

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

**PERMIT ISSUED**

Permit No: 01-0565 Issue Date: MAY 31 2001 CBL: 037 D023001

Location of Construction: 15 Casco St	Owner Name: October Corporation	Owner Address: One Canal Plaza Portland ME 04101	Phone: 207-772-6544
Business Name: Fleet Bank	Contractor Name: Burr Signs	Contractor Address: 10 Buttonwood St. So. Portland	Phone: 2077991183
Lessee/Buyer's Name: Fleet Bank	Phone: n/a	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial / Bank	Proposed Use: Same: Signage Permit: <i>reface</i> Replace Pylon Sign, Replace 2 wall Signs and Replace 5 Directional Signs. Call October Corp at 772-6544 when ready.	Permit Fee:	Cost of Work: \$5,000.00	CEO District: 2
Proposed Project Description: <del>Replace</del> Pylon Sign, Replace 2 Wall Signs and Replace 5 Directional Signs. <i>to reface only</i>		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>Signage</i> Type: <i>Signage</i> <b>PERMIT ISSUED WITH REQUIREMENTS 1989</b> Signature: <i>[Signature]</i>	
		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: cjh	Date Applied For: 05/18/2001	<b>Zoning Approval</b>	
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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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <i>OK per changes</i> <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>5/30/01</i>	Zoning Appeal <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: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>9</i>
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**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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT \_\_\_\_\_ ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_ PHONE \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ DATE \_\_\_\_\_ PHONE \_\_\_\_\_

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 15 Casco ST ZONE: B-3

OWNER: OCTOBER CORP

APPLICANT: Fleet Bank - Carol Bugbee Agent

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

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT?  YES NO

MULTI-TENANT LOT? YES NO

FREESTANDING SIGN? (ex. Pole Sign)  YES NO

DIMENSIONS 4x8 HEIGHT 16'-E01

MORE THAN ONE SIGN? YES  NO

DIMENSIONS \_\_\_\_\_ HEIGHT \_\_\_\_\_

SIGN ATTACHED TO BLDG.?  YES NO

DIMENSIONS E07-3'x6'2"

MORE THAN ONE SIGN?  YES NO

DIMENSIONS E13-1'x4'-Face replacement

AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK in existing sign box,  
IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT?

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

E01-3'x6'2"  
E07-3'2 1/2'x6'1 1/2"  
E13-1'x4' } TO Be removed and  
Be replaced with  
NEW SIGNS

\*\*\* TENANT BLDG. FRONTAGE (IN FEET): \_\_\_\_\_

\*\*\* REQUIRED INFORMATION

AREA FOR COMPUTATION

YOU SHALL PROVIDE:

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE  
EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES  
AND/OR PICTURES OF PROPOSED ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: Carol M Bugbee Agent DATE: 5-9-2001

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

# SIGNAGE APPLICATION

01-0565

THIS IS NOT A PERMIT

CONSTRUCTION CANNOT NOT COMMENCE UNTIL THE PERMIT IS ISSUED

In the interest of processing your application in the quickest possible manner, please complete the information below for a Building or Use Permit.

NOTE\*\*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>15 Casco ST</u>		
Total Square Footage of Proposed Structure <u>E01=324 E07=18.54 E13=44</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Number Chart# <u>037</u> Block# <u>D</u> Lot# <u>023</u>	Owner: <u>OCTOBER CORP, 1 CANAL PLAZA PO BOX 426 PORTLAND, ME</u>	Telephone #: <u>772-6544</u>
Lessee/Buyer's Name (If Applicable) <u>Fleet Bank</u>	Owner's/Purchaser/Lessee Address: <u>100 Federal ST. BOSTON, MA 02106</u>	Cost Of Work: Fee: <u>\$5000 S</u>
Current use: <u>Bank</u> Proposed use: <u>Bank</u>		
Project description: <u>Replace pylon sign - E01</u> <u>UL # 960 110-003</u> <u>Replace 2 wall signs - E07, E13</u> <u>Replace 3 directional signs - E4, E5, E6</u>		
Contractor's Name, Address & Telephone <u>BURR SIGNS</u> <u>10 BUTTWOOD ST., S. PORTLAND, ME 04106</u>		Rec'd By:

Please check off the following indicating that you have included the below items to expedite the process of this sign application:

- "Certification of Liability" listing the City additionally insured
- Letter of permission from the owner

### A sketch plan indicating the following:

- Drawing of the property showing all dimensions of the lot
- Location of all buildings and property setbacks from all buildings
- Driveways and abutting streets showing street frontage and any right of ways
- Indicate on drawing the dimensions of all buildings on the lot
- Define in footage the frontage of your business front
- Indicate on drawing of existing signage and dimensions of each sign
- Indicate on drawing all proposed signage and dimension of each sign
- Sign area height and setback of each existing and proposed freestanding sign

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**THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED**

- Certification of flammability required for awning/canopy at time of application
- ✓ UL # required for lighted signs at the time of Final Inspection. Failure to provide this information will invalidate the Sign Permit.

