

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 100608

PERMIT ISSUED

Please Read Application And Notes, If Any, Attached

This is to certify that THE ONETEN COMPANY LLC Leavitt, Inc.

has permission to install awnings for the "Corner Room"

AT 110 EXCHANGE ST CB 032 H001001

JUL 16 2010

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 red-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

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 10-0608	Issue Date:	CBL: 032 H001001
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Location of Construction: 110 EXCHANGE ST	Owner Name: THE ONETEN COMPANY LLC	Owner Address: 19 HANSON ST	Phone:
Business Name:	Contractor Name: Leavitt & Parris Inc.	Contractor Address: 256 Read St. Portland	Phone: 2077970100
Lessee/Buyer's Name	Phone:	Permit Type: Awning, no signage	Zone: B-3

Past Use: Commercial "The Corner Room"	Proposed Use: Commercial "The Corner Room" - install awnings for the "Corner Room" - 6 to 12' - no signage a long Federal St. frontage.	Permit Fee: \$90.00	Cost of Work: \$6,450.00	CEO District: 1
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Proposed Project Description:
install awnings for the "Corner Room" - 6 to 12' - no signage

FIRE DEPT: Approved Denied
 INSPECTION: Use Group: U Type: Signa
 IBC 2003
 Signature: [Signature] Signature: [Signature]
 PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
 Action: Approved Approved w/Conditions Denied
 Signature: [Signature] Date:

Permit Taken By: Idobson	Date Applied For: 06/01/2010	Zoning Approval
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- 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"/> OK Date: 6/17/10 [Signature]	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 VS <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 Per D. Andrews Date: 6.21.10
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PERMIT ISSUED

JUL 16 2010

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

BUILDING PERMIT INSPECTION PROCEDURES

**Please call 874-8703 or 874-8693 (ONLY)
or email: buildinginspections@portlandmaine.gov**

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months, if the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.**

 X **Final inspection required at completion of work.**

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

PERMIT ISSUED

JUL 16 2010

City of Portland

City of Portland, Maine - Building or Use Permit

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

Permit No: 10-0608	Date Applied For: 06/01/2010	CBL: 032 H001001
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Location of Construction: 110 EXCHANGE ST	Owner Name: THE ONETEN COMPANY LLC	Owner Address: 19 HANSON ST	Phone:
Business Name:	Contractor Name: Leavitt & Parris Inc.	Contractor Address: 256 Read St. Portland	Phone: (207) 797-0100
Lessee/Buyer's Name	Phone:	Permit Type: Awning, no signage	

Proposed Use: Commercial "The Corner Room" - install 6 awnings (no signage) along Federal St. Frontage for the "Corner Room"	Proposed Project Description: install 6 awnings (no signage) along Federal St. frontage for the "Corner Room"
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Dept: Historic **Status:** Approved with Conditions **Reviewer:** Deborah Andrews **Approval Date:** 06/21/2010**Note:** **Ok to Issue:**

- 1) * Awning to be installed over Exchange Street storefront facade as well to provide consistent treatment for corner storefront. At corner of Exchange/Federal, awnings to extend to either side of corner pier.
- * Awnings shall not cover entrances to upper floors at either end of corner storefront.
- * Awning to cover top edge of transom frame.
- * Sign may be raised to allow for greater visibility, however sign bracket should be positioned no higher than just above storefront cornice. (See marked-up photo.)
- * Consideration should be given to repainting storefront facade to better coordinate with awning color and upper facade.

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Maehado **Approval Date:** 06/07/2010**Note:** One 11'4" x 3'; three 11'5" x 3'; one 8'2" x 3' & one 10'8" x 3' **Ok to Issue:** ✓

- 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:** 06/22/2010**Note:** **Ok to Issue:** ✓

- 1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.
- 2) Eneerachments into public ways must be a minimum of 8' above grade per section 3202 of IBC 2003.

