

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 100687

PERMIT ISSUED

Please Read Application And Notes, If Any, Attached

This is to certify that 87 MARGINAL WAY LLC / Burr Signs

has permission to New signage for "Trader Joe's"

AT 87 MARGINAL WAY

CBL 034 D007001

JUN 23 2010

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 _____

Department Name

[Handwritten Signature]
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: 10-0687	Issue Date:	CBL: 034 D007001
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Location of Construction: 87 MARGINAL WAY	Owner Name: 87 MARGINAL WAY LLC	Owner Address: 1735 MARKET ST STE A-400	Phone:
Business Name:	Contractor Name: Burr Signs	Contractor Address: 50 DownEast Drive Yarmouth	Phone: 2077991183
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-7

Past Use: Commercial "Trader Joe's" Connected w/ permit#100497	Proposed Use: Commercial "Trader Joe's" - New signage for "Trader Joe's"	Permit Fee: \$734.00	Cost of Work: \$734.00	CEO District: I
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>U</i> Type: <i>Sign</i> <i>IBC 2003</i>	

Proposed Project Description: New signage for "Trader Joe's"	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</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: 06/11/2010	Zoning Approval	
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- 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"/> <i>needs review under</i> Date: <i>14-368.5.9</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input checked="" type="checkbox"/> Approved <i>per submitted plans</i> <input type="checkbox"/> Denied Date: <i>6/21/2010</i>	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>[Signature]</i>
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PERMIT ISSUED

JUN 23 2010

City of Portland

*ok 6/15/10
with conditions
6/21/10*

*Shubert's
Approved*

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

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.

PERMIT ISSUED
JUN 23 2010
City of Portland

CBL: 034 D007001

Building Permit #: 10-0687

Table 2.8 Sign Regulations by Zone

Downtown Business (B-3), Urban Commercial (B-5), Waterfront Central (WC) and Waterfront Special Use (WSU) Zones

Address
9/6/06

* Signs located on individual landmark properties or within historic districts, P.A.D. overlay districts or P.A.D. encouragement areas shall, in addition to the provisions herein, be subject to article IX of this Code or the downtown urban design guidelines, as applicable. Where the design guidelines are more restrictive than these regulations, the design guidelines shall supercede the otherwise applicable dimensional standards.

* Freestanding signs shall be allowed only if the front facade of the building (or individual tenant's/tenant's frontage in the case of a multi-tenant building) is set back a distance of at least 20 feet from either of the front facades of the abutting buildings (or other tenants' frontage in the same multi-tenant building).

Freestanding Signs * See restrictions on Pennsylvania

The free standing is existing

	Single & Multi-tenant Buildings
Area	16 sq. ft.
Height	6 ft.
Minimum Setback	5 ft.
# Freestanding signs per lot	1 per abutting street

Showing 3 signs instead of 6
Re max of 2 signs
Showing a total of 352.18 sq ft of signage = 346 sq ft max allowed

Building Signs

	Single Tenant Buildings	Multi-Tenant Buildings	
		Bldg. ID Sign and/or Upper Floor Tenant Signs	Ind. Ground Floor Tenant Signs
Maximum cumulative permitted area of all building signs	na	na	na
Sq. ft. per linear ft. of bldg. facade on which sign will be placed	2 sq. ft.	na	2 sq. ft. per ft. of tenant's building frontage
Maximum % of wall area on which sign(s) is(are) to be placed	na	5%	na
# bldg. signs permitted per lot	1 per facade + 1	1 per facade + 1 per tenant	1 per tenant (a)

(a) If individual tenant fronts on more than one street, one additional building sign is permitted for each additional frontage.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/04/2010

PRODUCER
Aon Risk Insurance Services West, Inc.
Los Angeles CA Office
707 Wilshire Boulevard
Suite 2600
Los Angeles CA 90017-0460 USA

PHONE: (866) 283-7122 FAX: (847) 953-5390

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.

