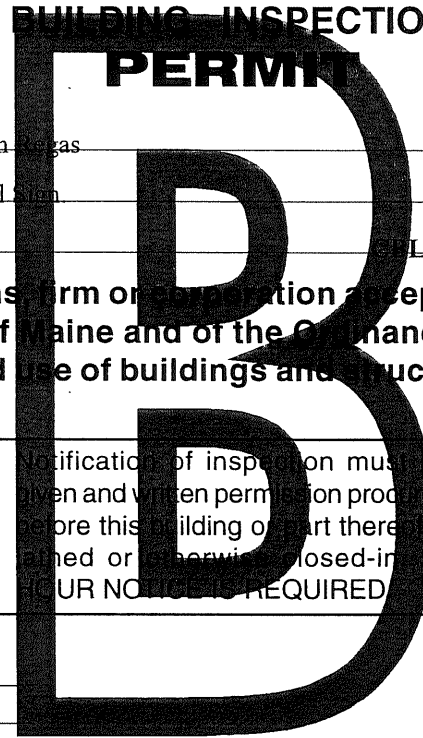


DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

**CITY OF PORTLAND**

**BUILDING INSPECTION**

**PERMIT**



Please Read Application And Notes, If Any, Attached

Permit Number: 080591

PERMIT ISSUED  
AUG 18 2008  
CITY OF PORTLAND

This is to certify that RING ISLAND LLC /John Gas

has permission to Install a 3'x3' Carbon Steel Sign

AT 545 CONGRESS ST

L 037 C01701B

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 opened or services closed-in. 4 HOUR NOTICE 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

*Thomas H. Mabley* 6/28/08  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

Scanned

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

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

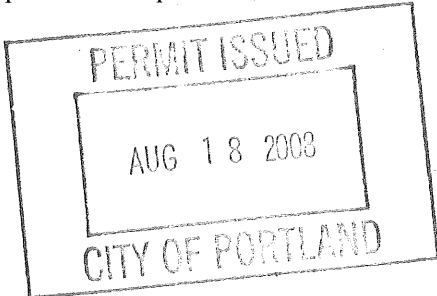
Permit No: 08-0591	Issue Date:	CBL: 037 C01701B
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Location of Construction: 545 CONGRESS ST	Owner Name: RING ISLAND LLC	Owner Address: PO BOX 6799	Phone: 207-883-3618
Business Name:	Contractor Name: John Regas	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial - Restaurant, Emilitsa Greek Cafe & Wine Bar	Proposed Use: Commercial - Restaurant, Emilitsa Greek Cafe & Wine Bar Install a <del>3x3</del> Carbon Steel Sign. 35" x 35"	Permit Fee: \$48.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Install a <del>3x3</del> Carbon Steel Sign. 35" x 35"		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>Commercial</i> Type: <i>Sign</i> IBC 2003 Signature: <i>Jm 6/18/08</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: <i>D. Andrews</i> Date: <i>6/9/08</i>		

Permit Taken By: lmd	Date Applied For: 05/27/2008	<b>Zoning Approval</b>
-------------------------	---------------------------------	------------------------

<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<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"/> Date: <i>OK 6/9/08 ABM</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 Date:	<b>Historic Preservation</b> <input checked="" type="checkbox"/> Not in District or Landmark <i>indiv: dual landmarks</i> <input type="checkbox"/> Does Not Require Review <input checked="" type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <i>see P&amp;D decision</i> <input type="checkbox"/> Denied Date: <i>6/9/08</i> <i>D. Andrews</i>
---	--	---	--



### 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> 08-0591	<b>Date Applied For:</b> 05/27/2008	<b>CBL:</b> 037 C01701B
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<b>Location of Construction:</b> 545 CONGRESS ST	<b>Owner Name:</b> RING ISLAND LLC	<b>Owner Address:</b> PO BOX 6799	<b>Phone:</b> 207-883-3618
<b>Business Name:</b>	<b>Contractor Name:</b> John Regas	<b>Contractor Address:</b> Portland	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	

<b>Proposed Use:</b> Commercial - Restaurant, Emilitsa Greek Cafe & Wine Bar Install a 35'x35" Carbon Steel Sign.	<b>Proposed Project Description:</b> Install a 35"x35" Carbon Steel Sign.
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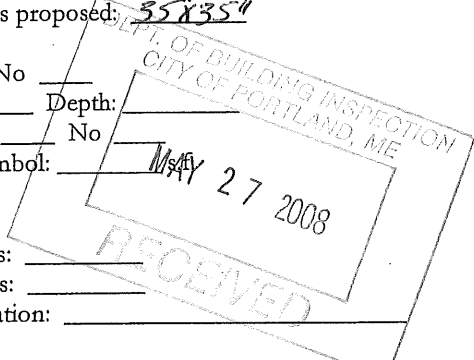
<b>Dept:</b> PAD	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Deborah Andrews	<b>Approval Date:</b>	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b> 1) * Plans do not indicate any provisions for sign lighting--if proposed, lighting specs must be reviewed and approved separately.				
<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 06/09/2008	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b>				
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tom Markley	<b>Approval Date:</b> 06/18/2008	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b> 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code. 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.				



