

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that OLD PORT ARMS

Located At 52 EXCHANGE ST

Job ID: 2012-05-4117-SIGN

CBL: 032- I-002-001

has permission to install new 24" x 40" hanging sign
provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

N/A

A handwritten signature in black ink, appearing to read "A. B. M.", written over a horizontal line.

6/15/12

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD

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 Inspections 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.**

Final Inspection

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



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Acting Director of Planning and Urban Development
Gregory Mitchell

Job ID: 2012-05-4117-SIGN

Located At: 52 EXCHANGE ST

CBL: 032- I-002-001

Conditions of Approval:

Zoning

1. ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.

Building

1. Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2012-05-4117-SIGN	Date Applied: 5/30/2012	CBL: 032- 1-002-001	
Location of Construction: 58 (52) EXCHANGE ST	Owner Name: OLD PORT ARMS	Owner Address: PO BOX 3879 PORTLAND, ME 04104	Phone:
Business Name: Bliss	Contractor Name: Fast Signs	Contractor Address: 413 Western AVE SOUTH PORTLAND MAINE 04106	Phone: (207) 773-5499
Lessee/Buyer's Name: John Foddrill	Phone: 207-730-1716	Permit Type: SIGN - PERM - Signage - Permanent	Zone: B-3
Past Use: Retail	Proposed Use: Same -- retail -- "Bliss" -- replace existing hanging sign -- 40" x 24"	Cost of Work:	CEO District:
		Fire Dept: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/> N/A Signature:	Inspection: Use Group: Type: SIGN Signature: ABU
Proposed Project Description: Bliss New 24" x 40" Hanging Sign		Pedestrian Activities District (P.A.D.) 6/15/12	
Permit Taken By: Lannie		Zoning Approval	

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 informatin may invalidate a building permit and stop all work.	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM Date: OK w/condition 6/17/12 ABU	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 <input type="checkbox"/> Not in Dist or Landmark <input type="checkbox"/> Does not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: 6/14/12 D. Andrews
	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



B3 Historic Lanie

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.

2012-05-4117

Location/Address of Construction: 58 Exchange Street, Portland

Tax Assessor's Chart, Block & Lot Chart# <u>032</u> Block# <u>I</u> Lot# <u>002</u>	Owner: <u>Maine Properties Inc.</u>	Telephone: <u>883-1042</u>
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Lessee/Buyer's Name (If Applicable) <u>John/Angela Foddrill</u> <u>Bliss Boutique</u>	Contractor name, address & telephone: <u>Fast Signs</u> <u>413 Western Ave.</u> <u>S. Portland, ME</u> <u>207-773-5499</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00 For H.D. signage \$75.00 Fee: \$ <u>115.40</u> Awning Fee = cost of work _____ Total Fee: \$ <u>115.40</u>
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Who should we contact when the permit is ready: John Foddrill phone: 730-1716

Tenant/allocated building space frontage (feet): Length: 34' Height: 16'
Lot Frontage (feet) 44' Single Tenant or Multi Tenant Lot multi

Current Specific use: Clothing Store
If vacant, what was prior use: _____
Proposed Use: same

Information on proposed sign(s):
Freestanding (e.g., pole) sign? Yes ___ No X Dimensions proposed: _____ Height from grade: _____
Bldg. wall sign? (attached to bldg) Yes X No ___ Dimensions proposed: 24" x 40"

Proposed awning? Yes ___ No X 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 X No ___ Dimensions: 3' x 4'
Awning? Yes ___ No X Sq. ft. area of awning w/communication: _____

RECEIVED
MAY 30 2012
Dept. of Building Inspections
City of Portland Maine

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.

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.

