Form # P 04

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

### BUILDING INCRECTION

PERM

Permit Number: 071357

This is to certify that ELEVEN EXCHANGE LLC	asco Signs	
has permission toremove old signs for Baskin	pbin Re w/ no ignange Dunkin	Donuts
AT _363 FORE ST	- 032	F005001
provided that the person or persons of the provisions of the Statutes of the construction, maintenance and the construction of	ine and of the O sances of	this permit shall comply with a of the City of Portland regulating, and of the application on file i
this department.		
Apply to Public Works the street line and grade if nature of work requires such information.	n and wen permit on procult re this ding or at there is ed or a privile cosed-in.  JR NOTCUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVACE Fire Dept. Health Dept.		12/3/87
Appeal Board		(AA)
Other Department Name	-	Director - Building & Inspection Services
PENAL	TY FOR REMOVING THIS CAR	ib .

Scannel

City of Portland, Maine 389 Congress Street, 04101	0				1357	133uc Dati	•	032 F0	05001	
Location of Construction: Owner Name:		7, 1 dx. (201) 014-0110		Owner Address:					Phone:	
363 FORE ST ELEVEN EXC							A none.			
Business Name:	Contractor Name			Contractor Ad				Phone		
	Dasco Signs			654 County Road Acton			2074772956			
Lessee/Buyer's Name	Phone:			Permit Type:				Zone:		
		-		Signs - Permanent					B-3	
Past Use:	Proposed Use:			Permit Fee: Cost of Work:		rk:	CEO District:			
Port Donuts - Dunkin' Donuts	Port Donuts -			\$127	7.00	\$1	27.00	1		
Commercial		remove old signs for Baskin Robbin Reface w/ new signange for Dunkin		FIRE DEPT: Approved INSPE			CCTION:	1		
	Donuts	signan	ge for Dunkin	٥	/A	Denied	Use G	roup:	Type: )/ J	
	Donais			1/	14		_	TRP 1M	25	
December of Decimal December of				11/	<b>//</b> `			De au		
Proposed Project Description: remove old signs for Baskin R	obbin Reface w/ new si	onange	for Dunkin	Signature:	/		Signat	Drey /		
Donuts	obbin Relace W new 31	grange	Tor Dunkin	PEDESTRIAN	ACTIV	ITIES DIS			1	
					Approve			//Conditions	Denied	
				Action.	Approved	Ар	proved w	Collunions	Demed	
				Signature:				Date:		
Permit Taken By:	Date Applied For:			Zo	ning A	Approv	al			
lmd	10/29/2007	Sne	cial Zone or Revie	we	Zoning	Appeal		Historic Pres	ervation	
<ol> <li>This permit application do Applicant(s) from meeting Federal Rules.</li> </ol>			Shoreland		☐ Variance		Not in District or Landman			
	. Building permits do not include plumbing,		☐ Wetland ☐ Misco		Miscellane	llaneous		Does Not Re	Does Not Require Review	
3. Building permits are void if work is not started		☐ Fle	☐ Flood Zone ☐ Conditional		al Use		Requires Review			
within six (6) months of the False information may investigate permit and stop all work		Subdivision		☐ Interpretation		Approved				
•		☐ Si	te Plan		Approved			Approved w/	Conditions	
0115	ED.	Maj [	Minor MM		Denied			☐ Denied	1	
PERMIT ISSU		Ok   Date: 11   8   07   4BM		Date:	Date:		П	Date: 11/14/07		
DEC 11								D. And	rug	
VOE P	SPILAND								/	
CITTO		(	CERTIFICATION	ON						
I hereby certify that I am the ov I have been authorized by the o jurisdiction. In addition, if a pe shall have the authority to enter such permit.	wner to make this apple ermit for work describe	ication and in the	as his authorized application is is	l agent and I a sued, I certify	agree to	conform e code of	to all a ficial's	applicable laws authorized repr	of this resentative	
SIGNATURE OF APPLICANT			ADDRESS	S		DATI	3	PHC	ONE	