# 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>545 Congress</u>		
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>037-C-017-01B</u>	Owner: <u>Kerry Anderson</u>	Telephone: <u>883-3618</u>
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone: <u>John Regas</u> <u>207-221-0245</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>John Regas</u> phone: <u>221-0245</u>		
Tenant/allocated building space frontage (feet): Length: <u>93' <del>19.5'</del></u> Height: <u>15.5'</u>		
Lot Frontage (feet) <u>19.5'</u> Single Tenant or Multi Tenant Lot _____		
Current Specific use: <u>RESTAURANT</u>		
If vacant, what was prior use: _____		
Proposed Use: _____		
<b>Information on proposed sign(s):</b>		
Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions proposed: _____ Height from grade: _____		
Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No ___ Dimensions proposed: <u>35" x 35"</u>		
Proposed awning? Yes ___ No <input checked="" type="checkbox"/> 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: _____		
<b>Information on existing and previously permitted sign(s):</b> <u>N/A</u>		
Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions: _____		
Bldg. wall sign? (attached to bldg) Yes ___ No ___ Dimensions: _____		
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](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: John Regas Date: 5/20/08

B-3 multi front  
2 x 19.5 = 39 sq ft  
This is not a permit; you may not commence ANY work until the permit is issued.  
proposed 35" x 35" = 1225 sq in = 8.5 sq ft (OK)



## Signage/Awning Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

- Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way.
- Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
- A sketch plan of lot indicating location of buildings, driveways and any abutting streets or rights of way, lengths of building frontages, street frontages and all existing setbacks. Please indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building façade dimensions for any signage attached to the building.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.
- Certificate of flammability required for awning or canopy.
- A UL# is required for lighted signs at the time of final inspection.
- Pre-application questionnaire completed and attached.
- Photos of existing signage
- Details for sign fastening, attachment or mounting in the ground.

Permit fee for signage or awning-with-signage: \$30.00 plus \$2.00 per square foot of sign.

Permit fee for awning-without-signage is based on cost of work:  
\$30.00 for the first \$1,000.00, \$9.00 per additional \$1,000.00 of cost.

Base application fee for any Historic District signage is \$65.00.

Details for fastening. John Reyer 221-0245

Existing hanger mounted on exterior fascia previously approved by town. with 02 chains attached to signs with locking carabiners and attached also to hanger.



# INSURANCE BINDER

CSR RC

DATE (MM/DD/YYYY)  
03/13/2008**THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM.**

AGENCY  Bragdon Insurance, Inc. 286 York St PO Box 468 York ME 03909-0468 Roswitha Coughlin PHONE (A/C, No, Ext): 207-363-3200 FAX (A/C, No): 207-363-1023 CODE: 775 SUB CODE: AGENCY CUSTOMER ID: GREEK-1 INSURED  Foxville Group, LLC PO Box 852 Portland ME 04104		COMPANY MiddleOak	BINDER # 8017
DATE	EFFECTIVE	TIME	EXPIRATION DATE
03/07/08	12:01	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	04/07/08 <input checked="" type="checkbox"/> 12:01 AM <input type="checkbox"/> NOON
THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY #: BINDER		DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (Including Location) Location: 1 Building: 1 Restaurant 547 Congress Street Restaurant Portland Maine	

