

City of Portland, Maine – Building or Use Permit Application 339 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <u>52 MODLTON</u>		Owner: <u>John M. Loke</u>		Phone: <u>114-0-202</u>		Permit No: 960091	
Owner Address: <u>52 MODLTON</u>		Leasee/Buyer's Name: <u>MODLTON 04101</u>		Phone: <u>114-0-202</u>		BusinessName: <u>MODLTON</u>	
Contractor Name: <u>MODLTON</u>		Address: <u>MODLTON</u>		Phone: <u>114-0-202</u>		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: FEB 16 1996 CITY OF PORTLAND </div>	
Past Use: <u>MODLTON</u>		Proposed Use: <u>MODLTON</u>		COST OF WORK: \$ <u>MODLTON</u> FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <u>MODLTON</u>		PERMIT FEE: \$ <u>MODLTON</u> INSPECTION: Use Group: <u>MODLTON</u> Type: <u>MODLTON</u> Signature: <u>MODLTON</u>	
Proposed Project Description: <u>MODLTON</u>				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: <u>MODLTON</u> Date: <u>MODLTON</u>		Zone: <u>B-3</u> CBL: <u>032-S-005</u> Zoning Approval: <u>MODLTON</u> 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 <input type="checkbox"/> maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: <u>MODLTON</u>		Date Applied For: <u>MODLTON</u>		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			

1. This permit application doesn't 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..

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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		PHONE:	

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

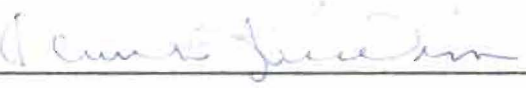
CEO DISTRICT

2

February 1, 1996

To whom it may concern,

As building owner of 5 Moulton St. Portland, ME which houses the shop occupied by Mainely Tours and Gifts at 5 1/2 Moulton St., I Kenneth McVicar do approve the plans for the exterior sign proposed by said shop owners.

owner 
Kenneth McVicar

date 2/1/96



ACORD. CERTIFICATE OF INSURANCEDATE (MM/DD/YY)
01/05/96**PRODUCER**MORRIS INSURANCE SERVICES INC
P O BOX 770
25 MAIN ST
KENNEBUNK ME 04043

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 POLICES BELOW.

COMPANIES AFFORDING COVERAGE**COMPANY****A**

PEERLESS INSURANCE COMPANY

COMPANY**B****COMPANY****C****COMPANY****D****INSURED**MAINLY TOURS & GIFTS
JOHN & KATHLEEN JENKINS
20 MELVIN AVE
OLD ORCHARD BEACH ME 04064**COVERAGES**

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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> PREMISES/OPERATIONS <input type="checkbox"/> UNDERGROUND EXPLOSION & COLLAPSE HAZARD <input type="checkbox"/> PRODUCTS/COMPLETED OPER <input type="checkbox"/> CONTRACTUAL <input type="checkbox"/> INDEPENDENT CONTRACTORS <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input type="checkbox"/> PERSONAL INJURY	T/B/A....	1/05/96	1/05/97	BODILY INJURY OCC \$ BODILY INJURY AGG \$ PROPERTY DAMAGE OCC \$ PROPERTY DAMAGE AGG \$ BI & PD COMBINED OCC \$ 1,000,000 BI & PD COMBINED AGG \$ PERSONAL INJURY AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS (Private Pass) <input type="checkbox"/> ALL OWNED AUTOS (Other than Private Passenger) <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY				BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$ BODILY INJURY & PROPERTY DAMAGE COMBINED \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				STATUTORY LIMITS EACH ACCIDENT \$ DISEASE - POLICY LIMIT \$ DISEASE - EACH EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**CONFIRMATION OF COVERAGE****CERTIFICATE HOLDER**KEN MCVICOR
MOULTON ST REAL ESTATE & TRUST
PO BOX 250
HAMPTON NH 03842**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 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 COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

William Hodgkins, III JS A

ACORD. INSURANCE BINDER

DATE (MM/DD/YY)
01/05/96

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM.