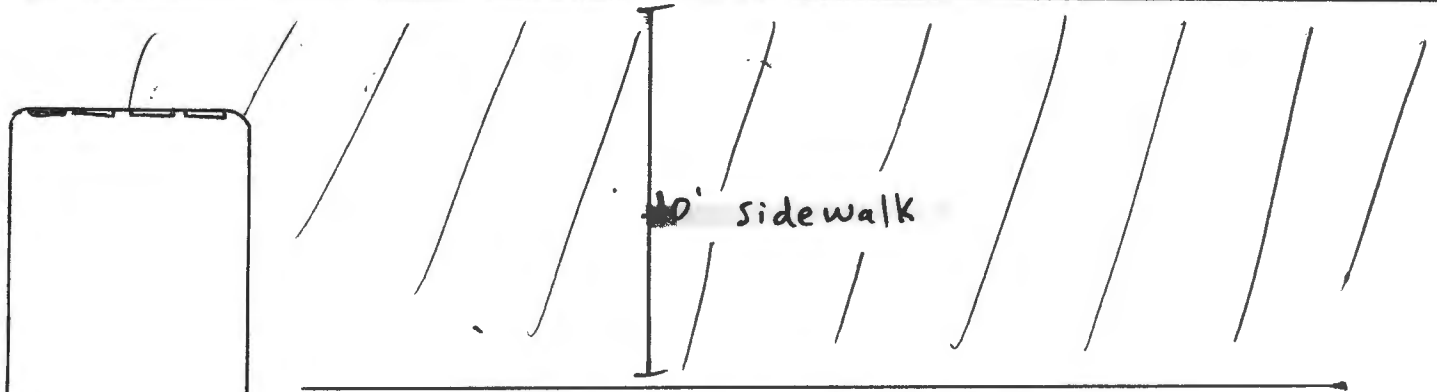
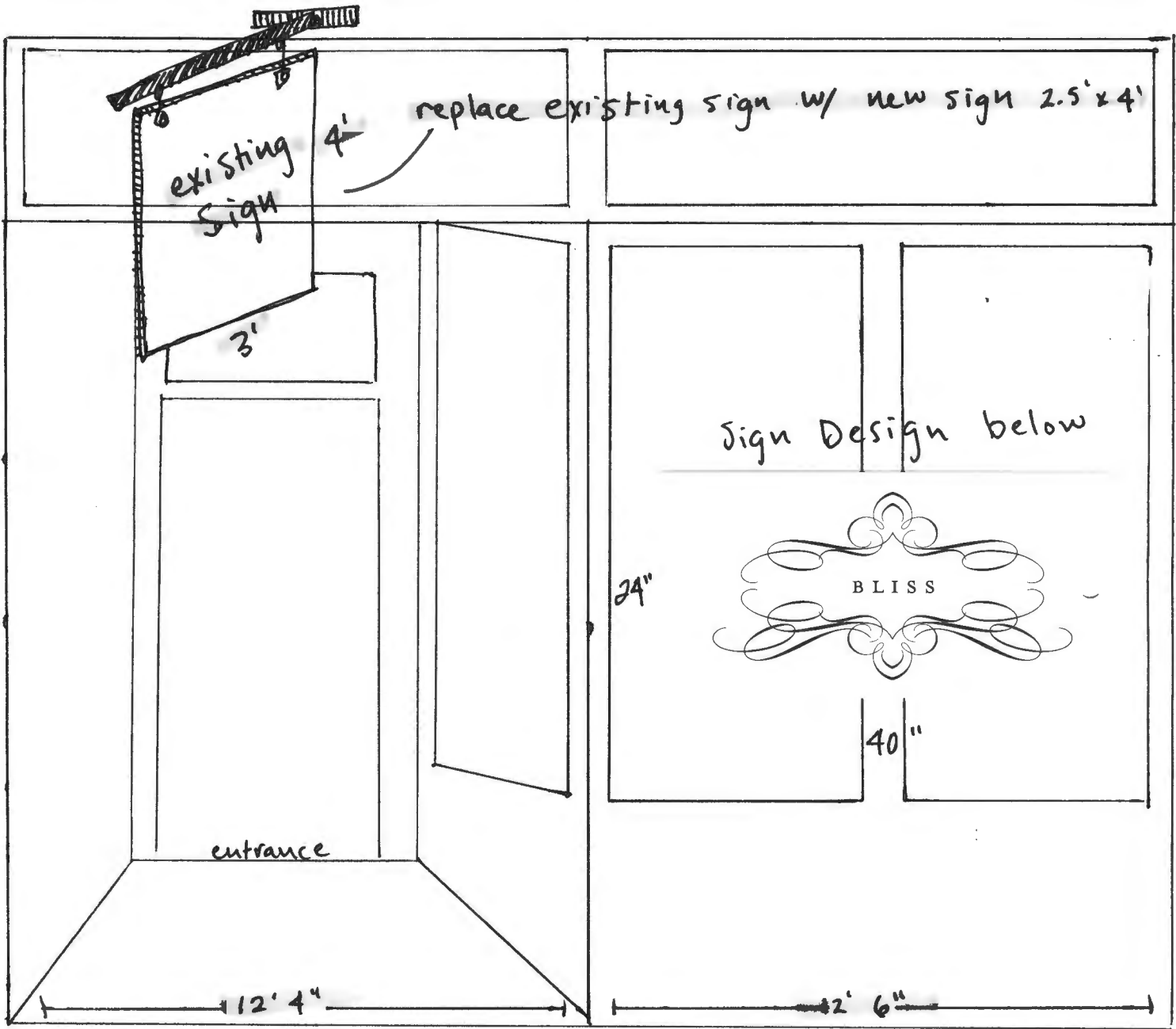
Signature of applicant:	Date: <u>05 22 12</u>
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This is not a permit, you may not commence ANY work until the permit is issued.

