

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, if Any, Attached

Permit Number: 070385

PERMIT ISSUED MAY 7 2007 CITY OF PORTLAND

This is to certify that OCEAN BLOCK ASSOCIATES /Graphic Wear Inc has permission to Install one 30" Diameter hanging Sign connected to permit# 070384 AT 42 MARKET ST 032 E001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this State 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 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

Handwritten signature and date 4/13/07

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

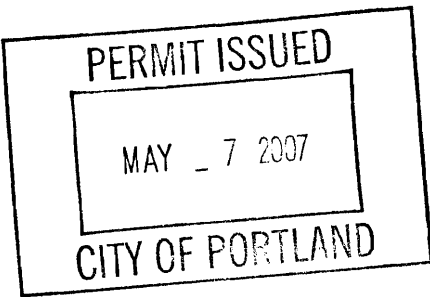
Permit No: 07-0385	Issue Date:	CBL: 032 F001001
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Location of Construction: 42 MARKET ST	Owner Name: OCEAN BLOCK ASSOCIATES	Owner Address: 30 MARKET ST	Phone:
Business Name:	Contractor Name: Graphik Wear Inc	Contractor Address: 869 Broadway South Portland	Phone 2072535454
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial - Hair Salon	Proposed Use: Commercial - Retail / Gift Shop - Install one 30" Diameter hanging Sign connected w/ permit# 070384	Permit Fee: \$83.00	Cost of Work: \$83.00	CEO District: 1
Proposed Project Description: Install one 30" Diameter hanging Sign connected w/ permit# 070384		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>[Signature]</i>	INSPECTION: Use Group: <i>[Signature]</i> Type: <i>Sign</i> <i>IBC 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: Idobson	Date Applied For: 04/10/2007	Zoning Approval
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<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>4/11/07</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 to D.A. <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>4/11/07</i> <i>D. 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.

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: 07-0385	Date Applied For: 04/10/2007	CBL: 032 F001001
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Location of Construction: 42 MARKET ST	Owner Name: OCEAN BLOCK ASSOCIATES	Owner Address: 30 MARKET ST	Phone:
Business Name:	Contractor Name: Graphik Wear Inc	Contractor Address: 869 Broadway South Portland	Phone (207) 253-5454
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial - Retail / Gift Shop - Install one 30" Diameter hanging Sign connected w/ permit# 070384	Proposed Project Description: Install one 30" Diameter hanging Sign connected w/ permit# 070384
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Dept: Historic **Status:** Approved with Conditions **Reviewer:** Deborah Andrews **Approval Date:** 04/11/2007

Note: **Ok to Issue:**

- 1) * Sign to be hung from existing bracket.
- * Approval is for sign only; if lighting is proposed, separate approval will be required.

Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 04/11/2007

Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 04/13/2007

Note: **Ok to Issue:**

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

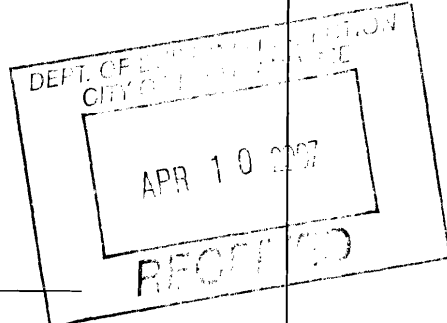


Signage/Awning Permit Application

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>38 Market St. Portland, Me 04101</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>32</u> <u>8F</u> <u>100</u>	Owner:	Telephone:
Lessee/Buyer's Name (If Applicable) <u>Prem Chandra Shrestha</u>	Contractor name, address & telephone: <u>Graphix Near Inc.</u> <u>869 Broadway</u> <u>So. Portland, Me 04106</u> <u>(207) 253-5454</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00 <u>\$65.00</u> For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>Prem Shrestha</u> phone: <u>332-5454</u>		
Tenant/allocated building space frontage (feet): Length: <u>51</u> ^{shown in picture} Height _____ Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot _____ Current Specific use: _____ If vacant, what was prior use: <u>Hair Salon</u> Proposed Use: <u>Retail/Gift Shop</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions proposed: _____ Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <u>2</u> No ___ Dimensions proposed: <u>2'6" x 2'6"</u>		
Proposed awning? Yes ___ No <u>X</u> 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 ___ Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes ___ No ___ Dimensions: _____ Awning? Yes ___ No ___ 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.		

