

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

DEPARTMENT OF BUILDING INSPECTION

PERMIT

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME
Permit Number: 050109
MAR 10 2005
RECEIVED

Please Read
Application And
Notes, If Any,
Attached

This is to certify that Mda Llc /The Signery
has permission to Signage 1 36" x 48" and one sign w/ image
AT 1 spring 032 P00100

provided that the person or persons, firm or corporation 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 is procured before this building or part thereof is altered or closed-in. HOUR NOTICE IS 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

Jamie Bouke 3/9/05
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: 05-0109	Issue Date: MAR 10 2005	DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME 032 P001001
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Location of Construction: 1 spring	Owner Name: Mda Llc	Owner Address: Po Box 100	Phone: 2078797700
Business Name:	Contractor Name: The Signery	Contractor Address: 299 Forest Avenue Portland	Phone: 2078797700
Lessee/Buyer's Name: <i>Kate Tackett</i>	Phone: <i>350-1066</i>	Permit Type: Signs - Permanent	Zone: <i>3-3</i>

Past Use: Commercial	Proposed Use: Commercial - Signage 1 36" x 48" and one awning w/ signage	Permit Fee: \$94.00	Cost of Work: \$97.00	CEO District: 1
Proposed Project Description: Signage 1 36" x 48" and one awning w/ signage		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: <i>SIGN</i> <i>IBC-2003</i>	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: <i>D. Andrews</i> Date: <i>3/3/05</i>				

Permit Taken By: ldobson	Date Applied For: 02/01/2005	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 <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"/> Date: <i>02/10/05</i>	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 checked="" type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>RODA</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: 05-0109	Date Applied For: 02/01/2005	CBL: 032 P001001
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Location of Construction: 1 Spring	Owner Name: Mda Llc	Owner Address: Po Box 100	Phone:
Business Name:	Contractor Name: The Signery	Contractor Address: 299 Forest Avenue Portland	Phone: (207) 879-7700
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial - Signage 1 36" x 48" and one awning w/ signage 12" x38"	Proposed Project Description: Signage 1 36" x 48" and one awning w/ signage
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Dept: PAD	Status: Approved	Reviewer: Deborah Andrews	Approval Date: 03/03/2005
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 02/08/2005
Note: 2/3/05 no tenant frontage given I can't determine compliance - left call for Kate T. 2/8/05 Kate phoned me back - 21' of tenant frontage	Ok to Issue: <input checked="" type="checkbox"/>		
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 03/09/2005
Note: 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.	Ok to Issue: <input checked="" type="checkbox"/>		
Dept: Zoning	Status: Pending	Reviewer:	Approval Date:
Note:	Ok to Issue: <input type="checkbox"/>		
Dept: Building	Status: Pending	Reviewer:	Approval Date:
Note:	Ok to Issue: <input type="checkbox"/>		

City of Portland, Maine - Building or Use Permit

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

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Note:			Ok to Issue: <input type="checkbox"/>
Dept: Zoning	Status: Pending	Reviewer:	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>
Dept: Building	Status: Pending	Reviewer:	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>

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: <u>1 Spring Street Portland</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>32</u> Block# <u>P</u> Lot# <u>1</u>		Owner: _____ Telephone: _____
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Kate Tackett</u> <u>129 Commercial St.</u> <u>Boothbay Harbor ME</u> <u>207-350-1066</u> <u>04538</u>	Total s.f. of signage x \$2.00 per s.f. plus \$30.00/\$65.00 for H.D./signage = Total Fee: <u>\$32.00</u> + <u>\$65.00</u> = <u>\$97.00</u> Awning Fee = Cost Of Work: \$ _____ Total Fee: \$ <u>97.00</u>
Current use: <u>Vacant</u>		
If the location is currently vacant, what was prior use: <u>-Hair Shop-Retail</u>		
Approximately how long has it been vacant: _____		
Proposed use: <u>retail/interior design</u>		
Project description: <u>Signage</u>		
Contractor's name, address & telephone: Whom should we contact when the permit is ready: <u>Kate Tackett</u> Mailing address: <u>129 Commercial St,</u> <u>Boothbay Harbor, ME 04538</u> We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A STOP WORK ORDER will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>207-350-1066</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT. WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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: <u>Kate Tackett</u>	Date: <u>1/27/05</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued.

