

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND**BUILDING INSPECTION****PERMIT**

Permit Number: 100352

Please Read
Application And
Notes, If Any,
Attached

This is to certify that BROWN C N COMPANY / C N Brown Company
has permission to Replace the existing freestanding sign w/ new Freestanding Sign
AT 2 PARK AVE CBL 036 G001001

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 altered 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. APR 14 2010
Health Dept. APR 14 2010
Appeal Board City of Portland
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 No: 10-0352		Issue Date:		CBL: 036 G001001	
Location of Construction: 2 PARK AVE		Owner Name: BROWN C N COMPANY		Owner Address: PO BOX 200	
Business Name:		Contractor Name: C N Brown Company		Contractor Address: PO Box 200 South Paris	
Lessee/Buyer's Name		Phone:		Permit Type: Signs - Permanent	
Past Use: Commercial "Big Apple"		Proposed Use: Commercial "Big Apple" - Replace the existing freestanding sign w/ new Freestanding Sign		Zone: B-2b	
Proposed Project Description: Replace the existing freestanding sign w/ new Freestanding Sign		Permit Fee: \$153.00		Cost of Work: \$153.00	
		CEO District: 1			
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied 		INSPECTION: Use Group:  Type:  	
		Signature:		Signature:	
		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: 04/08/2010		Zoning Approval	
<ol style="list-style-type: none"> 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		Zoning Appeal	
		<input type="checkbox"/> Shorcland <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"/> OK Date: 4/9/10 ABM		<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:	

PERMIT ISSUED

APR 14 2010

City of Portland

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:	Date Applied For:	CBL:
10-0352	04/08/2010	036 G001001

Location of Construction: 2 PARK AVE	Owner Name: BROWN C N COMPANY	Owner Address: PO BOX 200	Phone:
Business Name:	Contractor Name: C N Brown Company	Contractor Address: PO Box 200 South Paris	Phone (207) 743-9212
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial "Big Apple" - Replace the existing freestanding sign w/ new Freestanding Sign	Proposed Project Description: Replace the existing freestanding sign w/ new Freestanding Sign
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Dept: Zoning Status: Approved Reviewer: Ann Machado Approval Date: 04/09/2010

Note: Permit #091058 was to replace the existing sign. Sign was replaced and got hit again. This is a permit for the replacment sign. Ok to Issue: ✓

Dept: Building Status: Approved with Conditions Reviewer: Tammy Munson Approval Date: 04/14/2010

Note: Ok to Issue: ✓

- 1) The sign must be UL listed and stamped approved upon completion prior to use.
- 2) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.

PERMIT ISSUED

APR 14 2010

City of Portland

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

APR 14 2010

City of Portland



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>2 Park Ave</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>036-6-001-001</u> Block# _____ Lot# _____	Owner: <u>C.N. Brown Company</u> <u>P.O. Box 200</u> <u>South Paris, Maine 04281</u>	Telephone: <u>207-743-9212</u>
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone: <u>C.N. Brown Company</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For I.D. signage= Total <u>61.5</u> Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>Karen M. Moore</u> phone: <u>207-743-9212 x2128</u>		
Tenant/allocated building space frontage (feet): Length: _____ Height: _____ Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot _____ Current Specific use: <u>Big Apple Store</u> If vacant, what was prior use: _____ Proposed Use: _____		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: <u>61.75 sq ft</u> Height from grade: <u>18'0"</u> Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions proposed: <u>(see drawing)</u> <u>UL# 40096688</u>		
Proposed awning? Yes _____ No _____ 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 <input checked="" type="checkbox"/> No _____ Dimensions: <u>61.75 sq ft</u> Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions: <u>(See Drawing)</u> 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.		

