

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, if Any, Attached

PERMIT

Permit Number: 060272

PERMIT ISSUED

MAR 21 2008

This is to certify that FORE & WHARF LLC / Architect: Giobbi

has permission to "Chiang Mai"/ install signage

AT 50 WHARF ST

032 V01400

provided that the person or persons performing or supervising this permit shall comply with all of the provisions of the Statutes of the City of Portland 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 when permission proceeds before this building or part thereof is occupied or closed-in. YOUR 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 _____
Department Name


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 ISSUED	
Permit No: 06-0272	Issue Date: []
CBL: 032	V014001

Location of Construction: 50 WHARF ST	Owner Name: FORE & WHARF LLC	Owner Address: 6 WEBBER WAY	Phone:
Business Name:	Contractor Name: Archie Giobbi	Contractor Address:	Phone: 2072325343
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B3
Past Use: Commercial/ Restaurant	Proposed Use: Restaurant "Chiang Mai"/ install signage	Permit Fee: \$77.00	Cost of Work: \$77.00
Proposed Project Description: "Chiang Mai"/ install signage (9-11 Union St.)		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>V/A</i>	INSPECTION: Use Group: U Type: <i>JK</i> <i>IBC 2003</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: Idobson	Date Applied For: 02/28/2006	Zoning Approval
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1. This permit application does not 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..	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>3/10/06</i> <i>AGM</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 yz <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>3/13/06</i> <i>STH</i>
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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: 06-0272	Date Applied For: 02/28/2006	CBL: 032 V014001
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Location of Construction: 50 WHARF ST	Owner Name: FORE & WHARF LLC	Owner Address: 6 WEBBER WAY	Phone:
Business Name:	Contractor Name: Archie Giobbi	Contractor Address:	Phone (207)232-5343
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

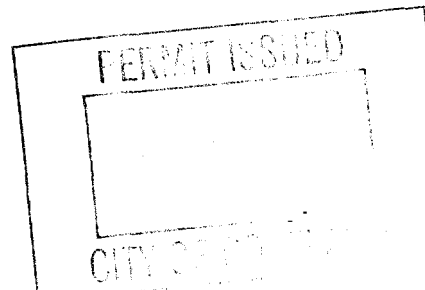
Proposed Use: Restaurant "Chiang Mai"/ install signage	"Chiang Mai"/ install signage
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Note: **Ok to Issue:**

Dept: Zoning **Status:** Approved **Reviewer:** Ann Machado **Approval Date:** 03/10/2006
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munsori **Approval Date:** 03/21/2006
Note: **Ok to Issue:**

1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.





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.

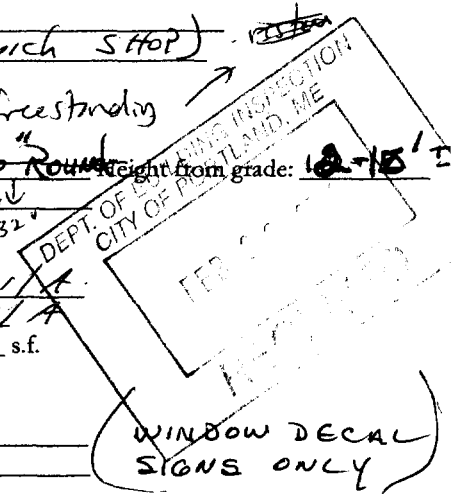
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 32 ✓ 14.			Owner: (STEVE BAUMANN) FORGE & WHARF LLC 6 WEBBER WAY PALMOUTH, ME	Telephone: 7721-333 THE BOULOS CO
Lessee/Buyer's Name (If Applicable) VOEUTH HEM			Applicant name, address & telephone: Voenth Hem WASHINGTON AVE	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ _____ 343

Lot Frontage (feet) 60 ^{building space} WATSON ST. VACANT

If vacant, what was prior use: SANDWICH SHOP (K&D SANDWICH SHOP)
Proposed Use: FOOD SERVICE (TAKE-OUT)
quick restaurant. building sign - not freestanding

Information on proposed sign(s):
Freestanding (e.g., pole) sign? Yes no No ✓
✓ No no

Dimensions proposed: 36" Round Height from grade: 12-15'
No ✓
No N/A
N/A s.f.



Information on existing and previously permitted sign(s):
Freestanding (e.g., pole) sign? Yes _____ No ✓ Dimensions proposed: _____
Bldg. wall sign? (attached to bldg) Yes _____ No ✓ Dimensions proposed: _____
Awning? Yes _____ No ✓ Sq. ft. area of awning w/ communication: _____

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.