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE COMPLETE ALL INFORMATION

ADDRESS: 1 Spring St. ZONE: B-3
CBL: _____

SINGLE TENANT LOT? YES _____ NO _____ MULTI TENANT LOT? YES _____ NO _____
MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES _____ NO _____

TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET):

Length: 21' called in on 2/9/05 Height: 42' MAX
21 x 2 = 42 # MAX

INFORMATION ON PROPOSED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES _____ NO _____ DIMENSIONS PROPOSED: _____
BLDG. WALL SIGN? (attached to bldg) YES NO _____ DIMENSIONS PROPOSED: 3' x 4' = 12 # projects

INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES _____ NO _____ DIMENSIONS: _____
BLDG. WALL SIGN(attached to bldg)? YES _____ NO _____ DIMENSIONS: OK
AWNING? YES _____ NO _____ DIMENSIONS: _____
LOT FRONTAGE (FEET): _____

AWNING YES NO _____ IS AWNING BACKLIT? YES _____ NO

HEIGHT OF AWNING: 2'-0" LENGTH OF AWNING: 7'-3" DEPTH: 2'-0"

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES NO _____
IF YES, TOTAL S.F. OF PANELS WITH COMMUNICATIONS/MESSAGE/TRADEMARK/SYMBOL? 12" x 38" = 456 # = 144 = 3.17 #
s.f.

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 ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: C. Tanker DATE: 1/27/05

***** FOR OFFICE USE ONLY *****

LANDLORD RELEASE FORM

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN PROPOSED TO BE

ERECTED ON A BUILDING AT 4 City Center / Spring Street

IN PORTLAND, MAINE JEROME ADE being the owner of the premises

at 1 Spring / City Center in Portland, Maine hereby gives consent to the

erection of a certain sign owned by Catheri over the

public sidewalk or on the building from said premises as described in

application to the Division of Inspection Services of Portland, Maine for a

permit to cover erection of said sign:

And in consideration of the issuance of said permit _____

owner of said premises, in event said sign shall cease to serve the purpose

for which it was erected or shall become dangerous and in event the owner of

said sign shall fail to remove said sign or make it permanently safe in case

the sign still serves the purpose for which it was erected, hereby agrees

for himself or itself, for his heirs, its successors, and his or its

assigns, to completely remove said sign within ten days of notice from said

Inspector of Buildings that said sign is in such condition and of order from

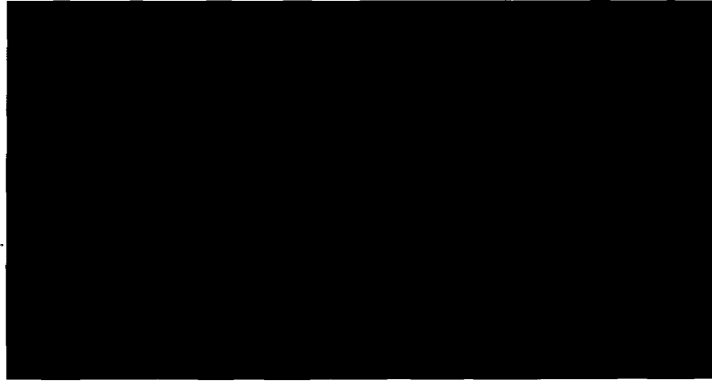
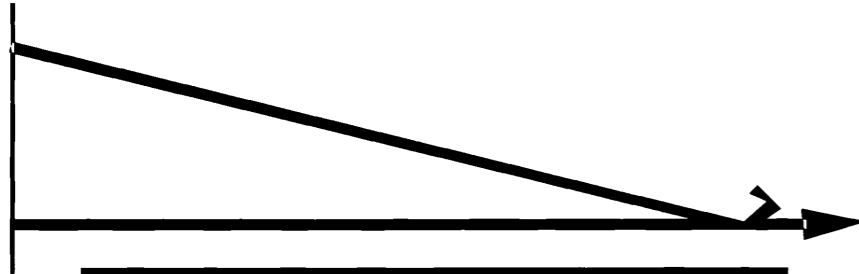
to remove it.

