

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 080339

This is to certify that BUCKSTAR LLChas permission to "NOVARE RES BIER CAFE - 3 New signs and sidewalk"AT 188 MIDDLE ST

032 1021001

provided that the person or persons term or condition 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 when permission procured before this building or part thereof is used or service closed-in. 4 HOUR NOTICE 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. _____

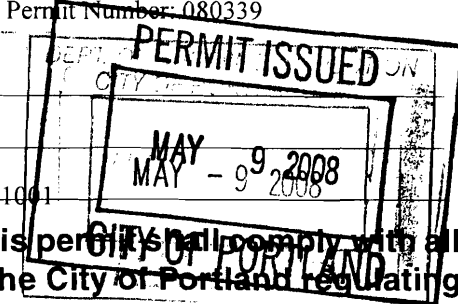
Appeal Board _____

Other _____

Department Name

[Signature] 5/9/08
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: 08-0339	Issue Date:	CBL: 032 I021001
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Location of Construction: 188 MIDDLE ST (4 Canal Plaza)	Owner Name: BUCKSTAR LLC	Owner Address: 100 SILVER ST	Phone:
Business Name: NOVARE RES BIER CAFE	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Restaurant - Black Tie <i>located in basement</i>	Proposed Use: Restaurant - "NOVARE RES BIER CAFE" 1 New sign and 1 sidewalk sign	Permit Fee: \$135.00	Cost of Work: \$135.00	CEO District: 1
Proposed Project Description: "NOVARE RES BIER CAFE" - 1 New sign and 1 sidewalk sign		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>		INSPECTION: Use Group: <i>U</i> Type: <i>Sign</i> <i>IBC 2003</i>
		Signature: _____		Signature: _____
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: Idobson	Date Applied For: 04/10/2008	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 information may invalidate a building permit and stop all work..		Special Zone or Reviews	Zoning Appeal	Historic Preservation
		<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"/> <i>OK w/ conditions</i> Date: 4/15/08 <i>BM</i>	<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: _____	<input checked="" 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 Date: 4-29-08 <i>STH</i>

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

City of Portland, Maine - Building or Use Permit

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

Permit No: 08-0339	Date Applied For: 04/10/2008	CBL: 032 I021001
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Business Name: NOVARE RES BIER CAFE	Contractor Name:	Contractor Address:	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Restaurant - "NOVARE RES BIER CAFE" - 21New building sign and 1 sidewalk sign	Proposed Project Description: "NOVARE RES BIER CAFE" - 1 New building sign and 1 sidewalk sign
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Dept: Historic **Status:** Approved with Conditions **Reviewer:** Scott Hanson **Approval Date:** 04/29/2008**Note:** Approved design marked "Final Design"**Ok to Issue:** ☒

- 1) Sign on Middle St. not approved, as it is an off-premise sign. Applicant has removed his request for approval of it from the application.

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 04/15/2008**Note:****Ok to Issue:** ☒

- 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 2) This permit is being issued with the condition that on the building sign near the entrance the letter and graphics are placed close together to give it the image of one sign.
- 3) This permit is being issued with the understanding that there will be three signs total: one building sign located at the corner of the building in the back where the entrance is, one building sign on Middle Street and one sidewalk sign. The second sign on the corner of the building near the entrance is not permitted.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 05/09/2008**Note:****Ok to Issue:** ☒

- 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.

Comments:

5/2/2008-amachado: The original application was for three building signs. Zoning reduced the nuber to two; one on the corner of the building near the entrance and one on Middle Street. Historic reduced the number to one (getting rid of the sign on Middle Street) and required a revised design. For the one remaining building sign.



Signage/Awning Permit Application

Location/Address of Construction: <u>4 Canal Plaza / 188 Middle St</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>32</u> Block# <u>I</u> Lot# <u>21</u>	Owner: <u>Buckstar II, LLC</u>	Telephone: <u>207-756-4454</u>
Lessee/Buyer's Name (If Applicable) <u>Movare Res, LLC</u>	Contractor name, address & telephone:	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 _____ Total Fee: \$ _____

Who should we contact when the permit is ready: Eric Michaud phone: 207-756-4454

Tenant/allocated building space frontage (feet): Length: 153 Height: 30
 Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot _____

Current Specific use: _____
 If vacant, what was prior use: Restaurant
 Proposed Use: Restaurant bar

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: See attached signs

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 X Dimensions: _____
 Bldg. wall sign? (attached to bldg) Yes X No _____ Dimensions: _____
 Awning? Yes _____ No X Sq. ft. area of awning w/communication: _____

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.

