

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

Location of Construction: <i>1 Park Ave</i>		Owner: <i>C.S. Brown</i>		Phone:		Permit No: <b>980313</b>	
Owner Address:		Lessee/Buyer's Name: <i>The Big Apple</i>		Phone:		BusinessName:	
Contractor Name: <i>TAGE Corporation</i>		Address: <i>P.O. Box 441 Sandwich, MA 02563</i>		Phone: <i>508-888-3955</i>		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b>                  Permit Issued:  <b>APR - 7 1998</b>  <b>CITY OF PORTLAND</b> </div>	
Past Use:		Proposed Use:		COST OF WORK: \$ _____ FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied			
Proposed Project Description:  <i>Erect Signage</i>				Signature: _____ PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action:           Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Signature: _____ Date: _____ Zoning Approval: <i>4/1/98</i> <b>Special Zone or Reviews:</b> <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"/>	
Permit Taken By: <i>Mary Greenik</i>		Date Applied For: <i>01 April 1998</i>				<b>Zoning Appeal</b> <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	

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..

PERMIT ISSUED WITH REQUIREMENTS

**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 provisions of the code(s) applicable to such permit

*01 April 1998*

SIGNATURE OF APPLICANT <i>Via Mail</i>	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

Date: \_\_\_\_\_

**CEO DISTRICT**

1

# AIGARD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
03/26/98

**PRODUCER**  
 Thomas J. Woods Insurance  
 30 Park Ave  
 P. O. Box 2940  
 Worcester MA 01613-2940

**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:**

**INSURED**  
 Steiner Sign Studio, Inc  
 426 East Country Road  
 Rutland MA 01543

**COMPANY A** Commerce Ins Co DB

**COMPANY B** Travelers Ins.

**COMPANY C**

**COMPANY D**

**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"/> OWNERS & CONTRACTORS PROT	98CPPK84719	02/06/98	02/06/99	GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGT \$ 1,000,000 PERSONAL & ADV INJURY \$ 500,000 EACH OCCURRENCE \$ 500,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP (Any one person) \$ 5,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	128386	12/31/97	12/31/98	COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ 250,000 BODILY INJURY (Per accident) \$ 500,000 PROPERTY DAMAGE \$ 100,000
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE <input type="checkbox"/> INCL <input type="checkbox"/> EXCL OTHER	6N18265X467-B	02/01/98	02/01/99	<input checked="" type="checkbox"/> INC STATUS <input type="checkbox"/> OTHER LIMITS EL EACH ACCIDENT \$ 100,000 EL DISEASE - POLICY LIMIT \$ 500,000 EL DISEASE SA EMPLOYEE \$ 100,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

**CERTIFICATE HOLDER**  
 ACME-Wiley Corp.  
 At Linda Apel

**CANCELLATION:**  
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER MAIL 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  
 Walter Conlin *Walter Conlin*

TAGR CORPORATION  
PO Box 441, Sandwich, Ma. 02563  
Tel/FAX (508) 888-3955

TRANSMITTAL NOTICE

Date: 4-1-98  
Project: Fleet Bank SIGN - By Apple Stone  
To: Code Enforcement 2 Park Ave  
Attention: MARY

We are sending:  
 Herewith Enclosed  
 Under Separate Cover

For: SIGN permit - UL #

Pages: 1  
Description:

Remarks:  
Mary - The UL # For our SIGN  
is BD 277827

Please call if any questions.

By: Paul Bugbee  
PO Box 441, Sandwich, Ma. 02563 Tel/FAX ~~508-888-3955~~ 508-888-3955

RECEIVED MAR 30 1998

SIGNAGE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 2 PARK AVE ZONE: B-2

OWNER: THE BIG APPLE

APPLICANT: JOHN BUGBEE

ASSESSOR NO.: \_\_\_\_\_

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

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

FREESTANDING SIGN? YES \_\_\_\_\_ NO \_\_\_\_\_ DIMENSIONS \_\_\_\_\_  
(ex. pole sign..)

