#### Permit No: CBL: City of Portland, Maine - Building or Use Permit Application 01-1232 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 032 T004001 Location of Construction: Owner Name: Owner Address: Phone: 4 Moulton St Adrienne-jane Incorporated 207-871-1080 One City Center Business Name: Contractor Name: Contractor Address: Phone Port Boutique The Signery 299 Forest Avenue Portland 2078797700 Lessee/Buyer's Name Phone: Permit Type: Zone: Signs - Permanent Past Use: Proposed Use: Cost of Work: CEO District: Permit Fee: Retail, Country Noel Retail Clothing Store \$30.00 FIRE DEPT: INSPECTION: Approved Use Group: Type: Denied Proposed Project Description: Erect a 5'7" sign Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved w/Conditions Denied Signature: Date: Permit Taken By: Date Applied For: **Zoning Approval** 10/05/2001 gad Special Zone or Reviews Zoning Appeal Historic Preservation 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Shoreland Variance Not in District or Landmark Federal Rules. Wetland 2. Building permits do not include plumbing, Miscellaneous Does Not Require Review septic or electrical work. 3. Building permits are void if work is not started Flood Zone Conditional Use within six (6) months of the date of issuance. False information may invalidate a building Subdivision □ Approved Interpretation permit and stop all work.. Site Plan Approved Approved w/Conditions Denied Denied Date: 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

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

1001-1232

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

#### SIGNAGE APPLICATION

## THIS IS NOT A PERMIT CONSTRUCTION CANNOT NOT COMMENCE UNTIL THE PERMIT IS ISSUED

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

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: 4	- Mouton St / ZW	hart St.			
Total Square Footage of Proposed Structure 5.7 sq. '	e Square Footage of Lot	15,323 sq.1			
Tax Assessor's Chart, Block & Lot Number  Chart# U3h Block# Lot#	Owner: Adrienne-Jane, Inc. Yodirigo Management	Telephone #: 871~1080			
Lessee/Buyer's Name (If Applicable), Beverly J Anderson	Owner's/Purchaser/Lessee Address:  20 Marshwood Cir SACO, Me 04072	Total s.f of signs 5. 1 x .20 \$ \ldot \do \do \do  plus \$30.00			
Current use: Clothing Accessories Datiqueroposed use:  Empty (Previously Countrylbel")  Project description:  INSTALL ONE SIGN 21"x36" (Oval) ground					
Applicants Name, Address & Telephone: Beverly J. Ander Son 20 Marshwood Circle SACO 04072 Contractor's Name, Address & Telephone: 207-294.4380 The Signery 299 Forest Ave, Porryand 879-7700					
Who shall we contact when the permit is ready: Beverly Anderson  Telephone: 207-294-4380					
If you would like it mailed, what mailing address should we use:					
20 marshwood		20			
SACO, Me o	4072	Rec'd By:			
		r\d>			

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

If the property is located in a HISTORIC DISTRICT, a separate sketch is required indicating the design, dimensions, construction materials and source of illumination if any. A photograph of the building façade should be submitted, showing where each sign is to be installed.

#### Certification

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: Beverly & Anderson	Date:	10	5/01	
X // /			7	•

Sign Permit Fee: \$30.00 plus \$0.20 per square foot.

A building permit is also required for any awning based on cost of work-\$30.00 for the first \$1,000.00 and \$6.00 for each additional \$1,000.00

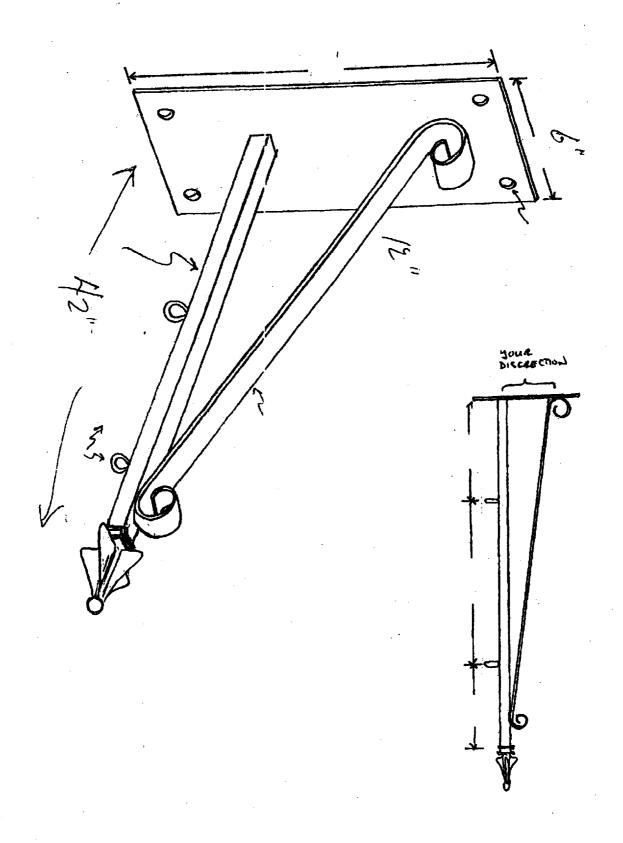
BY FILLING OUT THIS APPLICATION IS DOES NOT MEET THAT YOU WILL BE APPROVED FOR THE AMOUNT OF SIGNAGE YOU ARE APPLYING FOR

