Form # P 04

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

### **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

CTION

Permit Number: 080020

of buildings and st. tures, and of the application on file in

provided that the person or persons, of the provisions of the Statutes of N	m or expectation depting the ne and of the ences of the e	nis per <del>mit shall comply w</del> ith the City of Portland regulat	ir
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AT 401 Fore St	032 10	JAN 1 5 2008	1
has permission to Install new attached 20" x 8"	n and reger awn w/no.si ge to awn	ing	
This is to certify thatGRE_CONGRESS CANAL I	/Leavit	PERMIT ISSUEU	L

provided that the person or persons, of the provisions of the Statutes of N the construction, maintenance and u this department.

Apply to Public Works for street line and grade if nature of work requires such information.

N ication inspect in must git and wron permis in procuble this to ding or at thereodal dor of the procuble of the procuping of the process of

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

PENALTY FOR REMOVING THIS CARD

Director - Building & Inspection Services

## Certificate of Flame Resistance



REGISTERED APPLICATION CONCERN No.

FA-36801

Name of Applicator or Production Superintendent

ISSUED BY

Glen Raven Mills, Inc. 1831 N. Park Avenue Glen Raven, NC 27217

Phone) 336/227-6211 (Fax) 336/229-4039

Date treated or manufactured

Title

R Y		ADDRESSSTATE	
C	ertification is hereby made that	: (Check "a" or "b")	4
(a	chemical approved and registered	erse side of this Certificate have been treated with a flame-red by the State Fire Marshal and that the application of said in the laws of the State of California and the Rules and Reg	l chemi-
i	Name of chemical used Method of application	Chem. Reg. No	, , , , , , , , , , , , , , , , , , ,
	• •	erse side hereof are made from a flame-resistant fabric or state Fire Marshal for such use.	materiai
	) The articles described on the reverse registered and approved by the S	state Fire Marshal for such use. oric or material used <u>FR Sunbrella<sup>®</sup></u> Reg. No. <u>FA</u>	-36801

City of Portland, Ma		_				Issue Date:	CBT:	
389 Congress Street, 04	101 Tel: (	<b>207) 874-870</b> 3	B, Fax:	(207) 874-8716	08-0020		032 104	<del>41001</del>
Location of Construction:		Owner Name:			Owner Address:		Phone:	
401 Fore St (425)		GRE CONGR	ESS CA	NAL LLC	ONE CANAL PL	AZA 5TH FLOC	)R	
Business Name:		Contractor Name			Contractor Address:		Phone	
Leavitt & Pari		is Inc.		256 Read St. Port	land	2077970	100	
Lessee/Buyer's Name		Phone:			Permit Type:			Zone:
				J [	Signs - Permaner	<u>nt</u>		B-3
Past Use:		Proposed Use:			Permit Fee:	Cost of Work:	CEO District:	7
Commercial - retail- Mina & Co Commercial -					\$92.00 \$92.00		1	
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Proposed Project Description:	011 '		,				2014	
Install new attached 20" x awning	8" sign and	recover awning	g w/ no	~ ~ L	Signature:/	Signa	$-\iota_{\mathcal{I}}$	
awiiiig					PEDESTRIAN ACTIVITIES DISTRICT (P.A		( )	)
					Action: Approv	red Approved	w/Conditions	Denied
					Signature:	aush	Date:	2708
Permit Taken By:	Date An	oplied For:			1///	Approval		700
ldobson	1	7/2008			Zoning	Approvar		
1. This permit application	on does not	nracluda tha	Spe	cial Zone or Review	vs Zonir	ıg Appeal	Historic Pres	servation
Applicant(s) from me		•	<sub>                                    </sub>	oreland	☐ Variance	,	Not in Distri	et or Landma
Federal Rules.	5 S P P		_ 31	orcianu	Variance	<b>_</b>	W Not in Distri	Ct of Landina
Building permits do r septic or electrical wo		olumbing,	│	etland	Miscella	neous	Does Not Re	equire Review
•		is not started	 	ood Zone	Condition	mal Use	Requires Rev	view
3. Building permits are within six (6) months			'''	ood Zone	Condition	mar Osc	Requires Re-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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I have been authorized by t jurisdiction. In addition, if								
shall have the authority to								
such permit.		•	•	-		•		-
SIGNATURE OF APPLICANT				ADDRESS		DATE		NF.
S.S.G. ORD OF ALT DICART				ADDRESS		DALL	1110	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

Permit No: Date Applied For: CBL: City of Portland, Maine - Building or Use Permit 08-0020 01/07/2008 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 032 1041001 Location of Construction: Owner Name: Owner Address: Phone: 401 Fore St (425) GRE CONGRESS CANAL LLC ONE CANAL PLAZA 5TH FLOOR Phone Business Name: Contractor Name: Contractor Address: Leavitt & Parris Inc. 256 Read St. Portland (207) 797-0100 Lessee/Buyer's Name Phone: Permit Type: Signs - Permanent Proposed Use: Proposed Project Description: Commercial - retail- Mina & Co - Install new attached 20" x 8, sign Install new attached 20" x 8" sign and recover awning w/ no and recover awning w/ no signage to awning signage to awning Dept: PAD Status: Approved Reviewer: Carrie Marsh Approval Date: 01/08/2008 Ok to Issue: Note: 01/08/2008 Dept: Zoning **Status:** Approved with Conditions Reviewer: Ann Machado **Approval Date:** Note: Ok to Issue: 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. It is understood that the awning is not backlit and made from subrella material. Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 01/14/2008 Ok to Issue: Note:

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

2) Separate Permits shall be required for any new signage.



# 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.

(0)	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.
	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.

A UL# is required for lighted signs at the time of final impection.

Certificate of flammability required for awning or canopy.

Pre-application questionnaire completed and attached.

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, \$9.00 per additional \$1,000.00 of cost.

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

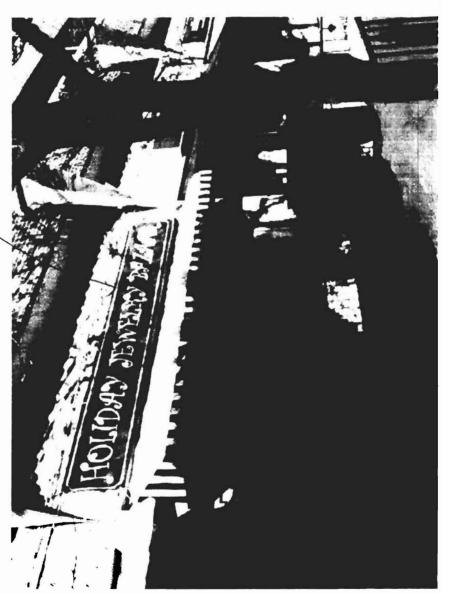
## Signage/Awning Permit Application

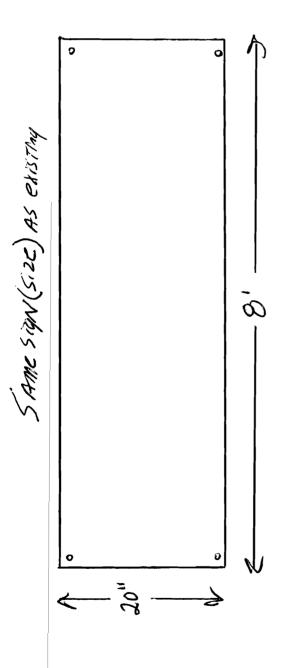
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

T : //// 50 : ////		
Location/Address of Construction: (1)  Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner:	Telephone:
Lessee/Buyer's Name (If Applicable)  Mina 6.  Christma Bounalal  Michell Marke	Contractor name, address & telephone:  Lecuitt & Paris  956 Read St  Port ME 04/03	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$
Who should we contact when the permit is ready  Tenant/allocated building space frontage (feet)  Lot Frontage (feet)  Current Specific use:	et): Length: 17f4 Height 8ft K Single Tenant or Multi Tenant Lot	ottom of auning 10.3 to buttom au
Information on proposed sign(s):  Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes  Recover Proposed awning? Yes No Is awn Height of awning: Is there any communication, message, tradema If yes, total s.f. of panels w/communications,  Information on existing and previously perm Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes	ning backlit? Yes No Depth: Perth: No network or symbol on it? Yes No s.f.  itted sign(s):  No Dimensions: Perth x & & & & & & & & & & & & & & & & & &	1200
Awning? Yes No Sq. ft. area  A site sketch and building sketch showing ex  Sketches and/or pictures of proposed signage	ractly where existing and new signage is lo	ocated must be provided.
Please submit all of the information of Failure to do so may result in the auto	utlined in the Sign/Awning Applic matic denial of your permit.	cation Checklist.
In order to be sure the City fully understands the additional information prior to the issuance of a pullding Inspections office, room 315 City Hall of	permit. For further information visit us on-lin	
I hereby certify that I am the Owner of record of the nauthorized by the owner to make this application as his a permit for work described in this application is issued areas covered by this permit at any reasonable hour to	s/her authorized agent. I agree to conform to all a l, I certify that the Code Official's authorized repre	applicable laws of this jurisdiction. In addition, if esentative shall have the authority to enter all
Signature of applicant:	Date	: 1/12/08
	you may not commence ANY work until the $5 i \% 20 \% \times 96 \% = 192$ $= (13.3)$	

