

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

Location of Construction: 487 Congress St		Owner: Maine Historical Society		Phone:		<b>Permit No: 971337</b> <b>PERMIT ISSUED</b> <b>DEC 30 1997</b> <b>CITY OF PORTLAND</b> <b>Zone: B-3 CBL: 037-P-014</b>	
Owner Address:		Lessee/Buyer's Name:		Phone:			<b>Permit Issued:</b> <b>INSPECTION:</b> Use Group: Type: Signature:
Contractor Name: Taylor Signa		Address: 142 High St Rm 501 Portland, ME 04101		Phone: 775-3269			
Past Use: Office		Proposed Use: Same		<b>COST OF WORK:</b> \$ <b>PERMIT FEE:</b> \$ 53.00			
Proposed Project Description: Erect Signage 140 Sq Yr		<b>FIRE DEPT.</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature:		<b>INSPECTION:</b> Use Group: Type: Signature:		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: Date:	
Permit Taken By: Mary Grosik		Date Applied For: 16 December 1997					

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..

**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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: Tony Taylor ADDRESS: DATE: 16 December 1997 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**Zoning Appeal**

☐ Variance  
☐ Miscellaneous  
☐ Conditional Use  
☐ Interpretation  
☐ Approved  
☐ Denied

**Historic Preservation**

☐ Not in District or Landmark  
☐ Does Not Require Review  
☐ Requires Review

**Action:**

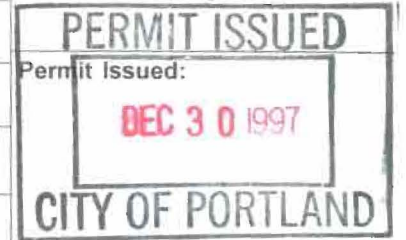
☐ Approved  
☐ Approved with Conditions  
☐ Denied

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

**CEO DISTRICT** 2

**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8704

Location of Construction: 487 Congress St		Owner: Maine Historical Society		Phone:		Permit No: <b>971337</b>	
Owner Address:		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Taylor Signs		Address: 142 High St Rm 501		Ptld, ME 04101		775-3269	
Past Use: Office		Proposed Use: Same <i>Maine History Library for Public use</i>		COST OF WORK: \$		PERMIT FEE: \$ 53.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: <i>U.</i> Use Group: Type: <i>00C496</i>	
Proposed Project Description:  Erect Signage 140 Sq Ft				Signature:		Signature: <i>[Signature]</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>			
Permit Taken By: Mary Gresik		Date Applied For: 16 December 1997		Signature:		Date:	



Zone: *B-3* CBL: 037-F-014

Zoning Approval: *OK 12/20/97*

**Special Zone or Reviews:**

☐ Shoreland *use previously*

☐ Wetland *Approved*

☐ Flood Zone

☐ Subdivision

☐ Site Plan maj ☐ minor ☐ mm ☐

**Zoning Appeal**

☐ Variance

☐ Miscellaneous

☐ Conditional Use

☐ Interpretation

☐ Approved

☐ Denied

**Historic Preservation**

☐ Not in District or Landmark

☐ Does Not Require Review

☒ Requires Review

**Action:**

☒ Approved

☐ Approved with Conditions

☐ Denied

Date: *12/16/97*

*D.A.*

**CEO DISTRICT** 2

*A Rose*

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*Anthony R. Taylor*  
SIGNATURE OF APPLICANT Tony Taylor ADDRESS: DATE: 16 December 1997 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector



**ACORD. CERTIFICATE OF INSURANCE**

ISSUE DATE (MM/DD/YY)

12/09/97

## PRODUCER

Morse, Payson & Noyes  
100 Middle Street Plaza  
Portland, ME 04101

BAA

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  
LETTER

A Commercial Union

COMPANY  
LETTER

B

COMPANY  
LETTER

C

COMPANY  
LETTER

D

COMPANY  
LETTER

E

## INSURED

Maine Historical Society and  
MHS, Inc.  
487 Congress St.  
Portland, Me 04101

## COVERAGES

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 LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	AMR173050	7/15/97	7/15/98	GENERAL AGGREGATE \$2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG. \$2,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR.				PERSONAL & ADV. INJURY \$1,000,000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT.				EACH OCCURRENCE \$1,000,000
					FIRE DAMAGE (Any one fire) \$ 100,000
					MED EXPENSE (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per Person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per Accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	<input type="checkbox"/> HIRED AUTOS				
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY LIMITS
					EACH ACCIDENT \$
					DISEASE-POLICY LIMIT \$
					DISEASE-EACH EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

As required

CERTIFICATE HOLDER 00001

City of Portland  
Inspections & Permits  
389 Congress Street  
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

Barbara A. Alborano

**QUITCLAIM DEED**  
**(With Covenant)**

KNOW ALL PERSONS BY THESE PRESENTS, that Sun Life Assurance Company of Canada (U.S.), a Delaware corporation, with a place of business at One Sun Life Executive Park, Wellesley Hills, Massachusetts, in consideration of One Dollar (\$1.00) and other valuable consideration paid by MHS, Inc. a Maine corporation, whose mailing address is 485 Congress Street, Portland, Maine, 04101, the receipt whereof is hereby acknowledged, does hereby **REMISE, RELEASE, BARGAIN, SELL AND CONVEY** and forever **QUIT-CLAIM** unto the said MHS, Inc., its successors and assigns forever, all of its right, title and interest, if any, in and to the following described real estate:

Certain real property situated at 489 Congress Street, Portland, Maine, and being more particularly described in Exhibit A hereto.

