

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

**PERMIT ISSUED**

Permit No: 02-04103 Issue Date: MAY 16 2002 CBL: 032 F007001

<b>Location of Construction:</b> 375 Fore St	<b>Owner Name:</b> Soley Joseph	<b>Owner Address:</b> Po Box 4394	<b>Phone:</b>
<b>Business Name:</b> Bull Fenney's	<b>Contractor Name:</b> Prostyle Design	<b>Contractor Address:</b> 142 High St. #5 10 Portland	<b>Phone:</b> 12077753269
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	<b>Zone:</b> B-2
<b>Past Use:</b> restaurant	<b>Proposed Use:</b> erect 13.5 s.f. Hanging sign over public way	<b>Permit Fee:</b> \$43.50	<b>Cost of Work:</b> \$0.00
<b>Proposed Project Description:</b> erect 13.5 s.f. Hanging sign over public way		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group A Type: 30 5/15/02 [Signature]
		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> [Signature]	
		<b>Action:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <b>Signature:</b> <b>Date:</b>	
<b>Permit Taken By:</b> jodinea	<b>Date Applied For:</b> 04/23/2002	<b>Zoning Approval</b>	

<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"/> Date: 5/16/02	<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> <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 checked="" type="checkbox"/> Approved w/Conditions Date: 5/14/02
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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

4/23/03

AA

ADDRESS: 375 Fair St.  
PERMIT APPLICATION FOR: Sign  
BUILDING OWNER: Joe Soley  
PERMIT APPLICANT: Pro Style Design  
REVIEWER: J. J. Andrews  
DATE OF DECISION: 5/14/02

## HISTORIC PRESERVATION REVIEW

Note: Your property is **an** individually designated landmark structure or is located within a designated historic district. **As** such, alterations to the building exterior or site which are visible from a public way are subject to review and approval under Article IX (Historic Preservation) of the Land Use Code. Your building or sign permit application has been reviewed to determine whether the nature or scope of the project requires review, and if so, whether it meets the standards of the historic preservation ordinance.

## ACTION

☐ **Does not Require Review** (e.g. Interior work only / alteration is not readily visible from a public way)

Note: this finding is based on the understanding that the application entails interior work only or that the proposed exterior alteration(s) will not be readily visible from a public way. If your project entails exterior or site alterations (including the installation of sign(s), awnings, or exterior lighting for such) these alterations must be reviewed and approved prior to commencing with the work. Contact 874-8726 for more information.

☐ **Denied** Reason for Denial: \_\_\_\_\_

☐ **Approved as submitted**

☒ **Approved with conditions (see below)**

Conditions of Approval:

☐ Contact Historic Preservation Staff ( 874-8726 or 874-8728) prior to installation of sign(s) to confirm approved location.

☒ Your sign permit includes no reference to exterior lighting; if lighting is included, please submit information on fixtures and specifications on installation.

Other conditions:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

03-0412

**THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED**

## Signage 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>375 Fore St</u>		
Total Square Footage of Proposed Structure <u>13.5</u>	Square Footage of Lot <u>1800</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>07</u> Block# <u>118</u> Lot# <u>3</u>	Owner: <u>Lincoln Management</u>	Telephone:
Lessee/Buyer's Name (If Applicable) <u>Hand and Foot LLC</u> <u>DBA Bull Feeney's</u> <u>Po Box 531</u> <u>Portland, ME 04112-0531</u>	Applicant name, address & telephone: <u>Anthony Taylor</u> <u>Prostyle Design</u> <u>Rm 510, 142 High St</u> <u>Portland ME 04101</u>	Total s.f. of signage <u>13.5</u> 1.00 per s.f. \$_____, plus \$30.00 base fee Fee: \$ <u>13.50</u>
Current use: <u>Restaurant</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>Hanging Sign, 1 1/2" High Density Foam on tubular Iron Bracket</u>		
Project description:		
Contractor's name, address & telephone: <u>Prostyle Design, 142 High St Rm 510</u> <u>Portland, Me. 04101</u>		
Who should we contact when the permit is ready: _____		
Mailing address: <u>Prostyle Design, Rm 510, 142 High St</u> <u>Portland Me 04101</u> <u>xx</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$50.00 fee if any work starts before the permit is picked up. Phone: <u>775 3269</u> <u>xx</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