MORE THAN ONE SIGN? YES \_\_\_\_\_ NO  DIMENSIONS \_\_\_\_\_

BLDG. WALL SIGN? YES  NO \_\_\_\_\_ DIMENSIONS 2' x 8' 1" = 16'  
(attached to bldg)

MORE THAN ONE SIGN? YES \_\_\_\_\_ NO  DIMENSIONS \_\_\_\_\_

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

1 Big Apple Sign Approx. 3' x 8' 1" = 24'  
16'  
24'  
40'

LOT FRONTAGE (FEET) 40 ftg

BLDG FRONTAGE (FEET) 30 ftg x 2 = 60'

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

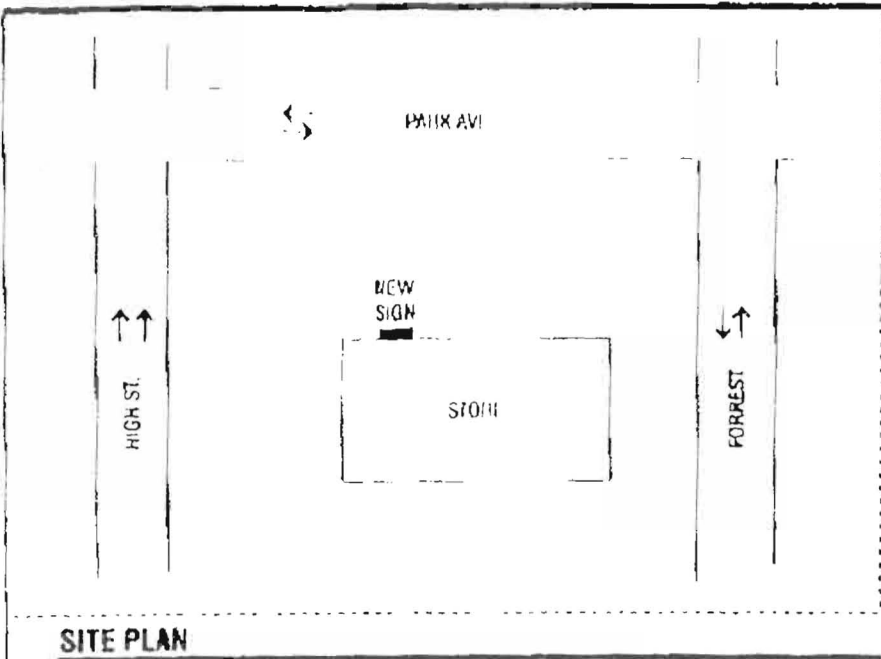
HEIGHT OF AWNING: \_\_\_\_\_

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

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW

SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF THE

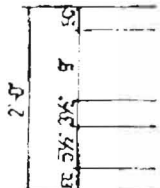
PROPOSED SIGNS ARE ALSO REQUIRED.



SITE PLAN

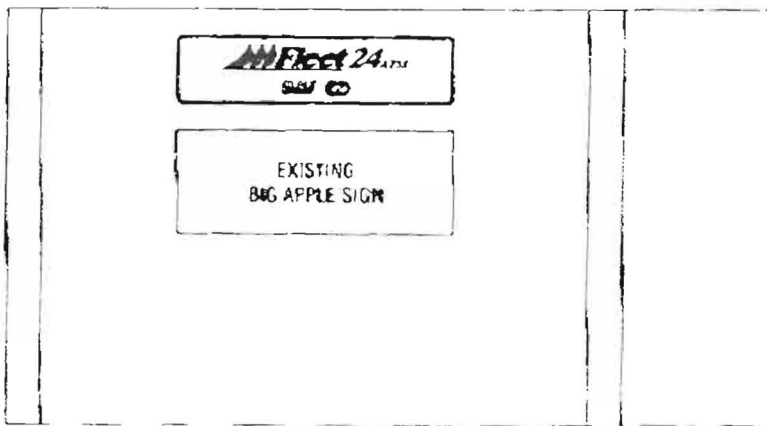
COLORS:  
 BDN - 17441 TO MARCHE-437 BNL  
 FACE - WHITE TRANSLUCENT VINYL  
 LOGO - "SAR" and "24" w/ PMS 481 C  
 "FLEET" PMS 481 C  
 NETWORKS - FULL COLOR

NEW 8'1"



