

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 070990

This is to certify that SOLEY WHARF LLC /Sinner Signs &has permission to 8 sf bldg signAT 100 COMMERCIAL ST

CITY OF PORTLAND 030 C001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission is procured before this building or part thereof is altered or closed-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____

Department Name

PENALTY FOR REMOVING THIS CARD

PERMIT ISSUED

AUG 22 2007

CITY OF PORTLAND

[Signature] 8/21/07
Director - Building & Inspection Services

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-0990		Issue Date:		CBL: 030 C001001	
Location of Construction: 100 COMMERCIAL ST		Owner Name: SOLEY WHARF LLC		Owner Address: 100 COMMERCIAL ST	
Business Name:		Contractor Name: Sinnett Signs & Graphics		Contractor Address: 332 New Portland Rd Portland	
Lessee/Buyer's Name		Phone:		Phone: 2078544999	
Past Use: Commerical / Hewins Travel		Proposed Use: Commercial / Hewins Travel 8 sf bldg sign - <i>reducing the Existing Sign</i>		Permit Type: Signs - Permanent	
Proposed Project Description: 8 sf bldg sign		Permit Fee:		Cost of Work: \$81.00	
		CEC District: 1		Zone: B-3	
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i> Signature: _____		INSPECTION: Use Group: <i>U</i> Type: <i>Sign</i> <i>IBC 2003</i> Signature: _____	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied Signature: _____ Date: _____			
Permit Taken By: dmartin		Date Applied For: 08/13/2007		Zoning Approval	
<ol style="list-style-type: none">This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.Building permits do not include plumbing, septic or electrical work.Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..		Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>8/14/07</i>		Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	
		Historic Preservation <i>to D.A.</i> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input checked="" type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>8/15/07</i> <i>D. Andrews</i>			

PERMIT ISSUED

AUG 22 2007

CITY OF PORTLAND

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT

ADDRESS

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

DATE

PHONE

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-0990	Date Applied For: 08/13/2007	CBL: 030 C001001
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Location of Construction: 100 COMMERCIAL ST	Owner Name: SOLEY WHARF LLC	Owner Address: 100 COMMERCIAL ST	Phone:
Business Name:	Contractor Name: Sinnott Signs & Graphics	Contractor Address: 332 New Portland Rd Portland	Phone (207) 854-4999
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial / Hewins Travel replacing the larger existing sign with a 8 sf bldg sign	Proposed Project Description: 8 sf replacement bldg sign
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Dept: Historic **Status:** Approved with Conditions **Reviewer:** Deborah Andrews **Approval Date:** 08/15/2007
Note: **Ok to Issue:** ☒

1) * Sign must be affixed to existing bracket; no new penetrations in granite allowed.

Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 08/14/2007
Note: **Ok to Issue:** ☒

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 08/21/2007
Note: **Ok to Issue:** ☒

1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.

Comments:

8/14/2007-mes: left a message with Kathy Hewins. Is this an additional sign or a replacement sign? Called back the same day, this is a replacement sign not an additional sign - going smaller in size on the same bracket



Signage/Awning Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>100 Commercial Street, Portland, ME</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: <u>SOLUWHAN, LLC</u> <u>J. Tim SOLU</u>	Telephone: <u>775-2252</u>
Lessee/Buyer's Name (If Applicable) <u>HELVINS TRAVEL, LLC</u>	Contractor name, address & telephone: <u>SINNET SIGNS</u> <u>7511111111 STREET</u> <u>PORTLAND, ME 04103</u> <u>854-4449</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 <u>8sf</u> For H.D. signage= Total Fee: \$ <u>81</u> Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>Kenneth Helvins</u> phone: <u>525-2131</u>		
Tenant/allocated building space frontage (feet): Length: <u>0 ~ 23'</u> Height: <u>2' = 46" MAX</u> Lot Frontage (feet) <u>190 feet</u> Single Tenant or Multi Tenant Lot <u>Multi</u>		
Current Specific use: <u>Travel agency within multi-use business building</u> If vacant, what was prior use: _____ Proposed Use: _____		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes _____ No <input checked="" type="checkbox"/> Dimensions proposed: _____ Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: <u>30" x 36" = 1080 sq. in. = 7.5 sq. ft.</u> Proposed awning? Yes _____ No <input checked="" type="checkbox"/> Is awning backlit? Yes _____ No _____ Height of awning: _____ Length of awning: _____ Depth: _____ Is there any communication, message, trademark or symbol on it? Yes _____ No _____ If yes, total s.f. of panels w/communications, message, trademark or symbol: _____ s.f.		
Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes _____ No <input checked="" type="checkbox"/> Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions: <u>30" x 60" = 1800 sq. in. = 12.5 sq. ft.</u> Awning? Yes _____ No <input checked="" type="checkbox"/> Sq. ft. area of awning w/communication: _____		
A site sketch and building sketch showing exactly where existing and new signage is located must be provided. Sketches and/or pictures of proposed signage and existing building are also required.		

