

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING PERMIT

Permit Number: 090008

This is to certify that OLD PORT RETAIL HOLDING LLC
has permission to install one hanging sign 3' x 55" and 1 side walk sign

AT 432 FORE STCE 032 R003001

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 written permission procured before this building or part thereof is altered or otherwise red-in. 24 HOURS 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

Thomas H. Mahoney 01/21/09
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: | Issue Date: | CBL: |
| 09-0008 | | 032 R003001 |

| | | | |
|--|---|-------------------------------------|--------------|
| Location of Construction: 432 FORE ST | Owner Name: OLD PORT RETAIL HOLDINGS | Owner Address: 101 RICHARDSON ST | Phone: |
| Business Name: | Contractor Name: | Contractor Address: | Phone: |
| Lessee/Buyer's Name | Phone: | Permit Type: Signs - Permanent | Zone: B-3 |

| | | | | |
|--|---|---|--|--------------------|
| Past Use: Commercial - "Joe's New York Pizza" | Proposed Use: Commercial - "Joe's New York Pizza" - install one hanging sign 3' x 55" and 1 sidewalk sign 4.58' | Permit Fee: \$86.00 | Cost of Work: \$86.00 | CEO District: 1 |
| Proposed Project Description: install one hanging sign 3' x 55" and 1 sidewalk sign | | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group Commercial Type: Sign IBC 2003 Signature: Jm 01/21/09 | |
| | | PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: Date: | | |

| | | | | |
|---|---------------------------------|--|--|--|
| Permit Taken By: ldobson | Date Applied For: 01/05/2009 | Zoning Approval | | |
| <ol style="list-style-type: none">This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.Building permits do not include plumbing, septic or electrical work.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: 8/15/09 | 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 102A <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions AS REVISION <input type="checkbox"/> Denied Date: 1/16/09 STT |
| | | OK with conditions | | |

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

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: 420 Fore St | | |
| Tax Assessor's Chart, Block & Lot Chart# 32 Block# 7 Lot# 3 | Owner: Joe Soley | Telephone: 603 608 8415 |
| Lessee/Buyer's Name (If Applicable) Joe's New York Pizza LLC | Contractor name, address & telephone: Joe Kelley 888 Lafayette Rd Hampton, NH 03842 | Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ 86 |
| Who should we contact when the permit is ready: Joe Kelley phone: 603 608 8415 | | |
| Tenant/allocated building space frontage (feet): Length: 20 x 20 Height: 20 Lot Frontage (feet) 60 ft Single Tenant or Multi Tenant Lot Multi | | |
| Current Specific use: restaurant If vacant, what was prior use: _____ Proposed Use: _____ | | |
| Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes _____ No _____ Dimensions proposed: _____ Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: _____ 3' x 55" 4.5' | | |
| Proposed awning? Yes <input checked="" type="checkbox"/> No _____ Is awning backlit? Yes _____ No <input checked="" type="checkbox"/> Height of awning: _____ Length of awning: _____ Depth: _____ Is there any communication, message, trademark or symbol on it? Yes _____ No _____ If yes, total s.f. of panels w/communications, message, trademark or symbol: _____ s.f. | | |
| Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes _____ No _____ Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions: _____ Awning? Yes <input checked="" type="checkbox"/> No _____ Sq. ft. area of awning w/communication: no communication 4ft 7in wide x 36 inch x 32 inch Drop | | |
| 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 and existing building are also required. | | |

Please submit all of the information outlined in the Sign/Awning Application Checklist.

Failure to do so may result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

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: Joe Kelley | Date: 1/5/09 |
|---|---------------------|

This is not a permit; you may not commence ANY work until the permit is issued.

City of Portland, Maine - Building or Use Permit

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

| | | |
|------------|-------------------|-------------|
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| 09-0008 | 01/05/2009 | 032 R003001 |

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| Business Name: | Contractor Name: | Contractor Address: | Phone |
| Lessee/Buyer's Name | Phone: | Permit Type: Signs - Permanent | |

| | |
|--|--|
| Proposed Use: Commercial - "Joe's New York Pizza" - install one hanging sign 3' x 55" and 1 sidewalk sign 24" x 36" | Proposed Project Description: install one hanging sign 3' x 55" and 1 sidewalk sign 24" x 36" |
|--|--|

Dept: Historic **Status:** Approved with Conditions **Reviewer:** Scott Hanson **Approval Date:** 01/16/2009**Note:** Design submitted did not fit available space between bracket and awning, Called applicant and discussed issue on 1/6. New design received on 1/15. **Ok to Issue:** ☒

- 1) Initial submitted design not approved. Smaller replacement design approved.