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, 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: Karen M. Moore

Date: March 9, 2010

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

APR - 8 2010

Dept. of Building Inspections
City of Portland Maine

B-26 - gas station

allowed 79' - 60.79' (OK)

height 18' - 18' max OK

252345-1
B MID

Mobil

3' 4 ³/₄"

INSTALL B/A FACE
FROM EXISTING SIGN

18' 0"

Regular

8.88 9.10

Special

8.88 9.10

Super +

8.88 9.10

7' 4 ³/₈"

10" LED

5' 2 ¹³/₁₆"

$$3' 4 \frac{3}{4}" \times 6' 2 \frac{13}{16}" = 40.75' \times 76.81" = 3130.4$$

$$= 21.74 \phi$$

$$7' 4 \frac{3}{8}" \times 5' 2 \frac{13}{16}" = 88.37' \times 62.81" = 5551.1 \phi$$

$$= 38.85 \phi$$

$$= 60.29 \phi$$

(OK)

* Before & After

Same Style & Size



Everbrite
Identity Systems Division

DISCLAIMER: Renderings are for graphic purposes only and not intended for actual construction dimensions. For windload requirements, actual dimensions and mounting detail, please refer to engineering specifications and install drawings.

These drawings and designs are the exclusive property of Everbrite, Inc. Use of, or duplication in any manner without express written permission of Everbrite, Inc. is prohibited.

Customer: **Exxon Mobil**

Project No: 252345-1.FS

Date: 8/18/2009

Drawn By: **J. Goldsmith**

Location & Site No:

Description:

Revised:

Revised:

Revised:

Customer Approval: NOTE: Unless specified by customer, all depth of embossing will be determined by Everbrite Engineering or existing customer specifications on file. Colors and graphics on file will be used unless otherwise specified by customer.

Please read carefully, check appropriate box and fax back to Everbrite:

☐ Sketch OK as is

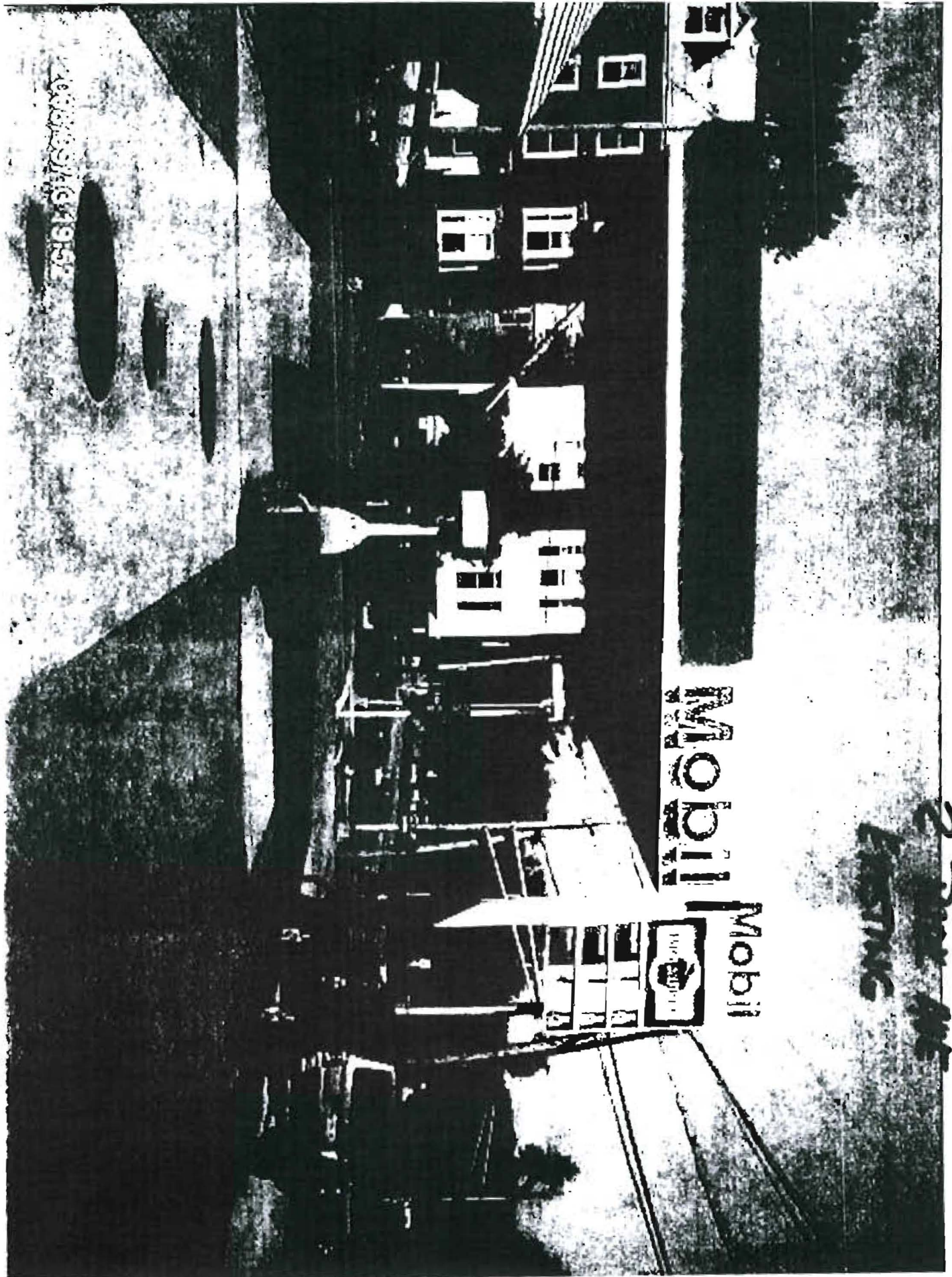
☐ New sketch required

Signature

Date

2700 Ave
KENTUCKY

Mobil Mobil



ACORD™ CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
11/01/08

PRODUCER

HRH Northern New England
31 Court Street
P.O. Box 40
Auburn, ME 04212-0040

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

C.N. Brown Company
1 C.N. Brown Way
P.O. Box 200
South Paris, ME 04281

INSURERS AFFORDING COVERAGE

NAIC

INSURER A: One Beacon Insurance	21970
INSURER B: Admiral Insurance Company	24856
INSURER C: American International Group	32220
INSURER D:	
INSURER E:	

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.

INSR ADD'L LTR	INSRD	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 type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	7100163610001	11/01/08	11/01/09	EACH OCCURRENCE	\$1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$500,000
						MED EXP (Any one person)	\$10,000
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$3,000,000
						PRODUCTS - COM/OP AGG	\$1,000,000
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> MCS-90 & CA9948 <input checked="" type="checkbox"/> PD DED \$5,000	7100163610001	11/01/08	11/01/09	COMBINED SINGLE LIMIT (Ea accident)	\$2,000,000
						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 EA ACC	\$
						AUTO ONLY: AGG	\$
B		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$	EX00000643902	11/01/08	11/01/09	EACH OCCURRENCE	\$8,000,000
						AGGREGATE	\$8,000,000
							\$
							\$
							\$
C		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC5314446 NH & VT	12/31/07	12/31/08	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER	
						E.L. EACH ACCIDENT	\$500,000
						E.L. DISEASE - EA EMPLOYEE	\$500,000
						E.L. DISEASE - POLICY LIMIT	\$500,000
A		OTHER PROPERTY	7100163610001	11/01/08	11/01/09		
A		LIQUOR LIABILITY	7100163610001	11/01/08	11/01/09		\$1,000,000 OCC & AGG
A		GARAGEKEEPERS	7100163610001	11/01/08	11/01/09		\$30,000 LIMIT \$500 DED

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
CITY OF PORTLAND IS AN ADDITIONAL INSURED WITH REGARDS TO THE GENERAL LIABILITY POLICY ONLY. GASOLINE DELIVERY.

CERTIFICATE HOLDER

CITY OF PORTLAND
389 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

David Z. Kelly

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing Insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.