5 x 2 = 10 # allowed
 showing 4 #



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:

Date:

04-05-07

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

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

April 5, 2007

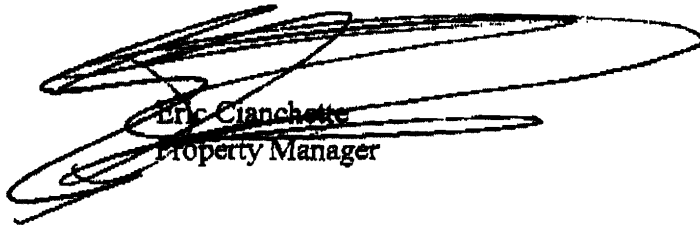
City of Portland and
The Historic Preservation Committee
Portland, Maine

Dear Sirs:

I have reviewed sidewalk and building sign plans for the Namaste Alternative Life Style Emporium and give permission for a sign to be hung on the existing framework at 38 Market Street.

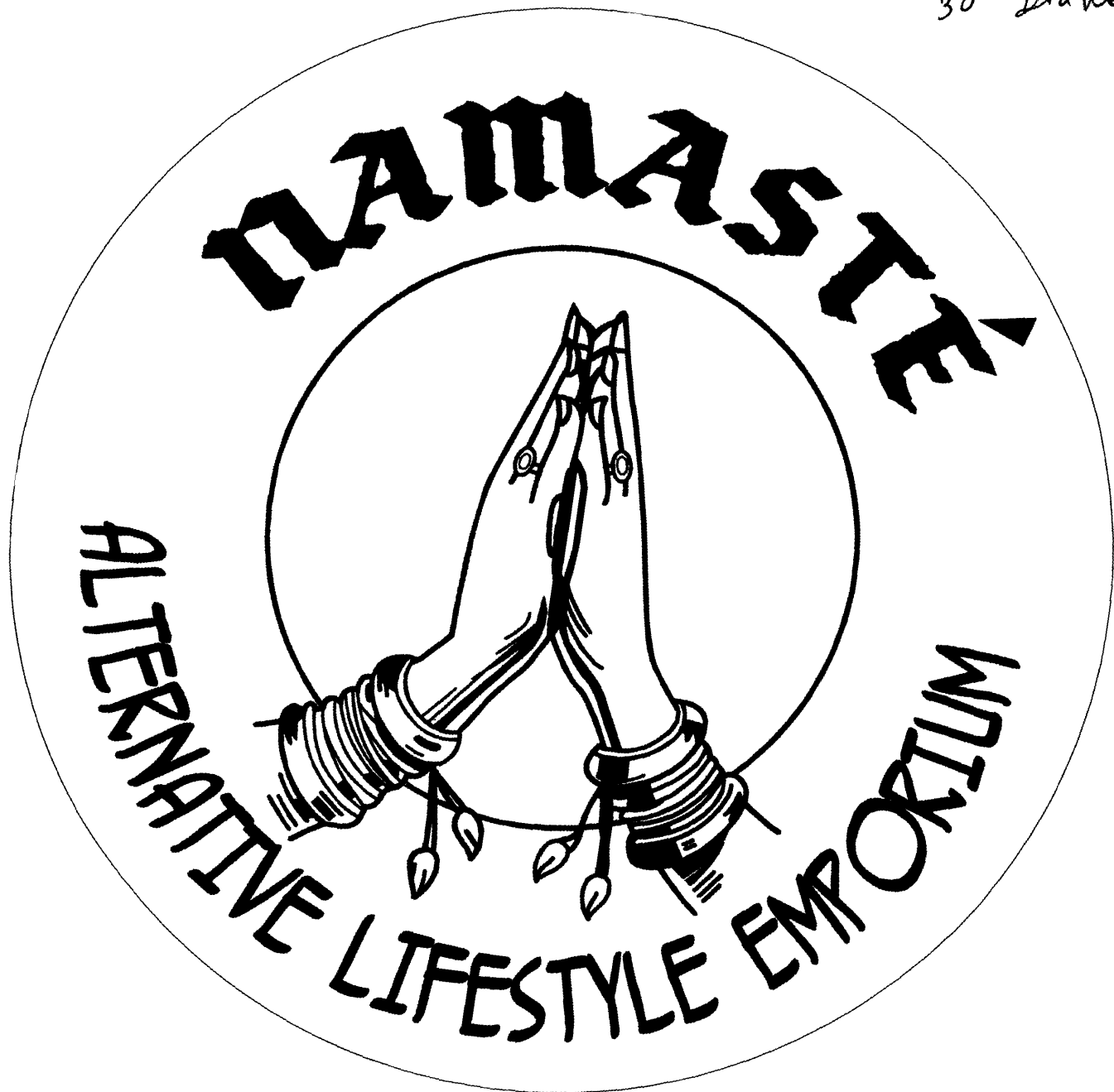
I can be reached at the above number if necessary. Thank you for your assistance.

