Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached	PERIVI	Permit Number: 061606
This is to certify that386 FORE STREET LLC /	S Loft	PERMIT ISSUED
has permission toInstall 12 sf bldg sign, moundary and a sign of the provisions of the Statutes of the construction, maintenance and this department.	s rm or a stion at epting	NOV 2 7 2006 g this permit shall comply with a of the City of Ropland regulation on file
Apply to Public Works for street line and grade if nature of work requires such information.	ification of inspace on muse even and volen permoon proceed or identification of inspace on muse even and volen permoon proceed or identification of inspace on permoon proceed or identification of inspace on permoon permoon permoon of inspace on permoon of inspace on permoon permoon of inspace on permoon permoon permoon of inspace on permoon permoo	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		Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine	- Building or Use	Permi	t Applicatio	n P	ermit No:	Issue Date	:	CBL:	
389 Congress Street, 04101	_				06-1606			032 J00	1001
Location of Construction: Owner Name:				Owner Address:				Phone:	
386 FORE ST 386 FORE STREET LLC			LLC	PO BOX 7225					
Business Name: Contractor Nam Sign Loft		:	_	Cont	ractor Address:			Phone	
				786	Middle St. Le	ewiston		2074420787	
Lessee/Buyer's Name	Phone:			Permit Type:					Zone:
					gns - Permanei	nt			33
Past Use:	Proposed Use:			<u> </u>	Permit Fee: Cost of Work			CEO District:	<u> </u>
Commercial -	'	Commercial /retail install a 12 sf bldg sign, mounting w/ existing		Pern					
Commercial -V PIV				EID	\$34.00 E DEPT:		39.00	I	
	hardware	ilitilig w	" Calsting	FIR	E DEP1:	Approved	Lico Gr	CTION	Tuna I
,	1					Denied	Use Gr	oup.	Турс
							-	tan 2	m3
D 10 10 10				-			1	CDC U	
Proposed Project Description:				l			l	oup: Bus tBC 24 ire: Im 11	1-21-6
Install 12 sf bldg sign, mountir		;			ature:	NUTTED DIO	Signatu	ire: // //	12/100
"Coul As AL	loose			PED	ESTRIAN ACT	IVITIES DIST	. RICI (I	CT (P.A.D.)	
				Acti	on: Appro	ved 🗌 App	oroved w/	/Conditions	Denied
				Sign	ature:			Date:	
Permit Taken By:	Date Applied For:	1			Zonina	Approva	<u> </u>		
dmartin	11/01/2006				Zomng	Approva	11		
1 This magnit application do		Spe	cial Zone or Revi	ews	Zoni	Zoning Appeal		Historic Pres	ervation
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance			Not in District or Landma		
2. Building permits do not include plumbing,		☐ Wetland		Miscellaneous			Does Not Require Review		
septic or electrical work.3. Building permits are void if work is not started within six (6) months of the date of issuance.		Flood Zone		Conditional Use			Requires Review		
False information may inv permit and stop all work		Subdivision		Interpretation			Approved		
pomine and stop an worth		Sin	te Plan		Approve	ed	`	Approved w/	Conditions
	The second of th	Maj [Minor MM	I 🗀	Denied			Denied	
PERMIT ISSUED		Date: 11/2/01 fpm		и 	Date:		D	Date: 11/22/06 STH	
I hereby certify that I am the ov I have been authorized by the o jurisdiction. In addition, if a pe	oner of record of the nate when to make this application work described	med proication a	as his authorize application is i	he pro d age: ssued	nt and I agree, I certify that	to conform the code of	to all ap ficial's a	pplicable laws authorized repr	of this esentative
shall have the authority to enter such permit.	an areas covered by su	ich perr	nit at any reaso	nable	nour to enforce	ce the provi	sion of	tne code(s) ap	piicable to
SIGNATURE OF APPLICANT	_		ADDRES	SS		DATE	,	РНО	NE