Comments:

6/21/2010-gg: received from historic as of 06-21-10. /gg

PERMIT ISSUED

JUL 16 2010

City of Portland



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

6-1-2010

Received from Lewis & Parris

Location of Work 110 Exchange St

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 90

Building (U) _____ Plumbing (15) _____ Electrical (12) _____ Site Plan (U2) _____

Other _____

CBL: 32-H-1

Check #: _____ Total Collected \$ 90

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature]

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy

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: THE CORNER ROOM 110 EXCHANGE ST PORTLAND ME			
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#		Owner:	Telephone:
032 H 001		THE ONETEN CO. 19 HANSON ST PORTLAND ME	415-8655 415-8655
Lessee/Buyer's Name (If Applicable) SUNSHINE ACORN LLC 110 EXCHANGE ST PORTLAND ME		Contractor name, address & telephone: LEAVITT & PARRIS INC. 256 READ STREET PORTLAND ME 04103	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 6,450.00 Total Fee: \$ _____
Who should we contact when the permit is ready: CARL RICKETT phone: 797-0100			
Tenant/allocated building space frontage (feet): Length: 65' Height: 12' Federal STREET side Lot Frontage (feet) 82' including exchange st. Single Tenant or Multi Tenant Lot: MULTI			
Current Specific use: RESTAURANT If vacant, what was prior use: _____ Proposed Use: _____			
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes _____ No _____ Dimensions proposed: _____ Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions proposed: _____			
Proposed awning? Yes <input checked="" type="checkbox"/> No _____ Is awning backlit? Yes _____ No <input checked="" type="checkbox"/> Height of awning: 3' Length of awning: 65' RUNNING FEET Depth: 3' OVERALL RUNNING FEET 6 awnings Is there any communication, message, trademark or symbol on it? Yes _____ 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 _____ No _____ Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions: ON FILE Awning? Yes _____ No _____ Sq. ft. area of awning w/communication: _____			
RECEIVED			
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. JUN - 1 2010			

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. Dept. of Building Inspections
City of Portland Maine

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: *Carl Rickett*

Date: **5/25/10**

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

Signage/Awning Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

- Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way.
- Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
- A sketch plan of lot indicating location of buildings, driveways and any abutting streets or rights of way, lengths of building frontages, street frontages and all existing setbacks. Please indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building façade dimensions for any signage attached to the building.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.
- Certificate of flammability required for awning or canopy.
- A UL# is required for lighted signs at the time of final inspection. *N/A*
- Pre-application questionnaire completed and attached.
- Photos of existing signage
- Details for sign fastening, attachment or mounting in the ground.

Permit fee for signage or awning-with-signage: \$30.00 plus \$2.00 per square foot of sign.

Permit fee for awning-without-signage is based on cost of work:
\$30.00 for the first \$1,000.00, \$10.00 per additional \$1,000.00 of cost.

Base application fee for any Historic District signage is \$65.00.

Certificate of Flame Resistance



REGISTERED
APPLICATION
CONCERN No.

F-36805

ISSUED BY

GLEN RAVEN CUSTOM FABRICS, LLC
1831 N PARK AVE
GLEN RAVEN NC 27217

Date Work Performed

5/14/09

336-227-6211

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).

FOR TRI VANTAGE,™ LLC AT 2937 WEST 25th STREET

CITY CLEVELAND STATE OHIO 44113

Certification is hereby made that: (Check "a" or "b")

- (a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used _____ Chem. Reg. No. _____