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 01/05/2009**Note:** **Ok to Issue:** ☒

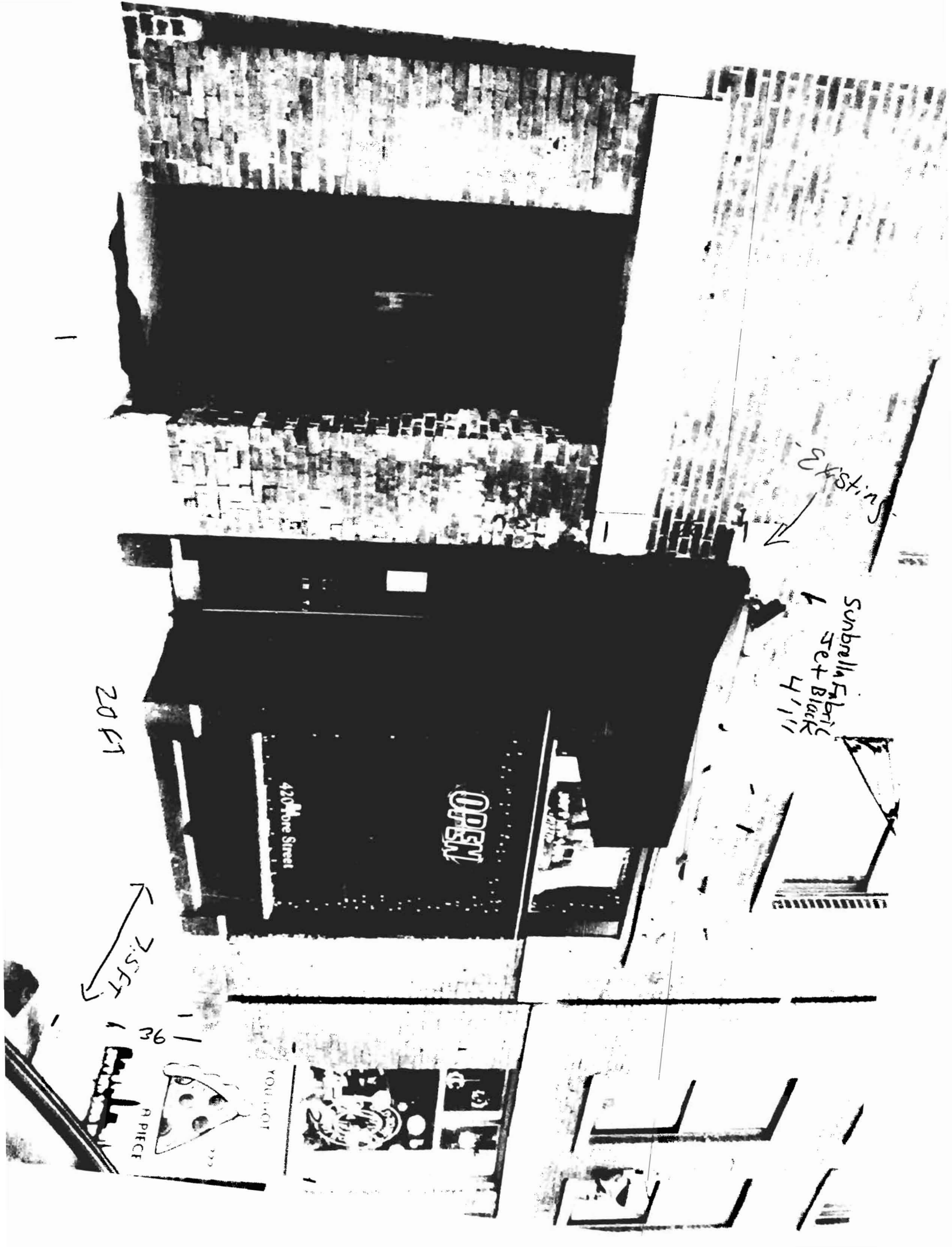
- 1) All sidewalk signs shall be removed when the business is closed or while any snow or ice exists on the walkway within eight feet of the sign in any direction. All sidewalk signs shall be located near the curb rather than the building face. The sidewalk shall maintain a width of no less than 4 1/2 feet of unobstructed sidewalk width perpendicular to major flows. For a single tenant listing, the maximum width is 24 inches or less if needed for the 4.5 feet of unobstructed sidewalk width. The maximum height of a sidewalk sign is 40 inches to the top of the sign in place. The minimum height of a sidewalk sign is 30 inches to the top of the sign in place.
- 2) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 01/21/2009**Note:** **Ok to Issue:** ☒

- 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.
- 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

Comments:

1/20/2009-gg: received permit from historic as of 1/16/09. /gg



Existing

Sunbrella Fabric
Set Black
4'11"

20 ft

7.5 ft

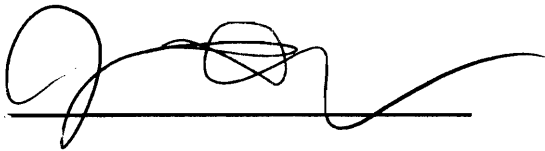
36



YOU GOT



I Joe Soley hereby give
Joe's New York Pizza permission to install
a building sign at 420 Fore st, Portland, ME 04101.



1-5-09

Joe Soley - manager

ACOF**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

11/03/2008

PRODUCER 3) 964-9491
THE INSURANCE PROS- CROSS INSURANCE
PO BOX 125
64 Lafayette Rd #4
No. Hampton NH 03862-

INSURED
JOES NEW YORK PIZZA LLC (PORTLAND)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE**NAIC #**

INSURER A: TRAVELERS

INSURER B:

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.

| INSR LTR | ADD'L INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|----------|-------------|--|---------------|----------------------------------|-----------------------------------|--|
| A | X | 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 | 680-8291M740 | 11/03/2008 | 11/03/2009 | EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| | | 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 EA ACC \$ AUTO ONLY: AGG \$ |
| | | EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$ | | / / | / / | EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$ |
| | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below | | / / | / / | WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |
| | | OTHER | | / / | / / | |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

CERTIFICATE HOLDER

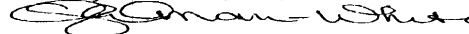
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CITY OF PORTLAND
381 CONGRESS ST
PORTLAND ME 04101-

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE : Cheryl Lee Gilman-White



ACORD 25 (2001/08)

INS025 (0108).01

ELECTRONIC LASER FORMS, INC. - (800)327-0545

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Page 1 of 2

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

PROOF for: Joe's Portland Slice Bar

Company Joe's New York Pizza
Name Joe Kelly e-mail:
Phone 603-608-8415
Date 1/14
Est. Due Date
Saved as: portland slice bar.cdr in joe's/fat belly's folder



603-964-1575

www.timberlinesigns.com

chuck@timberlinesigns.com

APPROVED
8/74



- ☐ Imitation Gold
- ☐ Black
- ☐ Red
- ☐ Printed



© 2008

Format 3/4" Extra Flat painted
Size 36" x 43.8"
Sides 2
Quantity 1
Color Scheme

Installation Yes

Hardware

Misc. Hanging hardware

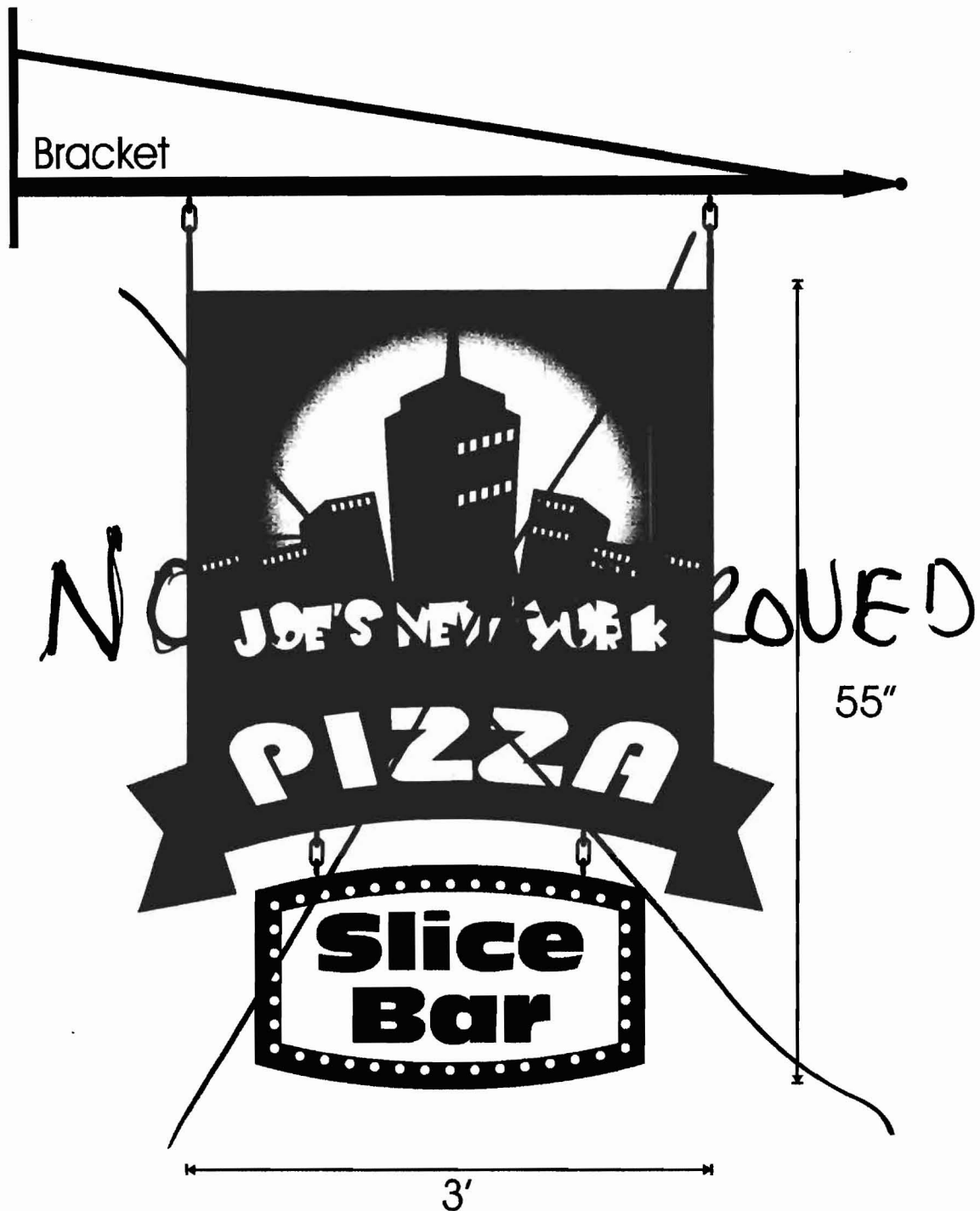
I hereby authorize TIMBERLINE SIGNS to produce the above layout. 100% Payment will be expected upon completion of project unless other arrangements have been made prior. Customer has the option to purchase the artwork to be used as a logo or for other personal promotions for a determined fee. For pricing please inquire within. All designs and custom artwork remain the property of Timberline Signs until the order is complete and paid in full.

Please review, make necessary corrections, sign and fax or return to Timberline Signs, LLC. We will not begin production until this document is signed and returned. A 50% deposit is required to begin production on all jobs exceeding \$100.

Note: Designs are not actual size and Colors do not accurately represent finished product colors.

Signature: _____ **Date:** _____

Please Return signed Fax to **603.964.1576**



- Sign is made out of 3/4" extra (outdoor Plywood)
- Flat painted Graphics (non-illuminated)
- 2 sided Projecting sign.
- 4 ft. wrought Iron Bracket attached to building.