The Provisions of Section 3102.0 of the City's Building Code "The BOCA National Building Code 1999 edition" shall govern the construction, alteration, repair and maintenance of outdoor signs together with the associated appurtenant and auxiliary devices in respect to structural and fire safety. In accordance to section 3102.4.4 of BOCA construction documents and owners consent is all follows; "Before any permit is issued for the erection of a sign, Construction Documents shall be filed with the code official showing the dimensions, materials and required details of construction, including loads, stresses and anchorage. The applications shall be accompanied by the written contract of the owner or lessees of the premises upon which the sign is to erected. **NO PERMIT CAN OR WILL BE ISSUED UNLESS THIS INFORMATION IS SUBMITTED AND APPROVED BY THE INSPECTIONS OFFICE.**

**ELECTRICAL SIGNAGE PERMITS/RESPONSIBILITIES**

All sign companies or any persons engaged in the installation, interchange or maintenance of signage in the City of Portland must have the Electrician or Electrical Contractor who provided power to the sign(s) or associated equipment apply for an electrical permit in the Inspections Office.

It is the responsibility of your company to contact your sub-contractor or he owner to inform them of this policy. Whether your company does the final connections, which requires a valid Maine Electricians License or your sub contractor provides this service; permits and inspections shall be required.

Failure to comply with this procedure may result in the denial of sign permits by this office for your company or its representation to install or interchange any future signage in the City of Portland.

If the property is located in a historic district, a separate sketch is required indicating the design, dimensions, construction materials and source of illumination if any. A photograph of the building façade should be submitted, showing where each sign is to be installed.

**Certification**

*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: <i>Carl M. Berger Agent</i>	Date: <i>5/9/2001</i>
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Sign Permit Fee: \$30.00 plus \$0.20 per square foot.

*A building permit is also required for any awning based on cost of work-\$30.00 for the first \$1,000.00 and \$6.00 for each additional \$1,000.00*

*E01 - 32 sq ft = \$30 + 6.40 = \$36.40  
E07 - 18.5 sq ft = \$30 + 3.70 = \$33.70  
E13 - 4 sq ft = \$30 + 0.80 = \$30.80  
\$100.90*

BUILDING PERMIT REPORT

DATE: 19 MAY 2001 ADDRESS: 15 Casco Street CBL: 037-D-023

REASON FOR PERMIT: Signage

BUILDING OWNER: October Corp.

PERMIT APPLICANT: CONTRACTOR Burr Signs.

USE GROUP: CONSTRUCTION TYPE: CONSTRUCTION COST: \$15,000.00 PERMIT FEES: 1/8280

The City's Adopted Building Code (The BOCA National Building Code/1999 with City Amendments)
The City's Adopted Mechanical Code (The BOCA National Mechanical Code/1993)

CONDITION(S) OF APPROVAL

This permit is being issued with the understanding that the following conditions shall be met: \*1, \*37.

- 1. 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.
3. Foundation drain shall be placed around the perimeter of a foundation that consists of gravel or crushed stone containing not more than 10 percent material that passes through a No. 4 sieve.
4. Foundations anchors shall be a minimum of 1/2" in diameter, 7" into the foundation wall, minimum of 12" from corners of foundation and a maximum 6' O.C. between bolts.
5. Waterproofing and dampproofing shall be done in accordance with Section 1813.0 of the building code.
6. Precaution must be taken to protect concrete and masonry.
7. It is strongly recommended that a registered land surveyor check all foundation forms before concrete is placed.
8. 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.
9. All chimneys and vents shall be installed and maintained as per Chapter 12 of the City's Mechanical Code.
10. Sound transmission control in residential building shall be done in accordance with Chapter 12, Section 1214.0 of the City's Building Code.
11. 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.
12. Headroom in habitable space is a minimum of 7'6".
13. Stair construction in Use Group R-3 & R-4 is a minimum of 10" tread and 7 1/2" maximum rise.
14. The minimum headroom in all parts of a stairway shall not be less than 80 inches.
15. The Minimum required width of a corridor shall be determined by the most restrictive of the criteria under section 1011.3 but not less than 36".
16. 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.
17. Each apartment shall have access to two (2) separate, remote and approved means of egress.
18. All vertical openings shall be enclosed with construction having a fire rating of at least one (1) hour, including fire doors with self closure's.
19. The boiler shall be protected by enclosing with (1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment.

5/18

20. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the City's Building Code Chapter 9, Section 920.3.2 (BOCA National Building Code/1999), 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
21. 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. (Section 921.0)
22. The Fire Alarm System shall be installed and maintained to NFPA #72 Standard.
23. The Sprinkler System shall be installed and maintained to NFPA #13 Standard.
24. All exit signs, lights and means of egress lighting shall be done in accordance with Chapter 10 Section & Subsections 1023.0 & 1024.0 of the City's Building Code. (The BOCA National Building Code/1999)
25. 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".
26. 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 the Division of Inspection Services.
27. Ventilation and access shall meet the requirements of Chapter 12 Sections 1210.0 and 1211.0 of the City's Building Code. (Crawl spaces & attics).
28. All electrical, plumbing and HVAC permits must be obtained by Master Licensed holders of their trade. **No closing in of walls until all electrical (min. 72 hours notice) and plumbing inspections have been done.**
29. All requirements must be met before a final Certificate of Occupancy is issued.
30. 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).
31. Ventilation of spaces within a building shall be done in accordance with the City's Mechanical code (The BOCA National Mechanical Code/1993). (Chapter M-16)
32. Please read and implement the attached Land Use Zoning report requirements.
33. Boring, cutting and notching shall be done in accordance with Sections 2305.3, 2305.3.1, 2305.4.4 and 2305.5.1 of the City's Building Code.
34. Bridging shall comply with Section 2305.16.
35. Glass and glazing shall meet the requirements of Chapter 24 of the building code. (Safety Glazing Section 2406.0)
36. All flashing shall comply with Section 1406.3.10.
- \*37. All signage shall be done in accordance with Section 3102.0 signs of the City's Building Code, (The BOCA National Building Code/1999).