**COVERAGES****LIMITS**

TYPE OF INSURANCE	COVERAGE/FORMS	DEDUCTIBLE	COINS %	AMOUNT
PROPERTY CAUSES OF LOSS <input type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input checked="" type="checkbox"/> SPEC	BUS PROPERTY IMPROV/BETTER BUS INCOME DELUXE ENHANC	500 500		100000 75000 100000
GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	RETRO DATE FOR CLAIMS MADE:	EACH OCCURRENCE		\$ 1000000
		DAMAGE TO RENTED PREMISES		\$ 300000
		MED EXP (Any one person)		\$ 10000
		PERSONAL & ADV INJURY		\$ 1000000
		GENERAL AGGREGATE		\$ 2000000
		PRODUCTS - COMP/OP AGG		\$ 2000000
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		\$
		BODILY INJURY (Per person)		\$
		BODILY INJURY (Per accident)		\$
		PROPERTY DAMAGE		\$
		MEDICAL PAYMENTS		\$
		PERSONAL INJURY PROT		\$
		UNINSURED MOTORIST		\$
				\$
AUTO PHYSICAL DAMAGE DEDUCTIBLE <input type="checkbox"/> COLLISION: _____ <input type="checkbox"/> OTHER THAN COL: _____	<input type="checkbox"/> ALL VEHICLES <input type="checkbox"/> SCHEDULED VEHICLES	ACTUAL CASH VALUE		
		STATED AMOUNT		\$
		OTHER		
GARAGE LIABILITY <input type="checkbox"/> ANY AUTO		AUTO ONLY - EA ACCIDENT		\$
		OTHER THAN AUTO ONLY:		
		EACH ACCIDENT		\$
		AGGREGATE		\$
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	RETRO DATE FOR CLAIMS MADE:	EACH OCCURRENCE		\$
		AGGREGATE		\$
		SELF-INSURED RETENTION		\$
WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY		WC STATUTORY LIMITS		
		E.L. EACH ACCIDENT		\$
		E.L. DISEASE - EA EMPLOYEE		\$
		E.L. DISEASE - POLICY LIMIT		\$
SPECIAL CONDITIONS/ OTHER COVERAGES		FEES		\$
		TAXES		\$
		ESTIMATED TOTAL PREMIUM		\$

**NAME & ADDRESS**

Town of Portland  389 Congress Street Portland ME 04101	MORTGAGEE	<input checked="" type="checkbox"/> ADDITIONAL INSURED
	LOSS PAYEE	
	LOAN #	
	AUTHORIZED REPRESENTATIVE  Roswitha Coughlin	

**Ring Island LLC**  
P.O. Box 6799  
Scarborough, ME 04070  
207-883-3618

May 21, 2008

Emilitsa Greek Café & Wine Bar  
547 Congress St  
Portland, Me 04101

To whom it may concern:

I have reviewed the description and image of the proposed sign for Emilitsa Greek Café & Wine Bar which will be located at 547 Congress St Portland ME. I give my approval for the 35 inch high, by 35 inch wide, by 1/8 inch deep carbon steel sign. The steel sign will have a large letter "E" made of stainless steel welded to the center. Please see attached copies of the sign design.

