

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



# CITY OF PORTLAND

# BUILDING PERMIT

This is to certify that 87 MARGINAL WAY LLC

Located At 87 MARGINAL WAY

Job ID: 2012-02-3311-SIGN

CBL: 034-D-007-001

has permission to Replace existing sign with new 6' x 13' Sign provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

4/22/12

\_\_\_\_\_  
Fire Prevention Officer

\_\_\_\_\_  
Code Enforcement Officer / Plan Reviewer

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY  
PENALTY FOR REMOVING THIS CARD**



# PORTLAND MAINE

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Acting Director of Planning and Urban Development  
Gregory Mitchell

Job ID: 2012-02-3311-SIGN

Located At: 87 MARGINAL WAY CBL: 034- D-007-001

## **Conditions of Approval:**

### **Zoning**

1. This permit is being approved on the basis of plans submitted 4/19/12. Any deviations shall require a separate approval before starting that work.
2. The sign facing Marginal Way was originally permitted under permit #04-1666. It was 60" x 18'4". The tenant no longer fronts on two streets so the second sign is legally non-conforming. Since the proposed replacement sign is no larger than the sign permitted in 2004, it can be replaced. The square footage of the proposed sign is 78 sf. Any future sign may not be larger than 78 sf.

### **Building**

1. Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.

**City of Portland, Maine - Building or Use Permit Application**

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

Job No: 2012-02-3311-SIGN	Date Applied: 2/17/2012	CBL: 034- D-007-001	
Location of Construction: 87 MARGINAL WAY	Owner Name: 87 MARGINAL WAY LLC	Owner Address: PO BOX 7525  PORTLAND, ME 4112	Phone:
Business Name: Eastern Mountain Sports	Contractor Name: Poyant Signs – Mike Patenaude	Contractor Address: 125 Samuel Bryant Blvd, New Bedford, MA 02745	Phone:  (508) 889-9424
Lessee/Buyer's Name:	Phone:	Permit Type: SIGN - PERM - Signage - Permanent	Zone:  B-7
Past Use:  Retail – EMS	Proposed Use:  Same – retail – EMS – replace & relocate wall sign facing Marginal Way – 6’ x 13’	Cost of Work:	CEO District:
		Fire Dept:  <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input checked="" type="checkbox"/> N/A	Inspection: Use Group: Type:  Signature:  4/23/12
Proposed Project Description: New 6’ x 13’ Sign – replacing old one		Pedestrian Activities District (P.A.D.)	
Permit Taken By:	<b>Zoning Approval</b>		

<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 informatin may invalidate a building permit and stop all work.</p>	<p><b>Special Zone or Reviews</b></p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetlands</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p><input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM</p> <p>Date: 08/17/2012 4/23/12</p>	<p><b>Zoning Appeal</b></p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p><b>Historic Preservation</b></p> <p><input checked="" type="checkbox"/> Not in Dist or Landmark</p> <p><input type="checkbox"/> Does not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: 4/23/12</p>
	<b>CERTIFICATION</b>		

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 appication 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





B-7

# 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>87 Marginal</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>034</u> Block# <u>0-007</u> Lot# <u>001</u>	Owner: <u>87 MARGINAL WAY LLC</u> <u>PO BOX 7525, PORTLAND ME 04112</u>	Telephone:
Lessee/Buyer's Name (If Applicable) <u>EASTERN MOUNTAIN SPORTS</u> <u>1 VINE FARM RD</u> <u>PETERBOROUGH NH</u>	Contractor name, address & telephone: <u>POYANT SIGNS</u> <u>125 SAMUEL BARNETT BLVD</u> <u>NEWBIDFORD MA 02745</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00 For H.D. signage \$75.00 Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>MIKE PATENAUOE</u> phone: <u>508-889-9424</u>		
Tenant/allocated building space frontage (feet): Length: <u>46' 7/8</u> Height: <u>20' 7/8</u> Lot Frontage (feet) <u>375' +/-</u> Single Tenant or Multi Tenant Lot <u>MULTI</u>		
Current Specific use: <u>RETAIL CENTER</u> If vacant, what was prior use: _____ Proposed Use: <u>RETAIL</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes _____ No <u>X</u> Dimensions proposed: _____ Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <u>✓</u> No _____ Dimensions proposed: <u>6'4" x 12'7.5"</u>		
Proposed awning? Yes _____ No <u>X</u> Is awning backlit? Yes _____ No _____ Height of awning: _____ Length of awning: _____ Depth: _____ Is there any communication, message, trademark or symbol on it? Yes _____ No _____ If yes, total s.f. of panels w/communications, message, trademark or symbol: _____ s.f.		
Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes <u>X</u> No _____ Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes <u>X</u> No _____ Dimensions: _____ Awning? Yes _____ No <u>X</u> 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.		