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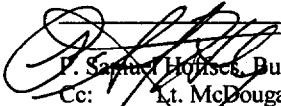
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 P. Samuel Hoffner, Building Inspector  
 Cc: Lt. McDougall, PFD  
 Marge Schmuckal, Zoning Administrator  
 Michael Nugent, Inspection Service Manager

PSH 10/1/00

**\*\*This permit is herewith issued, on the basis of plans submitted and conditions placed on these plans, any deviations shall require a separate approval.**

**\*\*\*THIS PERMIT HAS BEEN ISSUED WITH THE UNDERSTANDING THAT ALL THE CONDITIONS OF THE APPROVAL SHALL BE COMPLETED. THEREFORE, BEFORE THE WORK IS COMPLETED A REVISED PLAN OR STATEMENT FROM THE PERMIT HOLDER SHALL BE SUBMITTED TO THIS OFFICE SHOWING OR EXPLAINING THAT THE CONDITIONS HAVE BEEN MET. IF THIS REQUIREMENT IS NOT RECEIVED YOUR CERTIFICATE OF OCCUPANCY SHALL BE WITHHELD. ( You Shall Call for Inspections )**

**\*\*\*\*ALL PLANS THAT REQUIRE A PROFESSIONAL DESIGNER'S SEAL, (AS PER SECTION 114.0 OF THE BUILDING CODE) SHALL ALSO BE PRESENTED TO THIS DIVISION ON AUTO CAD LT. 2000, DXF FORMAT OR EQUIVALENT.**

**\*\*\*\*\*CERTIFICATE OF OCCUPANCY FEE \$50.00**

Signage Facility Name: In Town Plz.  
 Recorimend. Company: Fleet

Facility Type: Remote

Address: 15 Casco St.  
 City, State, Zip: Portland, ME

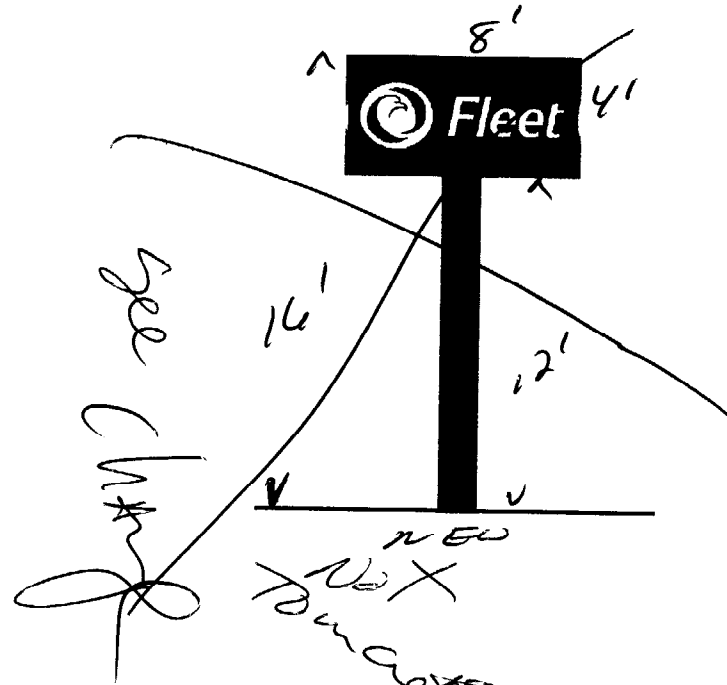
Facility No: 1010

Site ID: 230513



*OLD*

Proposed Signage



Item Number: E-01  
 Sign Type: Pylon  
 Height: 36  
 Width: 73 }  $2628 \div 144 = 18.25$  #  
 Sq Footage: 18,250  
 Depth: 10"  
 Overall Height: 174" - 14.5'  
 Illumination: Internally illuminated  
 # of Faces: Double Faced  
 Text (side a): FLEET BANK  
 Text (side b): FLEET BANK

	Product:	Side A:	Side B:
	<u>P-3</u>	<u>Logo Fleet</u>	<u>Logo Fleet</u>
	Action: <u>RR</u>		
	Height: <u>4'</u>		
	Letter Height: <u>N/A</u>		
	Width: <u>8'</u>		
	Depth: <u>5.125 to 16</u>		
	Overall Height: <u>16'</u>		
	Sq. Footage: <u>32</u>		
	Illumination: <u>Internally illumina</u>		
	# of Faces: <u>Double Faced</u>		
	Comments: <u>VIF Required</u>		

**Signage**

Facility Name: In Town Plz.

Facility Type: Remote

Address: 15 Casco St.

Facility No: 1010

Recommend. Company: Fleet

City, State, Zip: Portland, ME

Site ID: 230513

Existing Signage



*OLD*

Proposed Signage



*NEW*

Item Number: E-07  
 Sign Type: Box/Wall  
 Height: 36.5  
 Width: 73.5  
 Sq Footage: #Error 18.5  
 Depth: 8  
 Overall Height: 96  
 Illumination: Internally illuminated  
 # of Faces: Single Faced  
 Text (side a): FLEET BANK  
 Text (side b): N/A

*OL*

Product:	<u>FS-3</u>	<u>Side A:</u>	<u>Side B:</u>
Action:	<u>RR</u>	<u>Logo Fleet</u>	
Height:	<u>36</u>		
Letter Height:	<u>N/A</u>		
Width:	<u>74</u>		
Depth:	<u>N/A</u>		
Overall Height:	<u>N/A</u>		
Sq. Footage:	<u>18.5</u>		
Illumination:	<u>Internally illumina</u>		
# of Faces:	<u>Single Faced</u>		
Comments	<u>VIF Required</u>		



**Signage**

Facility Name: In Town Plz.