W-8 ILLUMINATED WALL SIGN W/ CUSTOM GRAPHICS

SAME Color w/ added icons



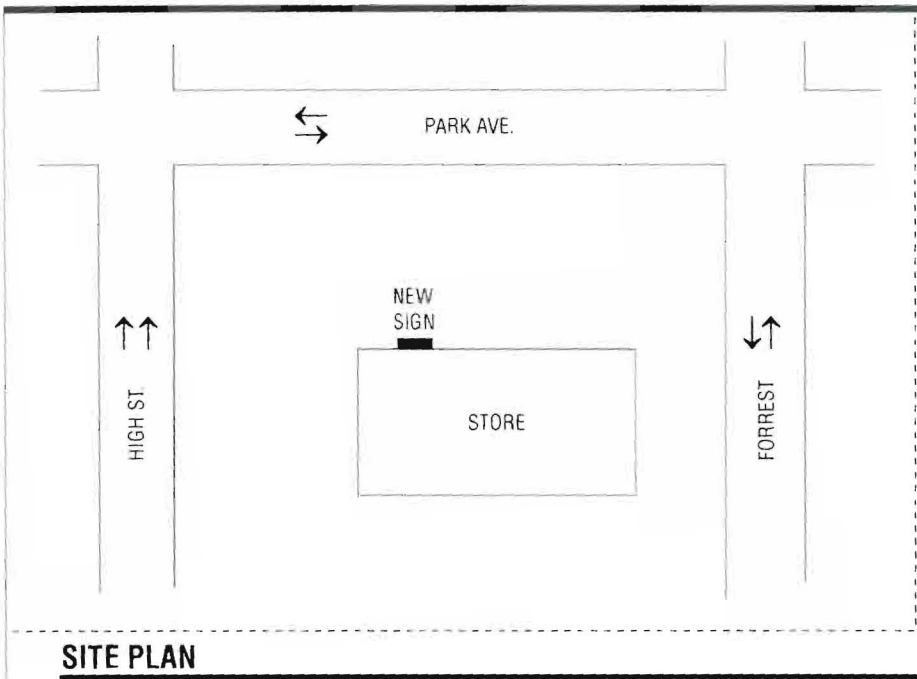
ELEVATION

W 8 ILLUMINATED WALL SIGN

N.T.S

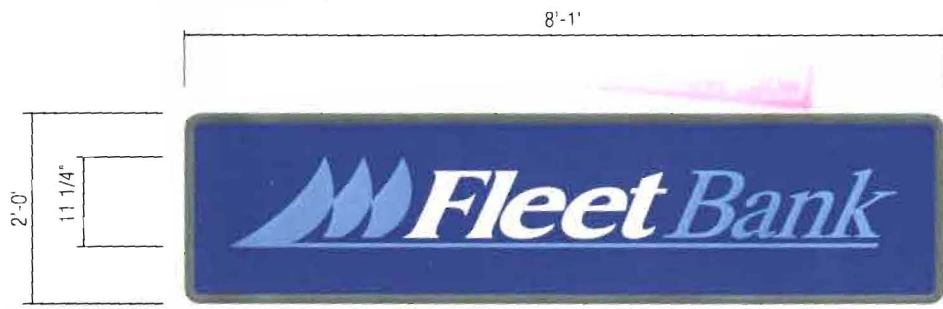
	LOCATION	THE BIG APPLE	FILE	PORTLAND.CDR	PAGE #1 OF #1	 ACME WILEY CORPORATION SIGNS AND SYSTEMS 1983 ORLEANS AVE. ELK GROVE ILLINOIS 60007
		2 PARK AVE.	DATE	03-24-98	REVISED	
		PORTLAND, MAINE	DRAWN BY	BV	SCALE 1/2" = 1'-0"	

15/08/2019 11:01  
 LINDA AREL  
 03/25/98 08:34



**SITE PLAN**

**COLORS:**  
 BACKGROUND E-137 BLUE VINYL  
 LOGO LE-147 BLUE VINYL & WHITE  
 RETAINER & FILLER PMS # 5C WARM GREY



**W-8 ILLUMINATED WALL SIGN**

*Block and white is  
 proposed signage. This will  
 give you an idea of the  
 color scheme.*



**ELEVATION**

W-8 ILLUMINATED WALL SIGN

N.T.S.



