

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED FEB 28 2007 CITY OF PORTLAND

Permit Number: 061721

This is to certify that PORTLAND STAGE COMPANY /The Signery

has permission to New 18" x 24" Hanging sign

AT 25 FOREST AVE

037 A022001

provided that the person or persons in charge of the work accepting this permit shall comply with all of the provisions of the Statutes of the State 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 when permission is procured before this building or part thereof is occupied or services closed-in. 4 HOUR NOTIFICATION 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

Jamie Burke 2/28/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



w/Permit # 061171

# 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>27 Forest ave, Portland, Me</u>  |   |   |
| Tax Assessor's Chart, Block & Lot<br>Chart# <u>37</u> Block# <u>A</u> Lot# <u>22</u>  | Owner:<br><u>Portland Stage Co.</u>   | Telephone:  |
| Lessee/Buyer's Name (If Applicable)<br><u>George Gilfoil</u>  | Contractor name, address & telephone:<br><u>The Signery 879-7700</u><br><u>81 Cove Street</u><br><u>Portland, Me.</u> | Total s.f. of signage x \$2.00<br>Per s.f. plus \$30.00/\$65.00<br>For H.D. signage= Total<br>Fee: \$ _____<br>Awning Fee= cost of work _____<br>Total Fee: \$ <u>36.00</u> |
| Who should we contact when the permit is ready: <u>George Gilfoil</u> phone: <u>699-2655</u>  |   |   |
| Tenant/allocated building space frontage (feet): Length: <u>18'</u> Height: <u>10'</u><br>Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot _____   |   |   |
| Current Specific use: <u>NA change of use 06-1171</u><br>If vacant, what was prior use: <u>City Side Event Planning</u><br>Proposed Use: <u>Bakery/Cafe</u>   |   |   |
| <b>Information on proposed sign(s):</b><br>Freestanding (e.g., pole) sign? Yes ___ No <input checked="" type="checkbox"/> Dimensions proposed: <del>18' x 24'</del> Height from grade: _____<br>Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No ___ Dimensions proposed: <u>18" x 24"</u> <u>432" = 36'</u>                      |   |   |
| <b>Proposed awning?</b> Yes ___ No <input checked="" type="checkbox"/> Is awning backlit? Yes ___ No ___<br>Height of awning: _____ Length of awning: _____ Depth: _____<br>Is there any communication, message, trademark or symbol on it? Yes ___ No ___<br>If yes, total s.f. of panels w/communications, message, trademark or symbol: _____ s.f.           |   |   |
| <b>Information on existing and previously permitted sign(s):</b><br>Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions: _____<br>Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No ___ Dimensions: <u>18" x 24"</u><br>Awning? Yes ___ No <input checked="" type="checkbox"/> 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.<br>Sketches and/or pictures of proposed signage and existing building are also required.  |   |   |

$3 \times 2 + 30 = 36$   
 BS multi-tenant  
 $2 \times 18 = 36'$  allowed  
 OK

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: [Signature] Date: 11/6/06

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

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

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

|                       |             |                     |
|-----------------------|-------------|---------------------|
| Permit No:<br>06-1721 | Issue Date: | CBL:<br>037 A022001 |
|-----------------------|-------------|---------------------|

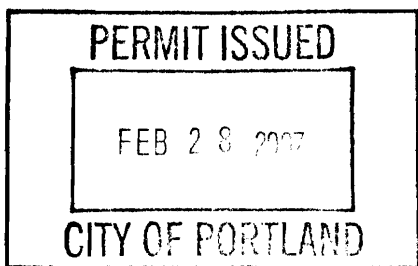
|  |                                       |   |                     |
|--|---------------------------------------|---|---------------------|
| Location of Construction:<br>25 FOREST AVE | Owner Name:<br>PORTLAND STAGE COMPANY | Owner Address:<br>PO BOX 1458                     | Phone:              |
| Business Name:<br>Geo's Patisserie Cafe    | Contractor Name:<br>The Signery       | Contractor Address:<br>299 Forest Avenue Portland | Phone<br>2078797700 |
| Lessee/Buyer's Name<br>George Gilfoil      | Phone:<br>207-699-2655                | Permit Type:<br>Signs - Permanent                 | Zone:<br>B3C        |

