

**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <i>19 Exchange St</i>	Owner: <i>Ocean Black Ambulance</i>	Phone:
Owner Address:	Leasee/Buyer's Name: <i>Reester Candle &amp; Bath</i>	Business Name: <i>19 Exchange St Portland, ME 04101</i>
Contractor Name: <i>Scarborough Signs</i>	Address: <i>Scarborough</i>	Phone: <i>774-8289</i>
Past Use: <i>Retail</i>	Proposed Use: <i>Same</i>	COST OF WORK: \$ PERMIT FEE: \$ <i>26.50</i>
Proposed Project Description: <i>Erect Signage 15 Sq Ft</i>		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: Type: <i>BOC496</i> Signature: <i>[Signature]</i>
Permit Taken By: <i>Mary Grestik</i>	Date Applied For: <i>21 October 1996</i>	Signature: _____ Date: _____

Permit No **961098**

**PERMIT ISSUED**

Permit Issued:  
**NOV - 7 1996**

**CITY OF PORTLAND**

Zone: *3* CBL: *032-F-001*

Zoning Approval:

**Special Zone or Reviews:**

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan  maj  minor  mm

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

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

1. This permit application doesn't 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..

**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 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 provisions of the code(s) applicable to such permit

*Gilbert Galli* *21 October 1996*

SIGNATURE OF APPLICANT *Gilbert Galli* ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT **2**

**City of Portland, Maine - Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 19 Exchange St		Owner: Ocean Block Associates		Phone:	
Owner Address:		Leasee/Buyer's Name: Rooster Candle & Bath 19 Exchange St		Phone: Ptld, ME 04101	
Contractor Name: Scarborough Signs		Address: Scarborough		Phone: 774-8289	
Past Use: Retail		Proposed Use: Same		COST OF WORK: \$	
				PERMIT FEE: \$ 26.50	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: Type: COCA 96 Signature: <i>[Signature]</i>	
Proposed Project Description: Erect Signage 15 Sq Ft		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Signature: <i>[Signature]</i> Date: 11/1/96	
Permit Taken By: Mary Gresik		Date Applied For: 21 October 1996			

Permit No. **961098**

**PERMIT ISSUED**

Permit Issued:  
**NOV - 7 1996**

**CITY OF PORTLAND**

Zone: *B-3* CBL: 032-F-001

Zoning Approval:  
*ok* 10/23/96  
Special Zone or Reviews: *6*

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm

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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.

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

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 Does Not Require Review  
 Requires Review

**Action:**

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 Approved with Conditions  
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Date: *11/1/96*

**CERTIFICATION**

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*Gilbert Gall* 19 EXCHANGE  
SIGNATURE OF APPLICANT Gilbert Galli ADDRESS: 21 October 1996 DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

*[Signature]*  
CEO DISTRICT **2**  
*A. Row*



SIGNAGE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 19 EXCHANGE ST. ZONE: B-3

OWNER: GILBERT GALL, D/B/A ROOSTER CANDLES & BATH

APPLICANT: SAME

ASSESSOR NO.: 032-F-001 (entered as 42 Market)

SINGLE TENANT LOT? YES \_\_\_\_\_ NO \_\_\_\_\_

MULTI TENANT LOT? YES [check] NO \_\_\_\_\_

FREESTANDING SIGN? YES \_\_\_\_\_ NO [check] DIMENSIONS \_\_\_\_\_  
(ex. pole sign..)

MORE THAN ONE SIGN? YES \_\_\_\_\_ NO [check] DIMENSIONS \_\_\_\_\_

BLDG. WALL SIGN? YES [check] NO \_\_\_\_\_ DIMENSIONS \_\_\_\_\_  
(attached to bldg)

MORE THAN ONE SIGN? YES \_\_\_\_\_ NO [check] DIMENSIONS \_\_\_\_\_

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: 1 HANGING SIGN

2x3' SIDEWALK SIGN 2x3' [circled]

LOT FRONTAGE (FEET) 5' x 2' = 10' [circled]

BLDG FRONTAGE (FEET) \_\_\_\_\_

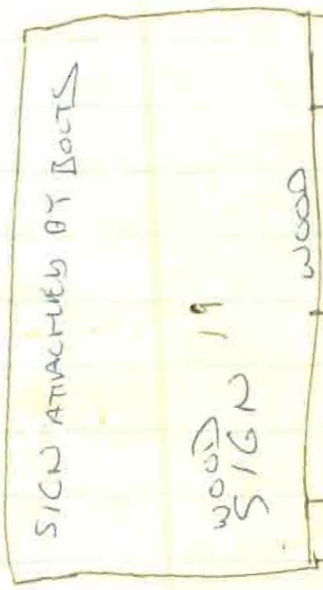
AWNING YES \_\_\_\_\_ NO [check] IS AWNING BACKLIT? YES \_\_\_\_\_ NO \_\_\_\_\_

HEIGHT OF AWNING: \_\_\_\_\_

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? \_\_\_\_\_

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF THE PROPOSED SIGNS ARE ALSO REQUIRED.