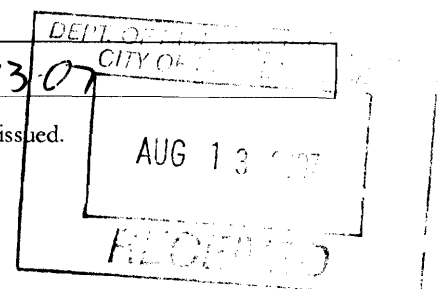
Please submit all of the information outlined in the Sign/Awning Application Checklist.
Failure to do so may result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>William C. Helvins</u>	Date: <u>8-13-07</u>
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This is not a permit; you may not commence ANY work until the permit is issued.



Existing
30" x 60"

HEWINS TRAVEL

30" x 36"

HEWINS TRAVEL

30" x 36"

HEWINS
TRAVEL

*2 sided Aluminum with vinyl inserts - unit
mounted on bracket using existing
holes/grommets.
Replacement sign*



current sign

to be replaced
with smaller
using same brackett
per Kathy Hewins



Current sign
to be replaced with
smaller using the
same bracket

30" x 36"



HEWINS TRAVEL

Proposed - new sign

- same size as all tenant signs on building
- 2 sided aluminum with vinyl inserts
- not lighted
- mounted on same bracket as existing

ACORD CERTIFICATE OF LIABILITY INSURANCEOP ID RK
AUTOM-8DATE (MM/DD/YYYY)
08/13/07

PRODUCER

Automobile Club of So. Calif
P.O. Box 25443
Santa Ana CA 92799-5443
Phone: 888-416-2402 Fax: 213-741-3005

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION
ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE
HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR
ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

Hewins Travel LLC
Rae Knapp, Risk Manager
3333 Fairview Road M/S-A481
Costa Mesa CA 92626

INSURERS AFFORDING COVERAGE

NAIC

INSURER A: Federal Insurance Company

INSURER B:

INSURER C:

INSURER D:

INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC	35805170	11/01/06	11/01/07	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ included MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
A	X	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS	74989758	11/01/06	11/01/07	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

*per policy conditions

City of Portland is an additional insured for the activities of the named insured.

CERTIFICATE HOLDER

City of Portland
c/s Signs Permits
City Hall Room 315

Portland ME 04101

CITYPOR

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30* DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