80x2 + 30  
190  
6'0" x 13'0" - revised  
4/19/12

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](http://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: <u>Michael Patenaude</u>	Date: <u>2-17-12</u>
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This is not a permit; you may not commence ANY work until the permit is issued.



## Signage/Awning Permit Application Checklist

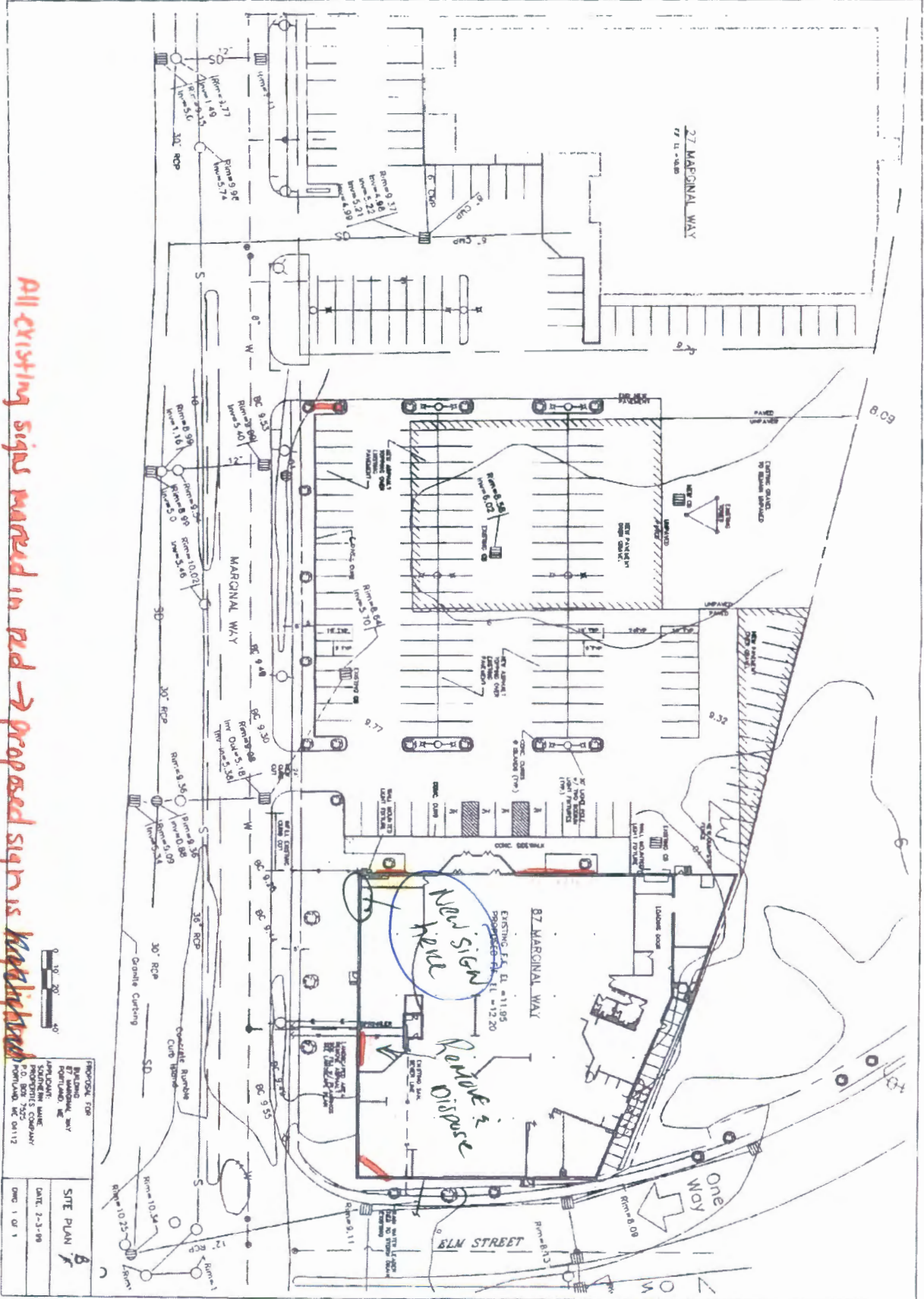
All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

- Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way.
- Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
- A sketch plan of lot indicating location of buildings, driveways and any abutting streets or rights of way, lengths of building frontages, street frontages and all existing setbacks. Please indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building façade dimensions for any signage attached to the building.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.
- Certificate of flammability required for awning, canopy or banner.
- A UL# is required for lighted signs at the time of final inspection.
- Photos of existing signage
- Details for sign fastening, attachment or mounting in the ground.