This sign not penuthed was "Ama Shret" been #06-0557

I enclosed port of that party





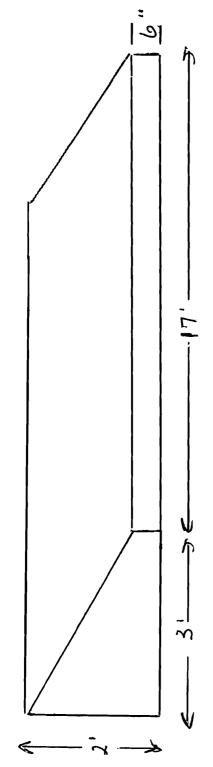
- Sign Makerial - Illuma - Flex mint cans = 3/8 x 2 " LAG 5 sher 16 Sign Attachment 7

4

On Nov 20, 2007, at 5:22 PM, Christina Bournakel wrote:

- > The sign over the awning is a 'set' size, I don't have exact
  > measurements but its about 18 inches high and maybe 5 feet long.
  > So we need something that will work on that. Then we were thinking
  > the Mina over the & and Counderneath could be a 'stencil' on the
  > windows.
  >
  ----- Original Message ----- From: "Chris Bournakis"
  > < ----- To: "Christina Bournakel" < ------
- > Sent: Tuesday, November 20, 2007 4:57 PM

- Existing Awning to be izecomped.



-# 10 TCK Scnew 72-dip

"Square Tubing

Client#: 156553 15MINACO ACORD. CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YYYY) 01/07/08 PRODUCER THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE Cross Insurance -CL/Bnds-P HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR P. O. Box 567 ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. Portland, ME 04112 800 286-5352 **INSURERS AFFORDING COVERAGE** NAIC # INSURED INSURER A: Maine Mutual Group 15997 Mina Co LLC INSURER B: 21 Linwood Street INSURER C Cape Elizabeth, ME 04107 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. INSRIADD'L LTR INSRC POLICY EFFECTIVE POLICY EXPIRATION DATE (MM/DD/YY) TYPE OF INSURANCE **POLICY NUMBER** LIMITS BINDER1070665 Α **GENERAL LIABILITY** 01/15/08 01/15/09 **EACH OCCURRENCE** \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) COMMERCIAL GENERAL LIABILITY \$250,000 CLAIMS MADE | X OCCUR MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER PRODUCTS - COMP/OP AGG POLICY AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) ANY AUTO ALL OWNED AUTOS BODILY INJURY (Per person) SCHEDULED AUTOS HIRED AUTOS BODILY INJURY (Per accident) \$ NON-OWNED AUTOS PROPERTY DAMAGE \$ AUTO ONLY - EA ACCIDENT \$ GARAGE LIABILITY ANY AUTO EA ACC \$ OTHER THAN AUTO ONLY: \$ AGG **EACH OCCURRENCE** EXCESS/UMBRELLA LIABILITY AGGREGATE \$ **OCCUR CLAIMS MADE** DEDUCTIBLE RETENTION WORKERS COMPENSATION AND **EMPLOYERS' LIABILITY** E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under SPECIAL PROVISIONS below E.L. DISEASE - POLICY LIMIT | \$ OTHER DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS Certificate Holder is named as an additional insured as their interest may appear for 425 Fore Street Portland ME 04101. CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION City of Portland DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL \_\_10\_ DAYS WRITTEN 389 Congress Street NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL Portland, ME 04101 IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES

#209954

AUTHORIZED REPRESENTATIVE

#### Casco Neck, Inc

P.O. Box 169 \* Portland, Maine 04112 Tel: 207-775-2228 \* Fax: 207-761-8280 Email: asiawest@aol.com

December 20, 2007

City of Portland City Hall Congress Street Portland, Maine 04101

To Whom It May Concern,

Christina Bournakel and Michelle Martel are leasing retail space from me at 425 Fore Street in Portland, to operate a business called "Mina & Co.". They have my permission to hang an awning (similar shape as the other tenant's awnings) and a flush mounted sign at that location.

If you have any questions, please let me know.