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 _____, 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: [Signature]

Date: 4/8/08

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

in alley
 Sign 1 = $2 \times 33 = 66\text{ ft}$ allowed $24 \times 108 = 2592 = 3024$
 $18 \times 24 = 432 = 21\text{ ft}$
 $8" \times 104" = 832\text{ ft} = 5.78$
 $24" \times 4" = 96\text{ ft}$
 $18" \times 24" = 432$
 $1360\text{ ft} = 9.4\text{ ft}$
 only allowed one in alley

Sign 2 - on middle
 $18 \times 24 = 36\text{ ft}$
 $18.25 \times 25.25 = 460.81 = 3.7\text{ ft}$

FINAL DESIGN



PO Box 346
Yarmouth, ME 04096
207.846.0473
Copyright 2008

DATE:

CUSTOMER:

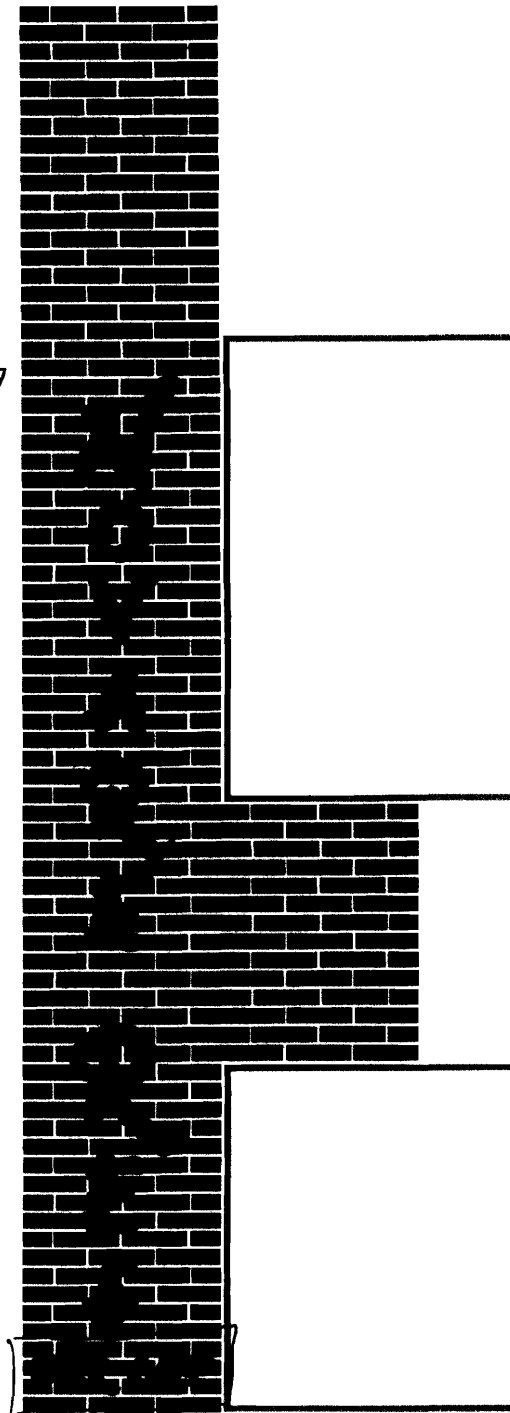
APPROVED:

DRAWING n°

1.