INSURED
T.A.C.T. HOLDING, INC.
TRADER JOE'S COMPANY
TRADER JOE'S EAST, INC
P O BOX 5049
MONROVIA CA 91017 USA

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A	ACE American Insurance Company	22667
INSURER B		
INSURER C		
INSURER D		
INSURER E		

Store #519
Holder Identifier: 570039130498

COVERAGES SIR applies per terms and conditions of the policy

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. LIMITS SHOWN ARE AS REQUESTED

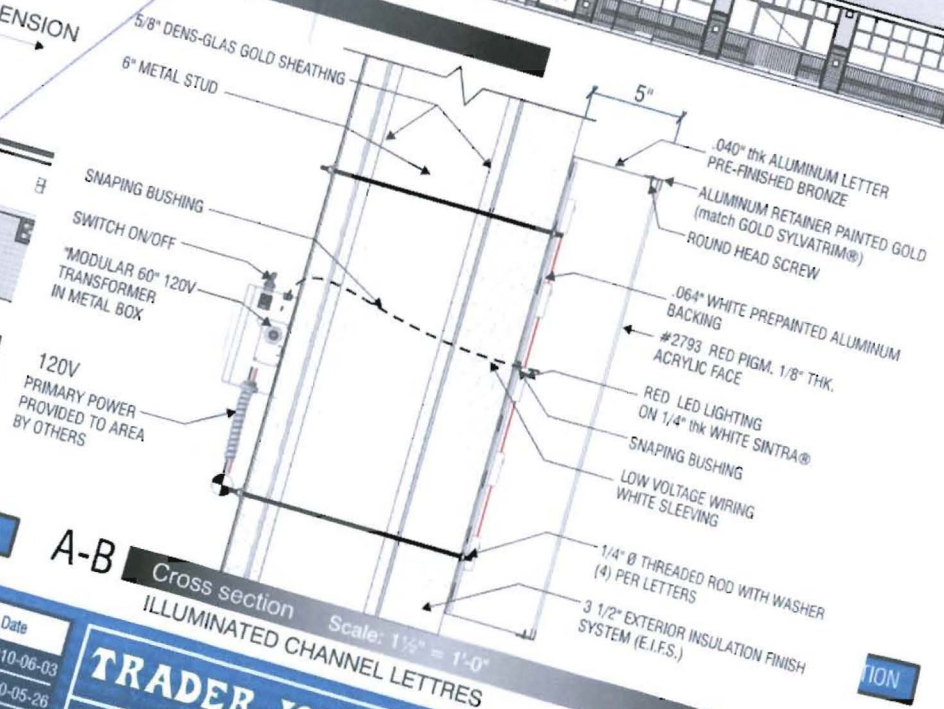
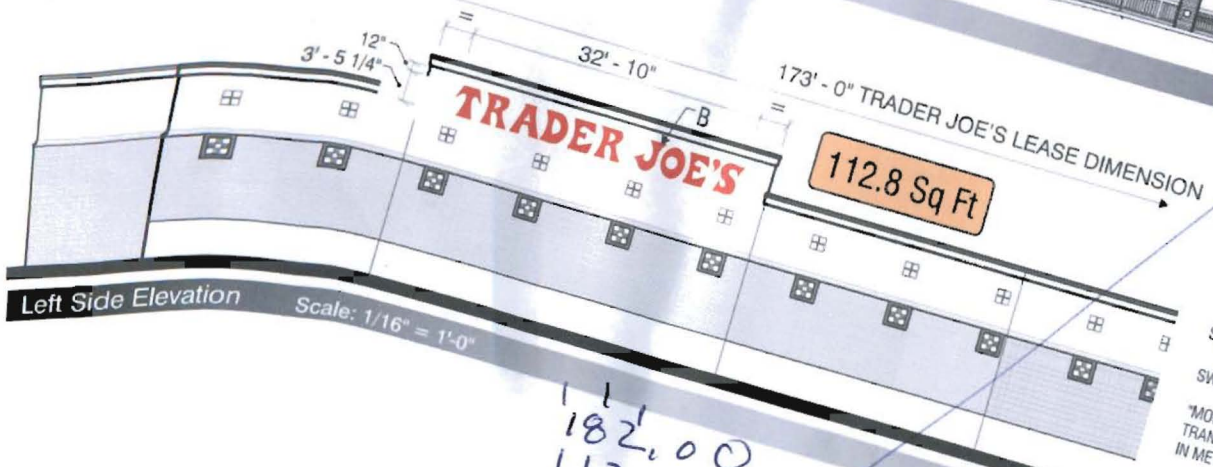
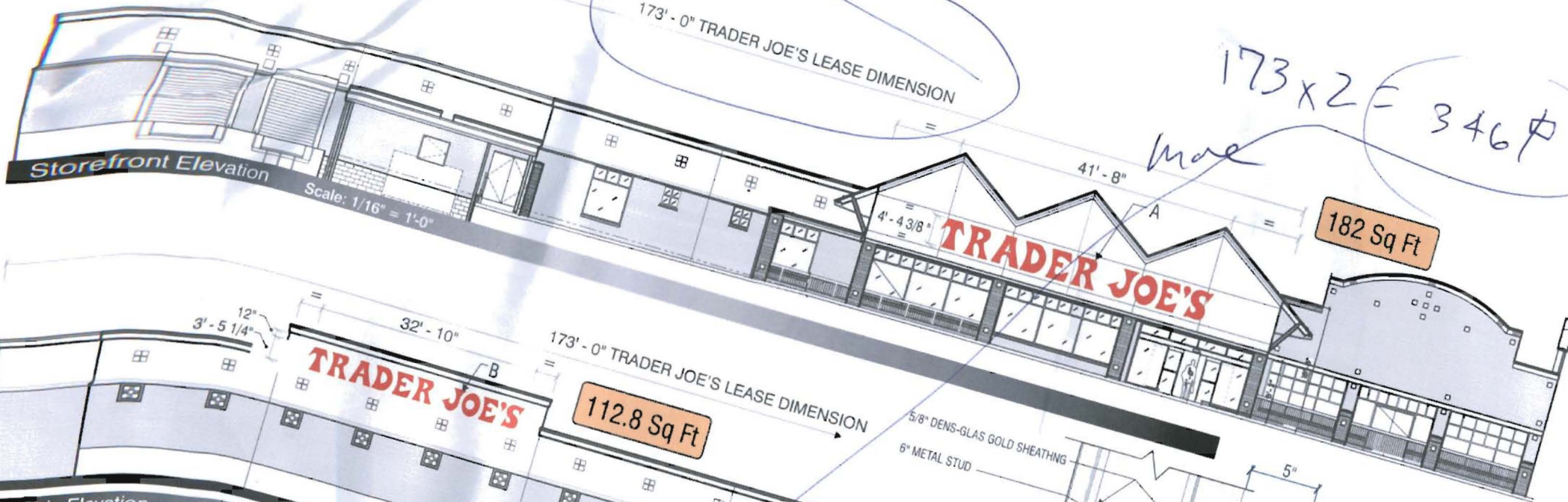
INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> SIR \$350,000 GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	XSLG24933490	07/01/2009	07/01/2010	EACH OCCURRENCE	\$1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
						MED EXP (Am one person)	Excluded
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$2,000,000
						PRODUCTS - COMP/OP AGG	\$2,000,000
						Liquor Liab Aggregate	\$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)	
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	
						OTHER THAN AUTO ONLY	EA ACC AGG
		EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION				EACH OCCURRENCE	
						AGGREGATE	
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER / MEMBER EXCLUDED* (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS	OTHER
						E.L. EACH ACCIDENT	
						E.L. DISEASE-EA EMPLOYEE	
						E.L. DISEASE-POLICY LIMIT	
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT SPECIAL PROVISIONS
 RE: Store No. 519 located at 87 Marginal way, Portland, ME, Sign Installation. The Certificate Holder is added as an Additional Insured with respect to the General Liability policy as required by written contract but limited to the operations of the Insured under said contract, and always subject to the policy terms, conditions and

CERTIFICATE HOLDER
City of Portland, Maine
389 Congress Street
Portland ME 04101 USA

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 *Aon Risk Insurance Services West, Inc*



112.80
182.00
57.38
352.184

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 Trader Joe's 10 Portland ME rev 02

PRELIMINAIRE
 FINAL

CUSTOMER APPROVAL

Signature _____

Printed name please _____

Revisions

Add, cross section (JYA)	Date
Remove letters on pylon sign (AB)	2010-06-03
	2010-05-26

ACCESS
 Your Sign Department
 www.accesssigns.com

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