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: Voenth Hem Date: 2/16/06

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

27 x 27 = 547

OK

33" x 36" = 1152 # 8

Sandblasted \$610.00 ^{2/24}

Aluminate ^{2/24} + fat

attached to existing bracket

\$275.00



Authentic ^{2/24}

Ching's

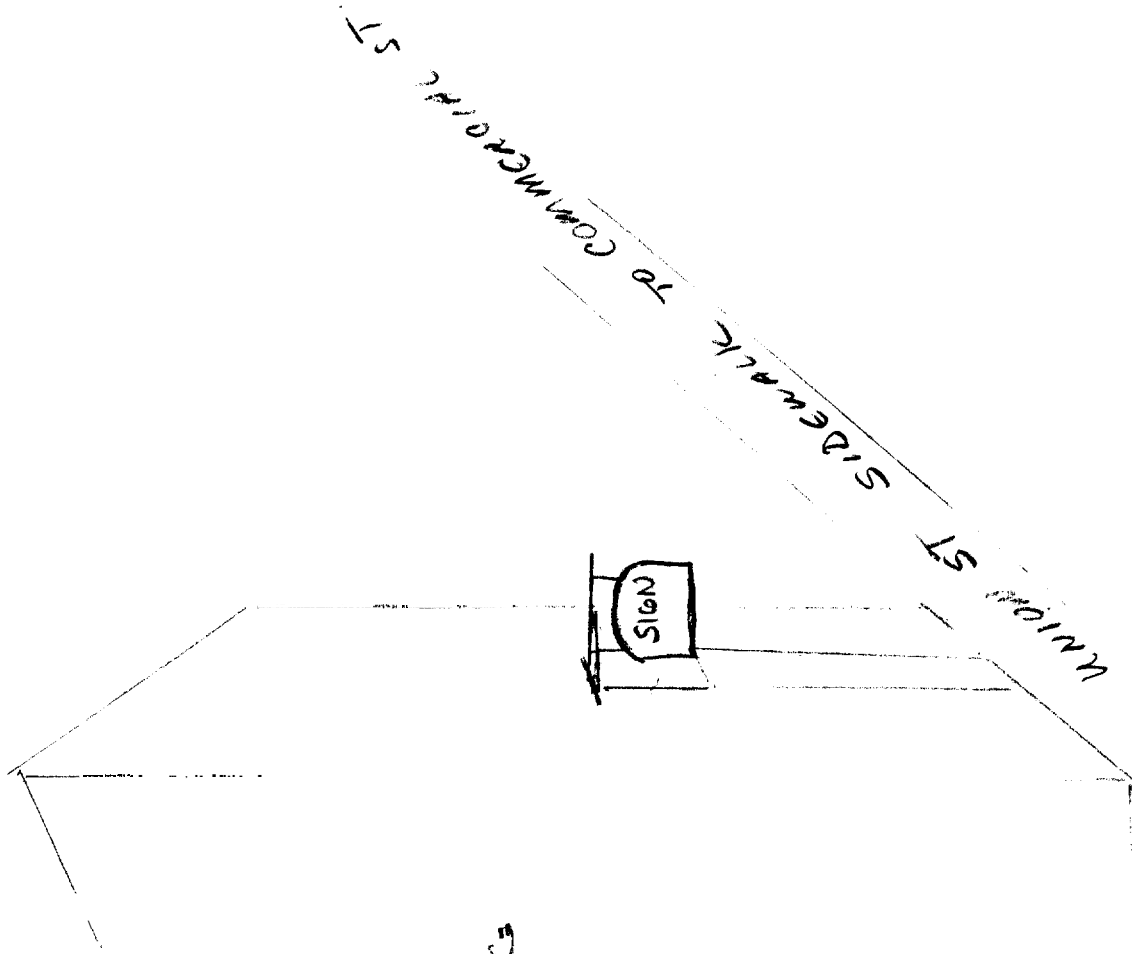
Thai Restaurant

DINE IN / TAKE OUT

8888-8888

36

LOCATION OF PROPOSED SIGN
VIEW FROM FORE & UNION STREETS

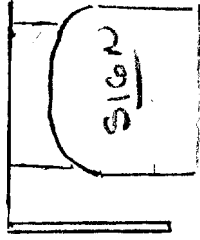


Profile
of
Building

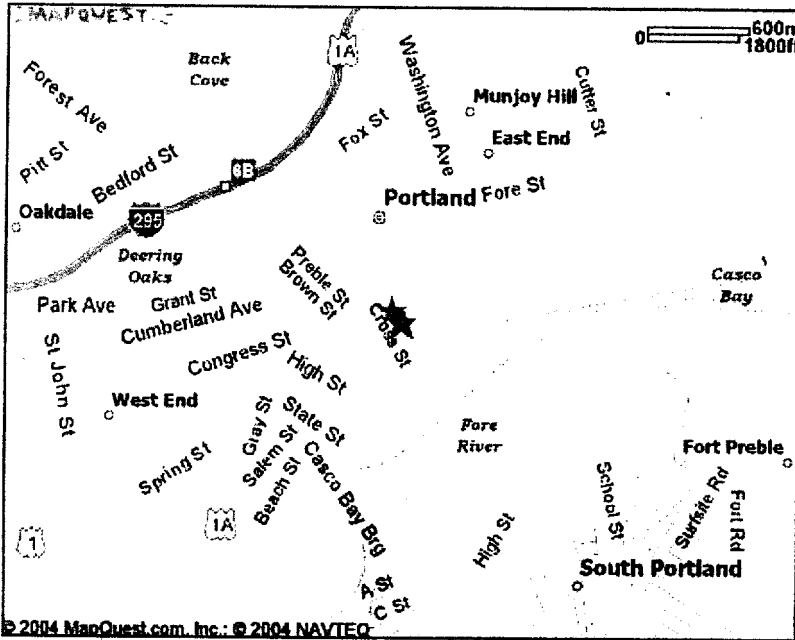
SKETCH OF PROPOSED SIGN INSTALLATION

Building
Profile

9-13
UNION ST



50 Wharf Street | Portland, Maine



Zoning: B-3 (Retail)

Heat: Gas

Water/Sewer: Public

Parking: Available on the street or in area lots.

Nearby Businesses: Joseph's, Betsy's, Helene M Street & Company, The Wine Bar, and the Portland Harbor Hotel.

Available Space: 1,000± SF

Lease Rate: 2,000/mth MG



For more information please contact Steve Baumann
 at 207.772.1333 or visit www.boulos.com.

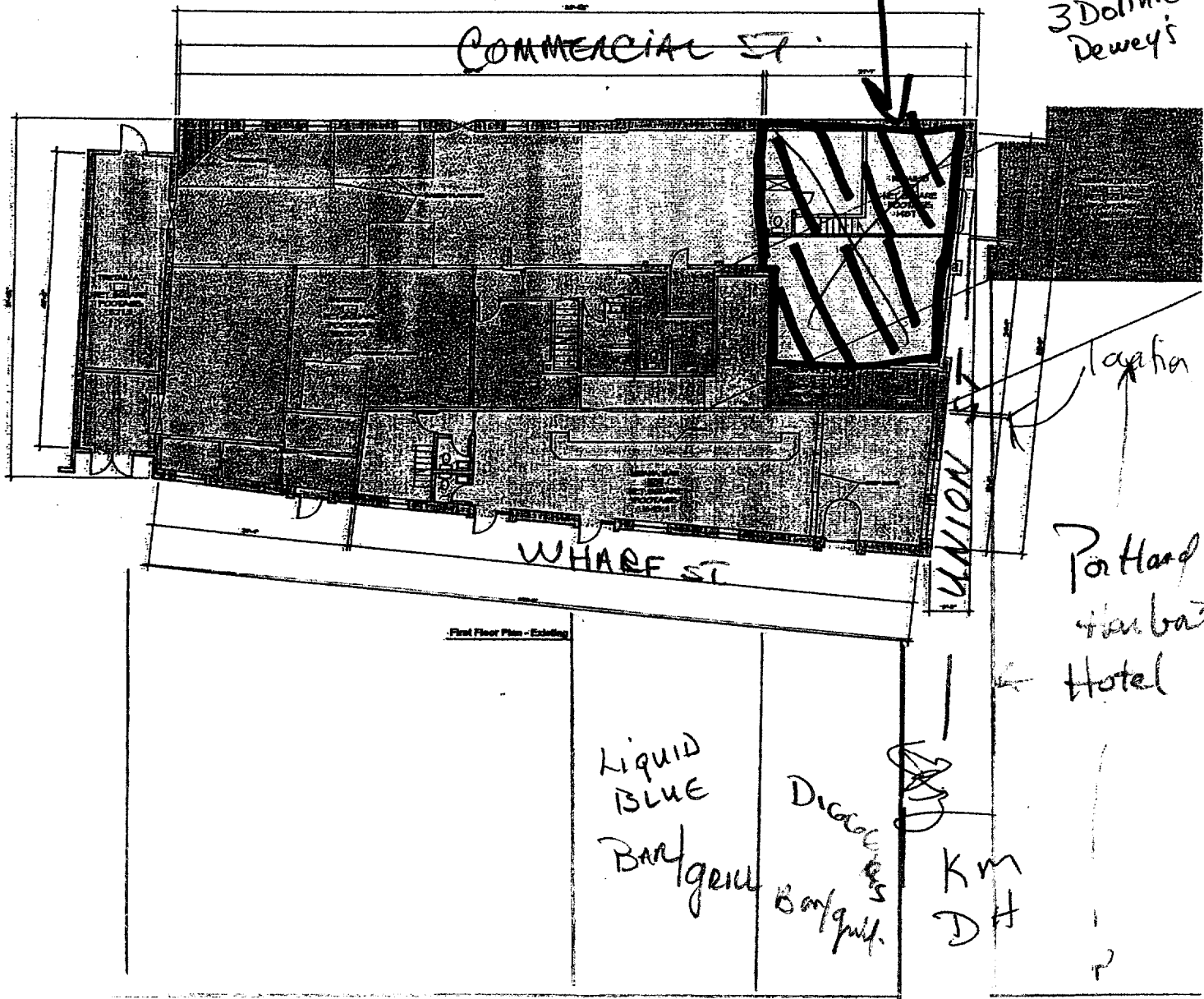
CBRE | The Boulos Company
 CB RICHARD ELLIS