LOCATION: THE BIG APPLE	FILE: PORTLAND.CDR	PAGE #1 OF #1
2 PARK AVE.	DATE: 03-24-98	REVISED:
PORTLAND, MAINE	DRAWN: BV	SCALE: 1/2" = 1'-0"

**ACME WILEY CORPORATION**  
 SIGNS AND SYSTEMS  
 2480 GREENLEAF AVE. ELK GROVE ILLINOIS 60007

provisions of the City's Building Code Chapter 9, Section 19, 920.3.2 (BOCA National Building Code/1996), and NFPA 101 Chapter 18 & 19. (Smoke detectors shall be installed and maintained at the following locations):

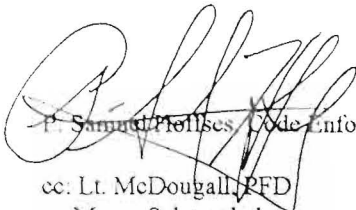
- In the immediate vicinity of bedrooms
- In all bedrooms
- In each story within a dwelling unit, including basements

In addition to the required AC primary power source, required smoke detectors in occupancies in Use Groups R-2, R-3 and I-1 shall receive power from a battery when the AC primary power source is interrupted. (Interconnection is required)

- 17 A portable fire extinguisher shall be located as per NFPA #10. They shall bear the label of an approved agency and be of an approved type.
18. The Fire Alarm System shall be maintained to NFPA #72 Standard.
19. The Sprinkler System shall maintained to NFPA #13 Standard.
20. All exit signs, lights, and means of egress lighting shall be done in accordance with Chapter 10 Section & Subsections 1023. & 1024. Of the City's building code. (The BOCA National Building Code/1996)
- 21 Section 25-135 of the Municipal Code for the City of Portland states, "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".
22. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act Title 5 MRSA refers, shall obtain a certification from a design professional that the plans commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.
23. Ventilation shall meet the requirements of Chapter 12 Sections 1210. Of the City's Building Code.
24. All electrical, plumbing and HVAC permits must be obtained by a Master Licensed holders of their trade.
25. All requirements must be met before a final Certificate of Occupancy is issued.
26. All building elements shall meet the fastening schedule as per Table 2305.2 of the City's Building Code. (The BOCA National Building Code/1996).
- 27 Ventilation of spaces within a building shall be done in accordance with the City's Mechanical Code (The BOCA National Mechanical Code/1993).
28. Please read and implement the attached Land Use-Zoning report requirements.

\*29. NO erection of sign shall begin until a structural detail has been submitted to this office & approved

30. \_\_\_\_\_
31. \_\_\_\_\_
32. \_\_\_\_\_

  
P. Samuel Proulx, Code Enforcement  
cc: Lt. McDougall, RFD  
Marge Schmuckal

## BUILDING PERMIT REPORT

DATE: 6 April 98 ADDRESS: 2 Park Ave. #36-G-001  
REASON FOR PERMIT: To Erect Signage  
BUILDING OWNER: C.N. Brown  
CONTRACTOR: T.A.G.R. Corporation  
PERMIT APPLICANT: Via Mail  
USE GROUP Sign BOCA 1996 CONSTRUCTION TYPE \_\_\_\_\_

### CONDITION(S) OF APPROVAL

This Permit is being issued with the understanding that the following conditions are met:

Approved with the following conditions: \*1 \*29

- X1. This permit does not excuse the applicant from meeting applicable State and Federal rules and laws.
2. Before concrete for foundation is placed, approvals from the Development Review Coordinator and Inspection Services must be obtained. (A 24 hour notice is required prior to inspection)
3. Precaution must be taken to protect concrete from freezing.
4. It is strongly recommended that a registered land surveyor check all foundation forms before concrete is placed. This is done to verify that the proper setbacks are maintained.
5. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by fire partitions and floor/ceiling assembly which are constructed with not less than 1-hour fire resisting rating. Private garages attached side-by-side to rooms in the above occupancies shall be completely separated from the interior spaces and the attic area by means of ½ inch gypsum board or the equivalent applied to the garage means of ½ inch gypsum board or the equivalent applied to the garage side. (Chapter 4 Section 407.0 of the BOCA/1996)
6. All chimneys and vents shall be installed and maintained as per Chapter 12 of the City's Mechanical Code. (The BOCA National Mechanical Code/1993).
7. Sound transmission control in residential building shall be done in accordance with Chapter 12 section 1214.0 of the city's building code.
8. Guardrails & Handrails: A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level. Minimum height all Use Groups 42", except Use Group R which is 36" In occupancies in Use Group A, B, H-4, I-1, I-2 M and R and public garages and open parking structures, open guards shall have balusters or be of solid material such that a sphere with a diameter of 4" cannot pass through any opening. Guards shall not have an ornamental pattern that would provide a ladder effect. (Handrails shall be a minimum of 34" but not more than 38". Use Group R-3 shall not be less than 30", but not more than 38".) Handrail grip size shall have a circular cross section with an outside diameter of at least 1 1/4" and not greater than 2".
9. Headroom in habitable space is a minimum of 7'6".
10. Stair construction in Use Group R-3 & R-4 is a minimum of 10" tread and 7 3/4" maximum rise. All other Use group minimum 11" tread, 7" maximum rise.
11. The minimum headroom in all parts of a stairway shall not be less than 80 inches. (6' 8")
12. Every sleeping room below the fourth story in buildings of use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside without the use of special knowledge or separate tools. Where windows are provided as means of egress or rescue they shall have a sill height not more than 44 inches (1118mm) above the floor. All egress or rescue windows from sleeping rooms shall have a minimum net clear opening height dimension of 24 inches (610mm). The minimum net clear opening width dimension shall be 20 inches (508mm), and a minimum net clear opening of 5.7 sq. ft.
13. Each apartment shall have access to two (2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
14. All vertical openings shall be enclosed with construction having a fire rating of at least one (1)hour, including fire doors with self closer's. (Over 3 stories in height requirements for fire rating is two (2) hours.)
15. The boiler shall be protected by enclosing with (1) hour fire-rated construction including fire doors and ceiling, or by providing automatic extinguishment.
16. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the