|   |  |   |  |                    |
|---|--|---|--|--------------------|
| Past Use:<br>Commercial - Geo's Patisserie Cafe<br>(Permit# 061171) | Proposed Use:<br>Commercial - Geo's Patisserie Cafe-<br>New 18" x 24" Hanging sign | Permit Fee:<br>\$36.00  | Cost of Work:<br>\$36.00   | CEO District:<br>1 |
| Proposed Project Description:<br>New 18" x 24" Hanging sign         |  | FIRE DEPT: <input type="checkbox"/> Approved<br><input type="checkbox"/> Denied   | INSPECTION:<br>Use Group: A-2 Type: Sign<br>IBC-2003<br>Signature: [Signature] 2/28/07 |                    |
|   |  | PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)<br>Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied<br>Signature: _____ Date: _____ |  |                    |

|                             |                                 |                        |  |  |
|-----------------------------|---------------------------------|------------------------|--|--|
| Permit Taken By:<br>Idobson | Date Applied For:<br>11/29/2006 | <b>Zoning Approval</b> |  |  |
|-----------------------------|---------------------------------|------------------------|--|--|

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..

|   |   |   |
|---|---|---|
| <b>Special Zone or Reviews</b><br><input type="checkbox"/> Shoreland<br><input type="checkbox"/> Wetland<br><input type="checkbox"/> Flood Zone<br><input type="checkbox"/> Subdivision<br><input type="checkbox"/> Site Plan<br>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/><br>Date: 12/4/06 ASU | <b>Zoning Appeal</b><br><input type="checkbox"/> Variance<br><input type="checkbox"/> Miscellaneous<br><input type="checkbox"/> Conditional Use<br><input type="checkbox"/> Interpretation<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied<br>Date: | <b>Historic Preservation</b><br>[Handwritten: landmark]<br><input type="checkbox"/> Not in District or Landmark<br><input type="checkbox"/> Does Not Require Review<br><input type="checkbox"/> Requires Review<br><input checked="" type="checkbox"/> Approved<br><input type="checkbox"/> Approved w/Conditions<br><input type="checkbox"/> Denied<br>Date: 2/26/07 [Signature] |
|---|---|---|



**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

|                              |  |                            |
|------------------------------|--|----------------------------|
| <b>Permit No:</b><br>06-1721 | <b>Date Applied For:</b><br>11/29/2006 | <b>CBL:</b><br>037 A022001 |
|------------------------------|--|----------------------------|

|   |  |  |                                 |
|---|--|--|---------------------------------|
| <b>Location of Construction:</b><br>25 FOREST AVE | <b>Owner Name:</b><br>PORTLAND STAGE COMPANY | <b>Owner Address:</b><br>PO BOX 1458                     | <b>Phone:</b>                   |
| <b>Business Name:</b><br>Geo's Patisserie Cafe    | <b>Contractor Name:</b><br>The Signery       | <b>Contractor Address:</b><br>299 Forest Avenue Portland | <b>Phone:</b><br>(207) 879-7700 |
| <b>Lessee/Buyer's Name:</b><br>George Gilfoil     | <b>Phone:</b><br>207-699-2655                | <b>Permit Type:</b><br>Signs - Permanent                 |                                 |

