Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

### **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

#### WERECTION

Permit Number: 070523

This is to certify that $\phantom{AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA$	ORIS EE JTS HANNAFORD COV	DEDMIT ICCION
has permission toinstall 3 new signs (2) 20	)" x & (1) 5	LEWMII 1990ED
AT 414 FOREST (17 What St)	032 N	1009001 HIN 1 5 2717
provided that the person or perso		his permit shall comply with al
of the provisions of the Statutes of the construction, maintenance and this department.		the City of Portland regulating and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	fication of inspersion muses a general way on permit on proceed to the this liding or artithered in the edge 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.		1 /
Appeal Board		- 121 0 111
Other Department Name		Director - Building & Inspection Services
,	NALTY FOR REMOVING THIS CARE	1

City of Portland, Maine	- Building or Use	Permit Application	Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101	_		1	6/15/	032 NO	009001
Location of Construction:	Owner Name:	<del></del>	Owner Address:	- + -	Phone:	
414 FORE ST (17 What	) RICH JOHN I	H JR & DORIS LEE J	TWO LIGHTS F	RD		
Business Name:	2:	Contractor Address		Phone		
Lessec/Buyer's Name Phone:			Permit Type:			Zone:
			Signs - Permane	nt		<u> 183                                    </u>
Past Use:	Proposed Use:		Permit Fee:	Cost of Worl	c: CEO District:	
Retail		3 new signs (2) 20" x	\$121.00	\$12	1.00	
	36" & (1) 5"x	20"	FIRE DEPT	Approved	INSPECTION:	~
	"Puzks	& Games Etz"		Denied	Use Group:	Types 57
	′				TRUE	2003
						Types SB DCO3
Proposed Project Description:					111	- 0\ 0\
install 3 new signs (2) 20" x 3	6" & (1) 5' x 20'		Signature:		Signature: U	11/1/V
			PEDESTRIAN ACT	IVITIES DIST	RICT (P.A.D.)	
			Action: Appro	oved App	roved w/Conditions	Denied
			Signature:		Date:	
Permit Taken By:	Date Applied For:		Zoning Approval			
ldobson	05/10/2007					
1. This permit application do	oes not preclude the	Special Zone or Rev	iews Zon	ing Appeal	Historic Pre	servation
Applicant(s) from meeting Federal Rules.		Shoreland	☐ Variance ☐ Not in District		ict or Landmark	
<ol><li>Building permits do not in septic or electrical work.</li></ol>	nclude plumbing,	Wetland	☐ Miscellaneous ☐ Does Not Requ		equire Review	
3. Building permits are void within six (6) months of the		Flood Zone	Conditional Use Requires Revie		view	
False information may inv permit and stop all work		Subdivision	Interpre	etation	Approved	
		Site Plan	Approv	/ed	Approved w	/Conditions
DEDINE		Maj Minor Minor Minor	M Denied		☐ Denied	
PERMIT IS	SSUED	Okal Condition	_		والدار	1/
		Date: 5 24 07	Date:		Date: 4	) (
JUN 1 5	2007				D.A.	dens
					U	
CITY OF PO	RTLAND					
		CERTIFICAT	ION			
I hereby certify that I am the ov	wner of record of the na			s authorized	by the owner of reco	rd and that
I have been authorized by the o						
jurisdiction. In addition, if a pe	ermit for work describe	d in the application is	issued, I certify that	the code offi	icial's authorized rep	resentative
shall have the authority to enter	r all areas covered by su	uch permit at any reaso	onable hour to enfor	ce the provis	sion of the code(s) ap	oplicable to
such permit.						
SIGNATURE OF APPLICANT		ADDRE	SS	DATE	PHO	ONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE

DATE

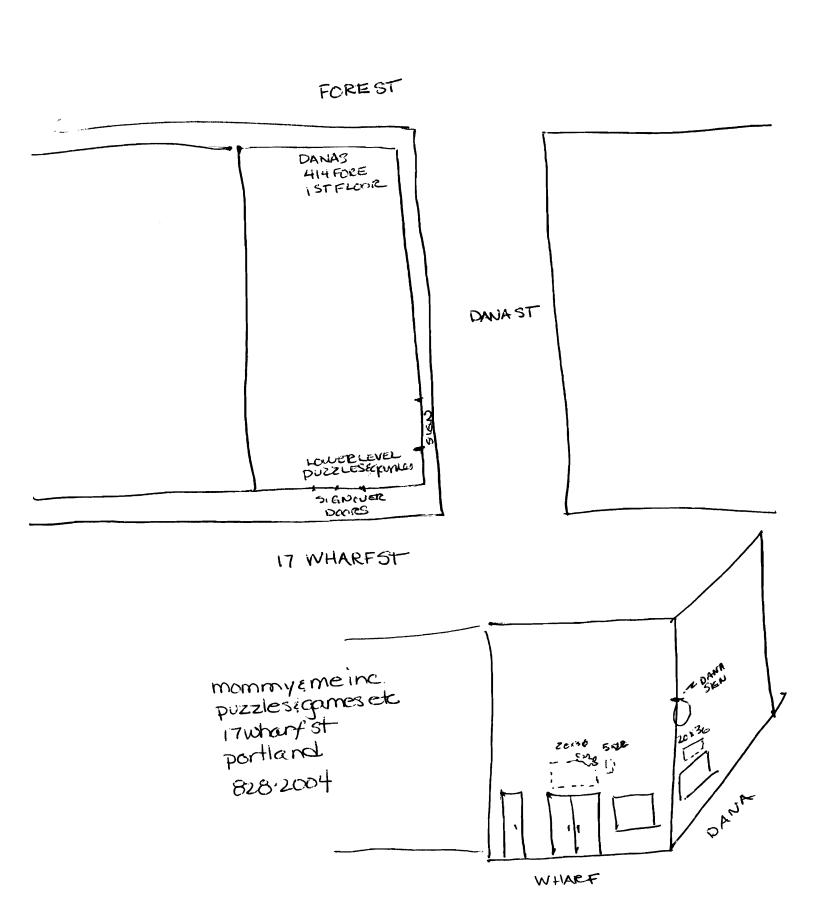
City of Portland, Maine - Bu	ilding or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel	: (207) 874-8703, Fax: (2	207) 874-8716	07-0523	05/09/2007	032 N009001
Location of Construction:	Owner Name:	Owner Name: Ov		Owner Address:	
414 FORE ST (17 Wharf)	RICH JOHN H JR & D	OORIS LEE J	TWO LIGHTS RE	)	
Business Name:	Contractor Name:	C	Contractor Address:		Phone
	Owner		Portland		
Lessee/Buyer's Name	Phone:		ermit Type:	<del></del>	
			Signs - Permanent	<u> </u>	
Proposed Use:		Proposed	Project Description:		
Retail - "Puzzles & Games Etc." ir (1) 5" x 20"	stall 3 new signs (2) 20" x	36" & "Puzzl 20"	es & Games Etc."	install 3 new signs (2	2) 20" x 36" & (1) 5" x
Note: 1) * Proposed projecting sign is not		s in close proxin		••	Ok to Issue:
* Removal of obsolete light fix	ture at building corner is str	rongly encourage	ed.		
Note:	Approved with Conditions		Ann Machado	Approval Da	Ok to Issue: $\Box$
ANY exterior work requires a s     District.	eparate review and approva	al thru Historic P	reservation. This p	property is located w	ithin an Historic
Dept: Building Status: Note:	Approved with Conditions	Reviewer:	Chris Hanson	Approval Da	ate: 06/15/2007 Ok to Issue: ✓
1) Fastener schedule per the IBC 2	2003				
2) Application approval based upo and approrval prior to work.	on information provided by	applicant. Any d	leviation from app	roved plans requires	separate review
3) Signage Installation to comply	with Chapter 31 of the IBC	2003 building co	ode.		
Comments:					
5/24/2007-amachado: Left message	for Sandra Wahlstrom. No	eed certificate of	`liability.		