In Witness whereof, the owner of said premises has signed this consent and

agreement this 27 day of JANUARY 2007.

Jerome Ade

Tot: 30 SQ FT



36" x 48" D/S

3 x 14 = 12 #

12" x 38" = 456 # ÷ 144 =

3,17 #

Logo 12" x 38"






Tagline
6" x 52"

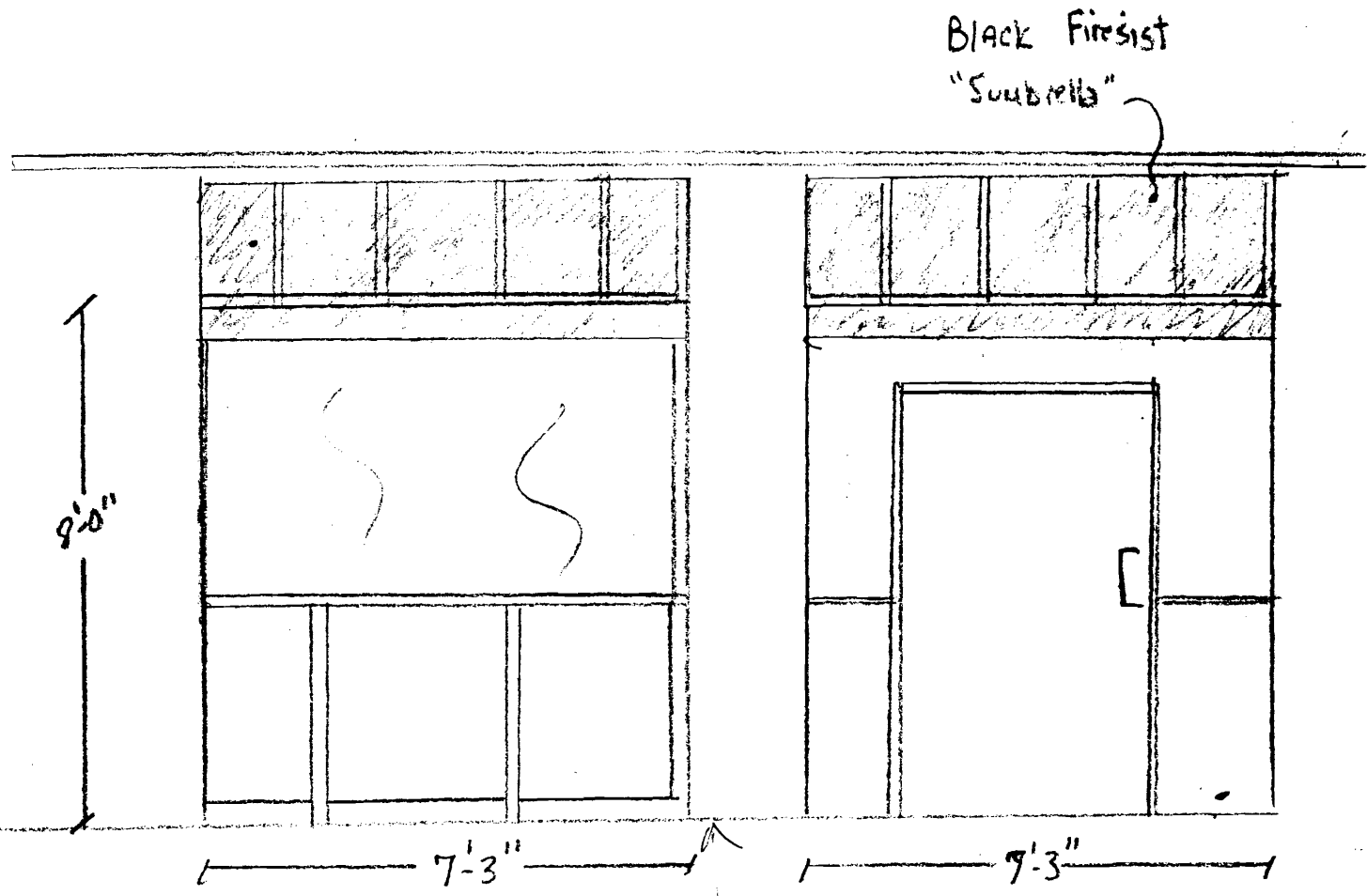
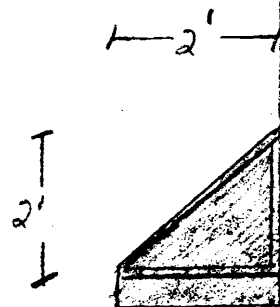
40 sq feet