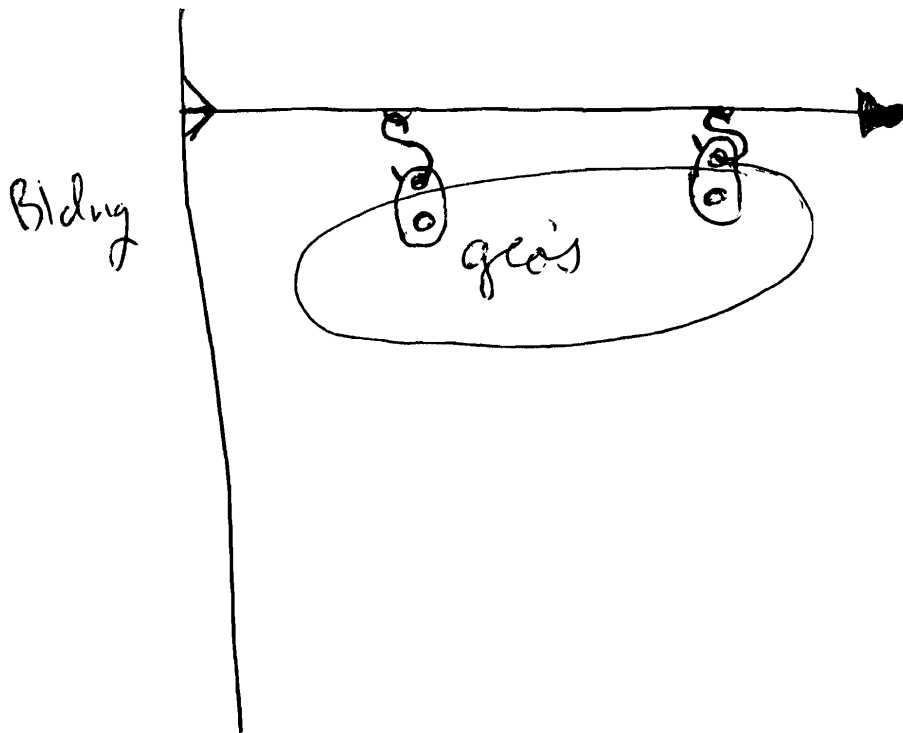
|  |  |
|--|--|
| <b>Proposed Use:</b><br>Commercial - Geo's Patisserie Cafe- New 18" x 24" Hanging sign | <b>Proposed Project Description:</b><br>New 18" x 24" Hanging sign |
|--|--|

|   |   |                                  |   |
|---|---|----------------------------------|---|
| <b>Dept:</b> Historic   | <b>Status:</b> Approved                 | <b>Reviewer:</b> Deborah Andrews | <b>Approval Date:</b> 02/26/2007                        |
| <b>Note:</b>  |   |                                  | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| <b>Dept:</b> Zoning   | <b>Status:</b> Approved                 | <b>Reviewer:</b> Ann Machado     | <b>Approval Date:</b> 12/04/2006                        |
| <b>Note:</b>  |   |                                  | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| <b>Dept:</b> Building   | <b>Status:</b> Approved with Conditions | <b>Reviewer:</b> Jeanine Bourke  | <b>Approval Date:</b> 02/28/2007                        |
| <b>Note:</b>  |   |                                  | <b>Ok to Issue:</b> <input checked="" type="checkbox"/> |
| 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code. It is understood that the sign will be installed on an existing bracket which must meet fastening specs of the code. |   |                                  |   |

|  |
|--|
| <b>Comments:</b><br>2/27/2007-dmartin: Recieved sign permit application this afternoon from Historic/ dm |
|--|

