Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any,

sign_

Permit Number: 091299

PERMIT ISSUED

Attached

This is to certify that _____551 CONGRESS STREET LL

has permission to ____ Commercial "Nosh Bar" - insta

provided that the person or persons, fi

the construction, maintenance and use

AT _551 CONGRESS ST

this department.

VIEW - I 037 C016001

or common accepting this permit shall comply with all eand of the comply with all of the provisions of the Statutes of Mass f buildings and structures, and of the application on file in

Apply to Public Works for street line and grade if nature of work requires such information.

Not ation o spectio must b nd writte give permissi procured ng or p befo this bui hereof is lath or oth sed-in. 2 HO NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

12/1/05

OTHER REQUIRED APPROVALS

Fire Dept. Health Dept.

Appeal Board

Other

Department Name

PENALTY FOR REMOVING THIS CARD

Director - Building & Inspection Services

City of Portland, I 389 Congress Street,		U	* *		09-1299	Issue Date:		037 CO	16001	
Location of Construction:		Owner Name:		_=	er Address:		==	Phone:		
			SS STREET LLC	1	PO BOX 6799			i none.		
Business Name: Contractor Name				Contractor Address:				Phone		
		Yarmouth Sign	ns	P.O	. Box 346 Yarr	nouth		20784604	73	
Lessee/Buyer's Name		Phone:		Perm	it Type:				Zone:	
L <u></u>				Sig	ns - Permanent				B-3	
Past Use:		Proposed Use:		Pern	nit Fee:	Cost of Work	: CE	O District:	7	
Commercial "Nosh Ba	r"-res hwant		Nosh Bar" - install a		\$87.00		7.00	1		
		24" x 64" sign		FIRI	I Abbioved I			SPECTION:		
]			2 □	Senied	Use Group	: <i>U</i>	Type:	
								73/1	Type:Siz	
n th the table				4 .	////	ar	_		1	
Proposed Project Descripti Commercial "Nosh Ba		" v 64" sign		Gian			S:	-A.	<u>K</u>	
Commercial Nosh Ba	i - ilistali a 24	X 04 Sigii		Signa	ESTRIAN ACTIV	TITIES DIST	Signature:	D) //	=	
				1				1		
				Actio	on: Approve	d Appi	roved w/Coi	aditions	Denied	
				Sign	ature:		Da	ite:		
Permit Taken By:		plied For:			Zoning 2	Approva	1			
Ldobson	11/13	3/2009								
1. This permit applic			Special Zone or Revie	ews	Zoning	g Appeal	- }	Historic Pres	ervation	
Applicant(s) from Federal Rules.	Applicant(s) from meeting applicable State and Federal Rules.		☐ Shoreland		☐ Variance			☐ Not in District or Landman		
2. Building permits of septic or electrical		olumbing,	Wetland		Miscellaneous			☐ Does Not Require Review		
3. Building permits a within six (6) mor			Flood Zone		Conditional Use			Requires Review Approved Approved w/Conditions		
False information permit and stop al	may invalidate	a building	Subdivision	Interpretation						
permit and stop al	ITISSU	JED	Site Plan	☐ Approved						
	.c - 1 /989		Maj ☐ Minor ☐ MM		Denied			Denied		
DE	C - 1 :55.00			_						
			Date: 11/19/29 1/20	~	Date:		Date:	11/30/09	STI	
Cit	ty of Portlan	d	111112		- <u>L</u>					
I hereby certify that I at I have been authorized				he pro						
jurisdiction. In addition shall have the authority such permit.	n, if a permit for to enter all are	r work describe	d in the application is i uch permit at any reaso	ssued nable	, I certify that th	ne code office the provis	icial's autl	norized represented code(s) ap	esentative plicable to	
SIGNATURE OF APPLICA	ANT		ADDRES	S		DATE		РНО	NE	
RESPONSIBLE PERSON I	N CHARGE OF W	ORK, TITLE				DATE		PHO	NE	