Method of application _____

- (b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

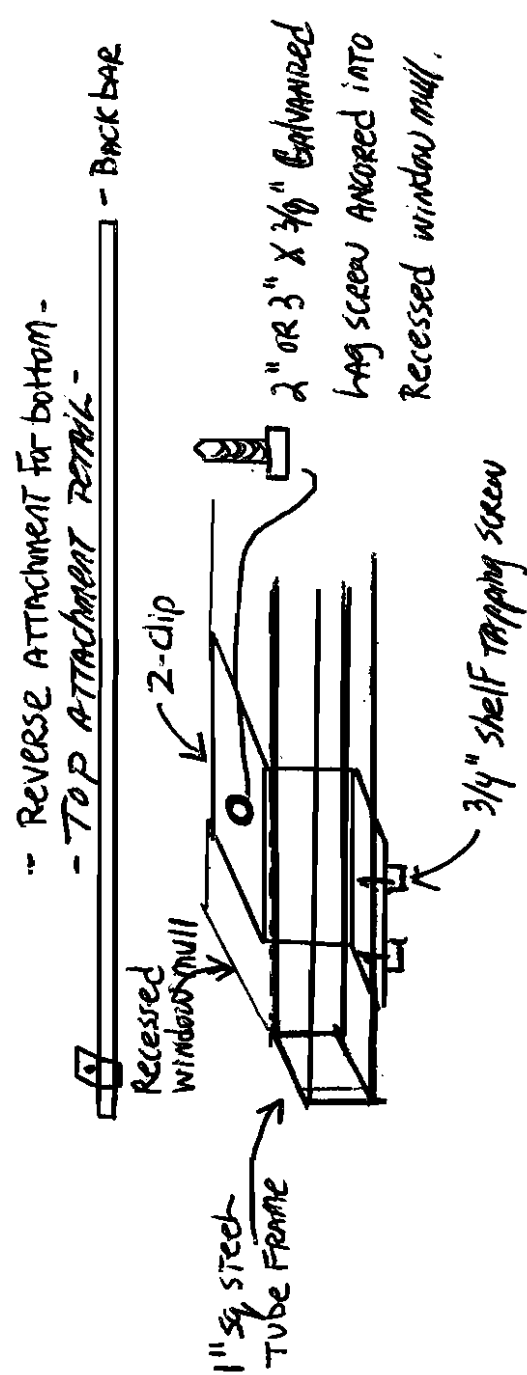
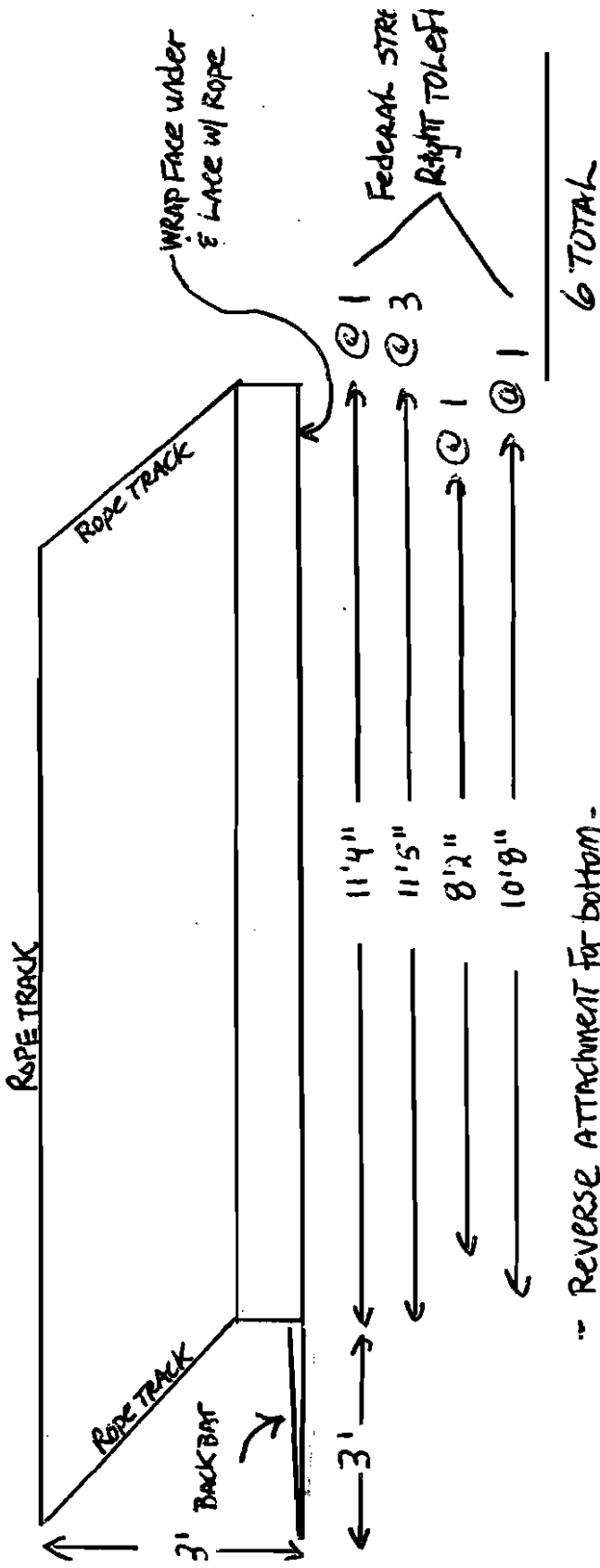
Trade name of flame-resistant fabric or material used FIRE S I S T Reg. No. F-36805

The flame Retardant Process Used WILL NOT Be Removed By Washing
(will or will not)