TO HAVE AND TO HOLD, the same, together with all the privileges and appurtenances thereunto belonging, to the said MHS, Inc., its successors and assigns forever, to their use and behoof forever.

AND Sun Life Assurance Company of Canada (U.S.) does **COVENANT** with the said MHS, Inc., its successors and assigns forever, that Sun Life Assurance Company of Canada (U.S.) will **WARRANT AND FOREVER DEFEND** the premises to the said MHS, Inc., its successors and assigns forever, against the lawful claims and demands of all persons claiming by, through or under Sun Life Assurance Company of Canada (U.S.).

IN WITNESS WHEREOF, said Sun Life Assurance Company of Canada (U.S.) has caused this instrument to be executed and delivered in its name by William Q. Rathrop and John G. Mulvihill, its *Assistant Vice President and Property Investments Officer respectively* hereunto duly authorized, this 17th day of December, in the year of our Lord one thousand nine hundred and ninety-two.

WITNESS:

Leslie W. Barr  
Leslie W. Barr

SUN LIFE ASSURANCE COMPANY  
OF CANADA (U.S.)

By: William Q. Rathrop  
Its Assistance Vice President  
William Q. Rathrop

John G. Mulvihill  
John G. Mulvihill,  
Property Investments Officer

Never Submitted

SIGNAGE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 487 Congress St ZONE: B-3

OWNER: \_\_\_\_\_

APPLICANT: \_\_\_\_\_

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

SINGLE TENANT LOT? YES \_\_\_\_\_ NO \_\_\_\_\_

MULTI TENANT LOT? YES \_\_\_\_\_ NO \_\_\_\_\_

FREESTANDING SIGN? YES \_\_\_\_\_ NO \_\_\_\_\_ DIMENSIONS \_\_\_\_\_  
(ex. pole sign..)

MORE THAN ONE SIGN? YES \_\_\_\_\_ NO \_\_\_\_\_ DIMENSIONS \_\_\_\_\_

BLDG. WALL SIGN? YES \_\_\_\_\_ NO \_\_\_\_\_ DIMENSIONS \_\_\_\_\_  
(attached to bldg)

MORE THAN ONE SIGN? YES \_\_\_\_\_ NO \_\_\_\_\_ DIMENSIONS \_\_\_\_\_

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: \_\_\_\_\_

This is guesstimate  
only - proper stuff not submitted

LOT FRONTAGE (FEET) \_\_\_\_\_

BLDG FRONTAGE (FEET) ~ 80' x 2 = 160'

AWNING YES \_\_\_\_\_ NO \_\_\_\_\_ IS AWNING BACKLIT? YES \_\_\_\_\_ NO \_\_\_\_\_

HEIGHT OF AWNING: \_\_\_\_\_

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? \_\_\_\_\_

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW

SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF THE

PROPOSED SIGNS ARE ALSO REQUIRED.



INFORMATION REQUIREMENTS FOR SIGN PERMIT APPLICATION

APPLICANTS FOR A SIGN PERMIT WILL BE ASKED TO SUBMIT THE FOLLOWING INFORMATION TO THE CODE ENFORCEMENT OFFICE:

1. PROOF OF INSURANCE
2. LETTER OF PERMISSION FROM THE OWNER
3. A SKETCH PLAN OF THE LOT, INDICATING LOCATION OF BUILDINGS, DRIVEWAYS AND ANY ABUTTING STREETS OR RIGHT OF WAYS. LENGTHS OF BUILDING FRONTAGES AND STREET FRONTAGES SHOULD BE NOTED (SEE ATTACHED)
4. INDICATE ON THE PLAN ALL EXISTING AND PROPOSED SIGNS
5. COMPUTATION OF THE FOLLOWING:

A) SIGN AREA OF EACH EXISTING AND PROPOSED BUILDING SIGN

B) SIGN AREA HEIGHT AND SETBACK OF EACH EXISTING AND PROPOSED FREESTANDING SIGN

A SKETCH OF ANY PROPOSED SIGN(S), INDICATING DIMENSIONS, MATERIALS, SOURCE OF ILLUMINATION AND CONSTRUCTION METHOD (SEE ATTACHED)

CERTIFICATE OF FLAMMABILITY REQUIRED FOR AWNING/CANOPY AT TIME OF APPLICATION

UL # REQUIRED FOR LIGHTED SIGNS AT TIME OF APPLICATION

FEE FOR PERMIT - \$25.00 PLUS \$0.20 PER SQUARE FOOT

FEE FOR AWNING BASED ON COST OF WORK - \$25.00 for the FIRST 1,000.00, \$5.00 for EACH ADDITIONAL \$1,000.00

NOTE: ONCE A SKETCH PLAN HAS BEEN FILED FOR A PROPERTY, THE CODE ENFORCEMENT OFFICE WILL KEEP A RECORD OF THE PLAN SO THAT A NEW SKETCH PLAN WILL NOT BE REQUIRED FOR LATER CHANGES TO SIGNAGE ON THE PROPERTY. IN SUCH AN INSTANCE, APPLICANTS WILL ONLY BE REQUIRED TO SUBMIT INFORMATION APPLICABLE TO THE NEW SIGNS.