Facility Type: Remote

Address: 15 Casco St.

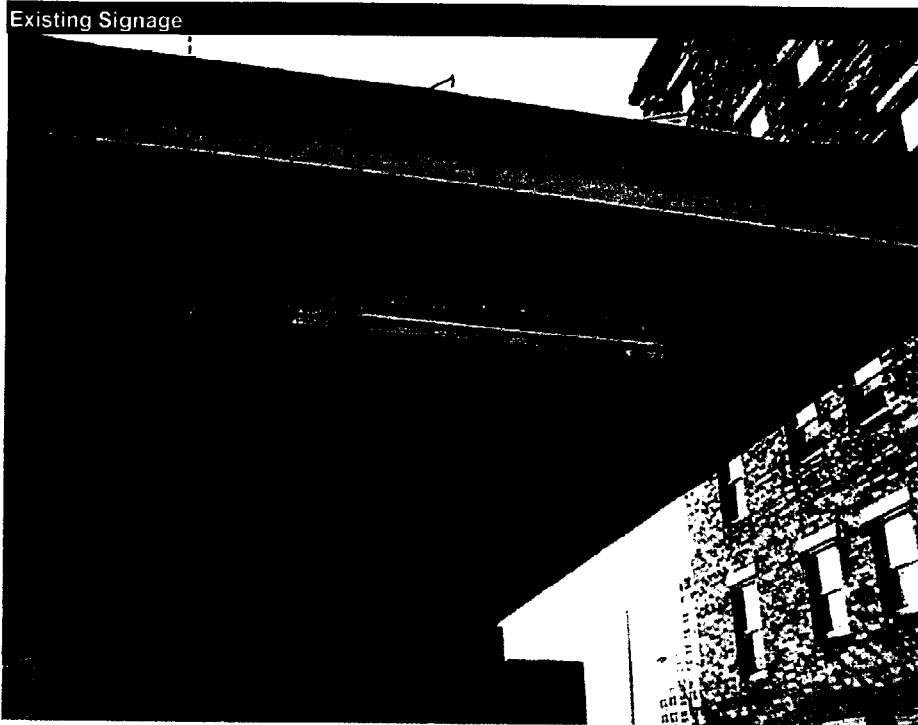
Facility No: 1010

**Recommend.**

Company: Fleet

City, State, Zip: Portland, ME

Site ID: 230513



*OLD*



*NEW - Face Replacement*

Item Number: E-13  
 Sign Type: Box/Wall  
 Height: 12  
 Width: 48  
 Sq Footage: 4,000  
 Depth: 6  
 Overall Height: 118  
 Illumination: Internally illuminated  
 # of Faces: Single Faced  
 Text (side a): (Logo) Fleet 24  
 Text (side b): N/A

		<u>Side A:</u>	<u>Side B:</u>
Product:	<u>Custom Reface</u>	<u>Logo Fleet</u>	
Action:	<u>RF</u>	<del>AZ</del>	
Height:	<u>12</u>		
Letter Height:	<u>N/A</u>		
Width:	<u>48</u>		
Depth:	<u>N/A</u>		
Overall Height:	<u>118</u>		
Sq. Footage:	<u>4</u>		
Illumination:	<u>Internally illumina</u>		
# of Faces:	<u>Single Faced</u>		
Comments	<u>VIF Required</u>		

*copy only  
 sheet!*

**ACORD™ CERTIFICATE OF LIABILITY INSURANCE** DATE (MM/DD/YYYY)  
4/11/01

<b>PRODUCER</b> Riedman Corporation 45 East Avenue Rochester, NY 14604 716-232-4424 Fax 716-232-7802	<b>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.</b>
<b>INSURERS AFFORDING COVERAGE</b>	
<b>INSURED</b> FleetBoston Financial Corporation & Any Fleet Subsidiary Hereinafter Described 50 Kennedy Plaza, RI DE 03611 D Providence, RI 02903	INSURER A: <b>Vigilant Insurance Co.</b>
	INSURER B: <b>Federal Insurance Co.</b>
	INSURER C:
	INSURER D:
	INSURER E:

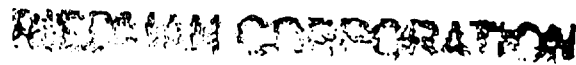
**COVERAGES**  
 THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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.