12 ft →
letter
width
11"

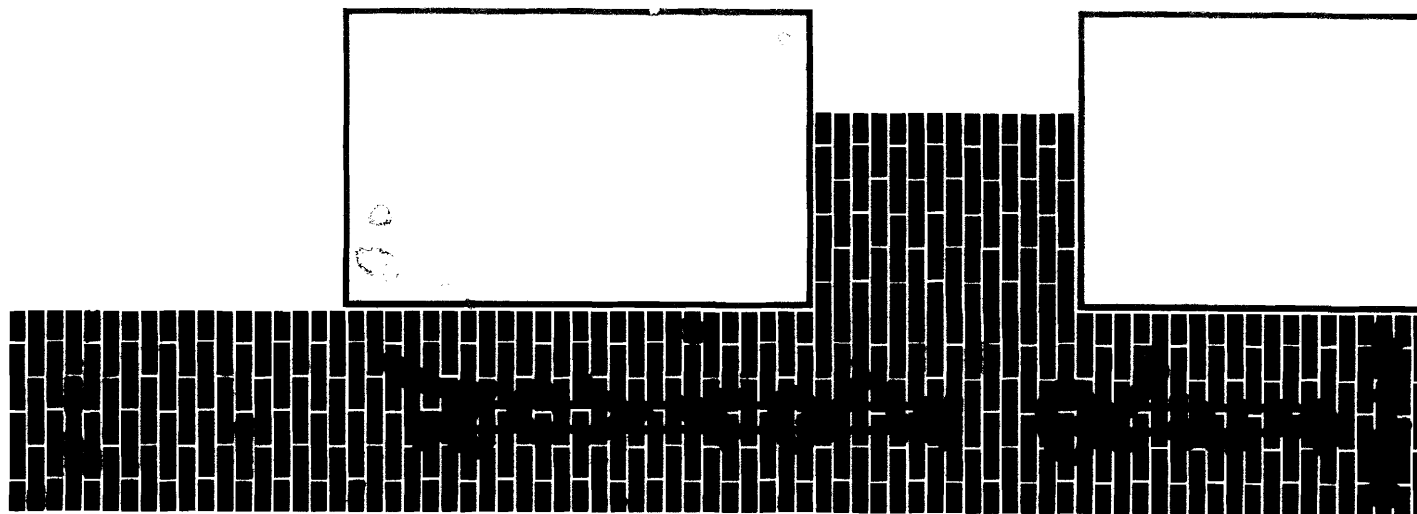
28" w
x
8" h →



letter composition:

vinyl sticker on
black composite
base

- letters attached
to support bars
- support bars painted
to match
brick
- total of 12 bolts
to attach directly
into masonry



PO Box 346
Yarmouth, ME. 04096
207.846.0473
Copyright 2008

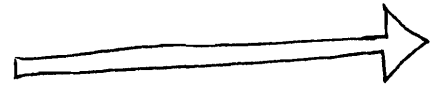
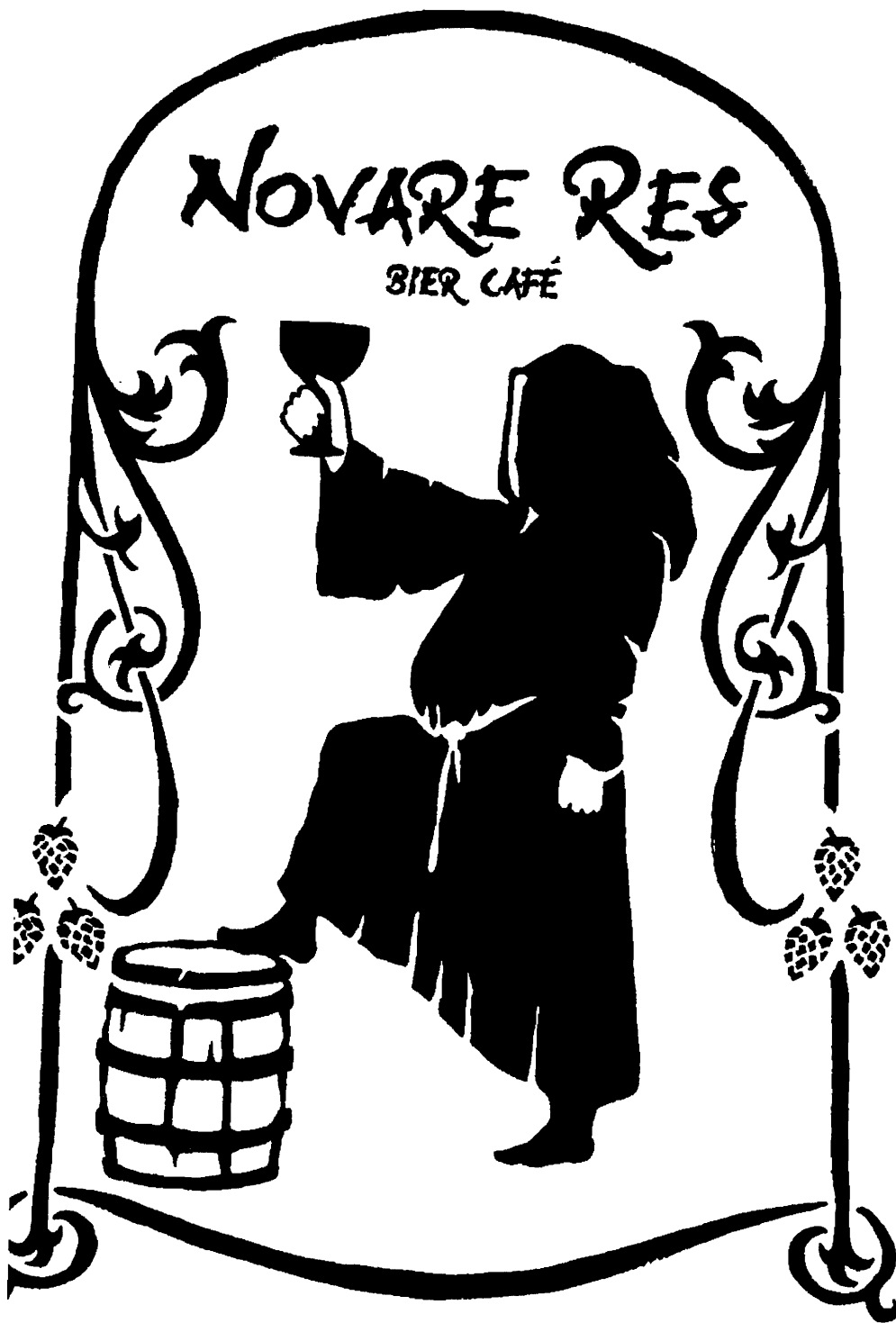
DATE:

CUSTOMER:

APPROVED:

DRAWING n °

1.



OPEN:

Mon - Fri

4 pm - 1 am

Sat & Sun

1 pm - 1 am

4

- Sandwich board 24" x 40"
- Black design painted on light wood background
- To be placed on sidewalk on Exchange St. at entry way to alley that leads back to Keybank parking lot & entrance to Novare Res Bier Cafe.

OK

(chalk board for daily specials)

atched
over

Trash Area
(cross-hatched)

Prerequisites

← EXTENSION DECK →

18
not
Middle St
along

Allyway
→

FX Channel ST

Project: 010207	4	4 of 5 Sheets(s)
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BUCKSTAR II LLC
100 SILVER STREET
PORTLAND, ME 04101
207-774-1885

Memo to: City of Portland

Date: 4/7/08

From: Michael Brescia on behalf of Buckstar II LLC

RE: signage for Novare Res Beer Café for property at Exchange and Middle Streets.

This letter shall confirm the approval of Buckstar II LLC, owner of the Property at 188 Middle Street/4 Canal Plaza, that we approve of our tenant, Novare Res, installing the following signs at the property:

1. a hanging sign on the face of the former Pavillion space on Middle Street of approximately 18 inches by 25 inches with directions to the Novare Res entrance off Exchange Street at the end of the Pavillion space closest to our current Tenant Blanche and Mimi's.
2. A building mounted sign at the entrance into Novare Res near the rear deck outside of its space.
3. A sidewalk sign for Novare Res to put at the Exchange Street entrance to the alleyway leading into its space.

