

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK  
**CITY OF PORTLAND** PERMIT ISSUED

Please Read Application And Notes, If Any, Attached

BU  ION

**PERMIT**

NOV 30  
Permit Number 091250

This is to certify that TOP OF EXCHANGE LLC/T Signery \_\_\_\_\_ City of Portland

has permission to "Motifs" - install a 40" x 32" S \_\_\_\_\_

AT 97 EXCHANGE ST \_\_\_\_\_ E 032 D002001 \_\_\_\_\_

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 written permission procured before this building or part thereof is lath or other is used-in. 2 HOURLY NOTICE IS REQUIRED.

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

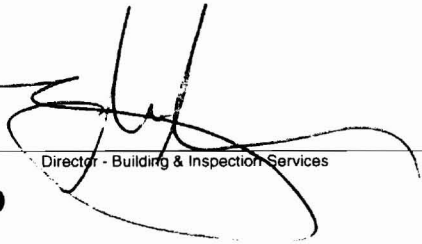
**OTHER REQUIRED APPROVALS**

Fire Dept. \_\_\_\_\_

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_  
Department Name

  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 09-1250	Issue Date:	CBL: 032 D002001
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Location of Construction: 97 EXCHANGE ST	Owner Name: TOP OF EXCHANGE LLC	Owner Address: 42 MARKET ST	Phone:
Business Name:	Contractor Name: The Signery	Contractor Address: 7 Lincoln Dr Scarborough	Phone 2078797700
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial - "Motifs" - retail	Proposed Use: Commercial - "Motifs" - install a 40" x 32".5 Sign	Permit Fee: \$83.00	Cost of Work: \$83.00	CEO District: 1
Proposed Project Description: "Motifs" - install a 40" x 32".5 Sign		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>U</i> Type: <i>Sign</i> <i>IBC 2003</i>	
		Signature: _____ Signature: _____		
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Ldobson	Date Applied For: 11/04/2009	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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"/> <i>OK w/ conditions</i> Date: <i>11/12/09 HSM</i>	<b>Zoning Appeal</b> <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: _____	<b>Historic Preservation</b> YG <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>11/20/09</i> <i>Dr. Andrews</i>
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**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.

PERMIT ISSUED

SIGNATURE OF APPLICANT	ADDRESS	DATE: <b>NOV 30</b>	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	City of Portland PHONE		

**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 09-1250	<b>Date Applied For:</b> 11/04/2009	<b>CBL:</b> 032 D002001
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<b>Location of Construction:</b> 97 EXCHANGE ST	<b>Owner Name:</b> TOP OF EXCHANGE LLC	<b>Owner Address:</b> 42 MARKET ST	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> The Signery	<b>Contractor Address:</b> 7 Lincoln Dr Scarborough	<b>Phone:</b> (207) 879-7700
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	

<b>Proposed Use:</b> Commercial - "Motifs" - install a 40" x 32".5 Sign	<b>Proposed Project Description:</b> "Motifs" - install a 40" x 32".5 Sign
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**Dept:** Historic      **Status:** Approved with Conditions      **Reviewer:** Deborah Andrews      **Approval Date:** 11/20/2009

**Note:** **Ok to Issue:**

- 1) \* The sign bracket should be installed in the same position as those on abutting storefronts to maintain consistency on this multi-tenant block.
- \* Application does not indicate any proposed lighting for sign. If lighting is desired, a proposal for such must be submitted to HP staff for review and approval.

**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Ann Machado      **Approval Date:** 11/10/2009

**Note:** **Ok to Issue:**

- 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 11/30/2009

**Note:** **Ok to Issue:**

- 1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.

**Comments:**

11/9/2009-amachado: Left vcm fof Paula. Need to know where the bracket is located on the wall.

11/10/2009-amachado: Received pictures showing location.

