		*****	1 million and a million and	
Location of Construction:	Owner:	er Amsoc.	Phone:	Permit No: 970860
Owner Address:	Lessee/Buyer's Name: Christian Science Reading	Phone:	BusinessName:	PERMIT ISSUED
Contractor Name:	Address:	Phone	:	Permit Issued.
Christian Science Reading Past Use:	Room A City Center PL1 Proposed Use:	COST OF WORI		AUG 2 1997
	1	\$1	\$ 28.20	
Study Room/Retail	Same	FIRE DEPT.		CITY OF PORTLAND
			Denied Use Group: Type	Zone: CBL:
		Signature:	Signature:	/0-/ 032-P-003
Proposed Project Description:			CTIVITIES DISTRICT (P.A.I).) Zoning Approval:
		Action:	Approved	Special Zone or Reviews:
Frect Stgmage (16 Sq Ft			Approved with Conditions:	□ □ Shoreland
		I	Denied	□ □ Wetland
		0.		
Den is The Den	Date Analised From	Signature:	Date:	□ Subdivision □ Site Plan maj □minor □mm □
Permit Taken By: Kary Greatk	Date Applied For:	5 August 1997		
				Zoning Appeal
1. This permit application does not preclude the a	Applicant(s) from meeting applicable	State and Federal rules.		□ Variance □ Miscellaneous
2. Building permits do not include plumbing, se	ptic or electrical work.			
3. Building permits are void if work is not started	within six (6) months of the date of is	ssuance. False informa-		□ Interpretation
tion may invalidate a building permit and stop				Approved
				Denied
				Historic Preservation
				Not in District or Landmark
				Does Not Require Review
				Requires Review
				Action:
	CERTIFICATION			
I hereby certify that I am the owner of record of the		work is authorized by the	e owner of record and that I have	
authorized by the owner to make this application a				
if a permit for work described in the application is				ter all
areas covered by such permit at any reasonable ho	ur to enforce the provisions of the con	de(s) applicable to such	permit	Date:
		05 Au	Shape 1997	
SIGNATURE OF APPLICANT Elizabeth 10	emeble ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK	(, TITLE		PHONE:	CEO DISTRICT
White_Pe	rmit Desk Green-Assessor's Ca	nary-D.P.W. Pink-Pul	lic File Ivory Card-Inspecto	or
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City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Contractor Name: Contractor Name: Christian Science Reading Ro	4 City Center essee/Buyer's Name: hristian Science Reading ddress: om 4 City Center Ptld, roposed Use: Same	Phone: Room lst flc Phone:	772-0996	PERMIT ISSUED Permit Issued: AUG 1 2 1997	
Contractor Name: Ad Christian Science Reading Roo Past Use: Pr Study Room/Retail	hristian Science Reading ddress: om 4 City Center Ptld, oposed Use:	Room 1st flc Phone: ME 04101 COST OF WORK \$	772-0996 : PERMIT FEE:	AUG 1 2 1997	
Contractor Name: Ad Christian Science Reading Roo Past Use: Pr Study Room/Retail	ddress: om 4 City Center Ptld, oposed Use:	ME 04101 COST OF WORK	772-0996 : PERMIT FEE:	AUG 1 2 1997	
Christian Science Reading Rom PastUse: Pr Study Room/Retail	om <u>4 City Center Ptld</u> , roposed Use:	ME 04101 COST OF WORK \$: PERMIT FEE:	AUG 1 2 1997	
PastUse: Pr Study Room/Retail	oposed Use:	COST OF WORK \$: PERMIT FEE:		
Study Room/Retail		\$			
	Same		28.20		
	Same	FIRE DEPT. 🗆 A		CITY OF PORTLAND	
	5 din 0		pproved INSPECTION:	OTT OTTOTTEALD	
Proposed Project Description:		D De	enied Use Group: Type:	1	
Proposed Project Description:			-11	Zone: 2 CBL: 032-P-003	
Proposed Project Description:		Signature:	Signature:	19	
		PEDESTRIAN AC	TIVITIES DISTRICT (F.X.D.)	Zoning Approval:	
		Action: A	pproved	OK- Solution	
Erect Signage (16 Sq Ft			pproved with Conditions:	Special Zone or Reviews: /	
Brece Signage (10 Sy FL			enjed I I	D Wetland	
				7 DFlood Zone	
		Signature:	. Date: 0/541	Subdivision	
Permit Taken By:	Date Applied For:			🛛 Site Plan maj 🗆 minor 🗆 mm 🗆	
Mary Gresik	05	August 1997	/ //		
				Zoning Appeal	
 This permit application does not preclude the App 	licant(s) from meeting applicable Sta	te and Federal rules.		D Variance	
2. Building permits do not include plumbing, septic	or electrical work.			Miscellaneous	
		anan Kalas informu		Conditional Use	
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tion may invalidate a building permit and stop all	I WOIK.				
				Historic Preservation	
				INet in District or Landmark	
				Proes Not Require Review	
				Requires Review	
				Action:	
	CERTIFICATION			[] Assessed	
I hereby certify that I am the owner of record of the nar		et in authorized by the	oumar of samed and that I have been	Appoved Approved with Conditions	
				Denied /	
authorized by the owner to make this application as hi if a permit for work described in the application is issu				allari	
				Date:	
areas covered by such permit at any reasonable hour to	o entoice the provisions of the code(s) applicable to such p	crim		
the 1 then al	1				
Planth Work	C.L.	05 Aug	ust 1997	h)	
SIGNATURE OF APPLICANT Elizabeth Hoese	chle ADDRESS:	DATE:	PHONE:	[//17]	
/	21 Ale				
				-	
RESPONSIBLE PERSON IN CHARGE OF WORK, T	ITLE		PHONE:	CEO DISTRICT	
			the file law on the	-	
1 m 21. 7 x 40. 7 x	t Desk Green-Assessor's Cana	rv-1 PW Pink-Pub	IC FUG NOBL Card Inchoctor		