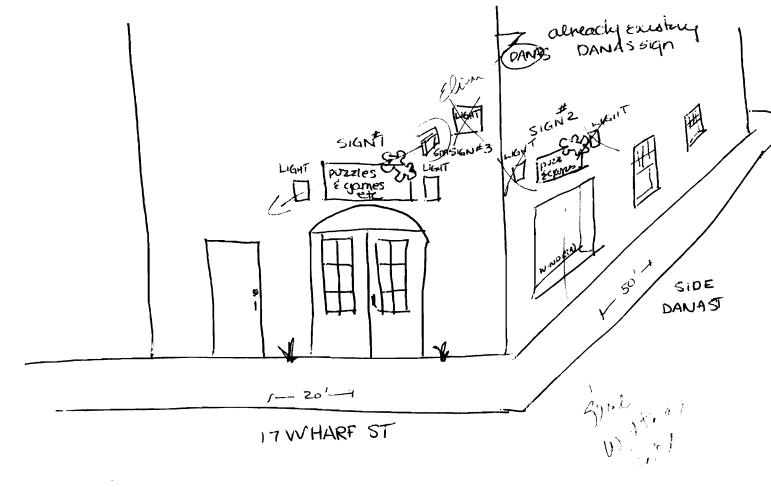
5/25/2007-amachado: Received certificate of liability .

# 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.

Location/Address of Construction: 17 v	VHARF ST PORTLAN	10
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 32	Owner: JOHN RICH	Telephone: 8282004
Lessee/Buyer's Name (If Applicable)  SANDRAWAHLSTOM (FCC)  PUZZLESE GAMES ETC  540LO SO FREEPORT PO  FREEPORT, ME 04032	Contractor name, address & telephor	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 (fee  Lot Frontage (feet)	et): Length: Height 40	). BCD 40
Current Specific use: DOSTAIRS - RETAI If vacant, what was prior use: ONKNOWN Proposed Use: PUZZLE GAME STOKE	THIS FLOOR (PETA	
Information on proposed sign(s):  Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes  Proposed awning? Yes No Is awn Height of awning: Length of a Is there any communication, message, tradema If yes, total s.f. of panels w/communications, to	ark or symbol on it? Yes No _	
Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes Sq. ft. area	No Dimensions:	- INKNOUN
A site sketch and building sketch showing ex Sketches and/or pictures of proposed signag		
Please submit all of the information of Failure to do so may result in the autor 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 of	omatic denial of your permit.  full scope of the project, the Planning permit. For further information visit us	and Development Department may request
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 l, I certify that the Code Official's authorize	l authorizes the proposed work and that I have been to all applicable laws of this jurisdiction. In addition, if ed representative shall have the authority to enter all
Signature of applicant:	<b>)</b>	Date: 5.607
	you may not commence ANY work ur	ntil the permit is issued.
3-multi thant-/shound floor. sign for each street front on	20x2=40th W	harf st 30"x36" = 7.5" building  5"x30" = .69# harging  Dara St = 30"x36" = 75





SIGN#1 @ 17 WHARF ST OVERDOOR 5SF FLAT ATTACHED W/BOLTSECHAIN 20" H X 36" W

SIGN#2 SIDE 2 5SF SIGN#3 SIDE ISF DANAST SIDE FLAT BOLT & CHAIN 20"H x 36" W

ALLSIGNS PAINTED WOOD, RAISED LETTERS OR ENGRAVED LETTERS

mommy & meinc.

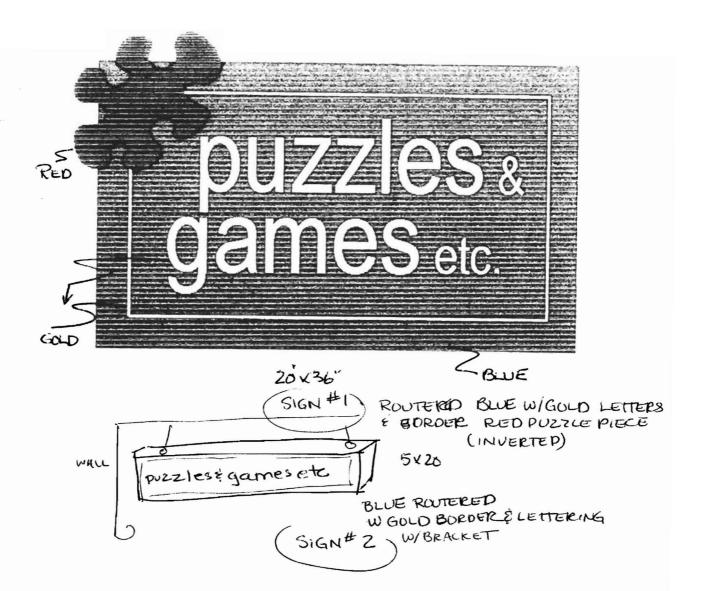
dba

puzzles & games etc

17 wharf st

portland, me 04101

8282004



ALMOST SAME AS 1, BLUE W/RAISED LETTERS IN GOLD, EDGE 18 1/2 ROUND GOLD, PUZZLE PIECE TO BE OVER 'ES' of PUZZLES.

#### **PUZZLES & GAMES ETC.**

17 Wharf St. Portland, Me 04101 207.828.2004

Town of Portland.

Mommy & me Inc. dba Puzzles & games etc. has my permission to install 3 signs on my building. The store fronts on 17 Wharf St. Portland with approximately 20' frontage/ the sign will be over the door, size will be 36" x 20". Approximately 50 feet along Dana St. and the sign will be over the window on the corner of Wharf and Dana also 20" x 36". The last sign will be 5" x 18 inches projecting out from the front of the building to the right of the door approximately 8' off the ground.

John Rich / HRich &

owner



## 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.

	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.				
	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.				
	Certificate of flammability required for awning or canopy.				
	A UL# is required for lighted signs at the time of final inspection.				
	Pre-application questionnaire completed and attached.				
	Photos of existing signage NONE				
	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.				
	fee for awning-without-signage is based on cost of work: for the first \$1,000.00, \$10.00 per additional \$1,000.00 of cost.				
Base ap	oplication fee for any Historic District signage is \$65.00.				

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			CI	ERTIFICATE OF	INSURANCE		
This certifies		STA	TE FARM FIRE ANI TE FARM GENERA TE FARM FIRE ANI TE FARM FLORIDA TE FARM LLOYDS,	D CASUALTY CO IL INSURANCE C D CASUALTY CO INSURANCE CO	MPANY, Blooming OMPANY, Bloomin MPANY, Scarboro	ngton, Illinois ough, Ontario	
insures the fa	policy	rholder fo	ir the coverages ind	icated below:			
Name d	yholde	r	Mormy & Me In	c, DBA Puzzle	s & Games, ETC	: 	
Addres	dicyhol	der	17 Wharf St.				
Locatio	eration	ıs	Portland, Main	ne 04101			
Descrip	operat	ions	Mercantile				
The policies						wn. The insurance descri	
subject to all	ms exc	lusions, a	and conditions of the			own may have been reduc	
DOLLOV A	1.	77/05	OF INCURANCE	1	PERIOD	LIMITS OF	
POLICY N	R		OF INSURANCE	Effective Date	Expiration Date	(at beginning of	<del></del>
99-BJ-0364 This insurand	des:	Busine:	ehensive ss Liability lucts - Completed C tractual Liability	06-04-07 Operations	06-04-08	İ	BODILY INJURY AND PROPERTY DAMAGE
		_	erground Hazard Co sonal Injury	overage		Each Occurrence	\$ 300000
		Adve	ertising Injury osion Hazard Cover apse Hazard Cover	_		General Aggregate Products – Completed	\$ 600000 \$ 600000
		🛛 Bus	iness property pay 5000	Liability 433		Operations Aggregate	
		EXC	ESS LIABILITY		PERIOD Expiration Date	BODILY INJURY AND F (Combined S	
		☐ Umb				Each Occurrence Aggregate	<b>\$</b> \$
						Part 1 STATUTORY Part 2 BODILY INJURY Each Accident	\$
:			1			Disease Each Employee	\$
	<u> </u>					Disease - Policy Limit	\$
				POLICY	PERIOD	LIMITS OF L	IABILITY
POLICY	ER	TYPE	OF INSURANCE	Effective Date	Expiration Date	(at beginning of	
					<del></del>		
	- 1						
THE CERTIF	OF INS	URANC	E IS NOT A CONTR	RACT OF INSURA	NCE AND NEITH	ER AFFIRMATIVELY NO	R NEGATIVELY
		e and Add	THE COVERAGE A		If an its ex notice cand no o	RIBED HEREIN.  y of the described policies corration date, State Farm the to the certificate hole cellation. If however, we fall bligation or liability will the rists agents or represent	will try to mail a written der 10 days before ail to mail such notice, be imposed on State
		Di	8149 EPT. OF BUILDING	INSPECTION	Signa Agen	ture of Authorized Represent	c5/14/07
			CITY OF PORTL	AND, ME	Title	1-40 Duca	lest Date
		- 1			Agent	's Code Stamp	

MAY 2 5 2007

AFO Code F874

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		C	ERTIFICATE OI	FINSURANCE		·
This certifies		STATE FARM FIRE AN STATE FARM GENERAL STATE FARM FIRE AN STATE FARM FLORIDAL STATE FARM LLOYDS	AL INSURANCE C D CASUALTY CC A INSURANCE CO	OMPANY, Bloomi	ngton, Illinois ough, Onterio	
insures the fq	policy	holder for the coverages inc	licated below:			
Name d	iryholde	r Mommy & Me In	c, DBA Puzzle	s & Games, ETC	2	
Addres	licyhol	der 17 Wharf St.				
	eration		ne 04101			
1	operat		Parkalahan Caraba			The alice Above well-in-
The policies subject to all	ms exc	have been issued to the pollusions, and conditions of th	ose policies. The	policy periods sho limits of liability sh	own. The insurance descr own may have been reduc	ted by any paid claims.
POLICY I		TYPE OF INSURANCE		PERIOD	LIMITS OF	
PULICY	R	Comprehensive	Effective Date	Expiration Date	(at beginning o	BODILY INJURY AND
99-BJ-0364 This insurance	e udes:	Business Liability  Products - Completed C	06-04-06 Operations	06-04-07		PROPERTY DAMAGE
		☐ Contractual Liability ☐ Underground Hazard Co ☐ Personal Injury	overage		Each Occurrence	\$ 300000
		☐ Advertising Injury			General Aggregate	\$ 600000
		☐ Explosion Hazard Cove ☐ Collapse Hazard Cover			Products – Completed	<b>\$</b> 600000
		☐ Business property ☐ Med pay 5000	_	300	Operations Aggregate	<b>4</b> 000000
		EXCESS LIABILITY		PERIOD Expiration Date	BODILY INJURY AND I (Combined S	
		☐ Umbrella	Ellective Date	Expitation Date	Each Occurrence	\$
		Other		<u> </u>	Aggregate	\$
				•	Part 1 STATUTORY Part 2 BODILY INJURY	
•				r 1 1	Each Accident Disease Each Employee	<b>\$</b> . •
					Disease - Policy Limit	• \$ \$
				,		
POLICY	BER	TYPE OF INSURANCE		PERIOD  Expiration Date	LIMITS OF I (at beginning of	
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THE CERTI	E OF INS	URANCE IS NOT A CONTE	RACT OF INSURA	NCF AND NEITH	ER AFFIRMATIVELY NO	R NEGATIVELY
		LTERS THE COVERAGE A		NY POLICY DESC	RIBED HEREIN.	
					y of the described policie piration date, State Farm	
				notic	e to the certificate ho	lder 10 days before
	Name	and Address of Certificate	Holder		ellation. If however, we f bligation or liability will	
City Of P	nd, Mai	ne Fax# 874- <del>8716</del>			of its agents or represen	
		8949		M	suff lendre	w
		DEPT. OF BUILDING IN	ISPECTION	Si <b>gfia</b> Ageni	ture of Authorized Represent	05/14/07
		CITY OF PORTLAN	ID, ME	Title	s Code Stamp	Date
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	1	MAY 2 5 20	07	AFO	Code F874	
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