PRODUCER MORRIS INSURANCE SERVICES INC P O BOX 770 25 MAIN ST KENNEBUNK ME 04043		PHONE (A/C, No, Ext) 985-2941	COMPANY PEERLESS INSURANCE COMPA	BINDER #
CODE: 8210287		SUB-CODE:		
AGENCY CUSTOMER ID: AMAITA0-4		DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (including Location) PACKAGE GIFT SHOP - PORTLAND		
INSURED MAINELY TOURS & GIFTS JOHN & KATHLEEN JENKINS 20 MELVIN AVE OLD ORCHARD BEAC ME 04064		THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY #: T/B/A....		

COVERAGES		LIMITS			
PROPERTY	TYPE AND LOCATION OF PROPERTY	COVERAGE/PERILS/FORMS	AMOUNT	DEDUCTIBLE	COINS %
	All risk except named excl.	Contents-Repl Cost Earnings Money & Securities 10,000/2,000	50,000	250	
LIABILITY		COVERAGE/FORMS	EACH OCCURRENCE	AGGREGATE	
<input type="checkbox"/> SCHEDULED FORM <input type="checkbox"/> COMPREHENSIVE FORM		BODILY INJURY	\$	\$	
<input type="checkbox"/> PREMISES/OPERATIONS		PROPERTY DAMAGE	\$	\$	
<input type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS		BI & PD COMBINED	\$1,000,000	\$	
<input type="checkbox"/> CONTRACTUAL		MEDICAL PAYMENTS	PER PERSON	\$ 5,000	
<input checked="" type="checkbox"/> MEDICAL PAYMENTS		PERSONAL INJURY	PER ACCIDENT	\$	
<input type="checkbox"/> PERSONAL INJURY		FORM: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C		\$	
AUTOMOBILE LIABILITY					
<input type="checkbox"/> ANY AUTO		COMBINED SINGLE LIMIT \$			
<input type="checkbox"/> ALL OWNED AUTOS		BODILY INJURY (Per person) \$			
<input type="checkbox"/> SCHEDULED AUTOS		BODILY INJURY (Per accident) \$			
<input type="checkbox"/> HIRED AUTOS		PROPERTY DAMAGE \$			
<input type="checkbox"/> NON-OWNED AUTOS		MEDICAL PAYMENTS \$			
<input type="checkbox"/> GARAGE LIABILITY		PERSONAL INJURY PROT \$			
		UNINSURED MOTORIST \$			
		\$			
AUTO PHYSICAL DAMAGE DEDUCTIBLE		ACTUAL CASH VALUE			
<input type="checkbox"/> COLLISION:		STATED AMOUNT \$			
<input type="checkbox"/> OTHER THAN COL:		OTHER			
EXCESS LIABILITY		EACH OCCURRENCE \$			
<input type="checkbox"/> UMBRELLA FORM		AGGREGATE \$			
<input type="checkbox"/> OTHER THAN UMBRELLA FORM		SELF-INSURED RETENTION \$			
WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY		STATUTORY LIMITS			
		EACH ACCIDENT \$			
		DISEASE - POLICY LIMIT \$			
		DISEASE - EACH EMPLOYEE \$			

SPECIAL CONDITIONS/OTHER COVERAGES
TO CONFIRM NEW COVERAGE AS OF 1/5/96 ON GIFT SHOP AT 5 1/2 MOULTON STREET PORTLAND. POLICY TO FOLLOW.

NAME & ADDRESS		MORTGAGEE	ADDITIONAL INSURED
		LOSS PAYEE	
		LOAN #	
		AUTHORIZED REPRESENTATIVE William Hodgkins, III	
		JS(A)	

ACORD 75-N (3/93) NOTE: IMPORTANT STATE INFORMATION ON REVERSE SIDE © ACORD CORPORATION 1993



HISTORIC PRESERVATION
APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

Pursuant to review under the City of Portland's Historic Preservation Ordinance (Chapter 14, Article IX of the Portland City Code), application is hereby made for a Certificate of Appropriateness for the following work on the specified historic property:

Property Name and Address: Mainely Tours + Gifts
Applicant: (name) Kathleen A. Jenkins (telephone) (207) 774-0808
(company, if applicable) Mainely Tours + Gifts
(address) 5 1/2 Moulton Street
Portland, ME 04101

Property Owner, if different: (name) Ken McVicar
(address) 19 Montreal Street
Portland, ME 04101
(telephone) 772-1232

Architect (if any): N/A

Contractor or Builder (if any): N/A

Local Designation:

☐ Landmark. ☒ Within Historic District. ☐ Historic Landscape District.