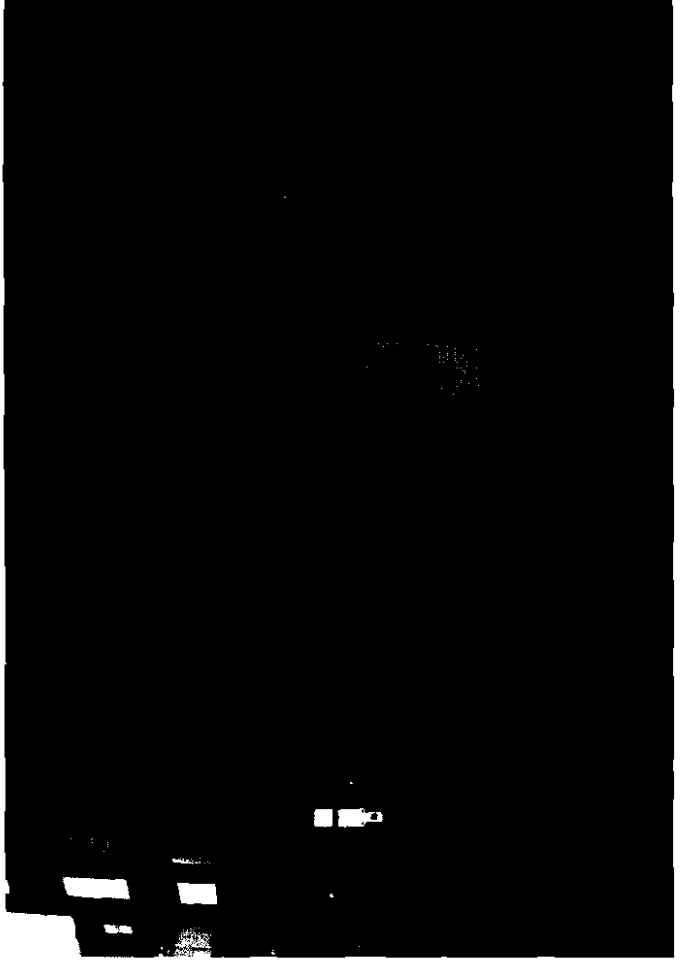
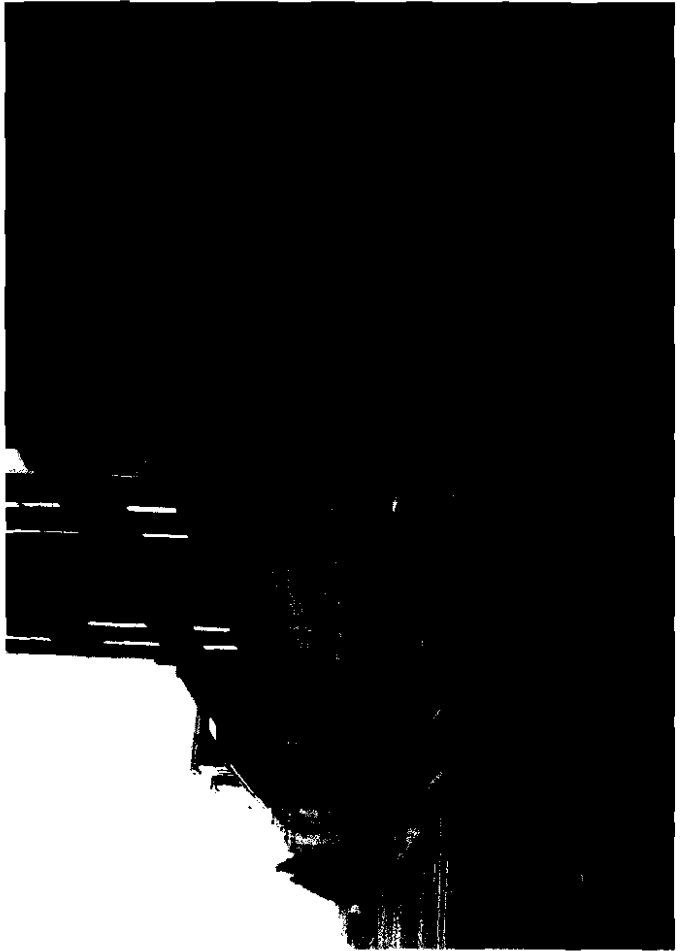
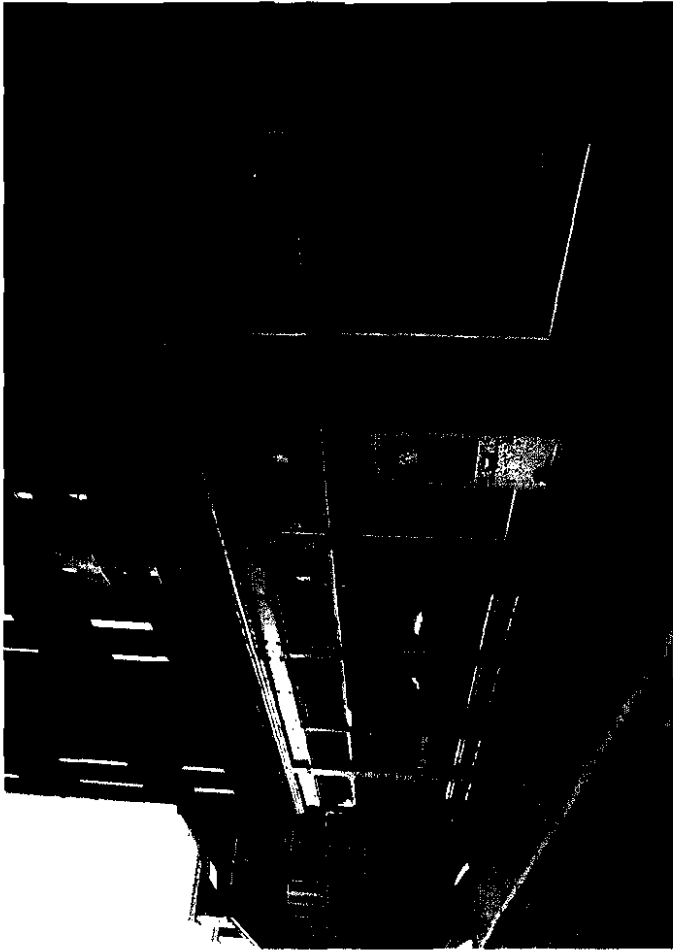
GLEN RAVEN CUSTOM FABRICS
Name of Production Superintendent