11/20/2009-gg: received from historic on 11/20/09. /gg

**PERMIT ISSUED**

NOV 30

City of Portland

**BUILDING PERMIT INSPECTION PROCEDURES**

**Please call 874-8703 or 874-8693 (ONLY )**

**to schedule your inspections as agreed upon**

**Permits expire in 6 months, if the project is not started or ceases for 6 months.**

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

**By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.**

**A Pre-construction Meeting will take place upon receipt of your building permit.**

  X   **Final inspection required at completion of work.**

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

**If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

\_\_\_\_\_  
Signature of Applicant/Designee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Inspections Official

\_\_\_\_\_  
Date

**PERMIT ISSUED**

NOV 30

City of Portland



# 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: <b>97 EXCHANGE ST. PORTLAND, ME</b>		
Tax Assessor's Chart, Block & Lot Chart# <b>32</b> Block# <b>D</b> Lot# <b>2</b>	Owner: <b>ERIC CHIFFALLETTE / NICOLE MORTON</b>	Telephone:
Lessee/Buyer's Name (If Applicable): <b>PAULA TALBERT</b>	Contractor name, address & telephone: <b>THE SIGNERY</b>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ <b>83</b>
Who should we contact when the permit is ready: <b>PAULA TALBERT</b> phone: <b>749-4052</b>		
Tenant/allocated building space frontage (feet): Length: <b>21'</b> Height: _____ Lot Frontage (feet): _____ Single Tenant or Multi Tenant Lot _____		<b>RECEIVED</b>
Current Specific use: <b>RETAIL (STILETTO SHOES)</b>		<b>NOV - 4 2009</b>
If vacant, what was prior use: _____		
Proposed Use: <b>RETAIL</b>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes _____ No <input checked="" type="checkbox"/> Dimensions proposed: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: <b>40 x 32.5"</b>		<b>Dept. of Building Inspections City of Portland Maine</b> Height from grade: _____
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: _____ 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.		

9 x 2 + 65

**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](http://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:	Date: <b>11/4/09</b>
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This is not a permit; you may not commence ANY work until the permit is issued.

B-3 - multi-front ground floor.  
3' x 21' = 42'

40" x 32.5" = 1300 sq in = 9.03 sq ft (OK)



# Signage/Awning Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

- Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way.
- Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
- A sketch plan of lot indicating location of buildings, driveways and any abutting streets or rights of way, lengths of building frontages, street frontages and all existing setbacks. Please indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building façade dimensions for any signage attached to the building.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.
- Certificate of flammability required for awning or canopy.
- A UL# is required for lighted signs at the time of final inspection.
- Photos of existing signage *NO EXISTING SIGNAGE*
- Details for sign fastening, attachment or mounting in the ground.

Permit fee for signage or awning-with-signage: \$30.00 plus \$2.00 per square foot of sign.

Permit fee for awning-without-signage is based on cost of work:  
\$30.00 for the first \$1,000.00, \$10.00 per additional \$1,000.00 of cost.

Base application fee for any Historic District signage is \$65.00.



Revised 10/19/09

## Sidewalk Signs

# THE SIBERY

Client: [unclear]  
Project: [unclear]

MDO Hanging Sign

I hereby certify that the information provided and the drawings included herein are true and correct to the best of my knowledge and belief. By signing below, you are certifying that you have checked and approved all details of this project, as represented on this print.

MOTIES  
97 EXCHANGE ST.

\* the bracket in  
the picture is not  
what is being used.



Approved By: \_\_\_\_\_

Date: \_\_\_\_\_

**RECEIVED**

NOV 10 2009

Dept. of Building Inspections  
City of Portland Maine



— sign

**RECEIVED**  
NOV 10 2009  
Dept. of Building Inspections  
City of Portland Maine





Client: Motifs

Invoice: 09-16783

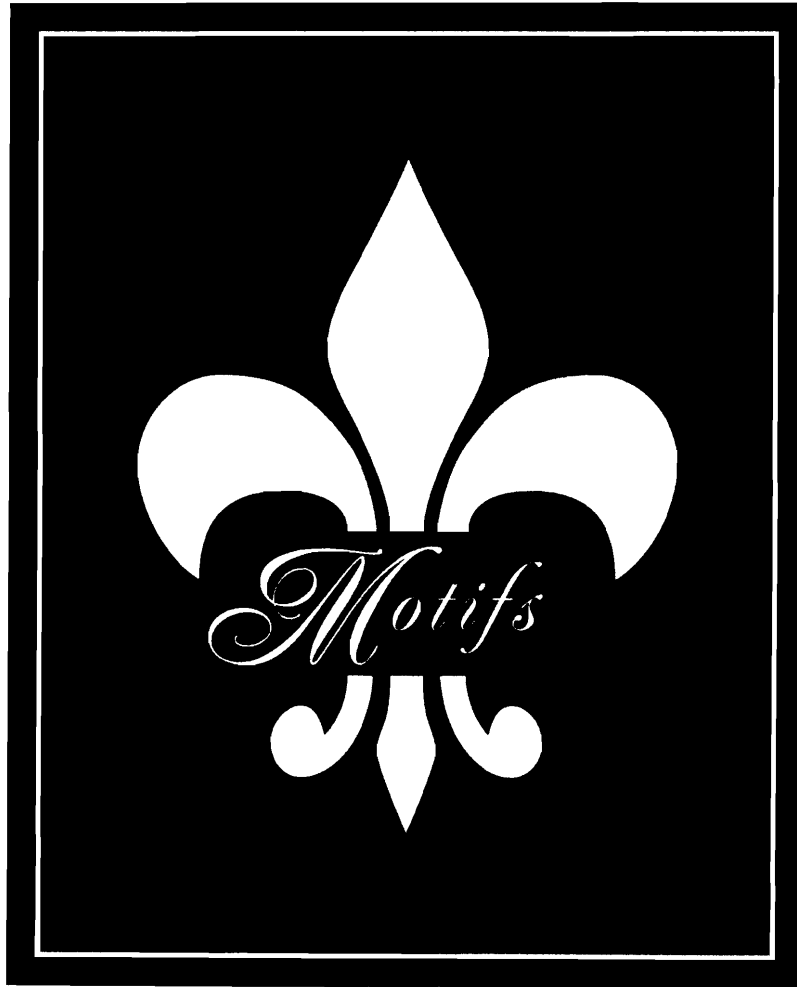
MDO Hanging Sign

Ben McDorr

This proof may reflect color shifts due to the color conversions from ink to paint and or vinyl. Also, PMS colors will be approximated to the best of our ability. If we are supplied with files (if applicable) they will be used as is and the Signery will not be responsible for any faults in the design (300 dpi required). Please check the following for accuracy: spelling, quantity, graphics and logos, size, fonts/typeface, single or double sided colors and legibility.

Please SIGN this form, if approved, and fax to (207) 510.0043 to continue the job progress.

\*By signing below, you are confirming that you have checked and approved of all details of this project, as represented on this proof.



(1) Hanging 3/4" MDO Sign  
40" x 32.5"

Double Sided

Paint sign WHITE first then mask off graphics & paint the BLUE - PMS 281c

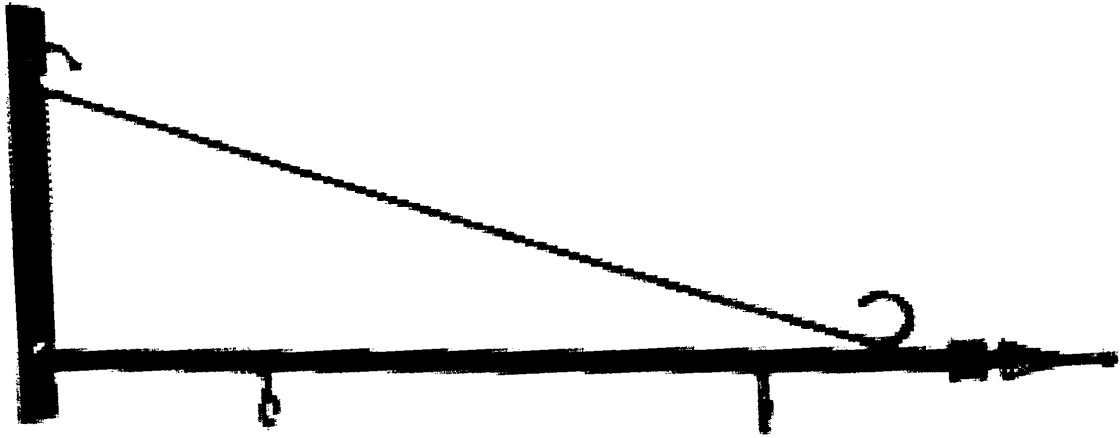
Two Hanging Clips at Top are Painted PMS 281c as well.