FORM	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	73180444	01/01/01	01/01/02	EACH OCCURRENCE \$1,000,000
					FIRE DAMAGE (Any one fire) \$1,000,000
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" 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	73183478	01/01/01	01/01/02	COMBINED SINGLE LIMIT (Per accident) \$1,000,000
					BODILY INJURY (Per person) \$
	<b>SAUSAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ EA ACC \$ OTHER THAN AUTO ONLY - AGG \$
	<b>EXCESS LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYER'S LIABILITY</b>				<input type="checkbox"/> WC STATUS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

**OTHER**  
 The following individuals and/or entities have general liability additional insured status under policy #73180444 when so required of named insured: Any lessor of premises or equipment leased to a named insured, any state or political subdivision or any other party in interest when required by written contract to be provided additional insured status. Such individuals and/or entities are additional insureds only to the extent as required by written contract between such additional insured and a named insured

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**  
 Fleet National Bank - City of Portland as additional insured

<b>CERTIFICATE HOLDER</b>  City of Portland c/o Jones Lang LaSalle - Project Management Group 1025 Main St., MA DE Waltham, MA. 02451	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 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:
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Certificate of Insurance

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON YOU THE CERTIFICATE HOLDER. THIS CERTIFICATE IS NOT AN INSURANCE POLICY AND DOES NOT AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE POLICIES LISTED BELOW.

This is to Certify that

FleetBoston Financial Corporation and its Subsidiaries c/o Fleet Corporate Risk Management 50 Kennedy Plaza, RI DE 03611D Providence, RI 02903-2393

Name and address of Insured.



is, at the issue date of this certificate, insured by the Company under the policy(ies) listed below. The insurance afforded by the listed policy(ies) is subject to all their terms, exclusions and conditions and is not altered by any requirement, term or condition of any contract or other document with respect to which this certificate may be issued.

Table with columns: TYPE OF POLICY, EXP. DATE (CONTINUOUS, EXTENDED, POLICY TERM), POLICY NUMBER, LIMIT OF LIABILITY (COVERAGE AFFORDED UNDER WC LAW OF THE FOLLOWING STATES). Rows include WORKERS COMPENSATION, GENERAL LIABILITY, and AUTOMOBILE LIABILITY.

ADDITIONAL COMMENTS: \*WA POLICY INCLUDES DEDUCTIBLE ENDORSEMENT WITH \$250,000 DEDUCTIBLE PER OCCURRENCE/CLAIMS (DISEASE) WITH THE PROVISION THAT LIBERTY MUTUAL WILL (MAY) ADVANCE PAYMENT OF THE DEDUCTIBLE AMOUNT. COVERAGE FOR THE STATE OF NY FOR THE FOLLOWING ENTITIES ONLY: Fleet National Bank FLEETBOSTON ROBERTSON STEPHENS, INC. / BANKBOSTON INTERNATIONAL / BANCOSTON FINANCIAL COMPANY

\* If the certificate expiration date is continuous or extended term, you will be notified if coverage is terminated or reduced before the certificate expiration date. SPECIAL NOTICE-OMHO. ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD. IMPORTANT NOTICE TO FLORIDA POLICYHOLDERS AND CERTIFICATE HOLDERS: IN THE EVENT YOU HAVE ANY QUESTIONS OR NEED INFORMATION ABOUT THIS CERTIFICATE FOR ANY REASON, PLEASE CONTACT YOUR LOCAL SALES PRODUCER WHOSE NAME AND TELEPHONE NUMBER APPEARS IN THE LOWER RIGHT HAND CORNER OF THIS CERTIFICATE. THE APPROPRIATE LOCAL SALES OFFICE MAILING ADDRESS MAY ALSO BE OBTAINED BY CALLING THIS NUMBER. NOTICE OF CANCELLATION: (NOT APPLICABLE UNLESS A NUMBER OF DAYS IS ENTERED BELOW) BEFORE THE STATED EXPIRATION DATE THE COMPANY WILL NOT CANCEL OR REDUCE THE INSURANCE AFFORDED UNDER THE ABOVE POLICIES UNTIL AT LEAST 30 DAYS

CITY OF PORTLAND c/o Jones Lang LaSalle - Prjt. Mgmt Group 1025 Main St., MA DE 13601A Waltham, MA. 02451

102 A-1 Estelle Cohen AUTHORIZED REPRESENTATIVE Weston, MA (781) 891-8900 4/11/01 OFFICE PHONE NUMBER DATE ISSUED

AUTHORIZATION AND CONSENT FORM

Landlord/Owner: OCTOBER CORP.

Leased Premises: 15 Casco St., Portland, ME

Landlord Contact: Amy B. Booth

Print Name: Amy Booth

Telephone Number: 207.871.1290

RE: Fleet Signage Conversion

To Whom It May Concern:

I am a duly authorized representative of OCTOBER CORP., the Landlord/Owner at the referenced lease premises.

In my capacity as Landlord's official representative, I do hereby authorize Fleet to perform all work associated with the re-branding program as referenced in the enclosed letter dated March 1, 2008. I further authorize Fleet or its representative to obtain in Landlord's name, and all permits for the sign conversion hereby consented to by Landlord. Costs associated with permit acquisition and signage replacement will be at Fleet's expense.

