

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

| | | | | | |
|---|--|--|--|---|--|
| Location of Construction: 193 Middle Street | | Owner: George Burns | | Phone: | |
| Owner Address: | | Lessee/Buyer's Name: McQuades, Inc. | | Phone: 774-9868 | |
| Contractor Name: Sign Design Inc. | | Address: 743 Broadway so Portland | | Phone: 799-2000 | |
| Past Use: | | Proposed Use: | | COST OF WORK: \$ 540.00 | |
| | | | | PERMIT FEE: \$ 27.40 | |
| | | | | FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied | |
| | | | | INSPECTION: Use Group: Type: | |
| Proposed Project Description: Erect 1-3' x 4' sign | | | | Signature: _____ | |
| | | | | Signature: <i>[Handwritten Signature]</i> | |
| | | | | Date: _____ | |
| Permit Taken By: Sherry Pinard | | Date Applied For: November 18, 1997 | | | |

Permit No: **971283**

PERMIT ISSUED

DEC - 2 1997

CITY OF PORTLAND

Zone: **B-3** GBL: **032 H 022**

Zoning Approval: *[Handwritten Signature]* **11/25/97**

Special Zone or Reviews:

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

1. This permit application does not 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..

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: 11/25/97

[Handwritten Signature]

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 provisions of the code(s) applicable to such permit

[Handwritten Signature: Dan Flannery]

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

Dan Flannery RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

CEO DISTRICT 2

[Handwritten Signature: A. Rowe]



743 Broadway, South Portland, ME 04106
207-799-2000 * FAX: 207-799-9544
1-800-949-9037

Sign Contractors

A Full Service Sign Company

FACSIMILE COVER SHEET

DATE: 11-24-97

TIME: 1:30

TO: DEB ANDREWS

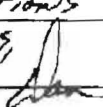
FAX NUMBER CALLED: 756-8258

RE: MCQUADES

FROM: DAN FLANNERY

NUMBER OF PAGES TO FOLLOW: 1

MESSAGE: DEB,

THIS IS THE LAYOUT OF MCQUADES PROPOSED SIGN
PLEASE CALL IF YOU HAVE ANY QUESTIONS
THANKS,


ANY TROUBLE WITH THIS TRANSMISSION PLEASE CALL (207-799-2000)

The information contained in this communication is confidential and is intended only for the use of the addressee. Unauthorized use, disclosure, distribution, or copy is strictly prohibited. If you receive this communication in error, please notify us by telephone as soon as possible at (207-799-2000) so that we may arrange for the retrieval of the documents at no cost to you.

SIGN DESIGN INC.

743 Broadway • South Portland, Maine 04106 • (207) 799-2000 FAX (207) 799-9544

CUSTOMER MCQUADES, INC
 ADDRESS 193 MIDDLE ST
PORTLAND ME ZIP _____
 PHONE 774-9868
 CONTACT NICOLE
 BUDGET AMOUNT _____
 TERMS FAX #

OVERHEAD LINES _____
 WRAP YES _____ NO _____
 UNDERGROUND LINES _____
 GAS _____
 PHONE _____
 ELECTRIC _____
 WATER _____
 SEWER _____
 OTHER _____
 EXPLAIN _____

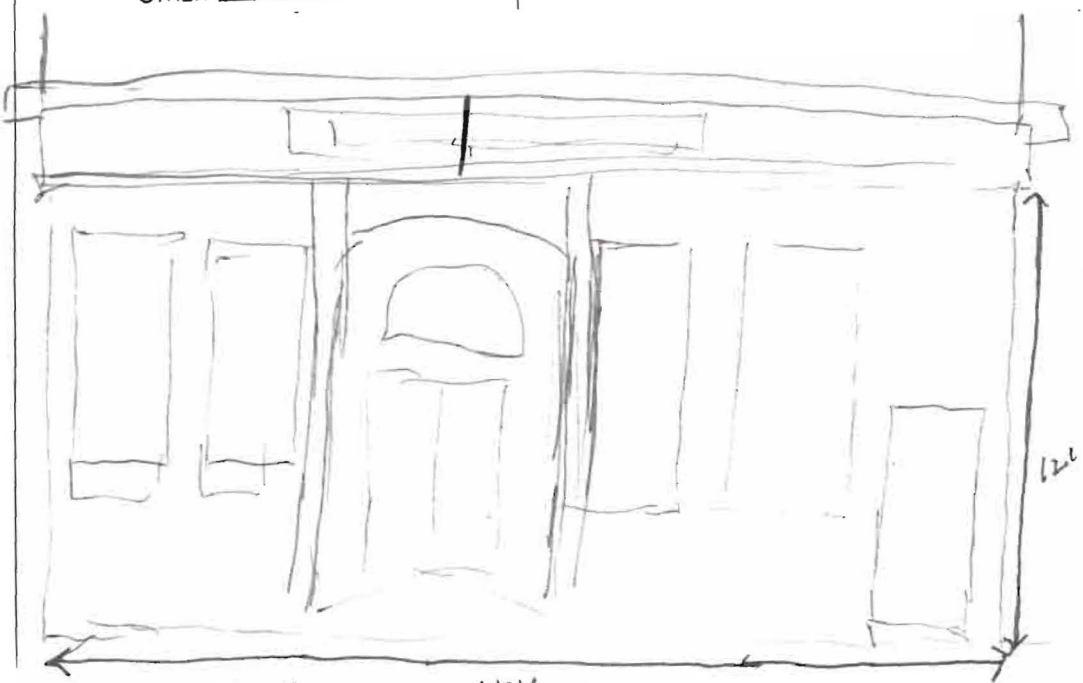
ELECTRICAL
 BY SDI
 BY OTHER _____
 EXPLAIN _____
 ELECTRICAL LOCATION _____
 WHERE _____
 WHICH END _____
 BUILDING VOLTAGE _____
 NEW SIGN RECOMMENDED VOLTAGE _____
 EXISTING SIGN VOLTAGE _____
 AMPS _____
 # OF LINES _____
 ADD SIGNAGE TO EXISTING SIGN _____