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

8/4/97

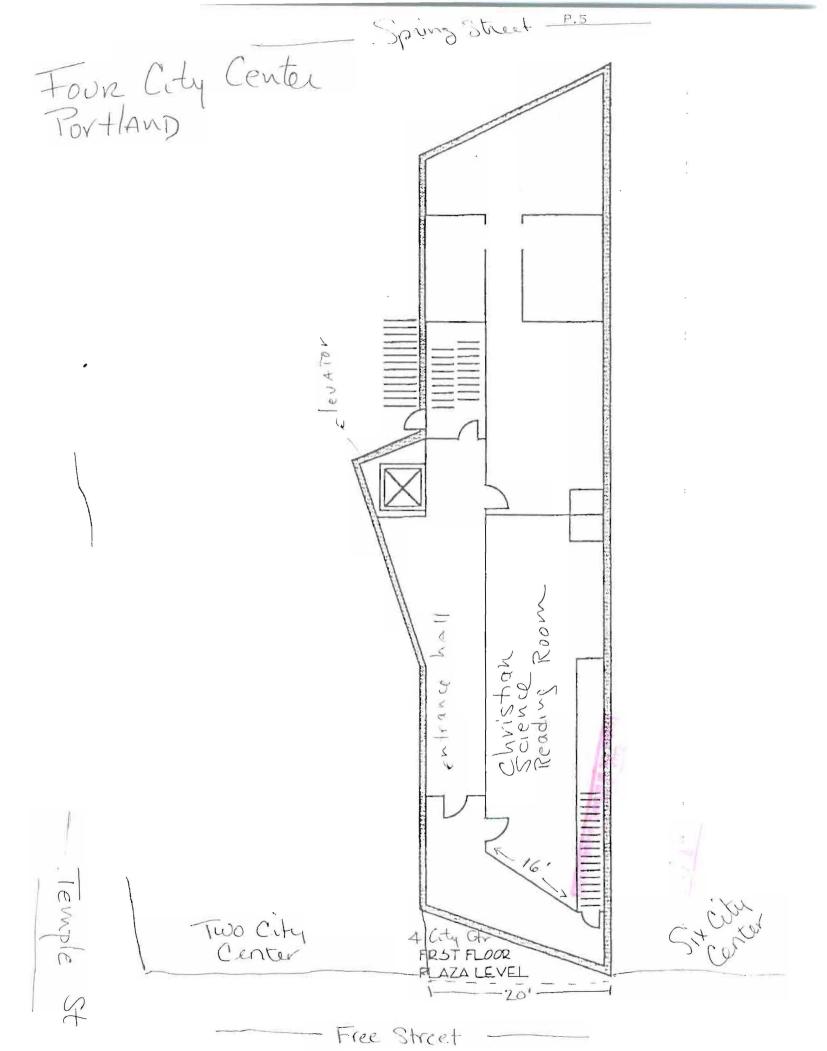
SIGNAGE

PLEASE ANSWER ALL QUESTIONS

Address: 4 Cety Center Portlandzone: B-3
Among Four City Conter 11 C
Cuence Pacific Product Provide
Applicant: <u>Christian Science Reading Room</u> (772-0996)
Single Tenant Lot?: Yes No
Multi Tenant Lot?: Yes No
Freestanding (Ext pole sign)? Yes No \times Dimensions
More than (1) one sign?: Yes No X Dimensions
Bldg Wall sign (att to bldg)? Yes 🔨 No Dimensions
List all existing signage and their dimensions:
none ex2 (16t) of
Lot Frontage(feet): $\frac{20'}{MH}$ Tenant Frontage(feet): $\frac{16'\chi^2}{MH}$
AWNINGS
Awning?: Yes No Is Awning Backlit?: Yes No
Is there any comunication, message, trademark or symbol on awning?
Height of Awning?:
PLEASE NOTE: Approvals for signs on the Public Sidewalk and temporary signs come under different requirements and regulations.
ALSO: See reverse side for additional information, requirements and materials needed for signage application submittal.