PAPER PATCH



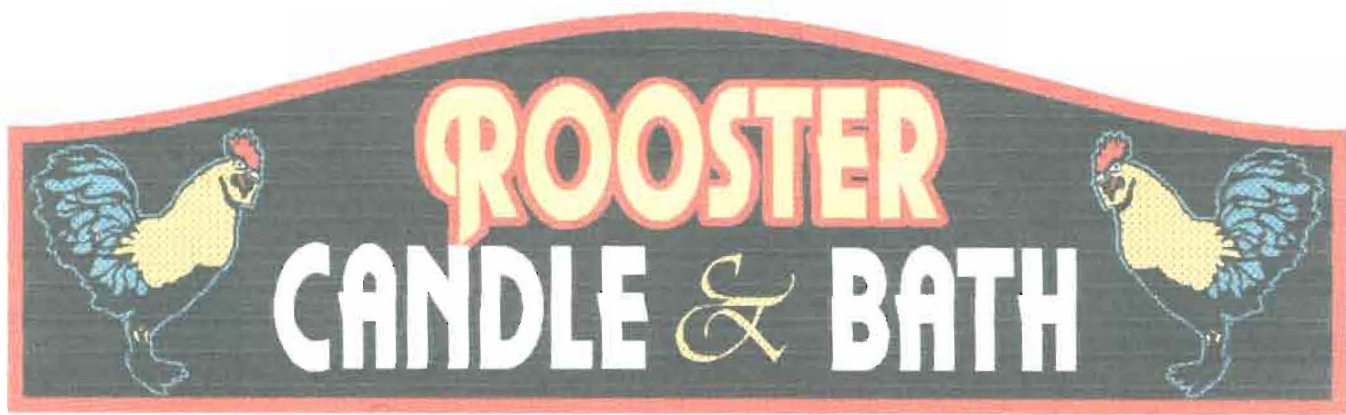
ROOSTER CAUSE & BATH

ROOSTER CAUSE & BATH

OVER 8' HIGH & DEAR

WOOD SIGN









# STATE FARM INSURANCE COMPANIES

State Farm General Insurance Company

100 State Farm Place

Ballston Spa, NY 12020-8000

## RENEWAL CERTIFICATE

OLICY NUMBER	BUSINESS - MER/SER	DATE DUE	PLEASE PAY THIS AMOUNT
99-BC-1895-6	JUN 27 1996 TO JUN 27 1997		BILLED THROUGH SFPP

6  
7  
6  
5  
4  
3  
2  
1

G-1027F74 F Z  
 GALLI, JOANN & GILBERT  
 DBA ROOSTER CANDLE & BATH  
 19 EXCHANGE ST  
 PORTLAND ME 04101-5008



Location: 19 EXCHANGE ST  
 PORTLAND ME

SFPP No: 0332274328

### Forms, Options, and Endorsements

Business - Special Form 3	FP-6103
Exterior Signs \$1,000	OPT ES
Money & Secur \$2,000/\$2,000	OPT MO
Amendatory Endorsement	FE-6219
Debris Removal Endorsement	FE-6451
Policy Endorsement	FE-6464

### Coverages and Limits

#### Section I

A Buildings	Excluded
B Business Personal Property	25,700
C Loss of Income	Actual Loss

#### Deductibles - Section I

Basic	250
Other deductibles may apply - refer to policy	

#### Section II

L Business Liability	\$1,000,000
M Medical Payments	5,000
Gen Aggregate (Other than PCO)	2,000,000
Products-Completed Operations (PCO Aggregate)	2,000,000

#### Annual Premium

Forms, Opts, & Endrmnt	\$297.00
Bus Liability - Cov L	60.00
<b>Total Amount</b>	<b>25.00</b>
	<b>\$382.00</b>

Cov. A - Inflation Index: N/A  
 Cov. B - Consumer Price: 155.7

*Thanks for letting us serve you...*

Agent JOHN GRILLO  
 Telephone (207) 797-7004

Prepared MAY 20 1996

See reverse side for important information.  
 Please keep this part for your record.

# QUOTATION

From



• 608 U.S. Rte. 1 • Scarborough, Maine 04074  
 Tel. (207) 883-6796 FAX (207) 885-0088

To

*Rooster Candle + Bath*

Inquiry No. \_\_\_\_\_

Date 7-29-96

Terms \_\_\_\_\_

Prices quoted are  
 F.O.B. \_\_\_\_\_

Delivery \_\_\_\_\_

We are pleased to quote as follows. Your inquiry

Quantity	Description	Price	Amount
1	18" x 5' one-sided mdo sign pictorial		\$150.00
		tax	9.00
		Installation	35.00
			<u>\$194.00</u>

By Joseph A. Tufts

OCEAN BLOCK ASSOCIATES  
42 MARKET STREET  
PORTLAND, ME 04101-5022  
(207) 774-1000

August 2, 1996


City of Portland and  
The Historic Preservation Committee  
Portland, Maine

Dear Sirs:

I have reviewed Ms. Galli's sign plans for her store, Rooster Candle & Bath, and give her permission to hang the sign above the doorway on the building at 19 Exchange Street.

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

Sincerely,



Eric Cianchette  
President