OF FACES
 S/F _____
 D/F 1
 OTHER _____
 LOCATION
 EXT. X
 INT. _____
 OTHER _____
 MOUNTING CLASS
 ROOF _____
 BLDG _____
 WALL MOUNT _____
 STICKOUT _____
 FREESTANDING _____
 CANOPY _____
 OTHER _____
 BLDG TYPE
 BRICK _____
 WOOD _____
 METAL _____
 GLASS _____
 OTHER CEMENT
 MATERIAL CLASS
 PLASTIC _____
 LEXAN _____
 ALUMINUM _____
 WOOD _____
 OTHER 2" SIGN Foam
 LIGHTING SOURCE
 NONE _____
 INTERNAL _____
 EXTERNAL _____
 NEON _____
 OTHER _____
 RAB
 # OF LINES _____
 LETTER SIZE _____
 COLOR _____
 GAUGE _____
 BRAND _____

POLES
 MATERIAL _____
 TYPE ROUND _____ SQ _____
 SIZE _____
 LENGTH _____
 TRAFFIC IRONS _____
 OTHER _____
 SOIL CONDITIONS
 CLAY _____
 SAND _____
 LEDGE _____
 FROZEN _____
 OTHER _____
 BASE
 SIZE H _____ W _____ D _____
 BAG SET _____
 ANCHOR _____
 DIRECT _____
 OTHER _____

ZONE _____
 SETBACK REQUIRED _____
 TOTAL ALLOWABLE SQ FOOTAGE _____
 VARIANCE NEEDED _____

3' x 4' DB SIDED
 ON SCROLL BRACKET
 OVER DOOR



MIDDLE ST 44'

OWNERS CONSENT AND AGREEMENT


I, George Burny, being the owner of the premises located at
(print property owners name)

193 MIDDLE STREET in Portland, Maine, hereby give consent to the
(print property address)

erection of a certain sign/awning/banner owned by MCQUADE'S, INC.
(print lessee's name)


over the sidewalk or on building from said premises as described in
application to the Division of Inspection Services.

And in consideration of the issuance of said permit, owner of said premises,
in event said sign shall cease to serve the purpose for which it was erected
or shall become dangerous and in event the owner of said sign shall fail to
remove said sign or make it permanently safe in case the sign still serves
the purpose for which it was erected, hereby agrees for himself or itself,
for his heirs, its successors, and his or its assigns, to completely remove
said sign.



Signature of Property Owner

11/5/97
Date

BROOKS McQuade
William McQuade


Signature of Lessee

11-7-97
Date

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
10/30/97

PRODUCER

WATSON INSURANCE AGENCY, INC.
60 WESTVILLE ROAD
P.O. BOX 486
PLAISTOW N.H. 03865

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.

COMPANIES AFFORDING COVERAGE

COMPANY A PRECISION-MARYLAND INS GROUP
COMPANY B
COMPANY C
COMPANY D

INSURED

MCQUADE'S, INC.
844 ELM STREET
MANCHESTER, NH 03101

COVERAGES

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| CO LTR | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|--------|---|---------------|----------------------------------|-----------------------------------|---|
| A | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT | PPS30811088 | 02/01/97 | 02/01/98 | GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 PERSONAL & ADV INJURY \$1,000,000 EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) \$ 100,000 MED EXP (Any one person) \$ 5,000 |
| A | AUTOMOBILE LIABILITY <input checked="" 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 | PPS30811088 | 2/01/97 | 2/01/98 | COMBINED SINGLE LIMIT \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$ |
| | GARAGE LIABILITY <input type="checkbox"/> ANY AUTO | | | | AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$ |
| A | EXCESS LIABILITY <input checked="" type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM | PPS30811088 | 2/01/97 | 2/01/98 | EACH OCCURRENCE \$3,000,000 AGGREGATE \$ |
| A | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL | TC893276138 | 2/01/97 | 2/01/98 | <input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER EL EACH ACCIDENT \$ 500,000 EL DISEASE-POLICY LIMIT \$ 500,000 EL DISEASE-EA EMPLOYEE \$ 500,000 |
| | OTHER | | | | |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

RE: SIGN FOR PORTLAND, ME LOCATION

CERTIFICATE HOLDER

SIGN DESIGN, INC.
743 BROADWAY
SO PORTLAND, ME 04106

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

JIM D WATSON

FA A

SIGNAGE

PLEASE ANSWER ALL QUESTIONS

Address: 193 MIDDLE ST Zone: B-3
Owner: GEORGE BURNS Assessors #: _____
Applicant: MCQUADES, INC

Single Tenant Lot?: Yes No

Multi Tenant Lot?: Yes No

Freestanding (Ext pole sign)? Yes _____ No Dimensions _____

More than (1) one sign?: Yes _____ No Dimensions _____

Bldg Wall Sign (att to bldg)? Yes No _____ Dimensions 3'x4' = 12sq ft

List all existing signage and their dimensions:

NO signs on this storefront

OK
12sq ft
88sq ft

Lot Frontage(feet): 44' Tenant Frontage(feet): 44' x 2' = 88sq ft

AWNINGS

Awning?: Yes _____ No Is Awning Backlit?: Yes _____ No _____

Is there any communication, message, trademark or symbol on awning? _____

Height of Awning?: _____

PLEASE NOTE: Approvals for signs on the Public Sidewalk and temporary signs come under different requirements and regulations.

ALSO: See reverse side for additional information, requirements and materials needed for signage application submittal.