Sincerely,

Thomas Dana

T-H.80

Location of Construction: 401 Fore St  Lessee/Buyer's Name  Past Use: Commercial/ retail "Anna Street"	Owner Name: October Cor Contractor Nan Leavitt & Pa Phone: Proposed Use:	poration On ne: Con rris Inc. 256 Peru	tractor Address: 6 Read St. Fortland	Phon Phon 2077970100	
Lessee/Buyer's Name Past Use:	Contractor Nan Leavitt & Pa Phone:	rris Inc. Con Peru	tractor Address: 6 Read St. Fortland	2077970100 2077970100	
Past Use:	Leavitt & Pa Phone:	rris Inc. 250	6 Read St. Fortland	2077970100 EVED - Zone:	
Past Use:		Pert	nit Type: REC	EVED - zone:	
	Proposed Use:	A	wning with signage		
	Proposed Use:		willing, with signage	153	
Commercial/ retail "Anna Street"		Per	mit Fee: Cost of Work:	CEO District:	
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			Denied	Use Group: B Type: 1989  TBC-2003  Signature: 9MB 5/11/06	
		ERMIT ISSUED		, Am.	
				TRC-2003	
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replace awning and signage	'		nature: DESTRIAN ACTIVITIES DISTR	CICT (P.A.D.) VA	
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		Sign	nature: su below	Date: 5/9/01	
Permit Taken By: Date A	pplied For:		Zoning Approval		
ldobson 04/2	0/2006		·		
		Special Zone or Reviews	Zoning Appeal	Historic Preservation	
		Shoreland	☐ Variance	Not in District or Landmar	
		Wetland	Miscellaneous	Does Not Require Review Requires Review	
		Flood Zone	Conditional Use		
		I lood Zolle	conditional case		
		Subdivision	Interpretation	Approved	
		Site Plan	Approved	Approved w/Conditions	
		Maj	Denied	Denied	
			J Demed	han	
		Date: 5/8/21 HBM	late:	Date	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK. TITLE

 Anna Streets to dio

Original

Custom

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Accessories

Handbags

1 934"H X 16 12" W / Letter sug size

11078"H X 1134"A | 4"A X 2674" W Leffanny 512e. (STUDIO)

. 20" HX 8"W BLACK ANUMALITE (MAT.)

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(B) Kenatings & wide strikes bady and Bathrods  ACK ROD OF ROPE TRACK E EGG CRATE II LIGHTS 4" OR 8" STEP LADDER OF EXT. LADDER II POST PINS II SURFACE/REGAL MUNICIPE GRAPHICS II COLOR INSTALL DAY AND DATE TAXE DOWN DAY AND DATE CUSTOMER PICK-UP YES LOD YARDAGE/RIGH COMPANY CONTACT PERSON  ATTERN NO. Rose 6927 2440 YARDAGE/RIGH COMPANY  ASTRUM.  DATE ORDERED  SHIPPED VIA & DATE  DATE RECEIVED YOR RECEIVED CONTACT PERSON  TOTAL DATE ORDERED  DATE RECEIVED YOR RECEIVED CONTACT PERSON  DATE RECEIVED YOR RECEIVED CONTACT PERSON  TOTAL DATE DATE  DATE RECEIVED YOR RECEIVED CONTACT PERSON  DATE RECEIVED YOR RECEIVED CONTACT PERSON  TOTAL DATE DATE  DATE RECEIVED YOR RECEIVED CONTACT PERSON  DATE RECEIVED YOR RECEIVED CONTACT PERSON  TOTAL DATE DATE  DATE RECEIVED YOR RECEIVED CONTACT PERSON  DATE RECEIVED YOR RECEIVED YOR RECEIVED CONTACT PERSON  DATE RECEIVED YOR RECEIVED CONTA	3/012			<del></del>	$\overline{}$	<del></del>
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ALCONAL TO STEPLACK DESCRIPTION BACK AND DATE DATE ORDERED COMPANY CONTACT PERSON  JACK ROD DE ROPE TRACK DE EGG CRATE DE LIGHTS 4" OR 8" STEPLADER DE EXT. LADDER DE POST PINS DE SURFACE/THE LADDER DE CUSTOMER PICK-UP YES LADDER DATE ORDERED COMPANY CONTACT PERSON  JACK ROD DE ROPE TRACK DE EGG CRATE DE LIGHTS 4" OR 8" SURFACE/THE LADDER DE CUSTOMER PICK-UP YES LADDER DATE ORDERED COMPANY CONTACT PERSON  JACK ROD DE EGG CRATE DE LIGHTS 4" COMPANY CO	3 34	Y . W . P	' / W / P	W. P.	remarks the second	<b>01</b> .
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(B) Kenatings & Wide Stricts ) Bady and Bathens!  JACK ROD & ROPE TRACK   EGG CRATE   LIGHTS & DR 8 STEP LADDER   EXT. LADDER   POST PINS   SURFACE/INCTIAL WILDOW, GRAPHICS   COLOR INSTALL DAY AND DATE   TAKE DOWN DAY AND DATE   CUSTOMER PICK-UP YES KNO   TO A COMPANY   YARDAGE   TO A COMPANY   YARDAGE   TO A COMPANY   YARDAGE   TO A COMPANY CONTACT PERSON   TO A				- juge		
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CUSTOMER NAME  DATE RECEIVED YOUR RECEIVED GOLDS TO BE DATE  DATE		2	ANT CONTACT P	****	Harry T.	
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