## Mounting

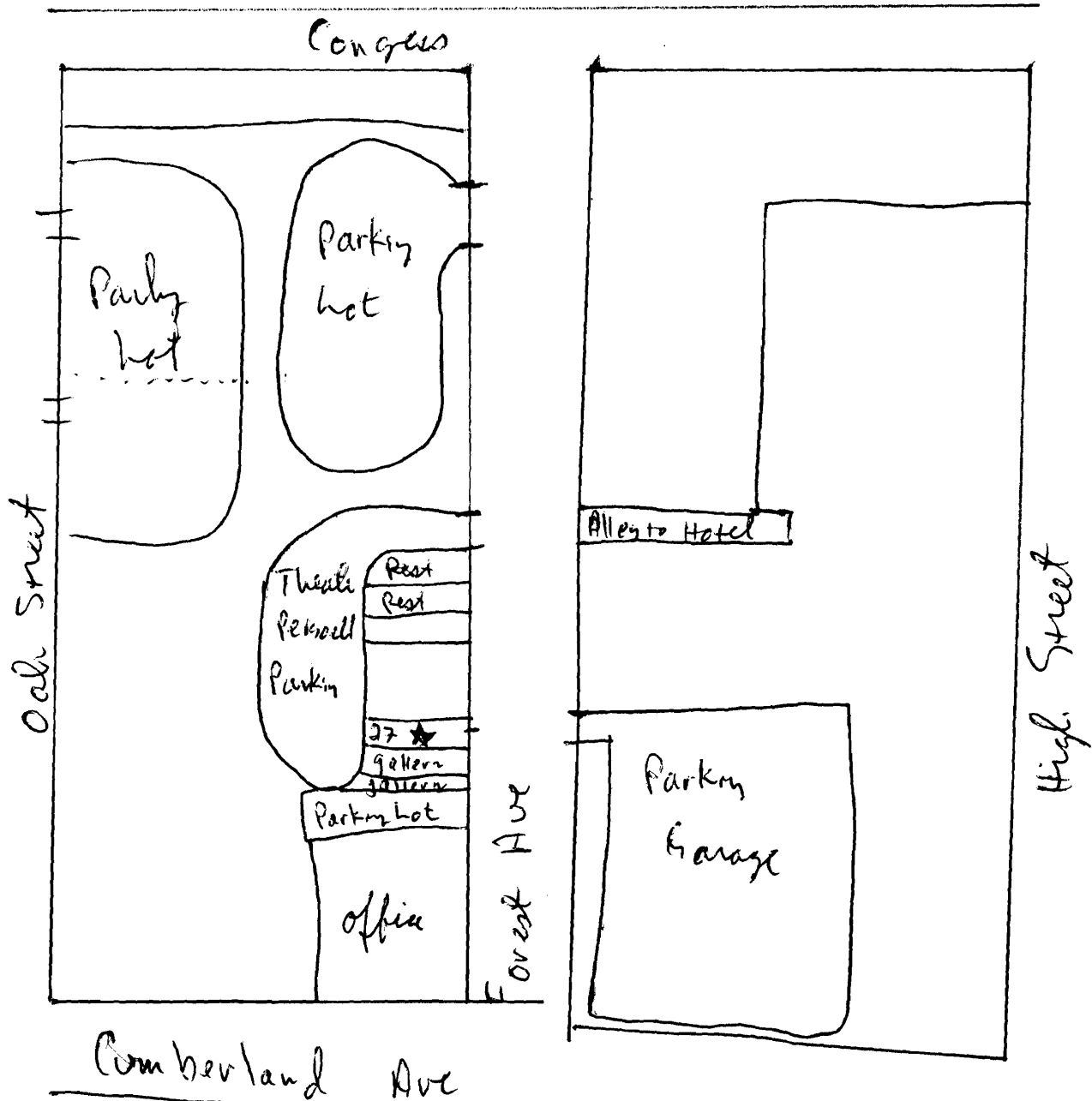
There is a class that is bolted permanently to the sign. The class will then be attached to the bracket with 2 S Hooks