**1 From**

Date 7/2/06

Sender's Name Linda Arca Phone (202) 312 8311

Company \_\_\_\_\_

Address 111 Old Dr Dept./Floor/Suite/Room \_\_\_\_\_

City Ft. Belvoir State VA ZIP 01120

**2 Your Internal Billing Reference Information**

**3 To**

Recipient's Name C Phone (202) 874 22

Company City of Potomac / Bldg Dept

Address 387 Cypress St Dept./Floor/Suite/Room \_\_\_\_\_

City Potomac State MD ZIP 20854

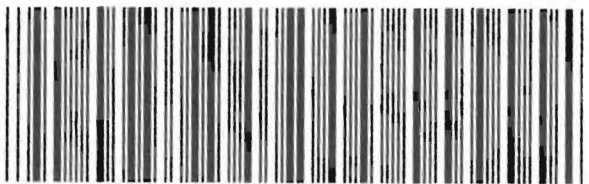
**For HOLD at FedEx Location check here**

Hold Weekday (Not available with FedEx First Overnight)

Hold Saturday (Not available at all locations) (Available for FedEx Priority Overnight and FedEx 2Day only)

**For Saturday Delivery check here**

(Extra Charge. Not available to all locations) (Available for FedEx Priority Overnight and FedEx 2Day only)



8 0 2 4 6 4 1 6 3 3 9 0

**4a Express Package Service Packages under 150 lbs.** Delivery commitment may be later in some areas.

FedEx Priority Overnight (Next business morning)  FedEx Standard Overnight (Next business afternoon)

FedEx First Overnight (Earliest next business morning delivery to select locations! (Higher rates apply))

FedEx 2Day (Second business day)  FedEx Express Saver (Third business day)

— FedEx Letter Rate not available. Minimum charge. One pound rate. —

**4b Express Freight Service Packages over 150 lbs.** Delivery commitment may be later in some areas.

FedEx Overnight Freight (Next business day)  FedEx 2Day Freight (Second business day)  FedEx Express Saver Freight (Up to 3 business days)

(Call for delivery schedule. See back for detailed descriptions of freight services.)

**5 Packaging**

FedEx Letter (Declared value limit \$500)  FedEx Pak  FedEx Box  FedEx Tube  Other Pkg

**6 Special Handling** (One box must be checked)

Does this shipment contain dangerous goods?  No  Yes (See attached Declaration)  Yes (See attached Declaration)

Dry Ice (IATA 649)  CA Cargo Aircraft Only

\*Dangerous Goods cannot be shipped in FedEx packaging.

**7 Payment**

Bill to:  Sender (Account no. in Section 7 will be billed)  Recipient  Third Party  Credit Card  Cash/Check

Obtain Recipient FedEx Account No.



Total Packages	Total Weight	Total Declared Value*	Total Charges
		\$ 00	\$

\*When declaring a value higher than \$100 per shipment, you pay an additional charge. See SERVICE CONDITIONS, DECLARED VALUE, AND LIMIT OF LIABILITY section for further information.

Credit Card Auth. \_\_\_\_\_

**8 Release Signature**

Your signature authorizes Federal Express to deliver this shipment without obtaining a signature and agrees to indemnify and hold harmless Federal Express from any resulting claims.

Questions? Call 1-800-Go-FedEx (800)463-3339

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