City of Portland, M	laine - Building	g or Use Permit	•	Termit No.	Date Applied For.	CBL.
389 Congress Street,	04101 Tel: (207)	874-8703, Fax: (207) 874-8716	09-1299	11/13/2009	037 C016001
Location of Construction:	Own	er Name:		Owner Address:		Phone:
551 CONGRESS ST 551 CONGRESS STREET LL				PO BOX 6799		
Business Name: Contractor Name:				Contractor Address:		Phone
	Ya	mouth Signs		P.O. Box 346 Yarı	nouth	(207) 846-0473
Lessee/Buyer's Name	Pho	ne:	1	Permit Type:		
				Signs - Permanent	İ	
Proposed Use:			Propose	l Project Description:		
Commercial "Nosh Bar	" - install a 24" x 6	4" sign	Comm	ercial "Nosh Bar"	- install a 24" x 64"	sign
		-				_
			}			
Dept: Historic	Status: Appro	ved with Condition	s Reviewer	Scott Hanson	Approval D	Date: 11/30/2009
Note:	Status: Appre	ved with condition	s iteviewer.	Scott Hunson	Approvate	Ok to Issue:
 The two security ca limit the visual clut 		1 at the corner must	be painted out i	n the color of the s	tucco wall to reduce	their visibility and
2) No lighting for sign ordinance.	age is approved, ar	ny proposal for light	ting in the future	is subject to review	w under the historic	preservation
3) Middle support sho	wn on drawings is	to be eliminated. C	hris @ Yarmout	n Signs confirms th	nat it is not necessary	y.
Dept: Zoning	Status: Appro	ved with Condition	s Reviewer:	Ann Machado	Approval D	Date: 11/18/2009
Note:						Ok to Issue:
ANY exterior work District.	requires a separate	review and approv	al thru Historic	Preservation. This	property is located v	vithin an Historic
Dept: Building	Status: Appro	ved with Condition	s Reviewer:	Tammy Munson	Approval D	Date: 12/01/2009
Note:						Ok to Issue:
1) Signage Installation	to comply with Ch	nanters 31 & 32 of t	he IBC 2003 bu	lding code		

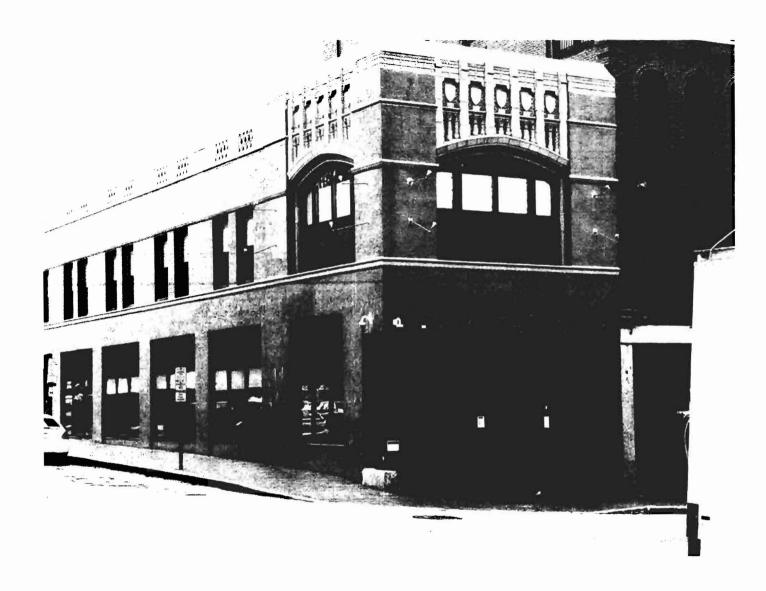
Comments:

11/30/2009-gg: received from historic on 11/30/09. /gg

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 Constru	iction: 551	Congre	ss street p	neltrox	4 me 04101
Tax Assessor's Chart, Block &		wner:			Telephone:
Chart# 037 Block# C	Lot# 0 6	Tom	MOULTON	ı	207-450-7100
Lessee/Buyer's Name (If Applic Jason Les Malheu Mor	RING	Yarmouth Cliris PO Box	ddress & telephone: Signs Bourgeois 346 Me. 04096	Per s.f. plus For H.D. si Fee: \$ Awning F	signage x \$2.00 \$30.00/\$65.00 gnage= Total See= cost of work
Who should we contact when the Tenant/allocated building spart Lot Frontage (feet) Current Specific use: If vacant, what was prior use: Proposed Use: Deli/E	ace frontage (feet): S Ar / LOUN	Length: <u>/8'-</u> ingle Tenant or I	O' Height 20' Multi Tenant Lot	07)807 -04 Nh-te	5
Information on proposed sign: Freestanding (e.g., pole) sign? Bldg. wall sign? (attached to be Proposed awning? Yes N Height of awning: Is there any communication, r If yes, total s.f. of panels w/co Information on existing and p Freestanding (e.g., pole) sign? Bldg. wall sign? (attached to be	Yes No loldg) Yes No loldg) Yes No lo Is awning Length of awninessage, trademark ommunications, mes reviously permitted Yes No	backlit? Yes ng: or symbol on it? sage, trademark of d sign(s): Dimer	No	REC	" ふんし り 01
Awning? Yes No No A site sketch and building sket Sketches and/or pictures of processing the sketches and statement of processing the sketches and sketches and sketches are sketches and sketches and sketches are sketches and sketches and sketches are sketches are sketches and sketches are sketches and sketches are sketches and sketches are sketches and sketches are sketches are sketches and sketches are	Sq. ft. area of a cch showing exactl coposed signage ar	where existing descriptions are also where existing build	unication: g and new signage is lo ling are also required.	cated must	be provided.
Please submit all of the ir Failure to do so may resu				ation Che	cklist.
In order to be sure the City fully additional information prior to th Building Inspections office, room	e issuance of a perm	nit. For further in			
I hereby certify that I am the Owner authorized by the owner to make this a permit for work described in this areas covered by this permit at any re- Signature of applicant:	application as his/her oplication is issued, I c	r authorized agent. ertify that the Code	I agree to conform to all ap Official's authorized repre	oplicable laws sentative shall his permit.	of this jurisdiction. In addition, it
	7.17	may not comme	nce ANY work until the		ned.
	- mulh-the	nt-stood	Porned	24"×1	4"= 10.67 4 04)





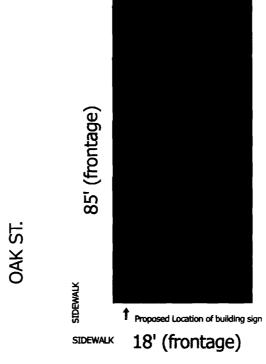
www.yarmouthsigns.com

27 Lafayette Yarmouth, ME. 04096 207.846.0473

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NOTES	CUSTOMER: NOSH	
	LOCATION:	
	DATE: 11/6/09	
DRAWING NO: 1 - REV 1	APPROVED:	



CONGRESS ST.



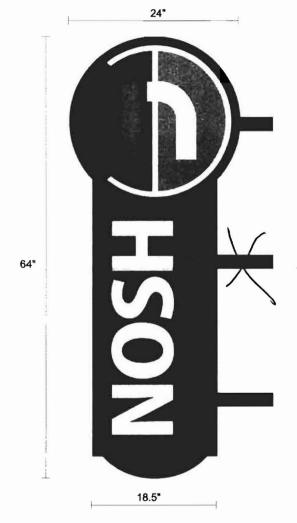
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NOTES	CUSTOMER: NOSH	_
	LOCATION:	
	DATE: 11/6/09	-
DRAWING NO: 1 - REV 1	APPROVED:	



NO MEDDLE STH

THES SUPPORT ELEMENATED. STH 3/8" Masonry fasteners reinforced with 2 part expoxy 1/4" Plate steel 2" Tubular steel frame laminated between 4" sign foam

2" Tubular steel frame laminated between 4" sign foam w/ dimensional letters



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	NOTES	CUSTOMER: NOSH
		LOCATION:
ı		DATE: 11/6/09
-	DRAWING NO: 1 - REV 1	APPROVED:



NO MEDDLE SUPPORT

13'-6"



YARMOUTH
ZNENS

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NOTES	CUSTOMER: NOSH
	LOCATION:
	DATE: 11/6/09
DRAWING NO: 1 - REV 1	APPROVED:

November 10, 2009

City of Portland 389 Congress Street Portland, ME 04101

RE: Signage/Awning Permit Application - 551 Congress Street, Portland, Maine

Map: 037, Block: C, Lot: 16

Dear Sir or Madam:

As the owner/manager of the above property, I hereby consent to Jason Loring and Matthew Moran attaching a sign to the above-referenced building on the corner of Congress and Oak Streets in Portland. The sign will be as described in the attached application.

This letter of acceptance is conditioned upon the sign being attached above the top of the camera arms at the corner of said location. All work to be performed by qualified and insured professionals.

If you have any questions, please feel free to call me at 207-450-7100.

