

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that CABOT CREAMERY COOP

Located At 5 MOULTON ST

Job ID: 2012-04-3829-SIGN

CBL: 032- S-005-001

has permission to install a wall sign & a hanging sign

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

N/A

A. Bell

4/30/12

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

Final Inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

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Acting Director of Planning and Urban Development
Gregory Mitchell

Job ID: 2012-04-3829-SIGN

Located At: 5 MOULTON ST

CBL: 032- S-005-001

Conditions of Approval:

Zoning

1. ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.

Building

1. Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.

Historic

1. Vertical dimension of fascia sign to be slightly shorter than height of granite header, so that there is at least 1" of granite exposed above and below sign.
2. Penetrations into granite to be limited as much as possible.
3. Bracket for projecting sign to be installed in brick field over the granite pier on left side of storefront. Vertical alignment of bracket to match that of adjoining storefront on this building. Bracket to be simple in design.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2012-04-3829-SIGN	Date Applied: 4/23/2012	CBL: 032-S-005-001	
Location of Construction: 163 COMMERCIAL ST/5 MOULTON ST	Owner Name: MOULTON STREET REALTY LLC (Malone Commercial Real Estate)	Owner Address: 5 MOULTON ST PORTLAND, ME 04101	Phone: 207-772-2422
Business Name:	Contractor Name: Bayview Signworks	Contractor Address: 18 Ocean St., South Portland ME 04106	Phone: (207) 799-0718
Lessee/Buyer's Name: <i>Cabot Creamery Cooperative</i>	Phone:	Permit Type: SIGN - PERM - Signage - Permanent	Zone: B-3
Past Use: Retail	Proposed Use: Same - Retail - Cabot Cheese Outlet - install one wall sign - 18" x 10' & one hanging sign - 2' x 3'	Cost of Work:	CEO District:
		Fire Dept: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: Type: <i>SJ</i> Signature: <i>AKM</i> 4/26/12
Proposed Project Description: 2 signs for 163 Commercial St.		Pedestrian Activities District (P.A.D.)	
Permit Taken By:		Zoning Approval	

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM Date: <i>OK w/condition</i> <i>4/26/12 AKM</i>	<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:	<input type="checkbox"/> Not in Dist 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 <input type="checkbox"/> Denied Date: <i>4/30/12</i> <i>D. Andrews</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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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Entered 4/23/12

(B)



83
Hitzler

Signage/Awning Permit Application

2012-01-3829-SIGN

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>161 Smolton</u> <u>163 Commercial Street, Portland, Me</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>32</u> <u>S</u> <u>5</u>	Owner: <u>Malone Commercial</u> <u>Real Estate</u> <i>#see back</i>	Telephone: <u>772-2422</u>
Lessee/Buyer's Name (If Applicable) <u>Cabot Creamery</u> <u>Cooperative</u>	Contractor name, address & telephone: <u>Bayview Signworks</u> <u>18 Ocean Street</u> <u>South Portland, Me.</u>	Total s.f. of signage x \$2.00 x 21 sq ft. = <u>\$42.00</u> Per s.f. plus \$30.00 For H.D. signage \$75.00 Fee: <u>\$52.00</u> Awning Fee = cost of work _____ Total Fee: <u>\$82.00</u>
Who should we contact when the permit is ready: <u>Andy Haynes</u> phone: <u>521-8659</u> <u>75 Historic</u>		
Tenant/allocated building space frontage (feet): Length: <u>15'</u> Height: <u>15'</u> Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot <u>Single 157.00</u>		
Current Specific use: <u>Vacant</u> If vacant, what was prior use: <u>card shop / convenience / web store / space</u> Proposed Use: <u>Retail Outlet</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes _____ No <input checked="" type="checkbox"/> Dimensions proposed: _____ Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: <u>10' w x 18" h</u> <u>10 x 2 = 20</u> <u>Hanging Sign / 2 sides</u> Yes <input checked="" type="checkbox"/> No _____ " <u>2' x 3' x 2" thick</u> <u>10' from grade</u>		
Proposed awning? Yes _____ No <input checked="" type="checkbox"/> Is awning backlit? Yes _____ No _____ 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 <input checked="" type="checkbox"/> Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes _____ No <input checked="" type="checkbox"/> Dimensions: _____ Awning? Yes _____ No <input checked="" type="checkbox"/> Sq. ft. area of awning w/communication: _____		
A site sketch and building sketch showing exactly where existing and new signage is proposed must be provided. Sketches and/or pictures of proposed signage and existing building are also required. RECEIVED APR 23 2012		

