City of Portland Ma	sine - Ruilding or Use	Permit Application	n Peri	PEKN pit No	III ISSU	些	CBL:		
City of Portland, Maine - Building or Use 389 Congress Street, 04101 Tel: (207) 874-8703				02-0490	V 1 4 200	,	032 S00)4001	
Location of Construction:	Owner Name:		Owner	\ddress:			Phone:		
161 Commercial St Robdog Realty		ty Llc	336 D	anforth St	FRACTI	<u> </u>	207-553-7	1665	
Business Name:	Contractor Nam	e:	Contractor Address:			ANU			
n/a	The Signery		299 Forest Avenue Portland				2078797700		
Lessee/Buyer's Name	Phone:		Permit	Туре:			<u>.</u>	Zone:	
n/a	n/a		Signs - Side Walk			B-5			
Past Use:	Proposed Use:		Permit	Fee:	Cost of Work:	CI	EO District:	1	
Commercial; Retail / LeRoux Kitchen Commercial / 36" A Framed Proposed Project Description:		Retail; Erect 24" x I Sign.	\$36.00 FIRE DEPT: Approve			\$0.00 1 INSPECTION:			
				117	Denied Use Group		ION: DE CALLA TIM	Type: 5.9 199	
Erect 24" x 36" A Frame			Signatu	/ V /],	Signature:	11/1/		
Erect 24 x 30 71 Tumo	d Digii			TRIAN ACTIV					
							•		
			Action:	··	ed [Appro	oved w/Co	<u> </u>	Denied	
Permit Taken By:	Date Applied For:	T	Signatu		A1		ate:		
gg	05/09/2002			Zoning	Approval				
1. This permit applicati	on does not preclude the	Special Zone or Revi	ews	vs Zoning Appeal			Historic Preservation		
 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. 		Shoreland		☐ Variance			Not in District or Landmark		
		□ Wetland Survelle Supra □ Flood Zone Not A □ Subdivision		Miscellaneous			Does Not Require Review		
				Conditional Use			Requires Review		
							Approved		
		Site Plan		Approved	l		Approved w/C	Conditions	
		Maj Minor MM		Denied			Denied		
		Date: 5/3/1	52	Date:		Date:			
I have been authorized by jurisdiction. In addition, is shall have the authority to	he owner of record of the na the owner to make this appl f a permit for work describe enter all areas covered by s	lication as his authorized in the application is in	he propo d agent a	and I agree to certify that the	o conform to ne code offic	all applicial's auth	icable laws of	of this esentative	
such permit.									
SIGNATURE OF APPLICANT		ADDRES	\$		DATE		PHON	JE .	

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS
ADDRESS: 161 Compression Species Continuo Mt. Zone: 6-5
OWNER: Sonya JAQUES KORINSON
APPLICANT:
ASSESSOR NO
PLEASE CIRCLE APPROPRIATE ANSWER
SINGLE TENANT LOT? YES NO MULTI-TENANT LOT? YES NO
FREESTANDING SIGN? (ex. Pole Sign) YES NO DIMENSIONS 24" HEIGHT 36"
MORE THAN ONE SIGN? YES NO DIMENSIONS HEIGHT
SIGN ATTACHED TO BLDG.? YES NO DIMENSIONS
MORE THAN ONE SIGN? YES NO DIMENSIONS AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT?
LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:
*** TENANT BLDG. FRONTAGE (IN FEET): 62 (Inax approx. *** REQUIRED INFORMATION
AREA FOR COMPUTATION
Side WALK Sign is Not of Zanj 1554

YOU SHALL PROVIDE:

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF PROPOSED ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: May tuck

DATE: ^S/

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

Signage Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within

me chy, payment allangements mast be me	ade belote petitilis of any kina are accepted.	
Location/Address of Construction: 161 Comments	CIAL SPECET	
Total Square Footage of Proposed Structure $oldsymbol{arrho}$	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# Owner:	SONYA ROBINSON Telephone: (207) 553-71da	5
telephon	Total s.f. of signage 1.00 per s.f. \$ (4) \$30.00 base fee Fee: \$ 30.00 base fee	o <u>(</u> x _, plus
Current use: ROTAIL / Se Rough	Sitche Margel	7 03
If the location is currently vacant, what was prior use Approximately how long has it been vacant: Proposed use: Project description:	Same of Port	Son
Contractor's name, address & telephone: Who should we contact when the permit is ready: Mailing address: /b/ Commencial Street FORTHOR, ME 0410/	HEARS FERENMAN 16 LEHOUX KIRTHEN -+ COLD	
We will contact you by phone when the permit is recreview the requirements before starting any work, will and a \$50.00 fee if any work starts before the permit	the action Decided and Astronomy and analysis in the force	
F THE REQUIRED INFORMATION IS NOT INCLUDED IN THE DENIED AT THE DISCRETION OF THE BUILDING/PLANNING		LY

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: Date:

