#### City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: Location of Construction: Phone: - 16 armedal St. Leasee/Buyer's Name: Owner Address: Phone: BusinessName: indicate introducts Fermit Issued: Address: Phone: Contractor Name: COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ SEFFICE A SESS INSPECTION: U FIRE DEPT. Approved ☐ Denied Use Group: Type: Zone: BOCAGO Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT secret and we work in a linear Approved Action: Special Zone or Reviews: Approved with Conditions: ☐ Shoreland Denied ☐ Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan mai ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: Zoning Appeal □ Variance This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use ☐ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Approved tion may invalidate a building permit and stop all work... □ Denied PERMIT ISSUED WITH LETTER Historic Preservation ☐ Not in District or Landmark ☐ Does Not Require Review Requires Review Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 ☐ Denied 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 issued, I certify that the code official's authorized representative shall have the authority to enter all Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit SIGNATURE OF APPLICANT ADDRESS: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: CEO DISTRICT White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Inspection Services
P. Samuel Hoffses
Chief



Plunning and Urban Development Joseph E. Gray Jr. Director

#### CITY OF PORTLAND

March 9, 1995

RE: 136 Commercial St.

Corporate Environments P. O. Box 5228 Portland, ME 04101

Dear Sir:

Your application to erect sign 1' X 1.5' has been reviewed and a permit is herewith issued subject to the following requirements: This permit does not excuse the applicant from meeting applicable State and Federal laws.

1. This is being approved with the condition that once the sign has been removed the holes be filled in to match existing granite color.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses

Chief of Inspection Services

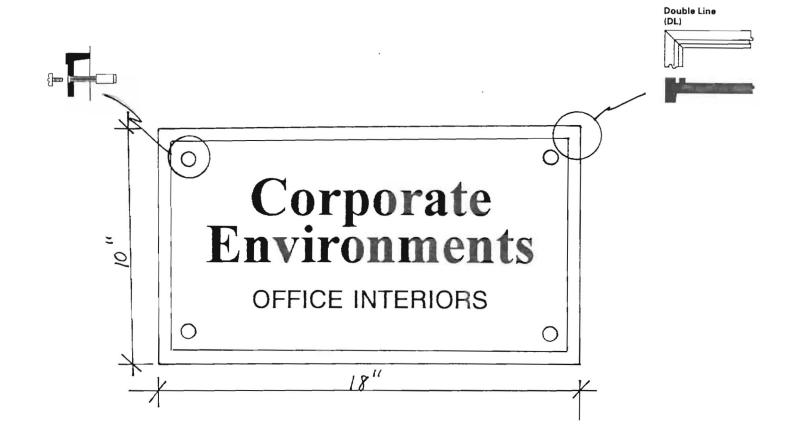
/el

cc: Gary Hamilton, Historic Preservation



NeoKraft Signs Incorporated, 686 Main Street, Lewiston, Maine 04240 (207) 782-9654, FAX 782-0009, IN STATE 1-800-339-2258

Pela many :



#### SIGNAGE APPLICATION

ADDRESS: 136 CO  OWNER: Steve h  APPLICANT: COIPORE  ASSESSORS NO.: NO	te Edvironme		
SINGLE TENANT LOT?	YE5:	NO:	
SINGLE TENANT LOT?	YES:	NO:	
			DIMENSIONS:
	MORE THAN DINE SI		DIMENSIONS:
BLDG. WALL SIGN?	YES:	NO:	DIMENSIONS: $10^{''}x18^{''}=1.25^{+}$
			DIMENSIONS:
LIST ALL EXISTING S	(GNAGE, INCLUDING	THEIR DIMENSIO	NS:
LOT FRONTAGE (IN FEE	ET):		
BLDG FRONTAGE (IN FE	ET): None Siv	en - but if	h+5 1/2 frontage theying
AWNING? YES:	NO:	_ 15 AWNING BA	CKLIT? YES: NO:
PLEASE PROVIDE A SIT	TE SKETCH <u>AND</u> A B	UILDING SKETCH,	SHOWING EXACTLY WHERE

PLEASE PROVIDE A SITE SKETCH AND A BUILDING SKETCH, SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED.

WE WILL NEED SKETCHES AND/OR PICTURES OF THE PROPOSED SIGNS INCLUDING STRUCTURAL COMPONENTS.



Two City Center Portland, Maine 04101 (207) 772-1333 Fax: (207) 871-1288

## FOR LEASE

## WATERFRONT OFFICE PROPERTY



# JOHN D. CARROLL BLOCK

# PORTLAND, MAINE

This Agency and Licensee represents the Seller's/Landlord's interest and, as such, has a fiduciary duty to disclose to the Seller/Landlord information, which is material to the sale/lease, acquired from the Buyer/Tenant or any other source.

Information furnished is from sources deemed reliable, but no warranty is made as to the accuracy thereof. All information should be independently verified.

GWB/ss Ver. XI

### HISTORIC PRESERVATION COMMITTEE



Pursuant to review under the City of Portland's Historic Preservation Ordinance (Chapter 14, Article IX of the Portland City Code), application is hereby made for a Certificate of Appropriateness for the following work on the specified historic property:

Property Name and	Address: 136 Commerce, AL ST	- POSETIANY
Applicant: (name)	CARLETON H. BARTER (telephone) 775	5-5344
(compa	any, if applicable) CORPORATE ENUIR	Councus
(addre	ess) 136 Commercial ST Portland	
Property Owner, if	f different: (name) WELLWOOD PARTNER	'SHIP
(addre	ess) STAPHEN J. MCDUFFIE	
(telep	phone)	
Architect (if any)	):	
Contractor or Buil	lder (if any):	
Local Designation:	:	
Landmark	Within Historic District Historic Landson	ape District.
Applicant's	s Signature Owner's Signature (if o	different)
costs of sen	oplication fee is required. Applicant is response ding notices and placement of legal ad. Such co or to issuance to Certificate/Building Permit or	osts shall
	• • • • • • • • • • • • • • • • • • • •	
All materials rela	ated to this Application MUST BE submitted no la	ater than 2

All materials related to this Application MUST BE submitted no later than 2 weeks prior to your desired meeting date in order for this application to be placed on the Historic Preservation Committee Agenda.

July 18, 1994

City of Portland Building Department Portland, Maine

RE: SIGN PERMIT APPLICATION CORPORATE ENVIRONMENTS 136 COMMERCIAL STREET PORTLAND, MAINE

To Whom it May Concern:

Please be advised that Corporate Environments has the permission of Wellwood Partnership to install proper signage on its building the John D. Carroll Block, located at 136 Commercial Street and 1 Portland Pier, Portland, Maine.

Very truly yours,

Stephen J. McDuffiell
Weller & Porton ship.

CALE CHANGAL

PRODUCER

NSURED

Bradish-Young Insurance P O BOX 3899 Portland, ME 04104

Corporate Environments

04102

ONLY AND CONFERS NO RIGHTS JPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELCW.

COMPANIES AFFORDING COVERAGE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION

COMPANY Acadia Insurance Co

A

COMPANY

8

COMPANY

C

COMPANY

COVERAGES

P O BOX 5228

Portland, ME

THIS IS TO CERTIFY THAT 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 LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	DATE (MM DO YY)	LIMITS		
	GEHERAL LIABILITY				GENERAL AGGREGATE	1.0	000,000
V	X GOMMERCIAL GENERAL LIABILI	BOA0005037	12/01/94	12/01/95	PRODUCTS-COMP. OF AGG		000,000
	CLAIMS MADE X OCC		22 V 22 C 4 24	and the same	PERSONAL & ADV INJURY		000,000
	OWNER'S & CONTIRACT				EACH OCCURRENCE	9,0	000,000
					FIRE DAMAGE (Any one fire)	\$	50,000
					MED EXP (Any one person)	\$	10,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	s	
	WWA TITO				GEMBRIED SINGLE DIWIT	•	
	ALLOWNED AUTOS				BOOKLY NURY	5	
	SCHEDULED AUTOS				(Par person)		
	HIRED AUTOS				BOCILY MUURY		
	NON OWNED AUTOS				(Per accident)	•	
					PROPERTY DAMAGE	\$	
	DARAGE LIABILITY		* 5 18 7 . T 65 7		AUTO CNLY - EA ACCIDENT	\$	
	ANY AUTO				OTHER THAN AUTO ONLY		
					EACH ACCIDENT	5	4.
					AGGREGATE	\$	
	EXCESS LIABILLY				EACH OCCURRENCE	5	
	LYBRELLAFORM				AGGREGATE	5	
	OTHER THAN UMBRELLA FORM					S	
	WORKERS COMPENSATION AND				STATUTORYLMITS		
	EMPLOYERS LIABILITY	WCA1000302-10	4/13/94	4/13/95	EACH ACCIDENT	\$	100,000
	THE PROPRIETOR N PARTNERS EXECUTIVE	CL	in the result would be	,	DISEASE - POLICY LIMIT		500,000
		KCL			DISEASE - EACH EMPLOYEE		100,000

DESCRIPTION OF OPERATIONS LOCATIONS VEHICLES SPECIAL ITEMS

Liability coverage is provided for the Insureds sign, to be attached to the Building.

CERTIFICATE HOLDER

City Of Portland City Hall Congress Street Portland, ME 04101 CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE HO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

CL YIC C

@ ACORD CURPORATION 1993

ACORD 25-S (3/93)