

**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <b>45 Portland St</b>		Owner: <b>Dave Norberg</b>		Phone:		Permit No: <b>960106</b>	
Owner Address:		Leasee/Buyer's Name:		Phone:		Business Name: <b>Dyer's Variety</b>	
Contractor Name: <b>Sign Design</b>		Address: <b>743 Broadway So. Portland, ME 04106</b>		Phone: <b>799-2000</b>		Permit Issued: <b>FEB 22 1996</b>	
Past Use: <b>Variety Store</b>		Proposed Use: <b>Same</b>		COST OF WORK: \$		PERMIT FEE: \$ <b>28.00</b>	
Proposed Project Description: <b>Replace Signage 15 sq ft</b>				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: <b>4</b> Use Group: <b>BOCA43</b> Type:	
				Signature:		Signature:	
Permit Taken By: <b>Mary Gresik</b>				Date Applied For: <b>09 February 1996</b>		Zoning Approval: <b>B-2 033-C-022</b>	
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>		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"/>	

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..

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**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 **Eric Moynihan** ADDRESS: DATE: **09 February 1996** PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

CEO DISTRICT

**5**

3/21/95

UL AH 319213

SIGNAGE APPLICATION

ADDRESS: 45 PORTLAND ST.  
OWNER: DYERS VARIETY - DAVE NORBERG  
APPLICANT: SIGN DESIGN INC.  
ASSESSORS NO.: \_\_\_\_\_

B-2 ✓

SINGLE TENANT LOT? YES: \_\_\_\_\_ NO:

MULTI-TENANT LOT? YES:  NO: \_\_\_\_\_

FREESTANDING SIGN? YES: \_\_\_\_\_ NO:

DIMENSIONS: 3

MORE THAN ONE SIGN? NO

DIMENSIONS: \_\_\_\_\_

BLDG. WALL SIGN? YES:  NO: \_\_\_\_\_

DIMENSIONS: 3x5 = 15'

MORE THAN ONE SIGN? \_\_\_\_\_

DIMENSIONS: \_\_\_\_\_

LIST ALL EXISTING SIGNAGE, INCLUDING THEIR DIMENSIONS: \_\_\_\_\_

THERE IS AN EXISTING BUD SIGN (4x4) WHICH WILL BE REMOVED @ THE TIME WE INSTALL THIS 3x5 COKE SIGN

LOT FRONTAGE (IN FEET): 100'

BLDG FRONTAGE (IN FEET): 60'

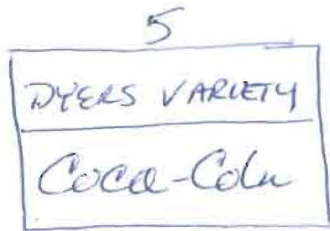
AWNING? YES: \_\_\_\_\_ NO:  IS AWNING BACKLIT? YES: \_\_\_\_\_ NO: \_\_\_\_\_

HEIGHT OF AWNING: \_\_\_\_\_

IS THERE ANY COMM. MESSAGE, TRADEMARK, OR SYMBOL ON IT? \_\_\_\_\_

PLEASE PROVIDE A SITE SKETCH AND A BUILDING SKETCH, SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED. SEE PICTURE

WE WILL NEED SKETCHES AND/OR PICTURES OF THE PROPOSED SIGNS INCLUDING STRUCTURAL COMPONENTS.



THE SIGN will be mounted to the wall w/ steel braces top + bottom and a steel stiff ARM FOR ADDED support. support will be lagged to building

A: SIGNLST

# Information Requirements for Sign Permit Application

Applicants for a sign permit will be asked to submit the following information to the Building Inspection Office:

- 1) Proof of insurance
- 2) Letter of permission from the owner
- 3) A sketch plan of the lot, indicating location of buildings, driveways, and any abutting streets or right of ways. Lengths of building frontages and street frontages should be noted (see attached)
- 4) Indication on plan of all existing and proposed signs
- 5) Computation of the following:
  - a) The sign area of each existing and proposed building sign
  - b) The sign area, height and setback of each existing and proposed freestanding sign
- 6) A sketch of any proposed sign(s), indicating dimensions, materials, source of illumination and construction method (see attached)
- 7) Fee remains the same - \$25.00 plus .20 per sq. ft.

Note: Once a sketch plan has been filed for a property, the Inspections Office will keep a record of the plan so that a new sketch plan will not be required for later changes to signage on the property. In such an instance, applicants will only be required to submit information applicable to the new signs



**ACORD. CERTIFICATE OF INSURANCE**

DATE (MM/DD/YY)

02/08/96

## PRODUCER

TURNER BARKER INSURANCE

ONE INDIA ST  
PORTLAND

ME 04101

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.

## COMPANIES AFFORDING COVERAGE

## COMPANY

A

PEEFLESS INS CO

## COMPANY

B

## COMPANY

C

## COMPANY

D

## INSURED

DYER'S VARIETY STORE

45 PORTLAND ST  
PORTLAND

ME 04101

## 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 checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT	BOUND	01/15/96	01/15/97	GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$1,000,000 PERSONAL & ADV INJURY \$1,000,000 EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP (Any one person) \$ 5,000
	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 \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR, PARTNER/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

RE: IN RESPECTS TO SIGN ON BUILDING

## CERTIFICATE HOLDER

CITY OF PORTLAND  
389 CONGRESS ST  
PORTLAND ME 04101

## 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

Barbara Ladd

*Barbara Ladd*



- EXISTING 4X4 BUD SIGN TO BE REMOVED 16 ~~7~~
- PROPOSED 3X5 COKE SIGN TO BE INSTALLED 15 ~~7~~

NO OTHER SIGN ON THE BUILDING