\*42" Scroll Bracket (standard bracket option "B")  
INSTALLED at 97 Exchange street Mounting To Brick Wall.

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

PAULA JALBERT@GMAIL.COM

# BRACKET FOR MOTIFS



**STYLE A**

**TOP OF EXCHANGE, LLC  
42 MARKET STREET  
PORTLAND, ME 04101-5022  
(207) 774-1000**

October 29, 2009

City of Portland and  
The Historic Preservation Committee  
Portland, Maine

Dear Sirs:

I have reviewed building sign plans for the Motifs, LLC and give permission for a building sign to be hung on new framework directly in front of the store located at 97 Exchange Street.

I can be reached at the above number if necessary. Thank you for your assistance.

Sincerely,

Nicole Morton  
Property Manager

**ACORD™ CERTIFICATE OF LIABILITY INSURANCE** DATE (MM/DD/YYYY)  
11/2/2009

PRODUCER (207)780-1677 FAX: (207)780-6377  
 Cross Insurance-Portland  
 2331 Congress Street  
 PO Box 567  
 Portland ME 04112

INSURED  
 Motifs LLC  
 97 Exchange Street  
 Portland ME 04101

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.

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Peerless Ins Co	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

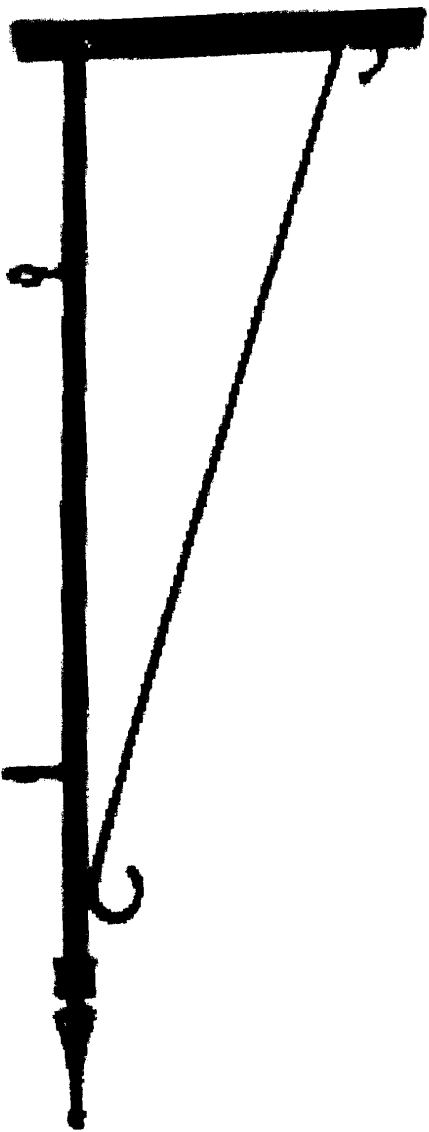
**COVERAGES**  
 THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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 LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	BINDERPACK	9/1/2009	9/1/2010	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 250,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER 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  
 Refer to policy for exclusionary endorsements and special provisions. 10 Day Cancellation for Non-Payment of Premium.  
 Certificate Holder is an Additional Insured with respect to Commercial General Liability only.

CERTIFICATE HOLDER	CANCELLATION
City of Portland 389 Congress Street Portland, ME 04101	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 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 Marina Salang/AH1 <i>Marina D. Salang</i>

BRACKET FOR MOTIFS



STYLE A