Sincerely,

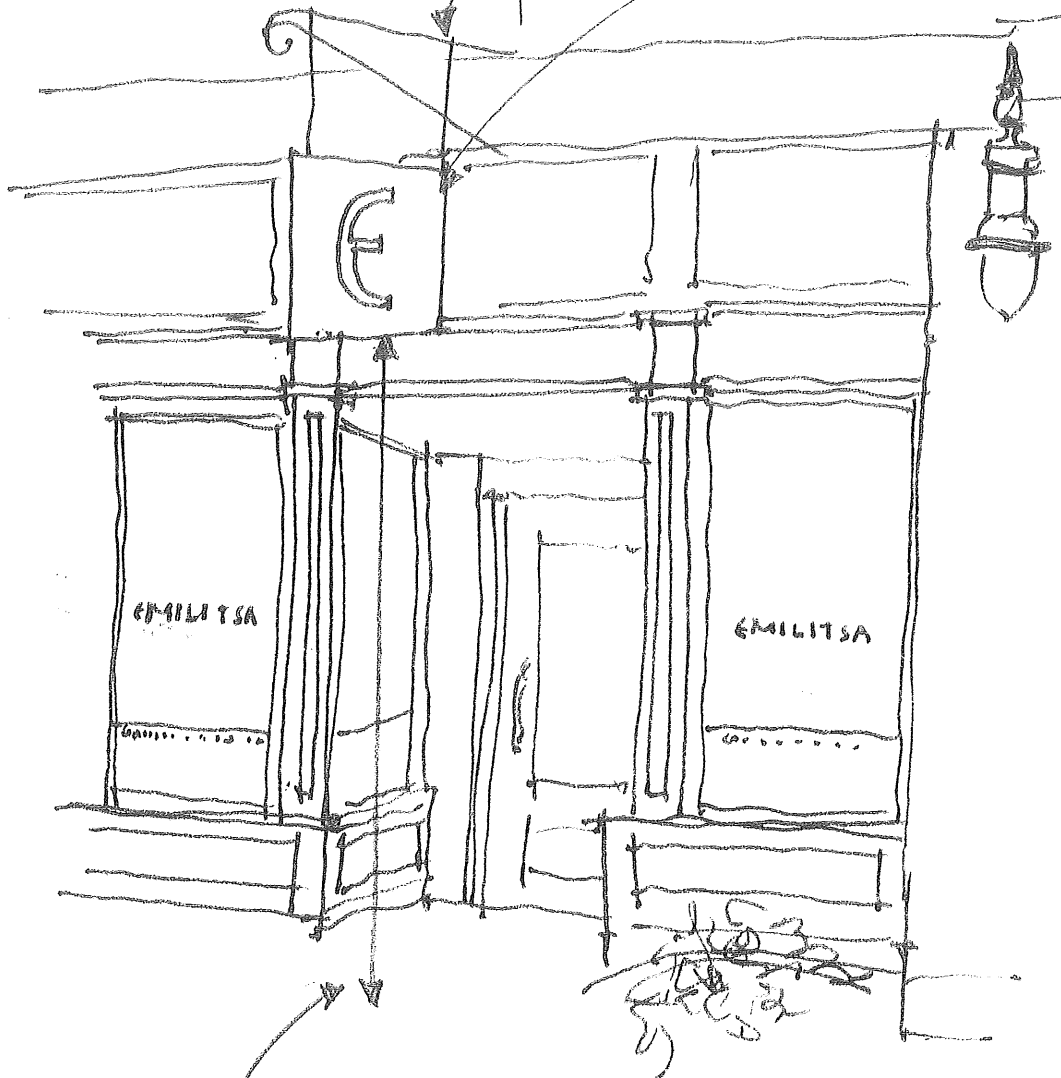
Jackie Robinson



EXISTING HANGER (Approved)

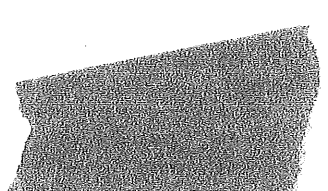
65"

35" x 35"



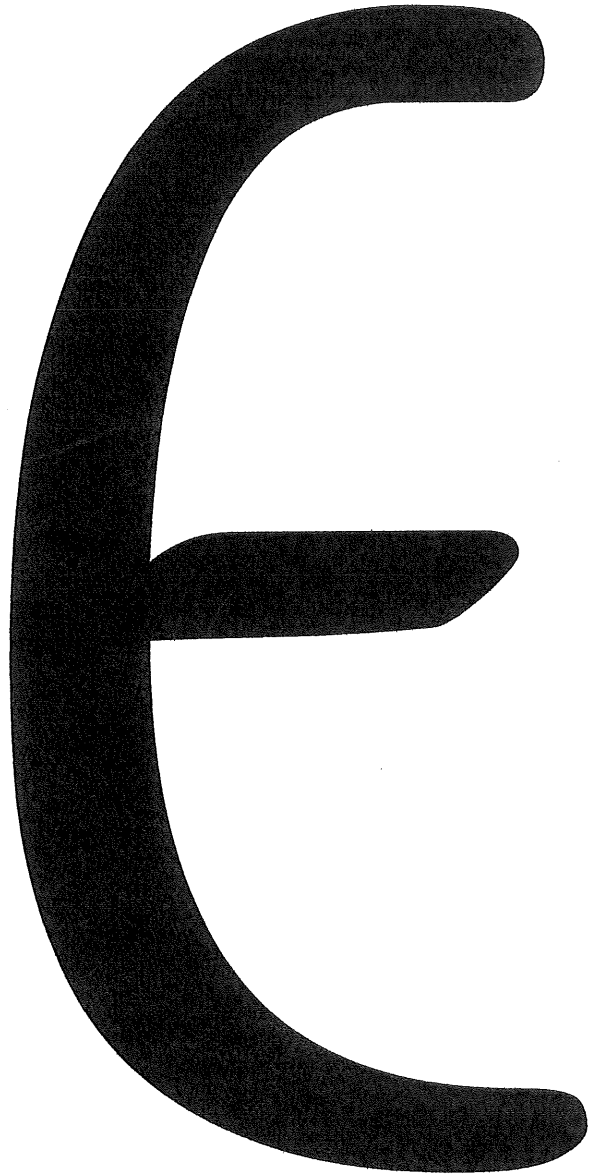
Bottom of sign  
to sidewalk level  
is 10'6"

Emilitsa GREEK CAFE & WINE  
BA  
547 congress St.