← 20' →

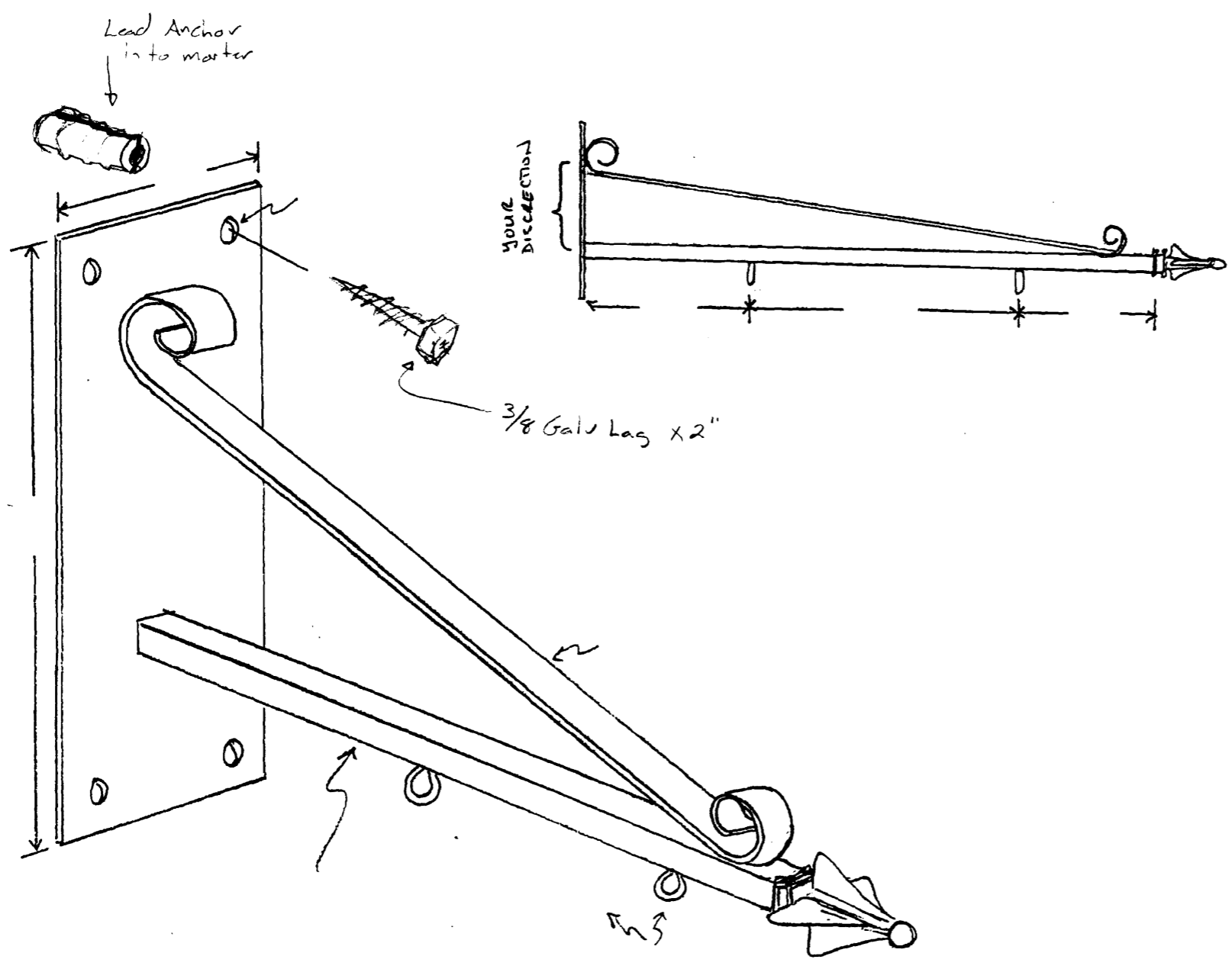
→ removed from awning

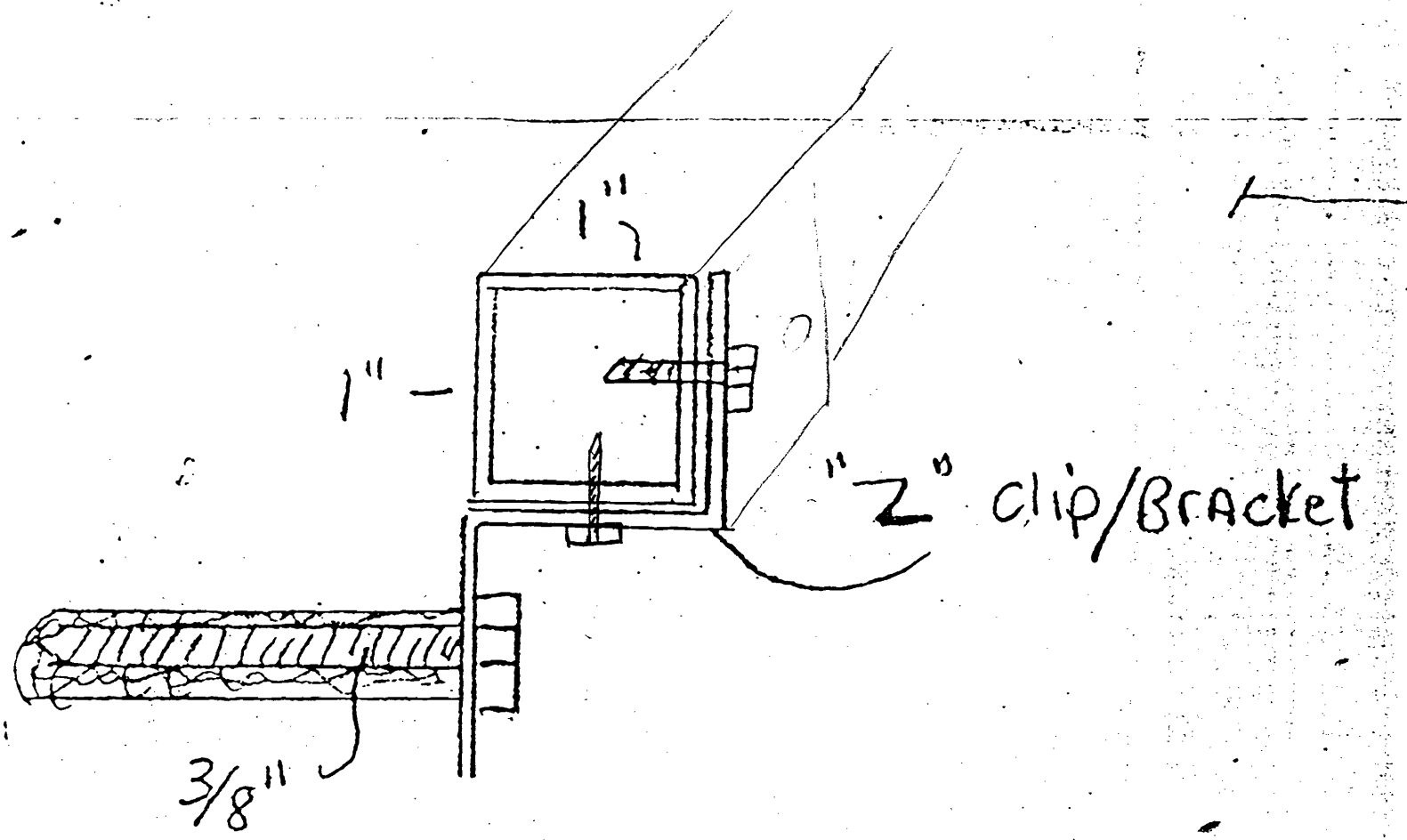
Awning

 299 FOREST AVE. PORTLAND, ME PHONE: 879-7700 FAX: 879-1570	JOB INFO JOB NO. DATE QUANTITY EST. NO. D.S. / S.S. APPROVED RELEASED		 relaxed living defined.
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21'
tenant frontage
per Kate T. on 2/8/06
left - Building to Street.





FASTENER - MASONARY Fastener / Into mortar
Joints only.

Certificate of Flame Resistance



REGISTERED
APPLICATION
CONCERN No.

GA-217

ISSUED BY
JOHN BOYLE & COMPANY, INC.
Salisbury Road
Statesville, NC 28677
704-872-8151

Date treated or
manufactured

This is to certify that the materials described below have been flame-retardant treated (or are inherently nonflammable).

FOR Maine Bay Canvas, Inc. ADDRESS 53 Industrial Way
CITY Portland, ME 04103 STATE _____

Certification is hereby made that: (Check "a" or "b")

(a) The articles described below this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used _____ Chem. Reg. No. _____

Method of application _____