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

**PHONE** 

DATE

# **BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 to schedule your**

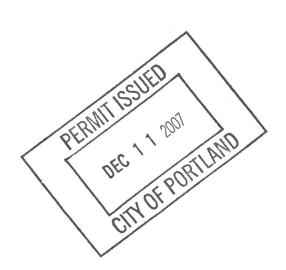
## inspections as agreed upon

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 a inspection procedure and additional fees from a Work Order Release" will be incurred if the probelow.	a "Stop Work Order" and "Stop
Pre-construction Meeting: Must be sche receipt of this permit. Jay Reynolds, Developmen also be contacted at this time, before any site worksingle family additions or alterations.	t Review Coordinator at 874-8632 must
Footing/Building Location Inspection:	Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electrical:	Prior to any insulating or drywalling
use.	to any occupancy of the structure or NOTE: There is a \$75.00 fee per ction at this point.
Certificate of Occupancy is not required for certain you if your project requires a Certificate of Occupancy inspection	
If any of the inspections do not occur, the phase, REGARDLESS OF THE NOTICE OR	
CERIFICATE OF OCCUPANICES MUBEFORE THE SPACE MAY BE OCCUPIED	UST BE ISSUED AND PAID FOR,
Signature of Applicant/Designee Signature of Inspections Official	Date
CBL: 032. F005 Building Permit #: 07	1 1357

City of Portland, Maine - Bu	ilding or Use Permi	t		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel:	(207) 874-8703, Fax: (	207) 874	-8716	07-1357	10/29/2007	032 F005001
Location of Construction:	Owner Name:			Owner Address:		Phone:
363 FORE ST	ELEVEN EXCHANG	E LLC		PO BOX 4894		
Business Name:	Contractor Name:		(	Contractor Address:		Phone
	Dasco Signs			654 County Road	Acton	(207) 477-2956
Lessee/Buyer's Name	Phone:		1	Permit Type:		
				Signs - Permanent		
Proposed Use:		F	Propose	Project Description:		
Commercial - Dunkin Donuts - remo	ove old signs for Baskin l	Robbin	remov	e old signs for Basl	cin Robbin Reface v	v/ new signange for
Reface w/ new signange for Dunkin				n Donuts		
Dept: Historic Status:	Approved with Condition	ns Revi	iewer:	Deborah Andrew	s <b>Approval D</b>	ate: 11/14/2007
Note:	approved with condition	15 14071	ic ivel .	Doodium 1 marew	i ippiovai D	Ok to Issue:
	1 1 1					OK to Issue.
1) * Approved for name change or	ilyno change in dimens	ions, mate	rials, p	lacement or lightin	ıg.	
Dept: Zoning Status:	Approved	Revi	iewer:	Ann Machado	Approval D	ate: 11/08/2007
Note:	**					Ok to Issue:
Trote.						OR to louc.
Dept: Building Status:	Approved with Condition	ns <b>Rev</b> i	iewer:	Tammy Munson	Approval D	ate: 12/03/2007
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:	363 FORE ST	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 32 F 5	Owner: ELEVEN EXCHANGE P.B. BOX 4394 PORTLAND 041	UC Telephone:
Lessee/Buyer's Name (If Applicable)  FORT DOUUTS  DUNKIN' DOUUTS	Contractor name, address & telephone:  DASCO SIENS  654 CONTY RD  ACTON, ME 04001	Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$
Who should we contact when the permit is rea  Hold Fork To  Tenant/allocated building space frontage ( Lot Frontage (feet)  Current Specific use:  If vacant, what was prior use:  Proposed Use:	DOWS	
Information on proposed sign(s):  Freestanding (e.g., pole) sign? Yes  Bldg. wall sign? (attached to bldg) Yes  Proposed awning? Yes Is a  Height of awning: Length of Is there any communication, message, trader If yes, total s.f. of panels w/communications	No Dimensions proposed: awning backlit? Yes No of awning: Depth: cmark or symbol on it? Yes No	7-11 SQ FT WAG
Information on existing and previously per Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes Awning? Yes No Sq. ft. ar	rmitted sign(s):  No Dimensions:	351GNS 2-11 SQF
A site sketch and building sketch showing sketches and/or pictures of proposed signs	exactly where existing and new signage	is located must be provided.
Please submit all of the information		plication Checklist.
Failure to do so may result in the au	ha full acome of the unsigns the Diameiro or	d Development Department may request
In order to be sure the City fully understands the additional information prior to the issuance of	a permit. For further information visit us or	
In order to be sure the City fully understands the additional information prior to the issuance of a Building Inspections office, room 315 City Hal I hereby certify that I am the Owner of record of the authorized by the owner to make this application as a permit for work described in this application is issue	a permit. For further information visit us of all or call 874-8703.  The named property, or that the owner of record as this/her authorized agent. I agree to conform to the could, I certify that the Code Official's authorized	n-line at www.portlandmaine.gov, stop by the uthorizes the proposed work and that I have been all applicable laws of this jurisdiction. In addition, if representative shall have the authority to enter all
In order to be sure the City fully understands the additional information prior to the issuance of Building Inspections office, room 315 City Hale hereby certify that I am the Owner of record of the authorized by the owner to make this application as a permit for work described in this application is issue	a permit. For further information visit us of all or call 874-8703.  The named property, or that the owner of record as this/her authorized agent. I agree to conform to the fued, I certify that the Code Official's authorized to enforce the provisions of the codes applicable.	n-line at www.portlandmaine.gov, stop by the uthorizes the proposed work and that I have been all applicable laws of this jurisdiction. In addition, if representative shall have the authority to enter all
	a permit. For further information visit us on all or call 874-8703.  The named property, or that the owner of record as this/her authorized agent. I agree to conform to used, I certify that the Code Official's authorized to enforce the provisions of the codes applicable to the code applicable to t	n-line at www.portlandmaine.gov, stop by the authorizes the proposed work and that I have been all applicable laws of this jurisdiction. In addition, if representative shall have the authority to enter all to this permit.  Date: 10/09/07  the permit is issued.

EXISTING SIGNAGE
363 FORE ST (COR) MARKET ST



48"

Baskin

DOUBLE

FACE



18"

DASCO SIGNS 654 County Road

Acton, ME 04001 (207) 477-2956

PRUPOSED

10 WALL SURFACE WITH FORM SURFACE 1/2" THICK PUC APPLIED ONE EACH STREED WALL SIGN

. 108"



g saft

18/

AND CHAINS HANGING SIGN EXISTING BRACKET DOUBLE FACED

**DASCO SIGNS**654 County Road
Acton, ME 04001
(207) 477-2956

Existy



10/24/2007

FORE

DASCO SIGNS 654 County Road Acton, ME 04001 (207) 477-2956

Existing-



10/24/2007

MARKET

DASCO SIGNS 654 County Road Acton, ME 04001 (207) 477-2956



CORNER FORE ST + MARKET ST

DASCO SIGNS

654 County Road Acton, ME 04001 (207) 477-2956



476 Alfred Road Biddeford, ME 04005

To: Ann Michado

From: Danny Bouzianis

Re: 363 Fore St., Portland, Maine Dunkin Donuts Signage

Dear Ms. Micahdo:

Greetings. Attached please find a copy of the insurance certificate for the sign work to be completed at 363 Fore St. I am awaiting a letter from the landlord granting permission for us to do work on the building. I would appreciate it if you could call me at 207 229 8600 to verify receipt of this certificate and for a couple of follow up questions. Thank you for your assistance.

Sincele

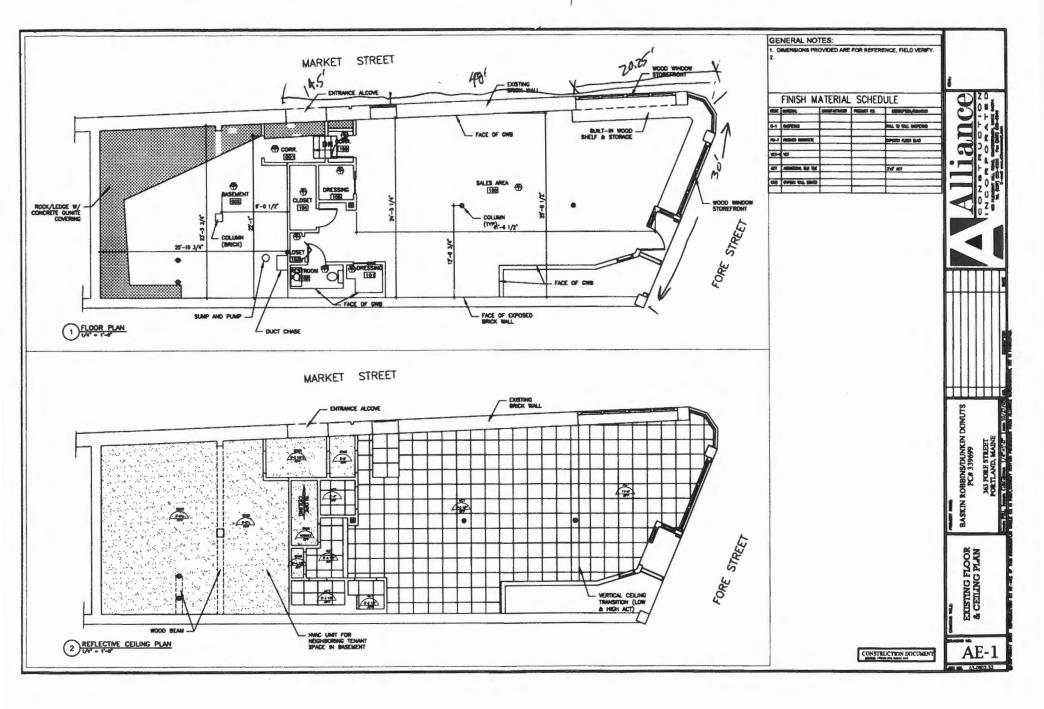
Danny Bouzianis Tel: 207 229 8600

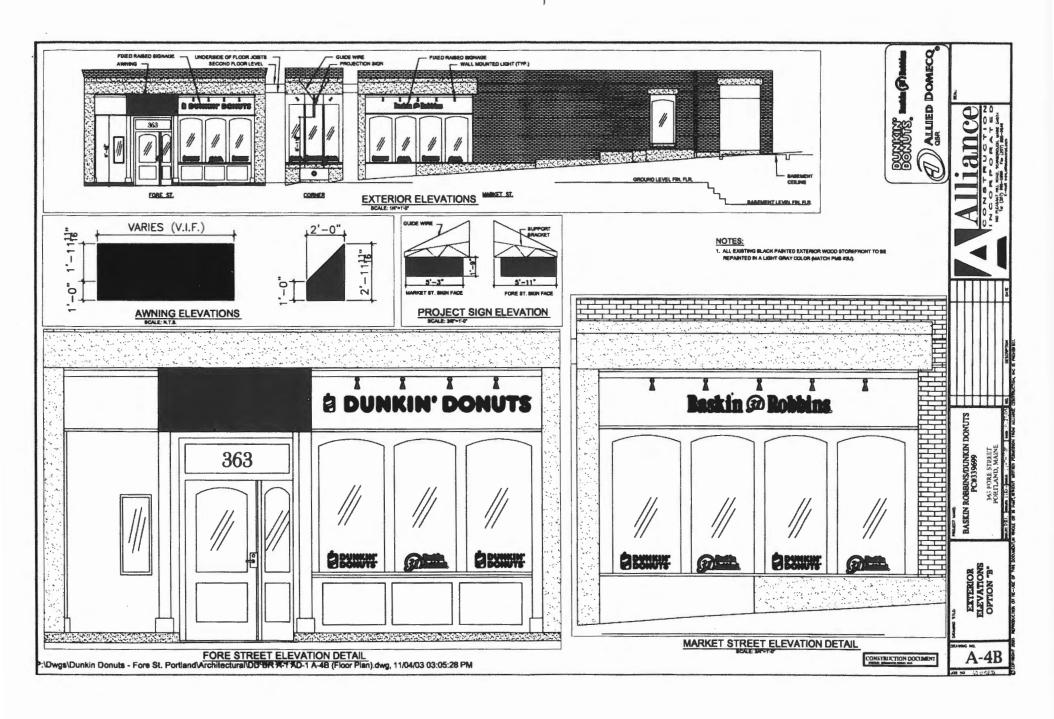
Fax: 207 282 1101

Email: DannyB3@Gmail.com

OCT 2 9 2007

		ORD CERTIFIC					10	D/29/2007
Pac 26	iruj M C	n & Carroll Insurance Main St.	AX (207)283-4258	ONLY AND HOLDER. 1	CONFERS NO R	ED AS A MATTER OF I EIGHTS UPON THE CER TE DOES NOT AMEND, FORDED BY THE POL	EXT	CATE END OR
		Box 356 aford, ME 04005		INSURERS A	FFORDING COV	ERAGE		VAIC#
		Old Port Foodservice Gr	oup, LLC	INSURER A: Ne	therlands In	surance Company	+	24171
		65 Gray Road, Box 4				rance Company		24198
		Falmouth, ME 04105		INSURER C: E)	celsior Insu	urance Company		11045
				INSURER D:				
				INSURER E:				
TH AN	YRE	VAGES  OLICIES OF INSURANCE LISTED BELCE EQUIREMENT, TERM OR CONDITION FERTAIN, THE INSURANCE AFFORDED IES. AGGREGATE LIMITS SHOWN MA	OF ANY CONTRACT OR OTHER DI BY THE POLICIES DESCRIBED HI	OCUMENT WITH R EREIN IS SUBJECT	ESPECT TO WHICH	H THIS CERTIFICATE MAY	RE IS	SHED OR
NSR			POLICY NUMBER		POLICY EXPIRATION	ПМГ	rs	
		GENERAL LIABILITY	BOP9796620	11/01/2007		EACH OCCURRENCE	\$	2,000,000
		X COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurence)	s	50,000
		CLAIMS MADE X OCCUR				MED EXP (Any one person)	\$	5,000
A	X					PERSONAL & ADV INJURY	\$	2,000,000
		GENL AGGREGATE LIMIT APPLIES PER:	·   _			GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	S	4,000,000
		POLICY PRO- LOC				PRODUCTS - COMPTOP AGG	•	4,000,000
		ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)	s	
		ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$	
		HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$	
						PROPERTY DAMAGE (Per accident)	s	
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
		ANY AUTO				OTHER THAN EA ACC	\$	
		EXCESS/UMBRELLA LIABILITY	CU9913324	11/01/2007	01/01/2008	EACH OCCURRENCE	\$	2,000,000
В		OCCUR CLAIMS MADE				AGGREGATE	\$	2,000,000
		DEDUCTIBLE					5	
	1000	RETENTION \$	WC2267672	05/01/2007	01/01/2008	WOSTATIL I INTL	5	
	EMP	RKERS COMPENSATION AND PLOYERS' LIABILITY	WC0207073	03/01/2007	V1/U1/2008	WC STATU- TORY LIMITS ER E.L.E ACH ACCIDENT		500 000
C	OFFI	PROPRIETOR/PARTNER/EXECUTIVE	RINEREXECUTIVE CLUDED?		- 1	E.L. DISEASE - EA EMPLOYER	5	500,000 500,000
	Ify es	is de scribe under ECIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	1	500,000
	ОТН	ER						
		non of operations / Locations / Vehicle pects general liability equirad by contract, ag		MENT/SPECIAL PRO and any othe	visions r person is	an additional in	sur	ed
ÇEF	TIFI	ICATE HOLDER		CANCELLAT	ION			
	3	City of Portland 389 Congress Street Portland, ME 04104	OCT 2 9 2007	SHOULD ANY EXPIRATION  10 DAYS BUT FAILURE	OF THE ABOVE DESC DATE THEREOF, THE R INVESTIGN NOTICE TO TO MAIL SUCH NOTIC UPON THE INSURER, PRESENTATIVE	RUBED POLICIES BE CANCELL SSUING INSURER WILL ENDEA THE CERTIFICATE HOLDER N. E SHALL IMPOSE NO OBLIGAT ITS AGENTS OR REPRESENTA	NOR T	TO MAIL TO THE LEFT, R LIABILITY







CORNER FORE ST + MARKET ST

DASCO SIGNS

654 County Road Acton, ME 04001 (207) 477-2956



# DUNKIN' DONUTS