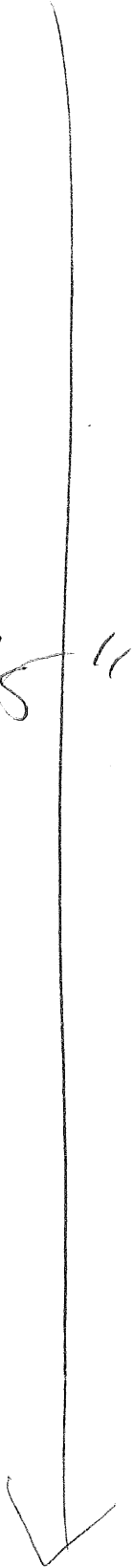




Top  
35"



35"





**CITY OF PORTLAND, MAINE**  
Department of Building Inspections

**Original Receipt**

\_\_\_\_\_ 5-11 20 01 \_\_\_\_\_

Received from \_\_\_\_\_

Location of Work \_\_\_\_\_

Cost of Construction \$ \_\_\_\_\_ Building Fee: \_\_\_\_\_

Permit Fee \$ 130 \_\_\_\_\_ Site Fee: \_\_\_\_\_

Certificate of Occupancy Fee: \_\_\_\_\_

**Total:** 130 \_\_\_\_\_

Building (IL) \_\_\_ Plumbing (I5) \_\_\_ Electrical (I2) \_\_\_ Site Plan (U2) \_\_\_

Other 201 site survey

CBL: 201-17

Check #: 2189 **Total Collected \$** 130

**No work is to be started until permit issued.**

If permit is Withdrawn or Denied, amount of the Refund is based on \$20.00 or 20% of the fee, (whichever is greater)

In order to receive a refund, you MUST present the Original Receipt.

Taken by: \_\_\_\_\_

WHITE - Applicant's Copy  
YELLOW - Office Copy  
PINK - Permit Copy

**CITY OF PORTLAND**  
**DEPARTMENT OF PLANNING & URBAN DEVELOPMENT**

389 Congress Street  
 Portland, Maine 04101

**INVOICE FOR PERMIT FEES**

<b>Application No:</b> 9-0318	<b>Applicant:</b> RING ISLAND LLC
<b>Project Name:</b> Outdoor Dining 4 Tables and 12 Ch	<b>Location:</b> 545 CONGRESS ST
<b>CBL:</b> 037 C01701B	<b>Development Type:</b>
<b>Invoice Date:</b> 04/14/2009	

<b>Previous Balance</b>	-	<b>Payment Received</b>	+	<b>Current Fees</b>	-	<b>Current Payment</b>	=	<b>Total Due</b>	<b>Payment Due Date</b>
\$0.00		\$0.00		\$260.00		\$80.00		\$180.00	On Receipt

**First Billing**

**Previous Balance** **\$0.00**

<b>Fee Description</b>	<b>Qty</b>	<b>Fee/Deposit Charge</b>
Outside Seating Sidewalk	90	\$180.00
Outside Seating	1	\$80.00
		<u>\$260.00</u>
	<b>Total Current Fees:</b>	+ <b>\$260.00</b>
	<b>Total Current Payments:</b>	- <b>\$80.00</b>
	<b>Amount Due Now:</b>	<b>\$180.00</b>

MAY 11 2009

-----  
 Detach and remit with payment

**Bill to:** RING ISLAND LLC  
 PO BOX 6799  
 SCARBOROUGH, ME 04070

CBL 037 C01701B  
**Application No:** 9-0318  
**Invoice Date:** 04/14/2009  
**Invoice No:** 34242  
**Total Amt Due:** \$180.00  
**Payment Amount:**

Make checks payable to the *City of Portland*, ATTN: Inspections, 3rd Floor, 389 Congress Street, Portland, ME 04101.

**BUILDING PERMIT INSPECTION PROCEDURES**

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

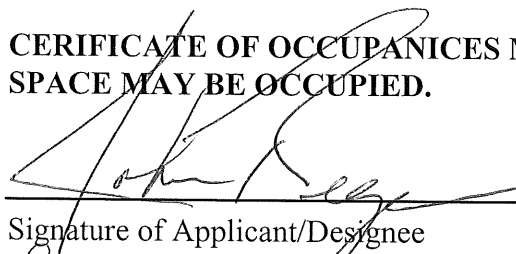
A Pre-construction Meeting will take place upon receipt of your building permit.

  X   The outdoor seating may NOT be used until the permit is issued and posted on site.

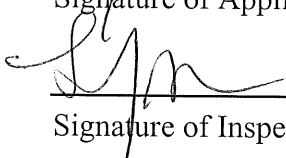
Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

  
\_\_\_\_\_  
Signature of Applicant/Designee

  t    
Date

  
\_\_\_\_\_  
Signature of Inspections Official

  5-11-09    
Date