IT IS SUGGESTED THAT YOU DO NOT ORDER ANY SIGNAGE UNTIL YOU HAVE RECEIVED YOUR SIGN PERMIT THAT HAS BEEN SIGNED BY THE BUILDING, ZONING AND POSSIBLE HISTORICAL OFFICIALS OF THIS OFFICE

#### Signage

#### PLEASE ANSWER ALL QUESTIONS

	ADDRESS: 2 WHARF STREET PORTLAND BONE: B- 9 OWNER: Adrienne JANE INC.
	OWNER: Adrienne JANE INC.
	APPLICANT: BEVERLY J. ANDERSON (db/a PORT BOUT)
	ASSESSOR NO.: U36-T-001
	SINGLE TENANT LOT? YESNO
	MULTI TENANT LOT? YES NO NO
	FREESTANDING SIGN? YES NO DIMENSIONS (ex. pole sign)
	MORE THAN ONE SIGN? YES NO DIMENSIONS
	eattached to bldg)  yes vo DIMENSIONS 21" x36" =  Over 8' high
	MORE THAN ONE SIGN? YES NODIMENSIONS
(	LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: NO OTHER SIGNAGE
3	COT FRONTAGE (FEET) 12 = 40 TA HOWED
1	SLDG FRONTAGE (FEET) 20 (WTOF ST)
2	WHING YES NO IS AWNING BACKLIT? YES NO
	HEIGHT OF AWNING:
I	S THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT?
2	SITE SEETCH AND BUILDING SEETCH SHOWING EXACTLY WHERE EXISTING AND NEW
	IGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF THE





# THE STORY

FAX: 879-1570 TEL: 879-7700
299 Forest Ave. Portland, ME. 04101
TO: CHY OF FONTIAND CODE ENFORCEMENT
ATTN: MARGE
FROM: DON WRIGHT
DATE: 195
FAX: 874-8716
PHONE:

now offering:

## CALL TO FIND OUT ABOUT OUR NEW CAPABILITIES...

UNIQUE DIMENSIONAL SIGNS

ELECTRIFIED SIGNAGE MARGE BEV ANDERTON WHO IS BOING TO

OPEN THE PORT BONTIQUE AT

4 MONLTON/ WICHARF ST WAS IN

TO SEE YOU TODAY REGARDING A

SIGN PERMIT. EVIDENTLY SITE WAS

ASKED TO FAX A PICTURE OF

THE BRACKET THAT WOMED BE

USED WHICH IS THE PURPOSE

DE THIS EAX.

LARGE FORMAT PRINTING

CARVING AND GOLD LEAFING

THAT YOU MIGHT REQUIRE
PLEASE CALL NE

ARCHITECTURAL LETTERS





3/4" Black Oval MDO
21 x 36
Overlay = 1/2" Teal MDO
w/Beveled White Edges
Carved Silver Starfish
HP White Vinyl Copy
Double Sided

10'to 12' high (off the ground)

