

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND**BUILDING INSPECTION****PERMIT**

Permit Number: 100233

Please Read
Application And
Notes, If Any,
Attached

This is to certify that 225 Commercial Street, Inc./n/ahas permission to Erect 18" x 168" attached building wall signAT 225 Commercial St

CBL 032 V008001

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 lathed or otherwise closed-in. 24 HOUR 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 _____



Jaime Bowke 4/22/10
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: 10-0233	Issue Date:	CBI: 032 V008001
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Location of Construction: 225 Commercial St (223)	Owner Name: 225 Commercial Street, Inc.	Owner Address: 225 Commercial St Ste 502	Phone:
Business Name:	Contractor Name: n/a	Contractor Address: n/a Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial - "Old Port Wine Merchants"	Proposed Use: Commercial / "Old Port Wine & Cigar Merchants" -Erect 18" x 168" attached building wall sign.	Permit Fee: \$109.80	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Erect 18" x 168" attached building wall sign.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group <i>M</i> Type <i>Sign</i> <i>IBC-2003</i> Signature <i>JMB 4/22/10</i>	
		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: gg	Date Applied For: 03/10/2010	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: <i>3/11/10</i> <i>ABU</i>	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 <i>(L)</i> <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 <input type="checkbox"/> Denied Date: <i>4/21/10</i>
		<p>PERMIT ISSUED</p> <p>APR 23 2010</p> <p>CITY OF PORTLAND</p>		

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

City of Portland, Maine - Building or Use Permit

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

Permit No:	Date Applied For:	CBL:
10-0233	03/10/2010	032 V008001

Location of Construction: 225 Commercial St	Owner Name: 225 Commercial Street, Inc.	Owner Address: 225 Commercial St Ste 502	Phone:
Business Name:	Contractor Name: n/a	Contractor Address: n/a Portland	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use:

Commercial / "Old Port Wine & Cigar Merchants" -Erect 18" x 168" attached building wall sign.

Proposed Project Description:

Erect 18" x 168" attached building wall sign.

Dept: Historic**Status:** Approved**Reviewer:** Deborah Andrews**Approval Date:** 04/21/2010**Note:****Ok to Issue:** ☒**Dept:** Zoning**Status:** Approved with Conditions**Reviewer:** Ann Machado**Approval Date:** 03/11/2010**Note:** Awning & 3'3" x 2'4" hanging sign under permit #09-0191.**Ok to Issue:** ☒

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

Dept: Building**Status:** Approved with Conditions**Reviewer:** Jeanine Bourke**Approval Date:** 04/22/2010**Note:****Ok to Issue:** ☒

- 1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.

Comments:

3/10/2010-gg: received permit by mail. /gg

4/22/2010-gg: received permit from historic on 04/21/10. /gg

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 Inspection 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 with construction.**

 X **Final inspection required at completion of work.**

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



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: <u>223 Commercial Street 04101</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>0418</u> Block# <u>32</u> Lot# <u>V005</u>	Owner: <u>Cyrus Hege</u>	Telephone:
Lessee/Buyer's Name (If Applicable) <u>Old Port Wine</u> <u>223 Commercial St</u> <u>Portland ME 04101</u>	Contractor name, address & telephone: <u>MAIL</u>	Total s.f. of signage x \$2.00 = Per s.f. plus \$30.00/\$65.00 = For H.D. signage = Total Fee: \$ <u>107.00</u> Awning Fee = cost of work Total Fee: \$ <u>107.00</u>
Who should we contact when the permit is ready: <u>Jacques De Villier</u> phone: <u>772-9465</u>		
Tenant/allocated building space frontage (feet): Length: <u>18'</u> Height: <u>18'</u> Lot Frontage (feet) <u>18'</u> Single Tenant or Multi Tenant Lot <u>multi</u>		
Current Specific use: <u>Old Port Wine Merchants</u> If vacant, what was prior use: Proposed Use: <u>Wine shop</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: Height from grade: Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: <u>18" x 169"</u>		
Proposed awning? Yes <input type="checkbox"/> No <input type="checkbox"/> Is awning backlit? Yes <input type="checkbox"/> No <input type="checkbox"/> Height of awning: Length of awning: Depth: Is there any communication, message, trademark or symbol on it? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, total s.f. of panels w/communications, message, trademark or symbol: s.f. <u>1.6 x 14' = 22.40</u>		
Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes <input type="checkbox"/> No <input type="checkbox"/> Dimensions: Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions: <u>3'4" x 3'3" (hang up sign)</u> Awning? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Sq. ft. area of awning w/communication: <u>no signage</u>		
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: [Signature]

Date: 5 Mar 10

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

32 5 and four
 $2 \times 18 = 36$

existing - $3'3" \times 2'4" = 39" \times 28" = 1092" = 7.58$
proposed $18" \times 169" = 3042" = 21$
total 28.58 ok

Signage Permit Check Points
for
233 Commercial St



Section 4



Sign Material: This sign will be constructed from a PVC Board which is weather resistant and very strong.

Illumination: No

Construction method: This will be one long board, and the letters will be raised lettering

Attachment: There are already wholes which to bolt the sign too in the building (from past signs every stong)


**225 Commercial Street, Inc
Portland, ME 04101**

February 27, 2010

Dear Sir/Ma'am:

In accordance with the requirements outlined in the signage/awning permit application, I hereby authorize Old Port Wine Merchants, 223 Commercial St. (tenant) permission to post the attached signage.

Sincerely,



Cyrus Hagg
225 Commercial St. Inc.

RECEIVED

MAR - 9 2010

Dept. of Building Inspections
City of Portland Maine

ACORD™ CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
02/23/2010PRODUCER (207)985-2901 FAX (207)985-2932
Lyons Agency for Insurance
135 Fletcher Street
PO Box 950
Kennebunk, ME 04043-0950THIS 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.INSURED Old Port Wine Merchants LLC
223 Commercial Street
Portland, ME 04101

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: MiddleOak

14532

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	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS				
A	LTR	GENERAL LIABILITY	CB0100031990	12/20/2009	12/20/2010	EACH OCCURRENCE	\$ 1,000,000			
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000			
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				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			
		GEN'L AGGREGATE LIMIT APPLIES PER								
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC								
		AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
		<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$					
<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$					
<input type="checkbox"/> HIRED AUTOS										
<input type="checkbox"/> NON-OWNED AUTOS										
GARAGE LIABILITY						AUTO ONLY - EA ACCIDENT	\$			
<input type="checkbox"/> ANY AUTO						OTHER THAN EA ACC	\$			
						AUTO ONLY AGG	\$			
EXCESS/UMBRELLA LIABILITY						EACH OCCURRENCE	\$			
<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE						AGGREGATE	\$			
<input type="checkbox"/> DEDUCTIBLE							\$			
RETENTION \$							\$			
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU-TORY LIMITS	OTH-ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?						E.L. EACH ACCIDENT	\$			
If yes, describe under SPECIAL PROVISIONS below						E.L. DISEASE - EA EMPLOYEE	\$			
OTHER						E.L. DISEASE - POLICY LIMIT	\$			

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

CERTIFICATE HOLDER

City of Portland
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 MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Lisa Ricker

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.