\$52.00

Dept. of Building Inspections
City of Portland, Maine

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: [Signature] Date: _____

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

Revised 10/19/09
B-3 - multi-tract
2 x 15 = 30 sq ft

Proposed 18' x 10' = 18 sq ft wall sign
2' x 3' = 6 sq ft hanging sign
24 sq ft (circled)



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Receipts Details:

Tender Information: Check , Check Number: 3362
Tender Amount: 157.00

Receipt Header:

Cashier Id: bsaucier
Receipt Date: 4/23/2012
Receipt Number: 43153

Receipt Details:

Referance ID:	6217	Fee Type:	BP-Signs
Receipt Number:	0	Payment Date:	
Transaction Amount:	82.00	Charge Amount:	82.00
Job ID: Job ID: 2012-04-3829-SIGN - 2 signs for 161 Commercial St.			
Additional Comments: 5 Moulton (161 Commercial)			

Referance ID:	6218	Fee Type:	BP-SignsHist
Receipt Number:	0	Payment Date:	
Transaction Amount:	75.00	Charge Amount:	75.00
Job ID: Job ID: 2012-04-3829-SIGN - 2 signs for 161 Commercial St.			

Estimate

Bayview Signworks
 15 Mildred Street
 South Portland, ME 04106
 (207) 799-0718

Name/Address
Creative Services Coordinator 1 Home Farm Way Montpelier, VT 05602

Date	Estimate No.	Project
04/05/12	288	CABOT CHEESE

Item	Description	Quantity	Cost	Total
Wood	18" x 10' x 2" thick custom made single sided carved HDU sign panel, black background. Quote includes routed smooth background, double border edge detail and cut out and applied prismatic face profile HDU letters. Quote also includes application of gold leaf to border areas and all letters.	1	1,517.25	1,517.25
Installation	Installation		285.00	285.00
Wood	2' x 3' x 2" thick custom made double sided carved HDU sign panel with clean out background finished in customer required colors	1	600.00	600.00
Installation	Installation		190.00	190.00
			Total	\$2,592.25



CARBOT™

SINCE 1919

OWNED BY OUR FARM FAMILIES IN
NEW YORK & NEW ENGLAND



3'w x 2'h x 2" thick, 2-sides (6 sq. ft.)



↑
10'
↓

10'w x 18" h

(15 sq. ft.)



**Moulton Street
Realty, LLC**

April 19, 2012

To Whom It May Concern:

As owner of the building located at 5 Moulton Street and 163 Commercial St, Portland, Maine, we approve the attached sign design for the 1st floor space known as 163 Commercial St. Final approval coming from the City of Portland, verifying the attached to be in compliance with the City's sign ordinances.

Best Regards,



Joseph Malone
Moulton Street Realty, LLC

18" h x 10' w





SINCE 1900

OWNED BY OLD FARM FAMILIES IN
NEW YORK & NEW ENGLAND

CABOTTM

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/20/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER USI Ins Serv of MA, Inc 12 Gill Street Suite 5500 Woburn, MA 01801	CONTACT NAME: PHONE (A/C, No, Ext): 781 938-7500	FAX (A/C, No): 781-376-5035	
	E-MAIL ADDRESS:		
INSURED Agri-Mark Inc PO Box 5800 Lawrence, MA 01842-800	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Liberty Mutual Fire Insurance C		23035
	INSURER B :		
	INSURER C :		
	INSURER D :		
INSURER E :			
INSURER F :			

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:


THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY 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			TB2Z11249007071	09/30/2011	09/30/2012	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$1,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> Drive Oth Car			AS2Z11249007081	09/30/2011	09/30/2012	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$10000			TH2Z11249007091	09/30/2011	09/30/2012	EACH OCCURRENCE \$25,000,000 AGGREGATE \$25,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC2Z11249007111	09/30/2011	09/30/2012	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 City of Portland(ME) is an additional insured on the General Liability policy when required by written contract and/or agreement.

CERTIFICATE HOLDER

CANCELLATION

City of Portland (ME) 389 Congress Street Portland, ME 04101	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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