Sincerely,



Eric Cianchette
Property Manager

30" Diameter



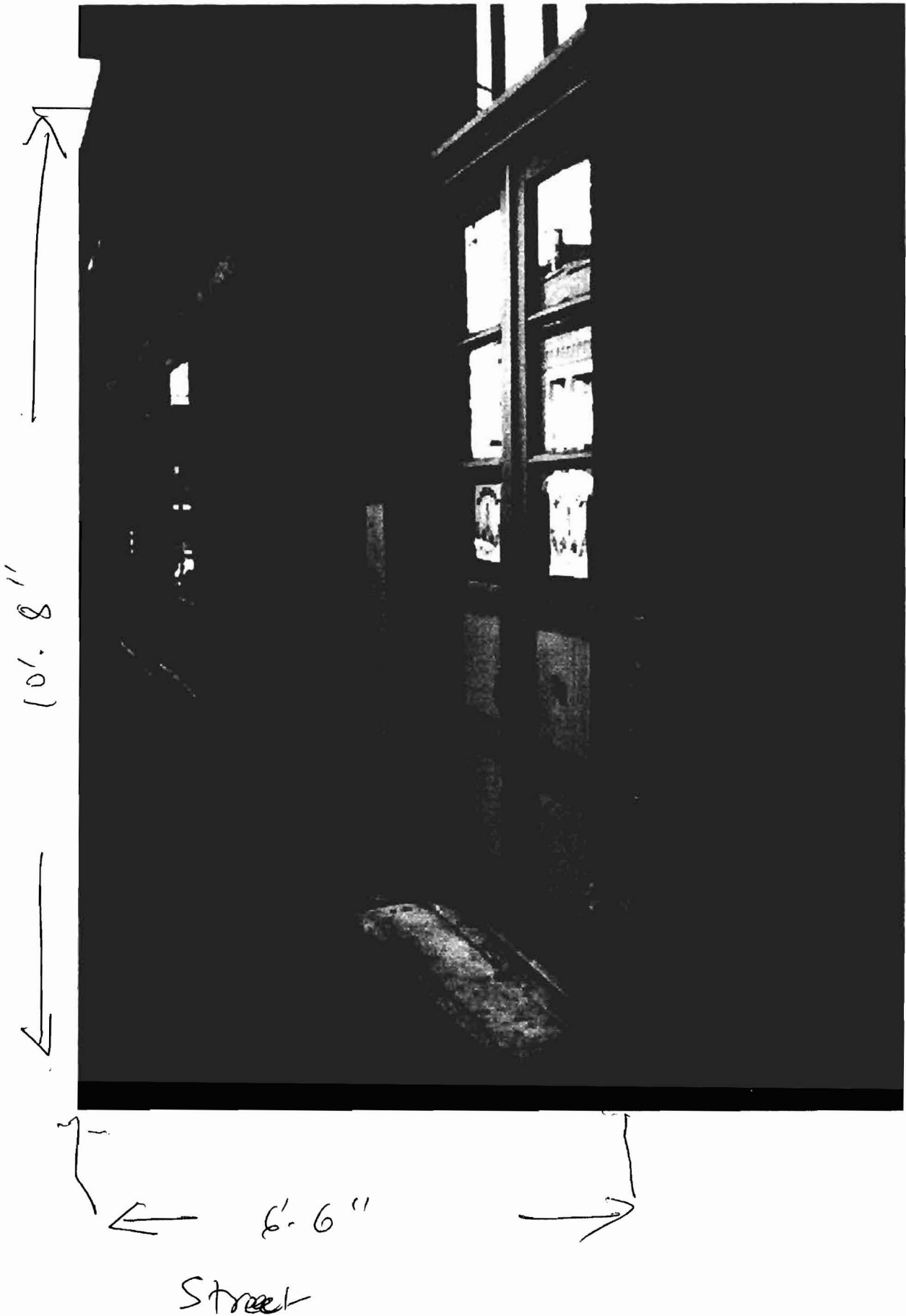
$$A = \pi R^2$$

$$A = (3.14) 15''$$

$$\begin{matrix} \uparrow \\ \downarrow \\ \uparrow \\ \downarrow \end{matrix} A = (3.14) 1.25'$$

3.9#

30" Diameter ~~Sign~~ Alumalite Sign
Metal ~~Board~~ Screws & Brackets



ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID RH
NAMAS-1

DATE (MM/DD/YYYY)
04/05/07

PRODUCER J.P. Henderson Ins Assoc, Inc 975 Broadway South Portland ME 04106 Phone: 207-799-1586 Fax: 207-799-9878	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 #
INSURED Namaste 38 Market Street Portland ME 04101	INSURER A: Norfolk & Dedham	
	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		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> BOP GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	R0635364A	04/05/07	04/05/08	EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 1000000 PRODUCTS - COMP/OP AGG \$
		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) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE 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 <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				PROPERTY 35000

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

Additional Insured: City of Portland ME

J.P. HENDERSON INS. ASSOC.
 975 Broadway
 South Portland, Maine 04106

CERTIFICATE HOLDER

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 City of Portland ME

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ 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
 Robert P Henderson