Landlord/Owner:

By: Paul M. Wilson

Dated: 3/9/01

CB

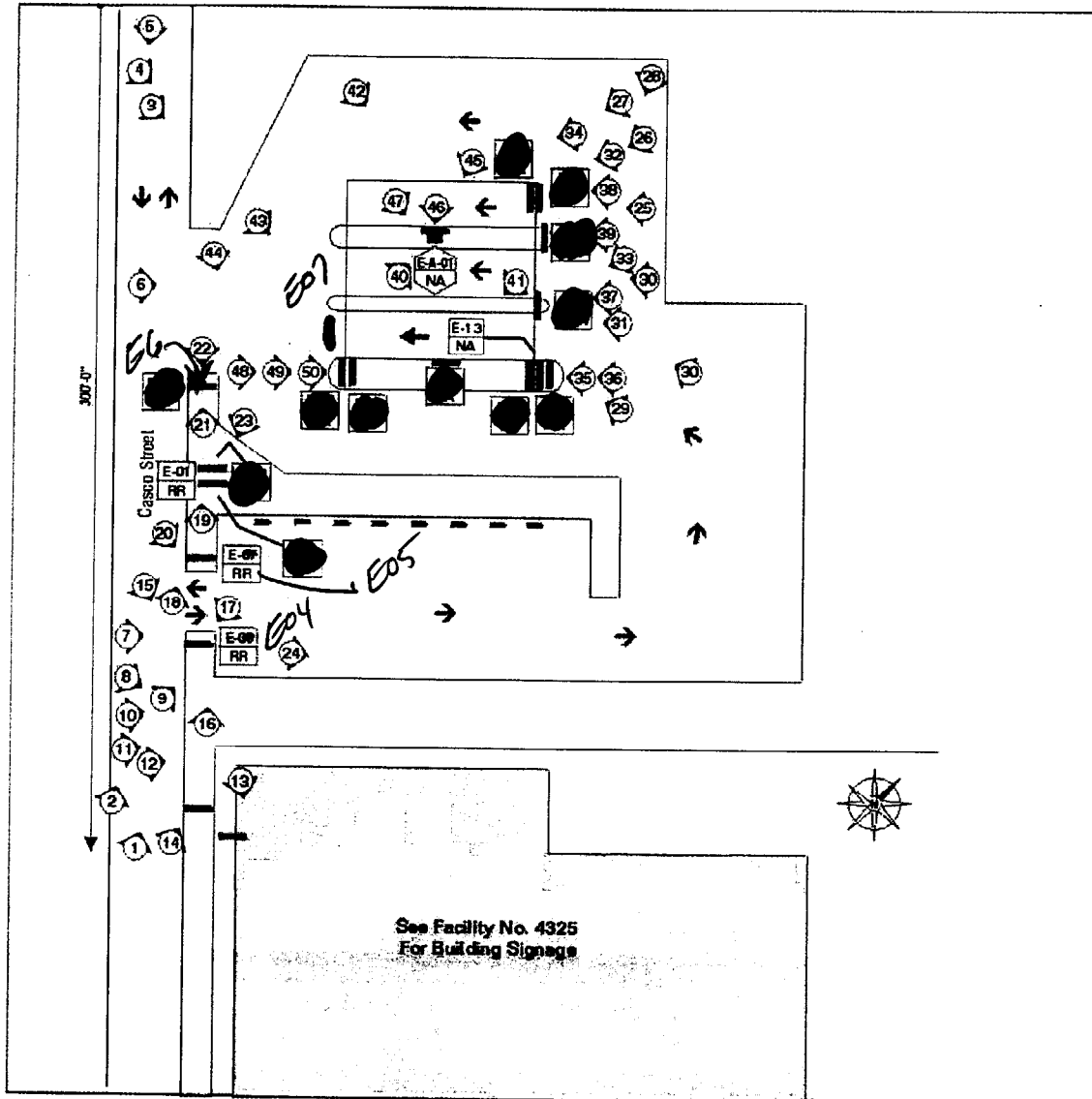
# Site Plan

Facility Name: In Town Plz.  
 Company: Fleet

Facility Type: Remote

Address: 15 Casco St.  
 City, State, Zip: Portland, ME

Facility No: 1010  
 Site ID: 230513



### Sign Recommendation Summary:

No.	Existing	Action	Recommend
E-01	Pylon	RR	P-3
<del>E-02</del>	<del>Box/Wall</del>	<del>RR</del>	<del>DPD-2</del>
E-04	Directional	RR	DPD-2
E-05	Directional	RR	DPD-2
E-06	Directional	RR	DPD-2
E-07	Box/Wall	RR	FS-3
<del>E-08</del>	<del>Box/Wall</del>	<del>RR</del>	<del>FS-3</del>
<del>E-09</del>	<del>Box/Wall</del>	<del>RR</del>	<del>None</del>
<del>E-10</del>	<del>Box/Wall</del>	<del>RR</del>	<del>None</del>
<del>E-11</del>	<del>Box/Wall</del>	<del>NEW</del>	<del>None</del>
<del>E-12</del>	<del>Box/Wall</del>	<del>RR</del>	<del>None</del>
E-13	Box/Wall	RF	Custom Reface

### ATM Recommendation Summary:

No.	Existing	Action	Recommend.
EA-01	None	N/A	NIS

### Misc Recommendation Summary:

No.	Existing	Action	Recommend.
M-01	Night Depository	NA	NIS

**Symbol Key:**

Signage Designator	Photo Keys	Signage Symbol
ATM Designator	ATM Symbol	

**Action Codes:**

RO Remove Only	RB Refurbish	NA No Action
RF Reface	RR Remove and Replace	RS Remove -Save Sign
RP Repaint	NEW New Product	RSL Remove - Save Log

"r" designates reface  
 "a" designates white backgrounds for directional sign types and alternative logo format for letter sets

**Signage**

Facility Name: In Town Plz.

Facility Type: Remote

Address: 15 Casco St.