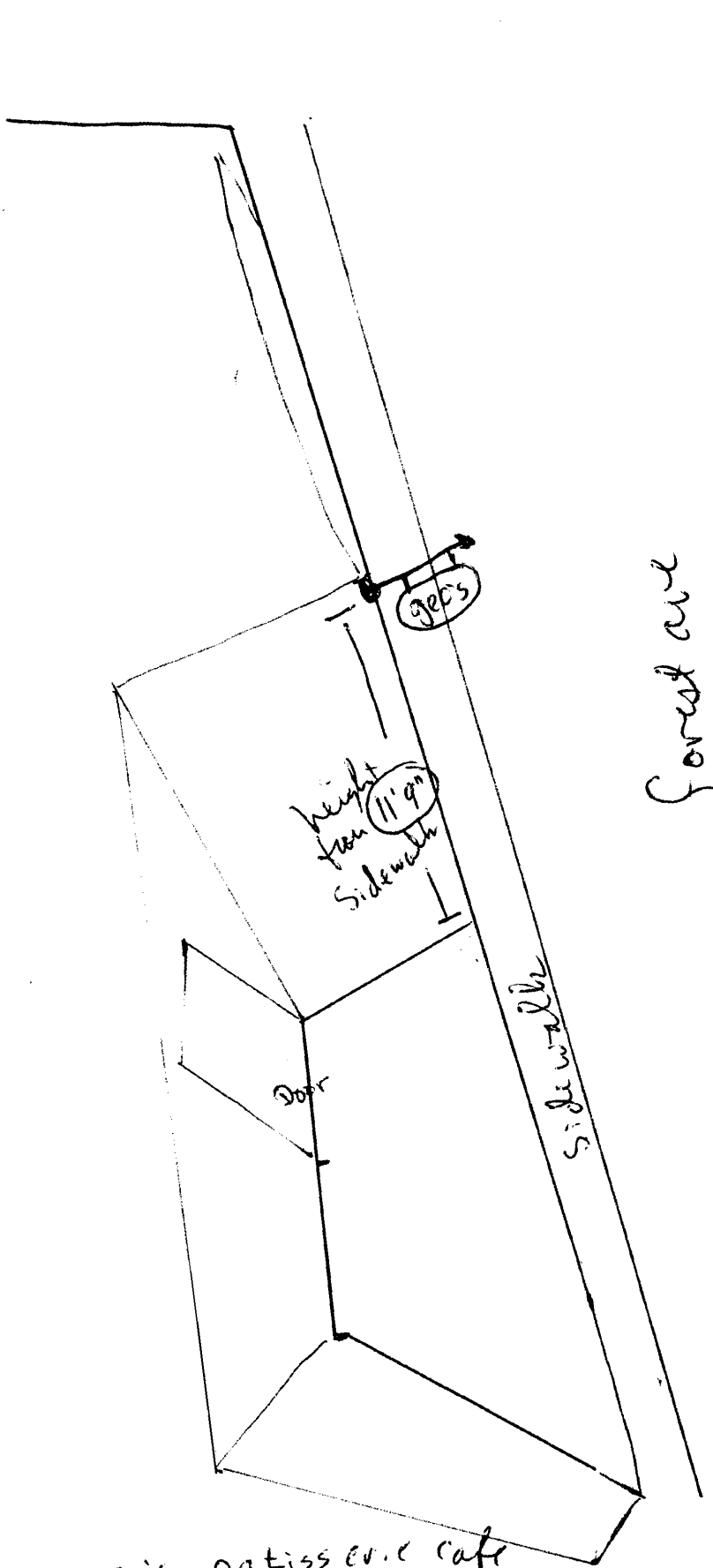
geo's patisserie cafe

27 Forest ave

699-2655



glo's patisserie cafe  
 27 Forest ave  
 699-2655



Forest ave

height from sidewalk  
11' 9"

gpc's patisserie cafe  
 27 Forest ave  
 609-2655



MAINE'S MOST COMPLETE SIGNAGE RESOURCE

84 COVE STREET PORTLAND, ME  
PHONE: 879-7700 FAX 879-1570

|                           |  |
|---------------------------|--|
| <b>INVOICE #</b><br>11529 | <b>INSTALL</b><br><input type="checkbox"/> YES           |
| <b>DESIGNER</b><br>JM     | <input type="checkbox"/> V<br><input type="checkbox"/> B |



| PROOFS SENT | DESIGN |
|-------------|--------|
| Email 10/10 | 30     |
| Email 10/11 |        |
|             |        |
|             |        |
|             |        |
|             |        |

**FONTS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE READ CAREFULLY**

This proof may reflect color shifts due to the color conversions from ink to paint and or vinyl. Also PMS colors will be approximated to the best of our ability. If we are supplied with files (if applicable) they will be used as is and the Signery will not be responsible for any faults in the design (300 dpi required).

**PLEASE REVIEW THE FOLLOWING CHECK LIST**

- Spelling
- Quantity
- Graphics / Logos
- Size
- Fonts / Typeface
- Single / Double Sided
- Colors
- Legibility

**BY SIGNING OFF ON THIS PROOF YOU ARE GIVING THE SIGNERY THE GO TO PRODUCE THIS WORK TO THE SPECIFICATIONS LISTED UNTIL THIS JOB IS APPROVED AND A DEPOSIT IS MADE, THIS PROOF IS THE PROPERTY OF THE SIGNERY**

**Fabrication Due:** \_\_\_\_\_ date

**Customer Due:** \_\_\_\_\_ date

**Intall By:** \_\_\_\_\_ date



(1) Painted 3/4" MDO (pms 123)  
18" x 24"  
w/ applied vinyl graphics (HP Periwinkle)  
DOUBLE SIDED

File Name Geo's Patisserie cut 11529.plt 2006-10

|   |   |
|---|---|
| (1) Decal<br>9" x 22"<br>HP White<br>MIRRORED | (1) Decal<br>7" x 17"<br>HP White<br>MIRRORED |
|---|---|

File Name Geo s Patisserie cut 11529.plt 2006-10

Approved by: \_\_\_\_\_

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

FILE FINDER: 2006-10





August 11, 2006

Inspections Division  
Planning and Development Department  
Portland City Hall  
389 Congress St.  
Portland, ME 04101

To Whom It May Concern:

Portland Stage Company owns the building at 21-31 Forest Avenue. George Gilfoil, dba geo's patisserie & café, has our permission to add an oven vent to the back of our building. We have a signed lease agreement for that space and have agreed to its conversion to a bakery.