IMPORTANT

If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

Soley Wharf LLC
100 Commercial Street
Portland, ME 04101

June 11, 2007

City of Portland
Portland, ME

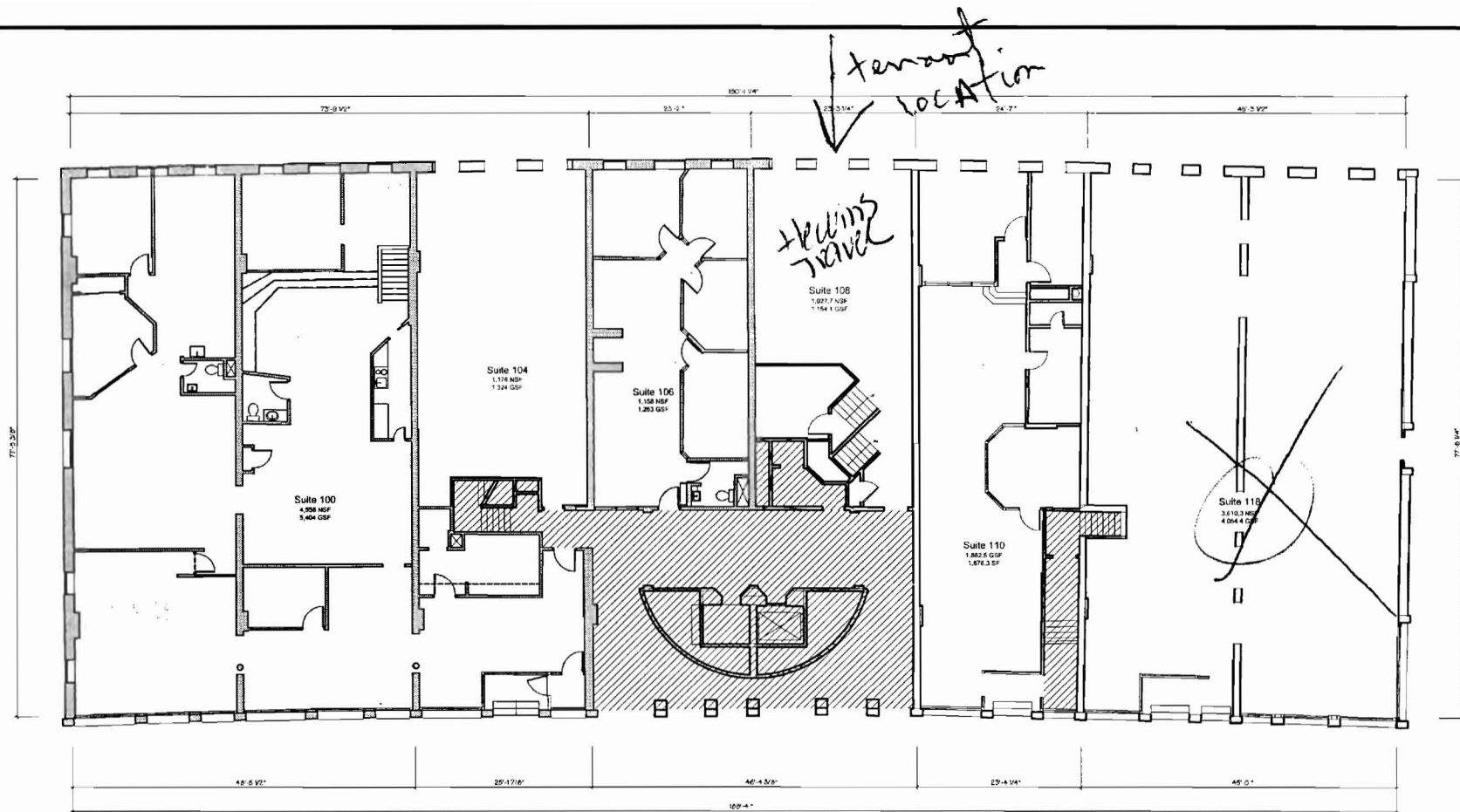
RE: Hewins Travel

To Whom It May Concern:

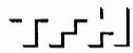
This letter shall serve as permission from Soley Wharf LLC (Landlord) to Hewins Travel (Tenant) for an exterior sign as described in the attached application.

Yours truly,

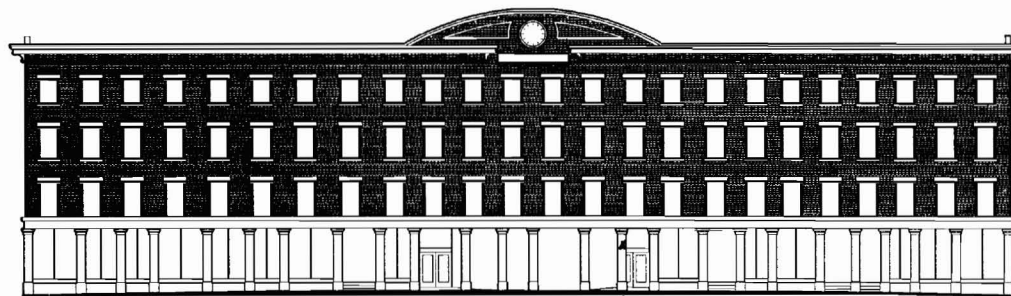
J. Tim Soley



FIRST FLOOR PLAN



TFH ARCHITECTS
100 COMMERCIAL STREET
PORTLAND MAINE 04101
TELEPHONE 207 775 8141
ARCHITECTURE PLANNING



ELEVATION NOT TO SCALE

THOMAS BLOCK
100 COMMERCIAL STREET
PORTLAND MAINE

0' 3' 6' 12' 24'
SCALE: 3/32" = 1'-0"

October 8, 2004