BUILDING PERMIT INSPECTION PROCEDURESPlease call 874-8703 or 874-8693 to schedule your

inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place	ce upon receipt of your building permit.
Footing/Building Location Inspec	tion: Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electri	cal: Prior to any insulating or drywalling
Final/Certificate of Occupancy:	Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.
phase, REGARDLESS OF THE NOTICE CERIFICATE OF OCCUPANICE	Occupancy. All projects DO require a final cur, the project cannot go on to the next COR CIRCUMSTANCES. ES MUST BE ISSUED AND PAID FOR,
BÉFORE THE SPACE MAY BE OCCUP	
Signature of American	
Signature of Applicant/Designee	Date 11 - 27 - 06
Signature of Inspections Official	Date
CBL: 32 J 001 Building Permit #	1:06 1606

-- P-1-- P-1-XT-MITTIR I CITITIL 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: 38	8 Fore STREET	04101
Tax Assessor's Chart, Block & Lot	MKip stone	Telephone: 207-774-4515
Zooseo/Buyer's Name (If Applicable) Honn Kip Stone	Contractor name, address de telephone: Signiloff 186 middle St. BATH Me 04530	Total of signage x \$2.00 Per of pius \$30.00/\$65.00 For H.D. signage Total Pee: \$ Awning Feem coat of work Total Fee: \$
Who should we contact when the posmit is read Tenant/allocated building space fromtage (file) Lot Prontage (feet) Current Specific uses If vacant what was prior use: Proposed Use:	ret): Length: Fleight Single Tenger or Multi Tenant Lot	105-4206./774-4515 21'x2=424
Proposed awning? Yes W. No X. Is av Height of swning? Yes W. No X. Is av Height of swning. A. Pr. Langth of Is there any communication, massage, tradem If yes, total of panels w/communications. Information on exclusing and previously perm Freestanding (e.g., pole) sign? Yes Birig, wall sign? (strached to bidg) Yes X.	erning backlist? Yes No Depth: swaing: Depth: nack or symbol on it? Yes No treestags, trademark or symbol: named sign(s): No Directsions:	NOV 1 2006
A site sketch and building sketch showing of Sketches and/or pictures of proposed signs. Please submit all of the information.	ge and existing building are also required outlined in the Sign/Awaing Appl	
Fallure to do so may result in the aut in order to be sure the City fully understands the additional information prior to the issuance of a Building Inspections office, room 315 City Hall	a full scope of the project, the Planning and permit. For further information visit us on-	
I hereby certify that I am the Country of record of the authorized by the owner to make this application as a penuit for work discelled in this application is issued as a covered by this permit at any reasonable hour to	sis/her eachorized agent. I agree to conform to si ed, I comify that the Code Official's authorized re	I applicable laws of this jurisdicties. In addition, if presentative shall have the natherby to enter all
Signature of applicant:	WE DE DA	
This is not a pecini	, you may not commence ANY work used the	ne permit a leaued.