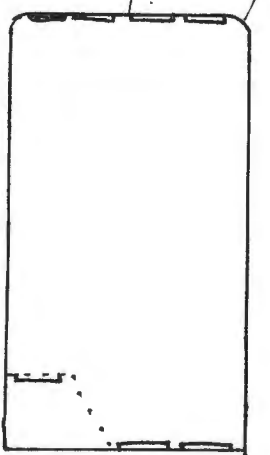
B3-ground front

$34 \times 2 = 68$

$24 \times 40 = 960 = 6.67 \text{ @ } 100$



58 EXCHANGE ST.
Bliss Boutique



interior lot dimensions

- location of new sign below:



- vinyl sticker on wood panel (no lighting)

ANDIAMO!



Where Sexy Style & Natural Beauty Unite

207-553-2299

Goldwell • Pureology • Brazilian Blowout
Jane Iredale Makeup • Hairlocs Extensions
Custom Sunless Tanning

AndiamoSalonAndSpa.com



ANDIAMO!
SALON & SPA



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207-553-2299

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- Makeup • Hairlocs Extensions
- Custom Sunless Tanning

AndiamoSalonAndSpa.com

58

APPOINTMENT
BY PHONE





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/23/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

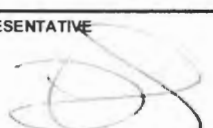
PRODUCER Smithwick & Mariners Ins. Inc. 366 US Route One Falmouth ME 04105	CONTACT NAME: Deborah White, CISR PHONE (A/C No. Ext): (207) 781-5553 E-MAIL ADDRESS: dwhite@smithwick-ins.com	FAX (A/C No.): (207) 781-5571
	INSURER(S) AFFORDING COVERAGE	
INSURED Bliss, LLP 58 Exchange Street Portland ME 04101-5020	INSURER A: Hanover Insurance Cos.	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

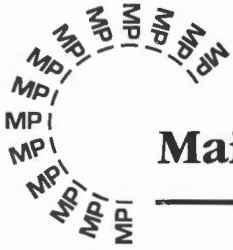
COVERAGES **CERTIFICATE NUMBER: CL1252305285** **REVISION NUMBER:**

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			ODP-7205153-08	6/3/2012	6/3/2013	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
	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) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Certificate holder is named as additional insured ATIMA

CERTIFICATE HOLDER City of Portland 389 Congress Street Portland, ME 04101	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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Maine Properties, Inc.

Residential – Commercial – Condominium Management

Office 207-883-3753 • Fax 207-883-2135 • TTY 207-883-2135

May 30, 2012

City of Portland
Congress Street
Portland, ME 04101

To whom it may concern:

Please be advised that as a tenant of 58 Exchange Street, Retail area, “Bliss” Clothing Store is entitled to signage on the building as a condition of their lease at a previously designated location.

If you have any further questions regarding this privilege, please feel free to contact me at 883-3753.

Sincerely,

Cheryl T. Hugill (ext 1304)
Property Manager