**Permit fee for signage or awning-with-signage: \$30.00 plus \$2.00 per square foot of sign.**

**Permit fee for awning-without-signage is based on cost of work:  
\$30.00 for the first \$1,000.00, \$10.00 per additional \$1,000.00 of cost.**

**Base application fee for any Historic District signage is \$75.00.**



All existing signs marked in red → proposed signs is highlighted indicated.

PROPOSED FOR  
 87 MARGINAL WAY  
 PORTLAND, ME  
 ARCHITECT: [Name]  
 ENGINEER: [Name]  
 P.O. BOX 7522  
 PORTLAND, ME 04112

SITE PLAN  
 DATE: 2-3-88  
 SHEET: 1 OF 1



**ACORD**<sub>TV</sub>

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

09/07/2011

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

<b>PRODUCER</b> HUB International New England 222 Milliken Blvd Fall River, MA 02722 508 235-2200	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 978 657-5100	FAX (A/C, No): 9789880038
	<b>E-MAIL ADDRESS:</b>	
<b>INSURED</b> Poyant Signs, Inc. 125 Samuel Barnet Blvd. New Bedford, MA 02745	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> Valley Forge	NAIC # 20508
	<b>INSURER B:</b> Continental Casualty Company	20443
	<b>INSURER C:</b> National Fire Ins Co of Hartford	20478
	<b>INSURER D:</b> Continental Insurance Co	35289
	<b>INSURER E:</b> <b>INSURER F:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**


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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY		C1077924068	09/04/2011	09/04/2012	EACH OCCURRENCE	\$1,000,000	
	<input 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	\$1,000,000	
							\$	
C D	AUTOMOBILE LIABILITY		2095490661	09/04/2011	09/04/2012	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO		C1077924040	09/04/2011	09/04/2012	BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS	<input checked="" type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident)	\$	
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident)	\$	
<input checked="" type="checkbox"/> Drive Oth Car						\$		
B	<input checked="" type="checkbox"/> UMBRELLA LIAB		C1077924054	09/04/2011	09/04/2012	EACH OCCURRENCE	\$5,000,000	
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE				AGGREGATE	\$5,000,000	
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$10000						\$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		WC182091627	09/04/2011	09/04/2012	<input checked="" type="checkbox"/> WC STATUTORY LIMITS		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe officer	Y/N					E.L. EACH ACCIDENT	\$1,000,000
		N				N/A	E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

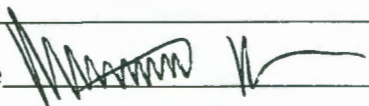
\*\* Auto Liability Information \*\*

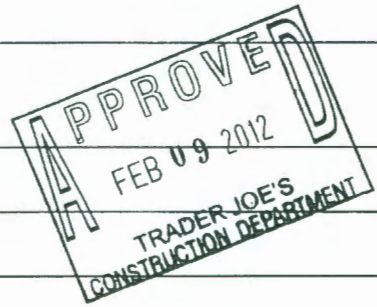
D C1077924040 Eff Date: 09/04/2011 Exp Date: 09/04/2012  
 Auto Liability: Any Auto, Hired Auto, Non-owned  
 Auto Liability: Drive Other Car  
 (See Attached Descriptions)

<b>CERTIFICATE HOLDER</b> Poyant Signs, Inc. 125 Samuel Barnet Blvd New Bedford, MA 02745-0000	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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# PROPERTY OWNER AUTHORIZATION FORM

I/we grant Poyant Signs and/or their representative authorization to apply and secure sign permits on our behalf.

Property Owner Trader Joe's  
Address 87 Marginal Way  
Signature   
Printed Robert Newman



I/we grant Poyant Signs and/or their representative authorization to apply to the zoning, planning and/or design review board on our behalf.

Property Owner \_\_\_\_\_  
Address \_\_\_\_\_  
Signature \_\_\_\_\_  
Printed \_\_\_\_\_