Kathleen A. Jenkins
Applicant's Signature

Owner's Signature (if different)

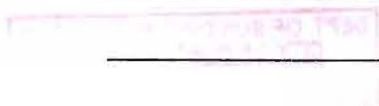
** Note: No application fee is required. Applicant is responsible for costs of sending notices and placement of legal ad. Such costs shall be paid prior to issuance to Certificate/Building Permit or upon denial.

2/8/96

I. DESCRIPTION OF PROJECT

Describe in a separate paragraph each type of proposed exterior architectural alteration, such as window replacement, roof replacement, porch alteration, repointing of masonry, or new addition/construction. Briefly describe the feature or materials affected by the work and give the approximate date that it was constructed, if known. Describe in detail the proposed work and how it will impact the existing feature. Use as many items as necessary to cover all aspects of the project. If more space is needed, continue on a separate page. Reference work items to accompanying drawings or photographs.

See attached documentation



II. ATTACHMENTS

Provide a copy of the plans, renderings, drawings and written specifications of the alteration. To supplement your application, it would be helpful to submit photographs or slides of current conditions, material samples, site plans, sketches, historical documentation, or anything else that will illustrate to the Committee and staff the effect of the proposed change.

The following information is enclosed:

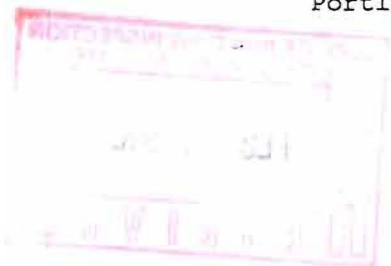
- ☒ Exterior photographs
- ☐ Sketches, elevation drawings and/or annotated photographs
- ☐ Floor plans
- ☐ Site plan showing relative location of adjoining structures, if located within a district
- ☐ Specifications
- ☐ Other (explain) _____

Please note: In order to be photocopied by the City, plans or drawings should generally not exceed 11" x 17". If you wish to submit larger plans, please provide 10 copies for distribution.

If you have questions or need assistance in completing this form, please contact the Historic Preservation staff at 874-8300, (Gary Hamilton, ext. 8699, or Deborah Andrews at ext. 8726).

Please return this form and related application materials to:

Department of Planning and Urban Development
Room 211
Portland City Hall
389 Congress Street
Portland, ME 04101