Set abya

SEP-27-2006 11:27 AM SIGHLOFT

928.20 08 (TEU) 15:04 PURILANDMAINELUSPECTIONSEZONING

City of	Doutland Ma	no Duilding on Has Donnie	L		Permit No:	Date Applied For:	CBL:
•	,	ine - Building or Use Permit 101 Tel: (207) 874-8703, Fax: (74-8716	06.1606	11/01/2006	032 J001001
Location o	of Construction:	Owner Name:				<u> </u>	Phone:
386 FOI		386 FORE STREET L	LC		PO BOX 7225		Thome:
Business N		Contractor Name:			Contractor Address:		Phone
Dusiness	······································	Sign Loft			786 Middle St. Le	wiston	(207) 442-0787
Loccoo/Ru	yer's Name	Phone:			Permit Type:	WISTOIL	(201) 442-0181
Lessee/Du	yer's Name	rnone:		[
				L	Signs - Permanen	<u> </u>	
Proposed 1	Use:			Propose	d Project Description	:	
Comme		a 12 sf bldg sign, mounting w/ exist	ting	Install Moose		ounting w/ existing h	nardware - "Cool As A
nara war	Č			1,10036	•		
Dept:	Historic	Status: Approved with Condition	is Re	viewer:	Deborah Andrev	vs Approval D	Pate: 11/22/2006
Note:							Ok to Issue:
1) Sanc	dhlasted backgrow	nd area of sign is to have minimal to	exture (n	oo propiii	nced wood grain)	and he nainted a solid	d color
	_	•		•	_	-	i color.
2) Atta	chment of new rei	nforcement to bracket is to be secur	ed into	mortar jo	oints only, not into	brick.	
- Dent	Zoning	Status: Approved	Re	viewer	Ann Machado	Approval D	Date: 11/07/2006
_	Zonnig	Status. Approved	IX.	vicwei.	Ann Machado	Approvatio	Ok to Issue:
Note:							
1) ANY Dist		quires a separate review and approv	al thru I/	Historic 1	Preservation. This	property is located v	vithin an Historic
Dept:	Building	Status: Approved with Condition	ıs Re	viewer:	Tom Markley	Approval D	Pate:
Note:	_						Ok to Issue:
	lication approval l approrval prior to	pased upon information provided by work.	y applica	ınt. Any	deviation from app	proved plans requires	s separate review
2) Sign	age Installation to	comply with Chapter 31 of the IBC	C 2003 b	ouilding o	code.		

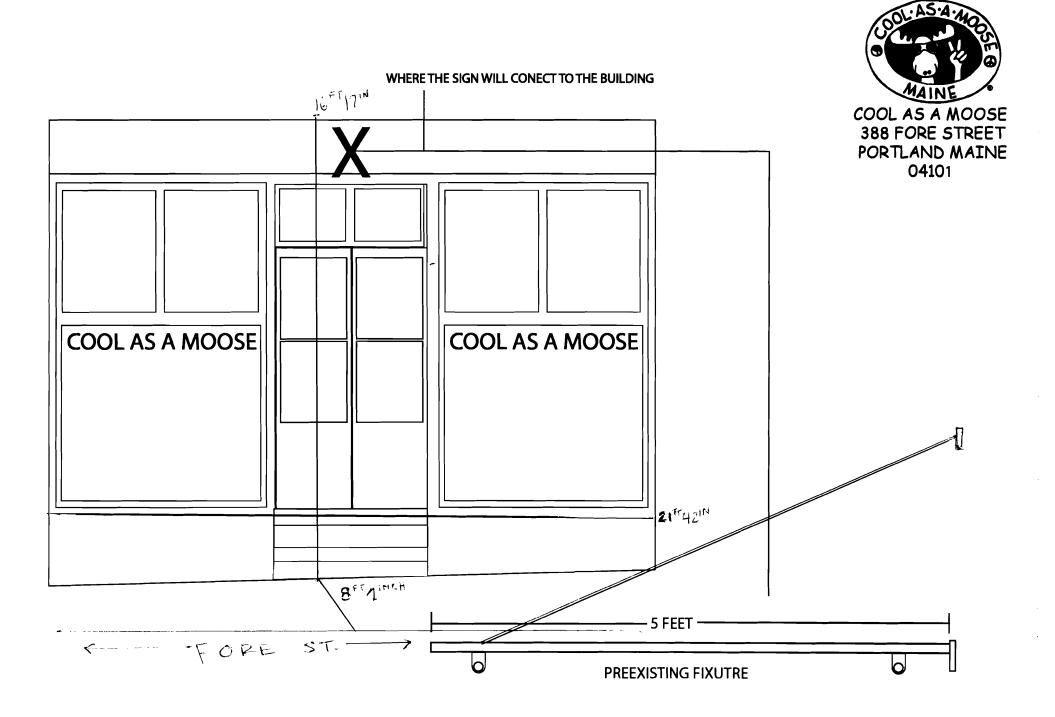
City of Portland, M	laine - Building or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, (04101 Tel: (207) 874-8703, Fax: (20	7) 874-871	6 06-1606	11/01/2006	032 J001001
Location of Construction:	Owner Name:	Owner Name: O			Phone:
386 FORE ST	386 FORE STREET LLC	2	PO BOX 7225		
Business Name:	Contractor Name:		Contractor Address:		Phone
	Sign Loft		786 Middle St. Le	wiston	(207) 442-0787
Lessee/Buyer's Name	Phone:	Phone: F			
			Signs - Permanen	ıt	
Proposed Use:		Propo	sed Project Description	<u></u> :	
Commercial /retail insta	ıll a 12 sf bldg sign, mounting w/ existing	g Insta	ll 12 sf bldg sign, m	ounting w/ existing l	hardware - "Cool As A
hardware		Moo	se"		
Dept: Historic	Status: Approved with Conditions	Reviewe	: Deborah Andrev	vs Approval I	Date: 11/22/2006
Note:					Ok to Issue:
Sandhlasted background	ound area of sign is to have minimal text	ure (no pron	unced wood grain) a	and be painted a soli	d color.
,	C	` •	,	•	a c c c c c c c c c c
2) Attachment of new i	reinforcement to bracket is to be secured	into mortar	joints only, not into	brick.	
Dept: Zoning	Status: Approved	Reviewe	: Ann Machado	Approval I	Date: 11/07/2006
Note:	**			• • • • • • • • • • • • • • • • • • • •	Ok to Issue:
	requires a separate review and approval	thru Historia	Preservation This	property is located y	
District.	requires a separate review and approval	tina Tibiori	Treservation. Time	property is recated.	Time an Tiplotto
Dept: Building	Status: Approved with Conditions	Reviewe	: Tom Markley	Approval I	Date:
Note:					Ok to Issue:
Application approva and approrval prior	al based upon information provided by a to work.	pplicant. An	y deviation from app	proved plans require	s separate review
2) Signage Installation	to comply with Chapter 31 of the IBC 2	003 building	code.		





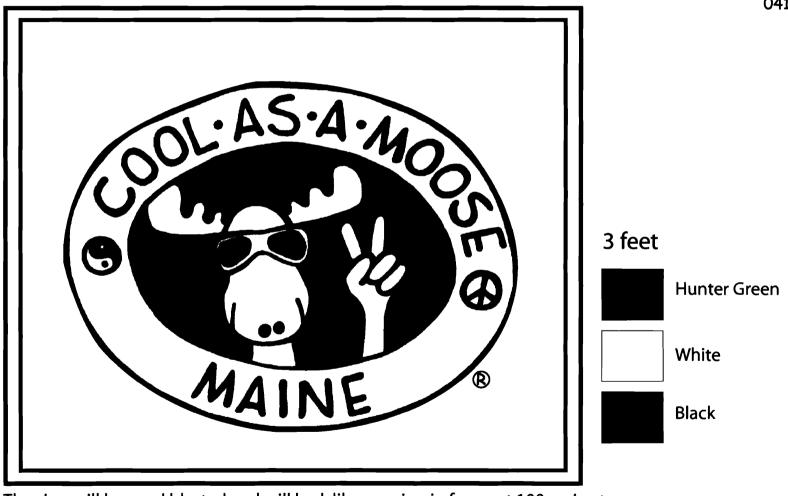








4 feet



The sign will be sand blasted and will look like our sign in freeport 100 main st.



395 Fore Street P.O. Box 7225 Portland, ME 04112 Tel: (207) 772-6579 Fax: (207) 773-0680

October 26, 2006

To Whom It May Concern,

Please be advised that H. H. Sawyer Realty Company gives permission to Kip Stone, DBA, Cool As A Moose, our tenant at 388 Fore Street, to hang a new retail sign at the location of the existing sign.

If you have any questions, please feel free to contact our office.

Sincerely,

Cathy-Ann Wirth

H. H. SAWYER REALTY COMPANY

	Client#: 142049		**************************************	ARTIFING	DATE (MM/DD/YYY)		
ACORD. CER	TIFICATE OF L	ABILITY	NSURA	NCE	10/18/06		
PRODUCER Cross Insurance -CL/Bnds-P P. O. Box 567		ONLY AN HOLDER	D CONFERS NO. THIS CERTIFICA	UED AS A MATTER OF IN RIGHTS UPON THE CERT ATE DOES NOT AMEND, E AFFORDED BY THE POLICE	IFICATE EXTEND OR		
Portland, ME 04112 800 286-5352		INSURERS	AFFORDING CO	VERAGE	NAIC #		
INSURED			lartford Insura				
Artforms Inc. & C		INSURER 8;					
	LC; 90 Bridge Street	INSURER C	INSURER C:				
Westbrook, ME 0	4092	INSURER D					
		INSURER 3:					
ANY REQUIREMENT, TERM OR COM MAY PERTAIN, THE INSURANCE AF POLICIES, AGGREGATE LIMITS SHO	ED BELOW HAVE BEEN ISSUED TO THE NOTION OF ANY CONTRACT OR OTHE FORDED BY THE POLICIES DESCRIBED WAY HAVE SEEN REDUCED BY A	ER DOCUMENT WITH RE ED HEREIN IS SUBJECT ' VAID CLAIMS.	SPECT TO WHICH ' TO ALL THE TERMS	THIS CERTIFICATE MAY BE IS I, EXCLUSIONS AND CONDITI	SUED OR ONS OF SUCH		
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X COMMERCIAL GENERAL I	DOCUR			MED EXP (Any one person)	\$300,000 \$10,000		
	, 54051.			PERSONAL & ADVINJURY	11,000,000		
				general adgregate	\$2,000,000		
GEN'L AGGREGATE LIMIT APP	LIES PER.			PRODUCTS - COMP/OP AGG	₹2,000,000		
POLICY PRO-	roc						
ANY AUTO				COMBINED SINGLE LIMIT (Ex accident)	\$		
AUL OWNED AUTOS SCHEDULED AUTOS				SCDILY (NUURY (Per person)	s		
HRED AUTOS				RODILY INJURY (Per accident)	\$		
				PROPERTY CAMAGE (Per addition)	\$		
GARAGE LIABILITY			ļ	AUTO ONLY - EA ACCIDENT	1		
ANY AUTO				OTHER THAN EA ACC	 		
A EXCESS/JMBRELLA LIABILITY	04RHQXU2840	07/22/06	07/22/07	EACH OCCURRENCE	\$1,000,000		
	IS MADE	07,45.00		AGGREGATE	\$1,000,000		
					\$		
DEDUCTIBLE					\$		
X RETENTION \$ 0				WC STATU- 1 OTH	3		
A WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	04WEQRH3442	07/22/06	07/22/07	TORY LIMITS FR			
ANY PROPRIETOR/PARTNER/EXECU- OFFICER/MEMBER EXCLUDED?	TIVE			E.L. EACH ACCIDENT	\$500,000 - \$500,000		
If you describe under SPECIAL PROVISIONS below		ł	ļ	E.L. CISEASE - POLICY LIMIT			
OTHER					1,000		
DESCRIPTION OF OPERATIONS / LOCATION Certificate Holder is named as					A constant		
CERTIFICATE HOLDER		CANCELLA	TION				
City Of Portland 389 Congress Street		DATE THEREOF	Should any of the agove described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail days written notice to the certificate holder named to the left, but failure to do so shall				
Portland, ME 041	וּט	REPRESENTAT	IVES. REPRESENTATIVE	IV OF ANY KIND UPON THE INSUR	RER, ITS AGENTS OR		
		Kare	Peters	H2 /2			
ACORD 25 (2001/08) 1 of 1	#\$151203/M151202				CORPORATION 198		

ACORD 25 (2001/08) 1 of 1

#\$151203/M151202

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