Signature of applicant: <u>Anthony Taylor</u>	Date: <u>April 23 2002</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued.  
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4<sup>th</sup> floor of City Hall

## SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 375 Fore St ZONE: B-3

OWNER: Lincoln Management

APPLICANT: Prostyle Design

ASSESSOR NO. \_\_\_\_\_

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? ☒ YES ☐ NO MULTI-TENANT LOT? YES ☒ NO

FREESTANDING SIGN? (ex. Pole Sign) YES ☒ NO --- DIMENSIONS \_\_\_\_\_ HEIGHT \_\_\_\_\_

MORE THAN ONE SIGN? YES ☐ NO ☐ DIMENSIONS \_\_\_\_\_ HEIGHT \_\_\_\_\_

SIGN ATTACHED TO BLDG.? ☒ YES ☐ NO DIMENSIONS 36" W X 54" H

MORE THAN ONE SIGN? YES ☐ NO ☒ DIMENSIONS \_\_\_\_\_

AWNING: YES ☐ NO ☐ IS AWNING BACKLIT? YES ☐ NO ☐ HEIGHT OFF SIDEWALK 13.5'  
IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT?

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

a - 14' x 14'

\*\*\* TENANT BLDG. FRONTAGE (IN FEET): 35' x 2 = 70'

\*\*\* REQUIRED INFORMATION

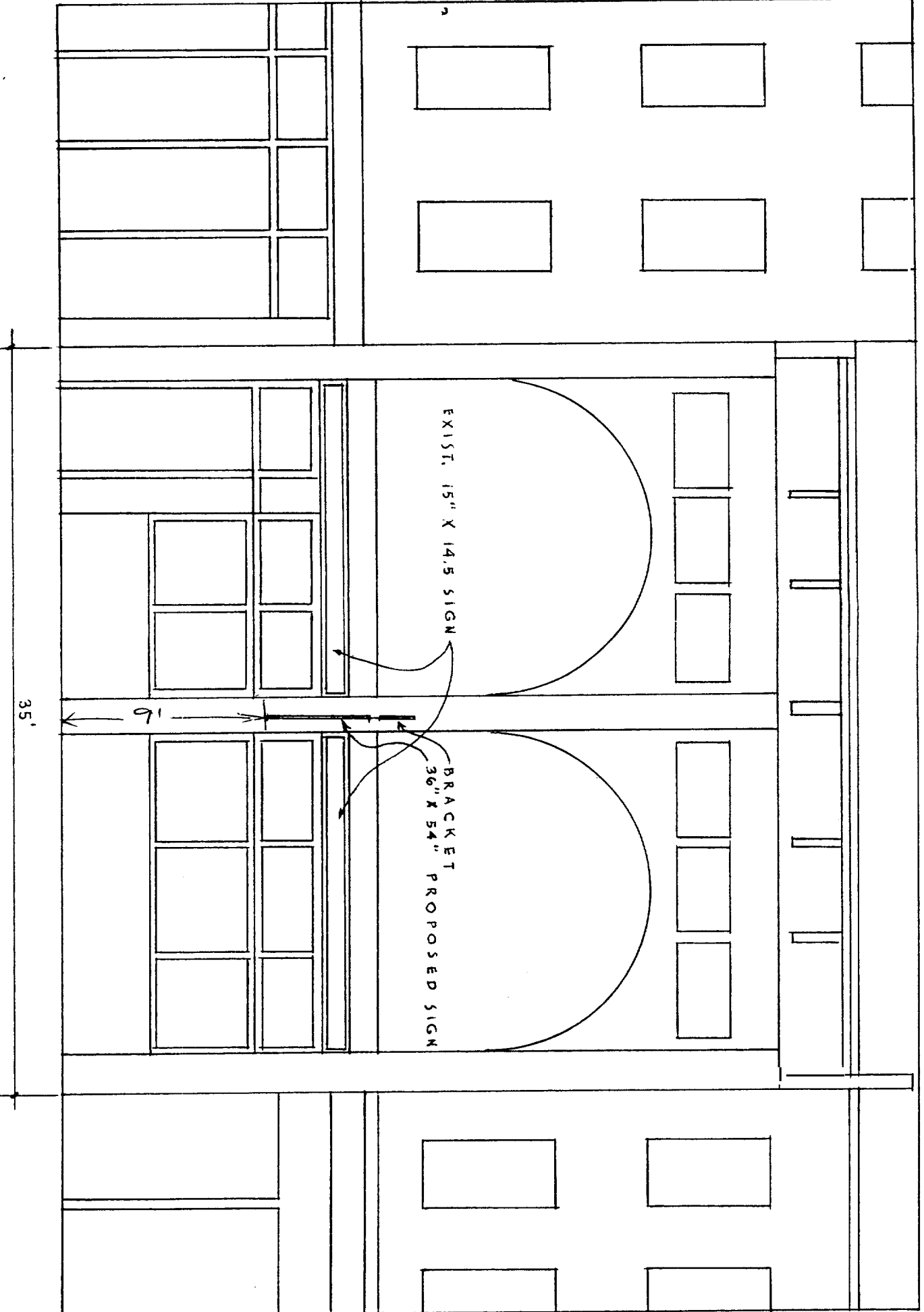
AREA FOR COMPUTATION

YOU SHALL PROVIDE:

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