Wavy Wavy Wavy **Mainely Tours** Wavy Wavy Wavy

Sightseeing • Charters • Transportation

February 7, 1996

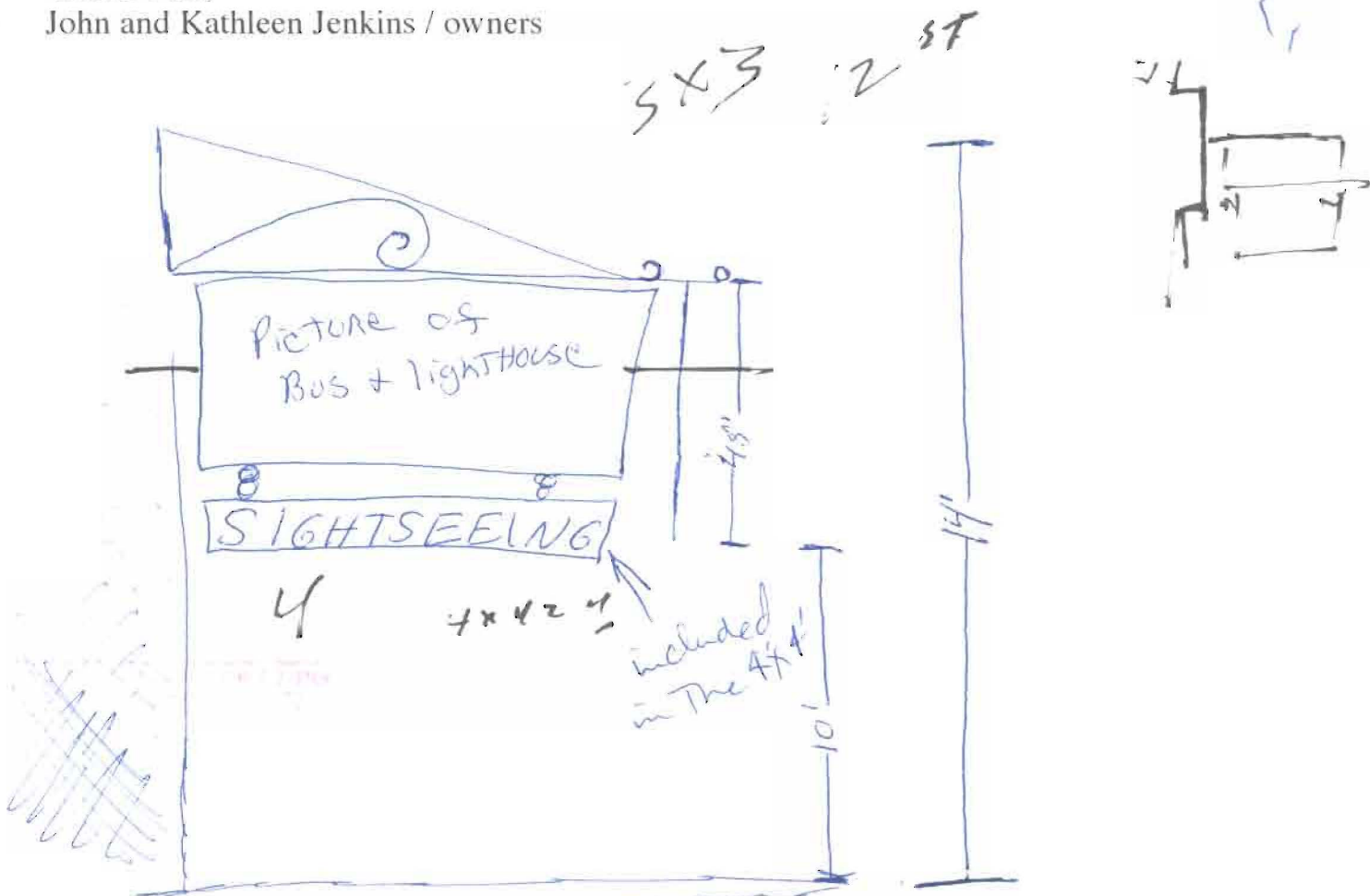
To whom it may concern,

The new sign proposed for Mainely Tours & Gifts will occupy the existing sign brackets previously used by Naturally Maine, (see photos).

The distance from the bottom of proposed sign to the side walk will be 10 feet. The sign itself is 48" square and depicts a four color picture of our tour bus parked in front of Portland Head Light. This image is taken from an original piece of artwork done by local artist Robert Cohen who was commissioned for this project. Also, the sign will have an additional piece hanging from the picture by a short chain that reads, "Sightseeing".

Thank You,
John and Kathleen Jenkins / owners

↓ WHAT SIZE ?



City Form



ADDRESS: _____

OWNER: K

APPLICANT: _____

ASSESSOR N _____

SINGLE TENANT LOT? YES _____ NO ✓

MULTI TENANT LOT? YES ✓ NO _____

FREESTANDING SIGN? YES ✓ NO ✓ DIMENSIONS 48" x 48"
(ex. pole sign..)

MORE THAN ONE SIGN? YES _____ NO ✓ DIMENSIONS main sign

BLDG. WALL SIGN? YES ✓ NO ✓ DIMENSIONS 48" x 48" 4x4 = 16'
(attached to bldg)

MORE THAN ONE SIGN? YES _____ NO ✓ DIMENSIONS extra hanging sign?

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: _____
None per John Jankins
The entire sign
including the
hanging part is
4x4

LOT FRONTAGE _____

BLDG FRONTAGE _____

AWNING _____

IS THERE AN _____

A SITE SKETCH _____

SIGNAGE IS _____

PROPOSED SIGN _____