If you need any additional information from us concerning this project, I may be reached during business hours at the address and phone number below, Ext. 102.

Sincerely,

A handwritten signature in black ink that reads "Camilla J. Barrantes". The signature is written in a cursive, flowing style.

Camilla J. Barrantes  
Managing Director

Maine Insurance Agency  
Gray Shopping Plaza  
PO Box 250  
Gray, Me 04039  
Phone (207)657-4938 Fax (207)657-4966

FAX TRANSMITTAL

Date 11/29/06 Fax 874-8716

To City of Portland

Attn LANIE DEBSON

From BOB HALEY

We are transmitting 2 pages, including this one

RE GEORGE WILHELM DIBLA CEO'S PATISSERIE MAFE.

Messages

to follow is cert of ins. naming  
the city of Portland as add ins  
as required for sign permit.

Thanks  
BOB

Sincerely \_\_\_\_\_

**ACORD**

**LIABILITY INSURANCE**

DATE (MM/DD/YY)

11/29/06

**PRODUCER**

Robert L Haley  
Maine Insurance Agency  
PO Box 250  
Gray, ME 04039

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 | North East Insurance |
| COMPANY B |                      |
| COMPANY C |                      |
| COMPANY D |                      |

**INSURED**

George Gilfoil III DBA  
Geo Patisserie Cafe  
27 Forest Ave  
Portland, ME 04101

**COVERAGE**

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 TR | TYPE OF INSURANCE  | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS                       |            |
|-------|--|---------------|----------------------------------|-----------------------------------|------------------------------|------------|
|       | <b>GENERAL LIABILITY</b><br><input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> OWNERS & CONTRACTORS PROT         | 77180007073   | 08/31/06                         | 08/31/07                          | GENERAL AGGREGATE            | \$ 2 Mill  |
|       |  |               |                                  |                                   | PRODUCTS - COMP/OP AGG       | \$ 2 Mill  |
|       |  |               |                                  |                                   | PERSONAL & ADV INJURY        | \$ 1 Mill  |
|       |  |               |                                  |                                   | EACH OCCURRENCE              | \$ 1 Mill  |
|       |  |               |                                  |                                   | FIRE DAMAGE (Any one fire)   | \$ 100,000 |
|       |  |               |                                  |                                   | MED EXP (Any one person)     | \$ 5000    |
|       | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS |               |                                  |                                   | COMBINED SINGLE LIMIT        | \$         |
|       |  |               |                                  |                                   | BODILY INJURY (Per person)   | \$         |
|       |  |               |                                  |                                   | BODILY INJURY (Per accident) | \$         |
|       |  |               |                                  |                                   | PROPERTY DAMAGE              | \$         |
|       | <b>GARAGE LIABILITY</b><br><input type="checkbox"/> ANY AUTO   |               |                                  |                                   | AUTO ONLY - EA ACCIDENT      | \$         |
|       |  |               |                                  |                                   | OTHER THAN AUTO ONLY:        |            |
|       |  |               |                                  |                                   | EACH ACCIDENT                | \$         |
|       |  |               |                                  |                                   | AGGREGATE                    | \$         |
|       | <b>EXCESS LIABILITY</b><br><input type="checkbox"/> UMBRELLA FORM<br><input type="checkbox"/> OTHER THAN UMBRELLA FORM   |               |                                  |                                   | EACH OCCURRENCE              | \$         |
|       |  |               |                                  |                                   | AGGREGATE                    | \$         |
|       | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL<br>OTHER   |               |                                  |                                   | WC STATUTORY LIMITS          | OTHER      |
|       |  |               |                                  |                                   | EL EACH ACCIDENT             | \$         |
|       |  |               |                                  |                                   | EL DISEASE - POLICY LIMIT    | \$         |
|       |  |               |                                  |                                   | EL DISEASE - EA EMPLOYEE     | \$         |

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**

The City of Portland, Me is an additional insured as required for sign permit

**ADDRESS**

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

*Robert L Haley*

IND 253

ACORD CORPORATION 1988