Michael Brescia

Client#: 35872

NOVARES

ACORD™ CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
04/08/08

PRODUCER
HRH Northern New England
959 Congress St
Portland, ME 04102-2715
207 553-2131

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
Novare Res
4 Canal Plaza
Portland, ME 04101

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: Nautilus Insurance Company

17370

INSURER B:

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/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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	NC746037	02/08/08	02/08/09	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$50,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COM/OP AGG \$2,000,000
		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) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC AGG \$ AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU- TORY LIMITS OTH- ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

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

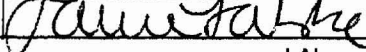
CERTIFICATE HOLDER

City of Portland
Portland, ME 04101

CANCELLATION

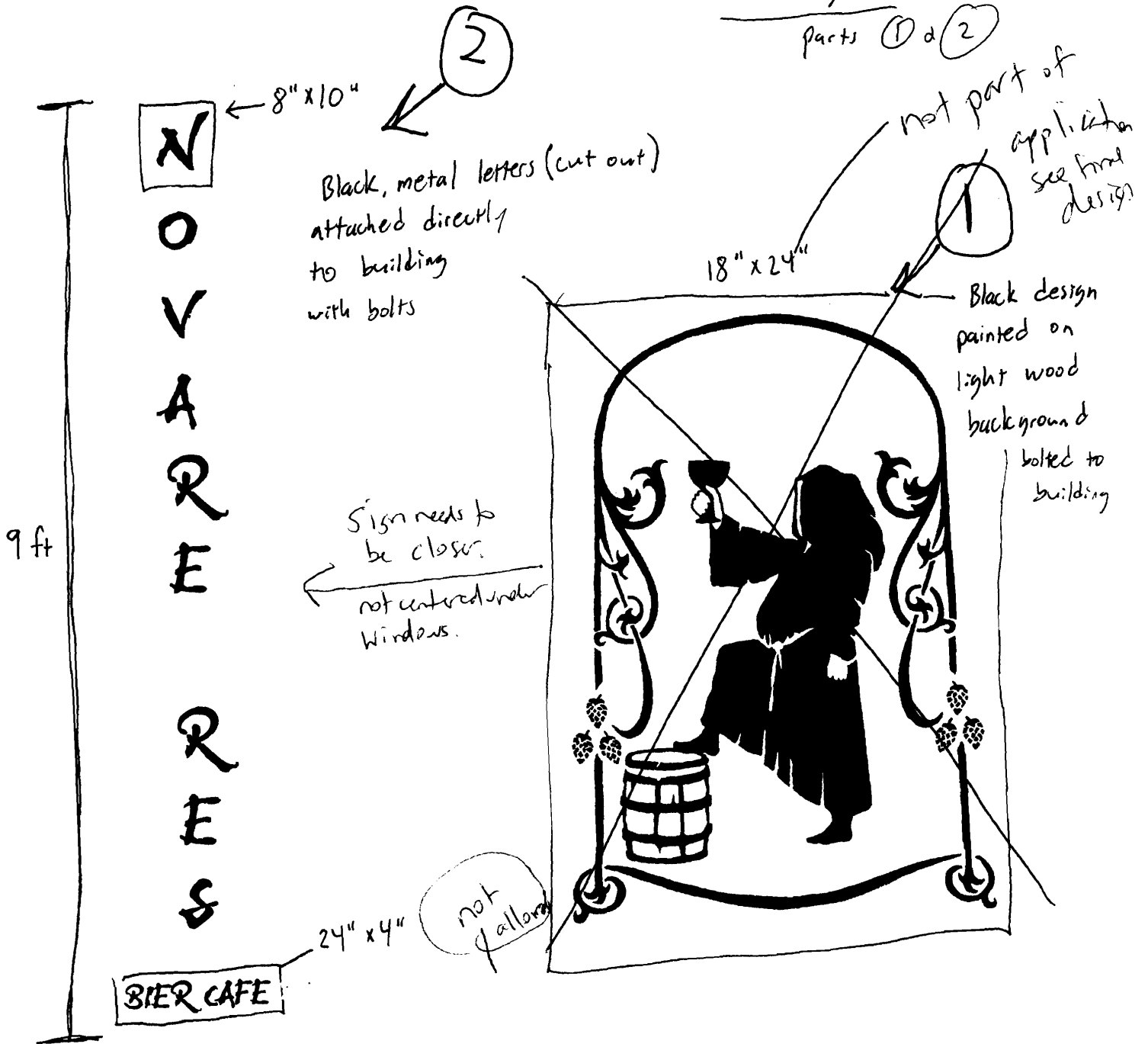
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS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

AUTHORIZED REPRESENTATIVE



One sign

parts ① & ②



$$24 \times 8 \times 108 = 2592 = 3024$$

$$18 \times 24 = 432 = 216$$