This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

508 693 0036

p.1

FROM : MONE LAURENCE CARLIN F/IX ND. :5086935508

May. 02 2002 12:19PM P1

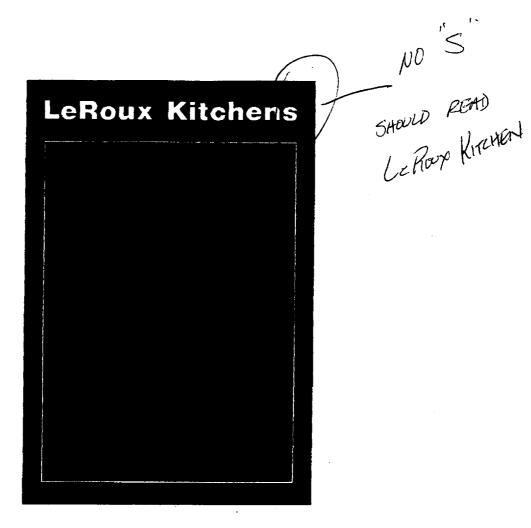
ACORD. CERTIFICATE OF LIABILITY INSURANCE						DATE (MMDDDMY) 09/17/2001		
PHULINGER SCHOOL A A2032 LAWRENCE -CARLIN INSURANCE AGENCY, INC. 230 JONES ROAD PORTLAND, ME 04101			ONLY AN	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. INSURERS AFFORDING COVERAGE				
MSI	MED LEROUX KITCHEN	A CONTRACTOR OF THE CONTRACTOR	INSURCE A	HARTFORD INS	LURANCE COMPANY			
	161 COMMERCIAL ST	REET	HISUREN O.	COMMON COLUMN CO	10 Hr H (M) \$ 15.0 \$ 1.0 \$ 1.00 \$ 1.00			
	PORTLAND, MC 04101		MILITER C;			* * * * * * * * * * * * * * * * * * * *		
			MOUNEN D	***				
	VERAGES		MEUREN C		· · · · · · · · · · · · · · · · · · ·			
7 ^	HE POLICIES OF INSURANCE LISTE NY REQUIREMENT, TERM OR COI INY PERTAIN, THE INSURANCE AFI	ED BELOWHAVE BEEN ISSUED TO THE IN NOTION OF ANY CONTRACT OR OTHER FORDED BY THE POLICIES DESCRIBED H WN MAY HAVE BEEN REDUCED BY PAID	DOCUMENT WIT EREIN 13 SUBJEC CLAMS.	IN NESPECT TO W CY TO ALL THE TER	MICH THIS CERTIFICATE MS. EXCLUSIONS AND C	MAY BE ISSUED OR		
J.	TYPE OF HIBURANCE	POLICY MARGER	POLICY EFFECTIVE	POLET EXPINATION	Lee	173		
A	GENERAL LIAMETTY X COMMERCIAL GENERAL LIMBETY CLAMS MADE X OCCUR	(50.00.000	07/16/01	07/16/02	EACH OCCURRENCE FIRE GASAGE (Any one that MED EXP (Any site person)	5 1,000,000 \$ 50,000 \$ 1,000		
		.			PERSONAL A ANY HARRY	1,000,000		
	GEN'L AGGREGATE LIMIT APPLICE PER	:]		}	GENERAL AGGREGATE	2,000,000		
	PAO LOC				FRODUCTS - COMPOP ACC	2,000,000		
	AUTOMOBILE LIABILITY				Commission()	1		
	SCITUA GRAND JIA				(Per person)			
	NON-OWNED AUTOF				ROOKY INJURY (Per recordant)	3		
	The second of Manager and Second of				PROPERTY DAMAGE	4		
	ANY AUTO				AUTO CHLY - EA ACCIDENT	•		
	PAGEZS LINGULITY				AUTO DILY: AGG	- ••••		
	OCCUR CLAME MADE				ACCH OCCUMPENCE			
	DEDUCTIONS					i.		
_	RETENTION S WORKERS COMPENSATION AND				The Brooks I was	1		
	GMLTOLGUE, FIYBIFIAA				EL EACHACCIOCHT	•		
_ i					EL DIRFASE - EA EMPLOVE			
^	A OTHER 801071701386		07/16/01		EL. 04EASH - POLICY LIMIT BPP \$370,000 BUILDING \$170,000	3		
EE0	NETION OF OPERATIONALOCATIONSOFT	NCLESTRICLUSIONS ADDED BY SHOORSCHIENT						
	AIL STORE			-				
ĖR	TIFICATE HOLDER X ADM	MONAL MININES MANAGE LATTER	CANCELLATI	- Ant				
					Barry Marie Annual Control	,		
CITY HALL PORTLAND, ME 02101			DWIE INSTITUTE	Should any of the above bescribed policies of gancelled before the expression date thereof, the regular majare wal, endeaded to mail $_{\rm L}^{\rm TO}$ days whitten notice to the certificate holder named to the Left, met palume to do so small minute to oblication or liability of any indeed upon the imbare, its agents or differents by the services of differents of the description of presents of the description of the services of the description of the services				
			MOTION TO THE C					
			MINISTER NO GREEK					
			AUTHORIZED MET	ESENDIÁN MON	CHOCAL MINERAL SERVICE			
	IO 25-3 (7/97) ROICERTAROS WEB			Valuet	- Ma	RECIDENTION 1988		

5/02 I spoke with Sonya Robertson and She has given Approval on The Seign -



FRONTAGE = 62 linear feet approx.

Sky placement in front of aw.



(2) 3mm Black PVC 36 x 24 Yellow Copy & Pinstripe 29" x 21" Painted Chalkboard Area

Fax Date:

Approved By:

Date:

4/02

.....

...

-

. .. .

- ---