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PorterinoM 17 Sign PANEL CAMDEN, MAINE 04847 1,3 FRAME SIDE VIEW 171 CHESTOUT ST. (det vo STROM SIGNS Sarry cool it TO FIT - MERICA インシュレーマン (INLIED) (INLIED) (copper) SCIENCE MOOM Nove: WILL CALL WITH PRICE QUOTES EADING Ÿ HRISTIAN · Mahagony Wood color 11 M. õ 7:04 5" LETTERS 71/2 LETTERS <u>|</u>6 Gold letters K Black grown



FOUR CITY CENTER, LLC

August b. 199

364 Ronstews Street Percland, MS 04101

RL: Soan Fermit/Christian Science Reading Room

Dean Sir Madama

This better verses as multip that The Chilstian Science Trading Rows, for conduct \$ 2712 Context loss the permission of Fou City Context, 112 to align as no \$25,27 Sign is described in a

Sincerely

Kennethe Skar as Rispertymanager and part-owner Four City Center

NOTION STATES

Four City Center - 4th floor & Portland, Maine 04101 Tel (207) 761-0500

RODUCER FOOKS Insurance Agency . O. Box 307	, Inc.	ONLY AND HOLDER. T	IFICATE IS ISSUE CONFERS NO RI HIS CERTIFICATE	CE CSR RD FIRST-3 D AS A MATTER OF INF GHTS UPON THE CERTII DOES NOT AMEND, EX ORDED BY THE POLICIE	FICATE		
ortland ME 04112			ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. COMPANIES AFFORDING COVERAGE				
Rolande Y. Doucette		COMPANY					
one No. 207-774-1419 Fax M SURED	lo.						
		COMPANY B					
FIRST CHURCH OF CHRIST SCIENTIST - PORTLAND		COMPANY C					
61 Neal Street Portland ME 04102			COMPANY D				
OVERAGES		and the second second	The second second				
THIS IS TO CERTIFY THAT THE POLI INDICATED, NOTWITHSTANDING AN CERTIFICATE MAY BE ISSUED OR M EXCLUSIONS AND CONDITIONS OF	IY REQUIREMENT, TERM OR CONDIT AY PERTAIN, THE INSURANCE AFFO	TION OF ANY CONTRAC	T OR OTHER DOCU	MENT WITH RESPECT TO V	WHICH THIS		
TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	1		
GENERAL UABILITY				GENERAL AGGREGATE	\$2,000,000		
COMMERCIAL GENERAL LIABILITY	ZDP5174378 00	08/05/96	08/05/97	PRODUCTS - COMP/OP AGG	\$2,000,000		
CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY	\$1,000,000		
OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$1,000,000		
				FIRE DAMAGE (Any one fire)	\$ 50,000		
				MED EXP (Any one person)	\$ 5,000		
				COMBINED SINGLE LIMIT	\$		
ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$		
HIRED AUTOS				BODILY INJURY	\$		
				(Per accident) PROPERTY DAMAGE	\$		
					•		
				AUTO ONLY - EA ACCIDENT	\$		
ANY AUTO				OTHER THAN AUTO ONLY:	an des range i Sam		
				EACH ACCIDENT	\$		
				AGGREGATE	\$		
EXCESS LIABILITY				EACH OCCURRENCE	\$		
UMBRELLA FORM			0	AGGREGATE	\$		
OTHER THAN UMBRELLA FORM			Martin	WC STATU- OTH-	\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			121	TORY LIMITS ER			
			1		\$		
PARTNERS/EXECUTIVE			1 parts	EL DISEASE - POLICY LIMIT	s s		
OFFICERS ARE: EXCL			12 mil	EL DISEASE - EA EMPLOTEE	\$		
SCRIPTION OF OPERATIONS/LOCATIONS/VER HURCH ERTIFICATE ISSUED AS R ORTLAND, ME.		COVERED LOCA	TION 4 CITY	CENTER,			
RTIFICATE HOLDER		CANCELLATI	ON				
RTIFICATE HOLDER	PORT	001 SHOULD ANY	OF THE ABOVE DESCI	BED POLICIES BE CANCELLED			
			EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,				
CITY OF PORTLAN		BUT FAILURE TO MAIL SUCH 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 COMPANY) ITS AGENTS OR REPRESENTATIVES.					
389 CONGRESS ST							
PORTLAND ME 04112			AUTHORIZED REPRESENTATIVE Alcude Dacette				
			NO	acut Dona	-CCC		