By WENDY MILLER, CUSTOMS COMP. MGR.
Title

The Corner Room
 110 Exchange Street
 Portland ME



The Corner Room
110 Exchange St
Portland ME 04103



- 6 TOTAL WINDOWS -

position of
raised sign
bracket -
no higher



To whom it may concern,

5/28/10

The OneTen Company, the owner of 110 Exchange Street building gives permission to Sunrise Acres DBA Corner Room to add window awnings on the windows facing Federal Street at their own expense.

Thank you.

A handwritten signature in black ink, appearing to read 'Chandrika Sanyal', written over the printed name.

Chandrika Sanyal

The OneTen Company.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/25/2010

PRODUCER (207)780-1677 FAX: (207)780-6377

Cross Insurance-Portland
2331 Congress Street
PO Box 567
Portland ME 04112

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
Leavitt & Parris, Inc. & JJ&L Corp.
256 Read Street
Portland ME 04103

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: One Beacon Ins Co

INSURER B: MEMIC

11149

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/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> PD Ded. \$1,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	7100110630004	4/30/2010	4/30/2011	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000				
	MED EXP (Any one person) \$ 10,000				
	PERSONAL & ADV INJURY \$ 1,000,000				
					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COM/PROP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> Drive Other Car	7100110630004	4/30/2010	4/30/2011	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	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 AGG \$
A	EXCESS / UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 0	7100110630004	4/30/2010	4/30/2011	EACH OCCURRENCE \$ 5,000,000
	AGGREGATE \$ 5,000,000				
	\$				
	\$				
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below Y/N <input type="checkbox"/>	1810063708	4/30/2010	4/30/2011	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER
	E.L. EACH ACCIDENT \$ 500,000				
	E.L. DISEASE - EA EMPLOYEE \$ 500,000				
	E.L. DISEASE - POLICY LIMIT \$ 500,000				
	OTHER				

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

*10 Day notice for nonpayment of premium except for Workers' Compensation.

RE: The Corner Room, 110 Exchange St., Portland, ME. Certificate Holder is an Additional Insured as respects to Commercial General Liability only.

CERTIFICATE HOLDER

The City of Portland
389 Congress Street
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 30* 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

Hope Cote/MLL

ACORD 25 (2009/01)
INS025 (200901)

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