551 CONGRESS STREET, LLC

Thomas W. Moulton, Manager

		_	RD, CERTIFIC	AX (207)829-6350				ED AS A MATTER OF II		1/11/2009 RMATION	
No: 27	rto: 5 U	ı İı S R	nsurance Agency loute 1	,		ONLY AND HOLDER, T	CONFERS NO R	IGHTS UPON THE CER TE DOES NOT AMEND, FORDED BY THE POLI	EX	ICATE TEND OR	
Cumberland Foreside, ME 04110				INSURERS A	FFORDING COV	ERAGE		NAIC#			
INSU	NSURED Nosh LLC				INSURER A: Um	ited States	Liability Ins.	\neg			
	1	PMI	181			INSURER B:					
	50 Market Street										
	;	So	Portland, ME 04106			INSURER D:			\Box		
-	/ED/					INSURER E:					
AI AI M	IY RE AY PE DLICIE	OLICI QUI RTA ES. A	S ES OF INSURANCE LISTED BELI REMENT, TERM OR CONDITION NIN, THE INSURANCE AFFORDED AGGREGATE LIMITS SHOWN MA	OF ANY CONTRACT OR OTH BY THE POLICIES DESCRIB	IER DO	OCUMENT WITH RI EREIN IS SUBJECT CLAIMS.	ESPECT TO WHICH TO ALL THE TERM	H THIS CERTIFICATE MAY	BE I	SSUED OR	
NSR LTR	ADD'L		TYPE OF INSURANCE	POLICY NUMBER		POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LiMit	rs		
			NERAL LIABILITY		TBD	11/11/2009	11/11/2010	EACH OCCURRENCE	\$	1,000,000	
		X	COMMERCIAL GENERAL LIABILITY		l			DAMAGE TO RENTED PREMISES (Fa occurence)	\$	300,000	
		_	CLAIMS MADE X OCCUR				l	MED EXP (Any one person)	\$	5,000	
A								PERSONAL & ADV INJURY	\$	1,000,000	
					ļ			GENERAL AGGREGATE	\$	1,000,000	
		GEI	N'L AGGREGATE LIMIT APPLIES PER: PRO-POLICY PRO-POLICY LOC					PRODUCTS - COMP/OP AGG	\$	1,000,000	
		AUT	TOMOBILE LIABILITY ANY AUTO					COMBINED SINGLE LIMIT (Ea accident)	\$		
			ALL OWNED AUTOS SCHEDULED AUTOS					BODILY INJURY (Per person)	\$		
			HIRED AUTOS NON-OWNED AUTOS					BODILY INJURY (Per accident)	\$		
								PROPERTY DAMAGE (Per accident)	\$		
		GAI	RAGE LIABILITY		ĺ			AUTO ONLY - EA ACCIDENT	\$		
			ANY AUTO					OTHER THAN AUTO ONLY: AGG	\$		
		EXC	CESS/UMBRELLA LIABILITY		l			EACH OCCURRENCE	\$		
			OCCUR CLAIMS MADE					AGGREGATE	\$		
			DEDUCTIBLE						\$		
			RETENTION \$					WC STATU- OTH-	\$		
			S COMPENSATION AND ERS' LIABILITY					TORY LIMITS ER	-		
			PRIETOR/PARTNER/EXECUTIVE MEMBER EXCLUDED?		- 1			E.L. EACH ACCIDENT	\$_		
	If yes	. des	cribe under				l.	E.L. DISEASE - EA EMPLOYER	t		
	OTH	_	PROVISIONS below					E.L. DISEASE - POLICY LIMIT	\$		
er	tifi	ica	FOPERATIONS/LOCATIONS/VEHIC te holder is named a ngress Street.	ies / exclusions added by EN is additional insur	PORSE	men!/SPECIAL PRO V ith respect :	visions s to the in s	sureds sign locat	æd		
CEI	RTIFI	CA1	TE HOLDER		-	CANCELLATI					
<u> </u>						SHOULD ANY EXPIRATION D	OF THE ABOVE DESC	RIBED POLICIES BE CANCELL SSUING INSURER WILL ENDEA THE CERTIFICATE HOLDER N.	VOR	TO MAIL	
City of Portland				BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.							
Portland, ME 04101				AUTHORIZED REPRESENTATIVE Michael Webb CIC							

ACORD 25 (2001/08)

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.