Facility No: 1010

**Recommend.**

Company: Fleet

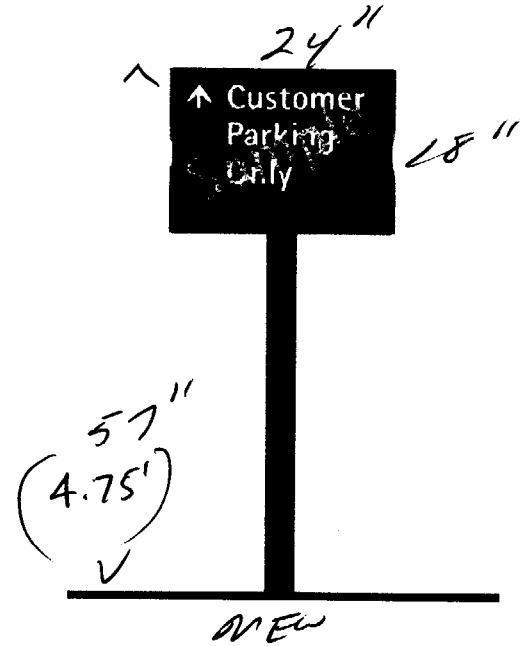
City, State, Zip: Portland, ME

Site ID: 230513



*OLD*

**Proposed Signage**



Item Number: E-05

Sign Type: Directional

Height: 25.5

Width: 25.5

Sq Footage: ~~8.5~~ 4.2

Depth: 8.5

Overall Height: 60

Illumination: Internally Illuminated

# of Faces: Double Faced

Text (side a): Enter <

Text (side b): Enter >

Product:	<u>DPD-2</u>	<u>Side A:</u>	<u>Side B:</u>
Action:	<u>RR</u>	<u>→ Entrance</u>	<u>← Entrance</u>
Height:	<u>18</u>	<u>Drive-Thru</u>	<u>Drive-Thru</u>
Letter Height:	<u>N/A</u>	<u>ATM entrance</u>	<u>ATM Entrance</u>
Width:	<u>24</u>		
Depth:	<u>2 to 4</u>		
Overall Height:	<u>57</u> <i>with less in height</i>		
Sq. Footage:	<u>3</u>		
Illumination:	<u>Internally illumina</u>		
# of Faces:	<u>Double Faced</u>		
Comments	<u>VIF Required</u>		

**Signage**

Facility Name: In Town Plz.

Facility Type: Remote

Address: 15 Casco St.

Facility No: 1010

**Recommend.**

Company: Fleet

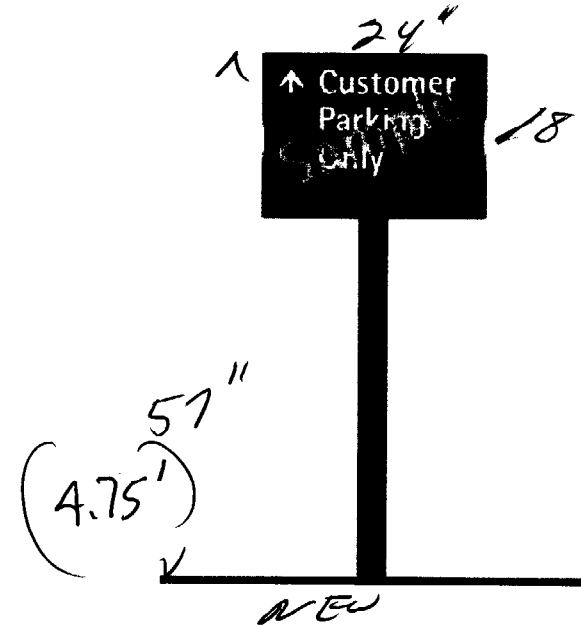
City, State, Zip: Portland, ME

Site ID: 230513



*OLD*

**Proposed Signage**



*New is 1'  
less in height  
& less in sq. ft.*

Item Number:	<u>E-04</u>
Sign Type:	<u>Directional</u>
Height:	<u>37.5</u>
Width:	<u>37.5</u>
Sq Footage:	<del>140</del> <u>9.2</u>
Depth:	<u>8.5</u>
Overall Height:	<u>72" = 6'</u>
Illumination:	<u>Internally illuminated</u>
# of Faces:	<u>Double Faced</u>
Text (side a):	<u>Drive-Up Teller (Arrow Left)</u>
Text (side b):	<u>Drive-Up Teller (Arrow Right)</u>

Product:	<u>DPD-2</u>	<u>Side A: ATM</u>	<u>Side B:</u>
Action:	<u>RR</u>	<u>→ Drive Thru Teller</u>	<u>← Drive Thru Teller ATM</u>
Height:	<u>18</u>		
Letter Height:	<u>N/A</u>		
Width:	<u>24</u>		
Depth:	<u>2 to 4</u>		
Overall Height:	<u>57 - 4.75' - less in height</u>		
Sq. Footage:	<u>3</u>		
Illumination:	<u>Internally illumina</u>		
# of Faces:	<u>Double Faced</u>		
Comments:	<u>VIF Required</u>		

**Signage**

Facility Name: In Town Plz.

Facility Type: Remote

Address: 15 Casco St.