ADDRI	ess: 4 Maltar St.
PERMI	T APPLICATION FOR: W W
BUILD	ING OWNER: Advience some Incorporated
PERMI	T APPLICANT:
REVIE	WER: Vall Andrews
DATE	OF DECISION 16/16/61
ніѕто	RIC PRESERVATION REVIEW
review a applicat	Your property is an individually designated landmark structure or is located within a designated historic As such, alterations to the building exterior or site which are visible from a public way are subject to and approval under Article IX (Historic Preservation) of the Land Use Code. Your building or sign permit ion has been reviewed to determine whether the nature or scope of the project requires review, and if so, it meets the standards of the historic preservation ordinance.
ACTIO	N
	Does not Require Review (e.g. Interior work only / alteration is not readily visible from a public way)
	Note: this finding is based on the understanding that the application entails interior work only or that the proposed exterior alteration(s) will not be readily visible from a public way. If your project entails exterior or site alterations (including the installation of sign(s), awnings, or exterior lighting for such) these alterations must be reviewed and approved prior to commencing with the work. Contact 874-8726 for more information.
	Denied Reason for Denial:
	Approved as submitted
	Approved with conditions (see below)
	Conditions of Approval:
	Contact Historic Preservation Staff (874-8726 or 874-8728) prior to installation of sign(s) to confirm approved location.
	Your sign permit includes no reference to exterior lighting; if lighting is included, please submit information on fixtures and specifications on installation.
	Other conditions:
	with other of projecting rights an the bldg and
	be installed in the mortar joints.
	3.
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Application ID Au	mber 1-1232			
Deportment Zonin	ng Status Pen	nding	Réviewer Marge	Schmuckal
Comments: 4 MOUL	TON STREET		pproval Date 10/24/2	001
		G	ilven Oir Date 10/09/2	001
3√2 OK to 3 Bane	Permit Namt> Marge S	chmuckal Pili	() 10/24/2001 Date 2	
Epinolitions(Savi	li))e			
All Inspection and H	listoric requirements shall be m	et.		

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## Memo

To: Beverly Anderson, Port Boutique

From: Kathi Nickerson, Property Manager

Date: 10/3/2001

Subject: Signage

Provided the City of Portland and the Old Port District allow the attached specifications for an exterior sign to be located at Suite 1013 at 2 Wharf Street, the Landlord approves the request for signage.

Landlord understands the sign is 21° x 36° double faced oval sign with black and white border and teal background. The lettering will be white vinyl and carved silver starfish.





ONE CITY CENTER, PORTLAND, MAINE 04101-4009

TEL: (207) 871-1080 - FAX (207) 871-7189

E-MAIL: info@dirigomgmt.com WEB SITE: www.dirigomgmt.com

#### Certificate of Insurance



The Company indicated below certifies that the insurance afforded by the policy or policies numbered and described below is in force as of the effective date of this certificate. This Certificate of insurance does not amend, extend, or otherwise siter the Terms and Conditions of insurance coverage contained in any policy or policies numbered and described below.

Certificate Holder's Name and Address:

CITY OF PORTLAND 389 CONGRESS ST PORTLAND ME 04101 insured's Name and Address: BEVERLY ANDERSON DBA THE PORT SOUTIQUE 20 MARSHWOOD GIR SACO ME 04072

ADDITIONAL INSURED: CITY OF PORTLAND

TYPE OF INSURANCE	POLICY NUMBER AND ISSUING COMPANY	POLICY BITECTIME DATE	POLICY EXPERATION DATE	LIMITS OF LIABILITY ("Limits At Inception)		
S GENERAL LIABILITY	5150316-822-3001 Nationwide Insurance	6/23/01	6/23/02	General Aggrega	to* 2000000	
Promises-Operations Products-Completed Operations	Enterprise			Pr. Comp. Op. A Each Occurrence Any One Person	1000000 Om. 1000000	
Personal & Advertising Injury Medical Expense Fire Damage Legal Other Liability				Any One Person Any One Pire	5000 100000	
GARAGE LIABILITY-PREMISES				Each Accident Aggregate*		
AUTOMOSILE LIABILITY#  BUBINESS AUTO GARAGE Owned Hired Non-Owned  Fill in Either Combined Single Limits or Split Limits				Bodly Injury (Each Person) (Each Accident) Property Demage (Each Accident) Combined Single Limit		
EXCESS LIABILITY  Umbrella Form				Each Occurrence Aggregate*	)	
☐ Workers' Compensation				STATUTORY LIMITS		
and				Bodily Injury by accident	Esch Accident	
☐ Employers' Liability				Bodily Injury by Disease	Each Employee	
				Bodily Injury by Discuss	Policy Limit	

insurance in force only for hazarda indicated by X.

Description of Operations/Locations/ Vehicles/Restrictions/Special Items THE BOSWORTH AGENCY
NATIONWIDE IS ON YOUR SIDE
78 MAIN STREET
KENNEBUNK, ME 04043
207-965-2525

**Authorized Representative** 

Date Certificate lanued Cos. 3640-A (9-86)

Countersigned at: