

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 091356

Please Read
Application And
Notes, If Any,
Attached

This is to certify that 45 Exchange Street LLC /self
has permission to Install two 2' x 2' hanging signs
AT 45 Exchange St CBL 032 E005001

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 lathed or otherwise 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

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

PERMIT ISSUED

8
City of Portland

12/21/09

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 09-1356	Issue Date:	CBL: 032 E005001
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Location of Construction: 45 Exchange St	Owner Name: 45 Exchange Street Llc	Owner Address: 1 City Center	Phone:
Business Name:	Contractor Name: self	Contractor Address: Portland	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Retail - "Spit Mc Rotten"	Proposed Use: Retail / Install two 2' x 2' hanging signs. "Coastal Maine Popcorn Co."	Permit Fee: \$97.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Install two 2' x 2' hanging signs		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>TBC 2003</i> Signature: <i>[Signature]</i>
		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: gg	Date Applied For: 11/24/2009	Zoning Approval		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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"/> <i>OK w/conditions</i> Date: 12/14/09 <i>ABM</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>yes</i> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: 12/9/09 <i>D. Andrews</i>

PERMIT ISSUED

- 8

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: 09-1356		Date Applied For: 11/24/2009		CBL: 032 E005001	
Location of Construction: 45 Exchange St		Owner Name: 45 Exchange Street Llc		Owner Address: 1 City Center	
Business Name:		Contractor Name: self		Contractor Address: Portland	
Lessee/Buyer's Name		Phone:		Permit Type: Signs - Permanent	
Proposed Use: Retail / "Coastal Maine Popcorn Co." - Install two 2' x 2' hanging signs.				Proposed Project Description: Install two 2' x 2' hanging signs	
Dept: Historic Status: Approved Reviewer: Deborah Andrews Approval Date: 12/08/2009 Note: Ok to Issue: <input checked="" type="checkbox"/>					
Dept: Zoning Status: Approved with Conditions Reviewer: Ann Machado Approval Date: 12/04/2009 Note: One sign is on Exchange Street & one sign is on Market Street. Ok to Issue: <input checked="" type="checkbox"/> 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.					
Dept: Building Status: Approved with Conditions Reviewer: Tammy Munson Approval Date: 12/21/2009 Note: Ok to Issue: <input checked="" type="checkbox"/> 1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.					

Comments:

12/8/2009-gg: received from historic on 12/08/09. /gg

PERMIT ISSUED

- 8

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

- 8

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: <u>43 Exchange St.</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>032</u> Block# <u>E</u> Lot# <u>005</u>	Owner: <u>45 Exchange St. LLC</u> <u>1 City Center</u> <u>Portland 04101</u>	Telephone: <u>871-1080</u>
Lessee/Buyer's Name (If Applicable) <u>Coastal Maine Popcorn Co., Inc.</u> <u>- Paul Roberts</u> <u>PO BOX 453, Boothbay Harbor</u> <u>ME. 04543</u>	Contractor name, address & telephone: <u>HH</u> <u>mail</u>	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: \$ <u>97.00</u>
Who should we contact when the permit is ready: <u>Paul Roberts</u> phone: <u>207-380-6325</u>		
Tenant/allocated building space frontage (feet): Length: <u>10.5'</u> Height: <u>14'</u> Lot Frontage (feet) <u>10.5'</u> Single Tenant or Multi Tenant Lot <u>Multi-Tenant</u>		
Current Specific use: <u>Gourmet Popcorn Sales</u> If vacant, what was prior use: <u>"Spoil me Rotten" - Bridal Boutique</u> Proposed Use: <u>Gourmet Popcorn Sales</u> NOV 24 2009		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Dimensions proposed: <u>24x24</u> Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: <u>24x24</u> Proposed awning? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Is awning backlit? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Height of awning: _____ Length of awning: _____ Depth: _____ Is there any communication, message, trademark or symbol on it? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 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 <input type="checkbox"/> No <input checked="" type="checkbox"/> Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Dimensions: _____ Awning? Yes <input type="checkbox"/> 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.		

RECEIVED

Dept. of Building Inspections
City of Portland Maine

$24 \times 24 = 16.00$
 $+ 2.00$
 32.00
 $11 \text{ stone } 65.00$
Total \$97.00

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: [Signature] Date: 11/24/09

This is not a permit; you may not commence ANY work until the permit is issued.

Revised 10/19/09
B-3 multi. front Exchange $10.5 \times 2 = 21.0$ 4th proposal (OK)
* front corner then are market $19.8 \times 2 = 39.6$ 4th proposal (OK)
sketch

107 ft. Total Bldg. Length

Market St.

19.8' frontage

14' above sidewalk
4' out from bldg.

Door Sign Fixture

Neighboring Building

Zone

Existing Sign

Building

Papercord store

#43

Tree House Toys

#47 Existing sign

Edgewood P.O. Box

#49

Existing sign

sidewalk 16 ft.

Door Sign Fixture

Exchange St.

10 1/2 ft. frontage

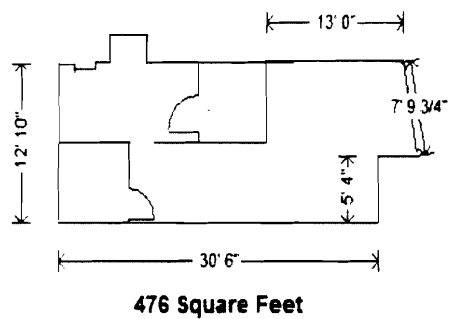
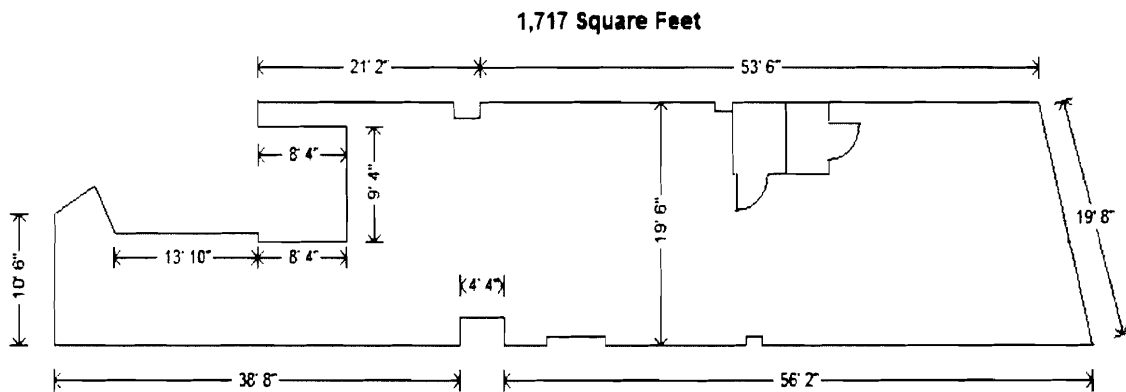
107 ft. Total Bldg. Frontage

Neighboring Building

Exchange St. Sign

3 1/2' bracket fixture
↳ attached to bldg.
16' above sidewalk

43 Exchange St.
Coastal Maine Popcorn Co., Inc.



3 1/2 ft.

16' above
sidewalk
on
Exchange St.
Sign

Eye Hooks Screwed
into sign

chain
or
lockable
fasteners

fastener
screw
lock



COASTAL MAINE

24" high



POPCORN CO.

24" wide

November 19, 2009

**Paul Roberts
Coastal Maine Popcorn
43 Exchange Street
Portland, Maine 04101**

RE: Proposed Exterior Sign

Dear Paul,

I have received a drawing of your proposed signage application for Coastal Maine Popcorn. The design is excellent and is therefore approved.

As always, if you have any questions, please do not hesitate to call me.

Sincerely,

**Peter S. Skapinsky, CPM
As Authorized Agent for the 45 Exchange Street LLC, Owner
peter@dirigomgmt.com**



CERTIFICATE OF LIABILITY INSURANCE

OP ID: LA
COAST-3

DATE (mm/dd/yyyy)

11/18/09

PRODUCER Harold W. Bishop Agency P.O. Box 87 3 Bridge Street Boothbay Harbor ME 04538 Phone: 207-633-3910	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 Coastal Maine Popcorn Co. ATTN: Paul Roberts PO Box 453 Boothbay Harbor ME 04538	<table border="1"><tr><th>INSURERS AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A: MMG Insurance Company</td><td>15997</td></tr><tr><td>INSURER B:</td><td></td></tr><tr><td>INSURER C:</td><td></td></tr><tr><td>INSURER D:</td><td></td></tr><tr><td>INSURER E:</td><td></td></tr></table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: MMG Insurance Company	15997	INSURER B:		INSURER C:		INSURER D:		INSURER E:	
INSURERS AFFORDING COVERAGE	NAIC #												
INSURER A: MMG Insurance Company	15997												
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.

INSURANCE TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (mm/dd/yyyy)	POLICY EXPIRATION DATE (mm/dd/yyyy)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	BP 0432695	03/14/09	03/14/10	EACH OCCURRENCE \$ 2000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 2000000 GENERAL AGGREGATE \$ 4000000 PRODUCTS - COMPROP AGG \$ 4000000
	<input type="checkbox"/> AUTOMOBILE LIABILITY <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) \$
	<input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ ADD \$
	<input type="checkbox"/> EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below Y/N <input type="checkbox"/>				WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	<input type="checkbox"/> OTHER				

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

Additional Insured for space located 43 Exchange Street Portland, ME 04101-4009. Plate Glass Coverage included for a limit of \$5,000.

CERTIFICATE HOLDER ADDITIONAL INSURED:

DIRIMAN

City of Portland
Planning & Development
389 Congress St
Portland ME 04101

CANCELLATION

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
Glenn H. Tilton

ACORD 25 (2009/01)

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