Facility No: 1010

Recommend. Company: Fleet

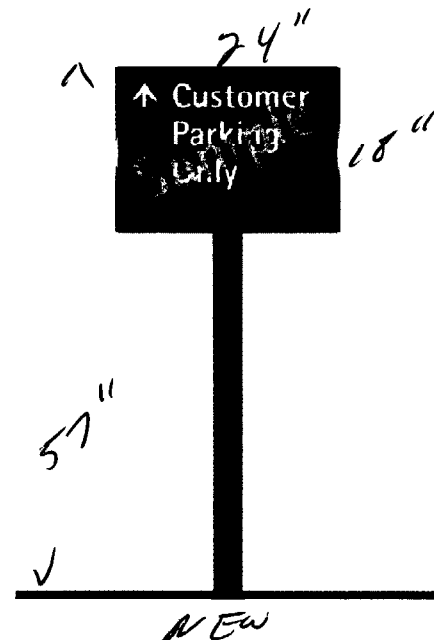
City, State, Zip: Portland, ME

Site ID: 230513



*OLD*

**Proposed Signage**



Item Number: E-06

Sign Type: Directional

Height: 25.5

Width: 25.5

Sq Footage: ~~3~~ 4.2

Depth: 0.5

Overall Height: 60

Illumination: Internally Illuminated

# of Faces: Double Faced

Text (side a): Exit Only

Text (side b): Exit Only

*New, less in size*

	<u>Side A:</u>	<u>Side B:</u>
Product:	<u>DPD-2</u>	<u>Exit</u>
Action:	<u>RR</u>	<u>Exit</u>
Height:	<u>18</u>	
Letter Height:	<u>N/A</u>	
Width:	<u>24</u>	
Depth:	<u>2 to 4</u>	
Overall Height:	<u>57</u>	
Sq. Footage:	<u>3</u>	
Illumination:	<u>Internally illumina</u>	
# of Faces:	<u>Double Faced</u>	
Comments	<u>VIF Required</u>	

*3# - less in size*

*with less height*



*JOJOINE ADAMS*

To: Marge Schmuckal, Portland, ME  
From: Carol Bugbee  
Subject: Fleet Bank Sign Permits  
Date: 5/09/2001

Marge: Enclosed are two applications for sign replacements at 15 Casco St. and 1058 Brighton Ave. in Portland. We are basically replacing the existing signs with the new program signs. We are also replacing the directional signs. I have enclosed photos, old and new, with the specifications. I have calculated the fees based on your application but have not included the directionals, as I don't believe they are addressed in the code. Please review and call with any questions. If approved please forward the permits to me at my address on the enclosed card.

Thank you so much for your help on this project.

Carol Bugbee  
Agent- Fleet Bank



Enclosed please find 2 checks for Fleet

Bank sign permits,

\$40.90 <sup>15</sup> - Casco ST

\$48.80 1058 Brighton Ave

Thank you for your help and once  
approved please mail permits to  
me at the address on my card.

Carol Bugbee

Agent Fleet Bank

Transmittal

Tagr Corp.

Tagr Corp.  
PO Box 441  
Sandwich, Ma.  
02563

To Marge Schmuckal  
Company Portland me Fax Number \_\_\_\_\_  
From Carol Bugbee-Fleet Tel. 1-508-888-3933  
Number of Pages ( Including this page) 3 Date 5-30-2001  
Subject Signs - 15 Casco St.

FAX 508-888-3955

TEL 508-888-3933

CELL 508-776-4511

**To: Marge Schmuckal, Portland, ME**  
**From: Carol Bugbee**  
**Subject: Fleet Bank Sign Permits, 15 Casco St.**

**Marge: Attached is the drawing reflecting the reface of the existing pylon sign at 15 Casco St. We will be repainting the sign box green, replacing the pole cover (green), and replacing the faces in the existing sign box. The sign dimensions will remain the same. Please amend my application to reflect this and I truly appreciate you help on this project.**

**Carol Bugbee**  
**Agent- Fleet Bank**

**Signage**

Facility Name: In Town Plz.

Facility Type: Remote

Address: 15 Casco St.

Facility No: 1010

Recommend. Company: Fleet

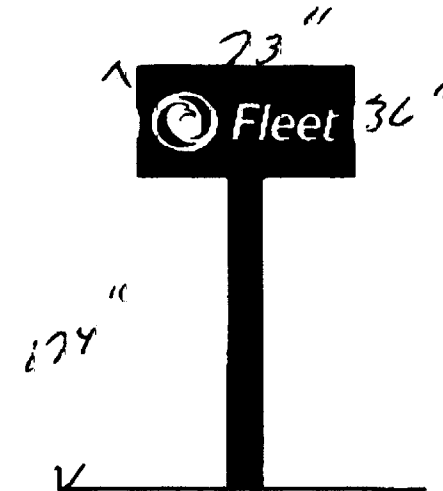
City, State, Zip: Portland, ME

Site ID: 230513

Existing Signage



Proposed Signage



ReFace existing sign - Replace pole over and Repair Fleet Green.

Item Number: E-01  
 Sign Type: Pylon  
 Height: 36  
 Width: 73  
 Sq Footage: 18,250  
 Depth: 10"  
 Overall Height: 174"  
 Illumination: Internally illuminated  
 # of Faces: Double Faced  
 Text (side a): FLEET BANK  
 Text (side b): FLEET BANK

	Side A:	Side B:
Product:	<u>ReFace</u> Logo Fleet	Logo Fleet
Action:	<u>RR</u>	
Height:	<u>36"</u>	
Letter Height:	<u>N/A</u>	
Width:	<u>73"</u>	
Depth:	<u>10"</u>	
Overall Height:	<u>174"</u>	
Sq. Footage:	<u>18,250</u>	
Illumination:	<u>Internally illumina</u>	
# of Faces:	<u>Double Faced</u>	
Comments	<u>VIF Required</u>	