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SITE LOCATION / SKETCH PLAN OF LOCATION

Location
9-13 Union St
P.H.L., Inc

~~9 Union St.~~
~~1,000± SF~~



Jore St

ATTN: ARCHIE

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE(MM/DD/YYYY) 02/23/2006
PRODUCER Insurance Intermediaries, Inc. 6460 Busch Blvd., Suite 100 Columbus, OH 43229-1737 INSURED Voeth Ham dba Chiang Mai 583 Washington Avenue Portland, ME 04103	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 INSURER A: Scottsdale Insurance Co. INSURER B: INSURER C: INSURER D: INSURER E:	NAIC#

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.

TYPE	ADDITIONAL TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE(MM/DD/YY)	POLICY EXPIRATION DATE(MM/DD/YY)	LIMITS
A		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO. <input type="checkbox"/> LOC	0001117000	02/21/2006	02/21/2007	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA occ/yr) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPOP AGG \$ 2,000,000
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		DAMAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				WC STATU- TORY LIMITS OTH- ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

** Locations: 9 Union St., Portland, ME 04101

CERTIFICATE HOLDER City of Portland, Maine 390 Congress Street 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 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE <i>[Signature]</i>
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City of Portland, Maine - Building or Use Permit Application

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

Permit No: 05-0394	Issue Date: PERMIT ISSUED MAY 23 2005	CBL: V014001
Owner Name: Fore & Wharf Llc	Owner Address: 6 Webber Way	Phone: 2076154197
Contractor Name: Drew Leslie	Contractor Address: 93 Mountfort Rd. No. Yarmouth	Phone: 2076154197
Permit Type: Alterations - Commercial	CITY OF PORTLAND	

Location of Construction: SO Wharf St	Owner Name: Fore & Wharf Llc	Owner Address: 6 Webber Way
Business Name:	Contractor Name: Drew Leslie	Contractor Address: 93 Mountfort Rd. No. Yarmouth
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial

Past Use: Commercial/Restaurant	Proposed Use: Commercial/Restaurant / Removal of T- 111 Production exterior / replace w/ glass store front/ renovations of interior/put up wall
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renovations of interior/put up wall

\$111.00	\$10,000.00	1
FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTOR: <i>NO</i> Type: <i>3B</i>	ASSIGNMENT: <i>USE</i>
Signature: <i>M. Kuttu</i> 5/16/05	Signature: <i>[Signature]</i>	
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature: _____ Date: _____		

Permit Taken By: Idobson	Date Applied For: 04/1 112005	Zoning Approval	
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <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>5/12/05</i>	<p>Zoning Appeal</p> <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: _____	<p>Historic Preservation</p> <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 (Partial) Denied to DA Date: <i>4/27/05</i>
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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: 05-0394	Date Applied For: 04/11/2005	CBL: 032 V014001
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Location of Construction: 50 Wharf St	Owner Name: Fore & Wharf Llc	Owner Address: 6 Webber Way	Phone:
Business Name:	Contractor Name: Drew Leslie	Contractor Address: 93 Mountfort Rd. No. Yarmouth	Phone (207) 615-4197
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	

Proposed Use: Commercial/Restaurant / Removal of T-111 Production exterior/ replace w/ glass store front/ renovations of interior/put up wall	
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Dept: Historical	Status: Approved with Conditions	Reviewer: Deborah Andrews	Approval Date: 04/27/2005
Note:	Ok to Issue: <input type="checkbox"/>		
1) * Approved at this time for interior work only. Applicant to provide revised exterior drawings that reflect HP Board's conditions of approval.			

Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 04/20/2005
Note:	Ok to Issue: <input type="checkbox"/>		

Dept: Building	Status: Pending	Reviewer: Mike Nugent	Approval Date:
Note:	Ok to Issue: <input type="checkbox"/>		

Comments: 5/2/2005-mjn: Hold for door swing verification, message left for Steve Baurnan