SIGNATURE OF APPLICANT: T. L. Cor 282 DATE: May 1, 2002

Prostyle Design

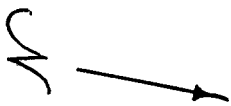


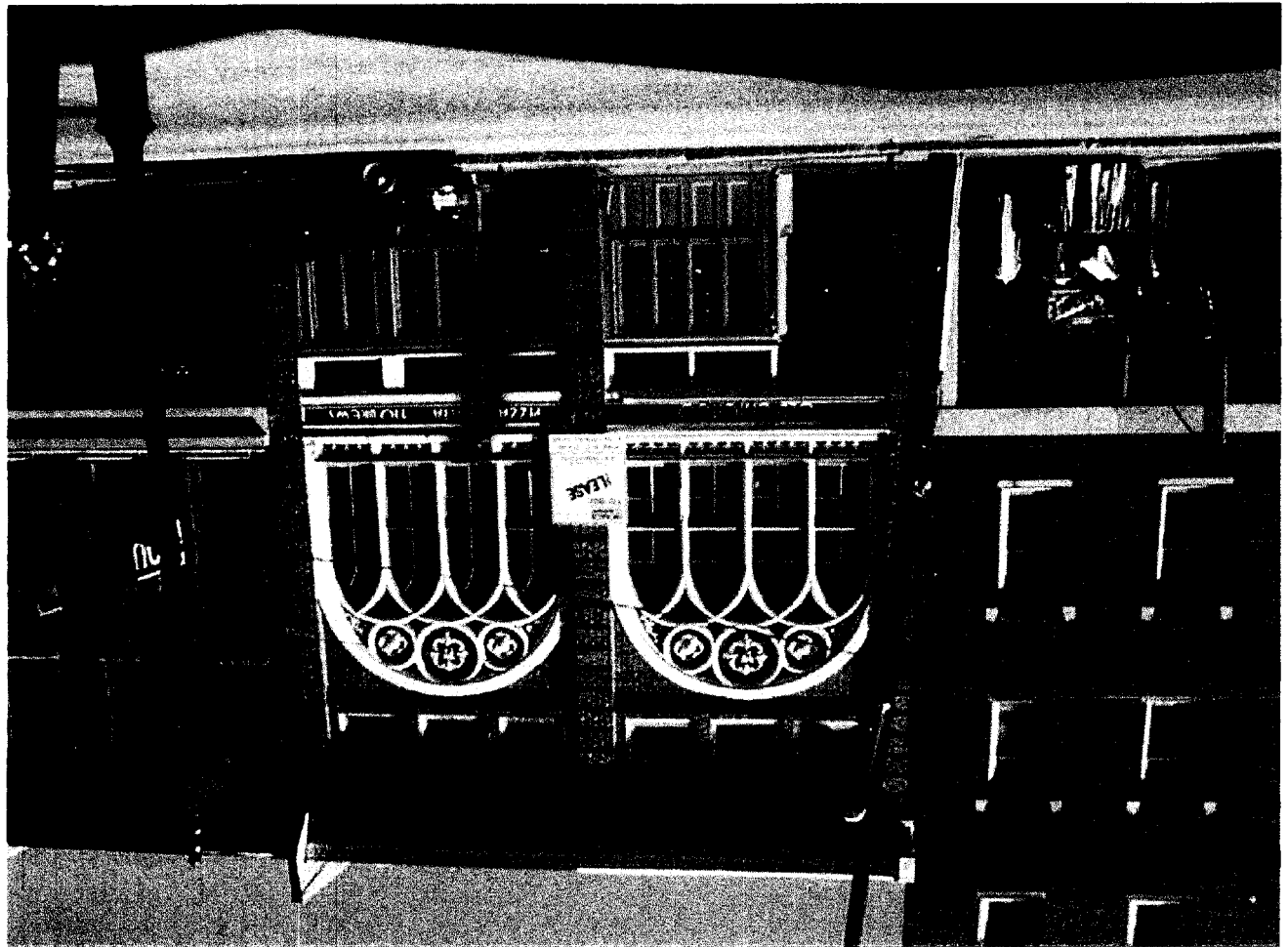
375 FORE ST.

EXCHANGE ST.

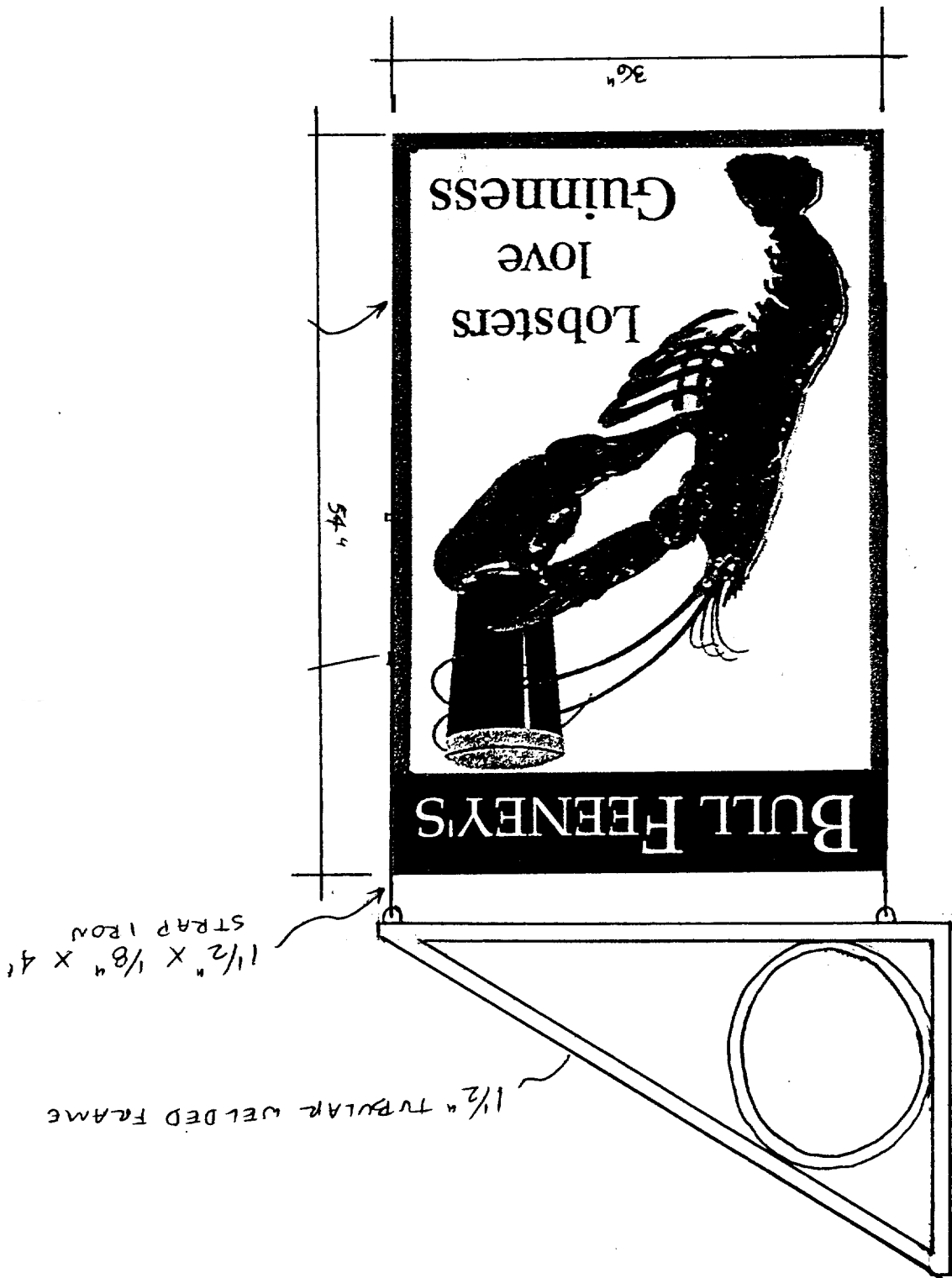
375

FOREST









To Wilson & may comm:

4/10/02

stand at 1st D&H Bull Ferry  
the formation from last time  
for why the long bridge at  
375 the 1st.

Manager P. J. Jones

Lincoln Management

<b>ACORD, CERTIFICATE OF LIABILITY INSURANCE</b>	
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 POLICES BELOW.	
INSURERS AFFORDING COVERAGE	INSURER
NAIC#	
Hand & Foot LLC DBA Bull Penys P.O. Box 531 Portland, ME 04112-0531	
1087 Forest Avenue Portland, ME 04103	
PRODUCER	
O'HEARN INSURANCE AGENCY 1087 Forest Avenue Portland, ME 04103	
INSURED	
Hand & Foot LLC DBA Bull Penys P.O. Box 531 Portland, ME 04112-0531	
COVERAGES	

THE POLICES 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 POLICES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INVESTOR	TYPE OF INSURANCE	POLICY NUMBER	POLICY PERIOD	COVERAGE	LIMITS
A	GENERAL LIABILITY	CP0000211224-00	3/08/02	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> POLICY <input type="checkbox"/> AGGREGATE LIMIT APPLIES PER POLICY <input type="checkbox"/> 100	EACH OCCURRENCE \$ 1000000 AGGREGATE \$ 1000000 PERSONAL & ADV. LIABILITY \$ 1000000 MED. EXP. (per person) \$ 5000 ADDITIONAL \$ 1000000
	AUTOMOBILE LIABILITY			ANY AUTO SCHEDULED AUTOS NON-OWNED AUTOS HOMEROWNED AUTOS ANY AUTO	COMBINED SINGLE LIMIT (per occurrence) BODILY INJURY (per person) BODILY INJURY (per person) PROPERTY DAMAGE (per occurrence)
	GARAGE LIABILITY			ANY AUTO	AUTO ONLY - EXCLUDED OTHER THAN SA ACC AGG
	EXCESS/UMBRELLA LIABILITY			CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> DEDUCTIBLE \$ RETENTION \$	EACH OCCURRENCE AGGREGATE AGG
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			ANY PROPRIETARY/INDEPENDENT CONTRACTOR EXCLUDED IF YES, describe under OTHER	ET. DISABILITY - SA EMPLOYEE \$ ET. DISABILITY - POLICY LIMIT \$
	OTHER				ET. DISABILITY - POLICY LIMIT \$

CANCELLATION	
REDESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS / SPECIAL PROVISIONS	

CERTIFICATE HOLDER	City of Portland Congress St. Portland, ME 04101
INSURED	Hand & Foot LLC DBA Bull Penys P.O. Box 531 Portland, ME 04112-0531

ACORD 25 (2001/03)

NOTICE TO THE CERTIFICATE HOLDER: THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICES BELOW. ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICES BELOW.