(b) The articles described below are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric or material used Sunbrella Firesist Reg. No. _____

The Flame-Retardant Process Used WILL NOT Be Removed By Washing

JOHN BOYLE & COMPANY, INC.

Name of Applicator or Production Superintendent

JOHN BOYLE & COMPANY, INC.

By

Walter Conize
Specialty Products Manager

To Lannie

From Many Phelps
COAST+COTTAGE, Inc
DBA COCO VIVO

Re:
1 Spring St. Sign Permit

2 pgs including this one.

Please call if any problems
207-633-0979

9

JAN-28-2005 15:22

J EDWARD KNIGHT

2076337151

P. 01/01

PRODUCER (207)633-4423 J. Edward Knight & Co. P. O. Box 447 Boothbay Harbor, ME 04538 Laurie Dickinson		FAX (207)633-7151 COMMERCIAL LIABILITY INSURANCE 01/27/2005	
INSURED Coast & Cottage, Inc 129 Commercial Street Boothbay Harbor, ME 04538		INSURERS AFFORDING COVERAGE INSURER A: Acadia Insurance Company NAIC # 31325 INSURER B: Maine Employers Mutual Ins. Co 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.

LINE NO.	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	80A0091134-11	04/15/2004	04/15/2005	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
	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 AUTO ONLY: EA ACC \$ AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	1810064214	06/01/2004	06/01/2005	INC STATUS: <input type="checkbox"/> TO/SC/LIMITS <input type="checkbox"/> TOTAL S.L. EACH ACCIDENT \$ 100,000 S.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Business Location: 1 Spring Street, Portland, ME

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 <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE Laurie Dickinson <i>Laurie Dickinson</i>
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ACORD 25 (2001/08) GACORD CORPORATION 1988



CITY OF PORTLAND, MAINE

Department of Building Inspections

20

Received from _____

Location of Work _____

Cost of Construction \$ _____

Permit Fee \$ _____

Building (IL) ____ Plumbing (IS) ____ Electrical (I2) ____ Site Plan (U2) ____

Other _____

CBL: 32 P /

Check #: _____ Total Collected \$ _____

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy