

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING DEPARTMENT

Please Read Application And Notes, If Any, Attached

PERMIT

Permit Number: 030364

This is to certify that Kojie Corporation/Leavitt & Morris Inc.
has permission to Erect 29'6" x 3'10" Stationaryawning
AT 490 Congress St 037 1002001

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 when permission is procured before this building or part thereof is leased or occupied. **48 HOUR NOTICE IS 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

Handwritten Signature
5/16/08
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 03-0364	Issue Date:	CBL: 037 I002001
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Location of Construction: 490 Congress St	Owner Name: Kojie Corporation	Owner Address: 492 Congress St	Phone: 671-7550
Business Name:	Contractor Name: Leavitt & Parris Inc.	Contractor Address: 256 read St. Portland	Phone: 2077970100
Lessee/Buyer's Name	Phone:	Permit Type: Awning, with signage	Zone: B3

Past Use: Salon/Spa	Proposed Use: Salon/Spa	Permit Fee: \$150.00	Cost of Work: \$150.00	CEO District: 2
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>Yawning</i> Type: <i>NA</i> <i>5/16/03</i>	

Proposed Project Description:
Erect 29'6" x 3'10" Stationary Awning

Signature: _____ Signature: _____

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: *John Anderson* Date: *5/7/03*

Permit Taken By: gad	Date Applied For: 04/10/2003	Zoning Approval
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>5/15/03</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input checked="" type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>to DA 5/16/03</i> <i>DA 5/7/03</i></p>
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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

Permit No: 03-0364	Date Applied For: 04/10/2003	CBL: 037 I002001
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Location of Construction: 490 Congress St	Owner Name: Kojie Corporation	Owner Address: 492 Congress St	Phone: () 671-7550
Business Name:	Contractor Name: Leavitt & Parris Inc.	Contractor Address: 256 read St. Portland	Phone (207) 797-0100
Lessee/Buyer's Name	Phone:	Permit Type: Awning, with signage	

Proposed Use: Salon/Spa	Proposed Project Description: Erect 29'6" x 3'10" Stationary Awning
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Dept: Historical	Status: Not Applicable	Reviewer: Deborah Andrews	Approval Date: 05/07/2003	Ok to Issue: <input checked="" type="checkbox"/>
Note:				
Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 05/05/2003	Ok to Issue: <input checked="" type="checkbox"/>
Note:				
Dept: Building	Status: Pending	Reviewer: Mike Nugent	Approval Date:	Ok to Issue: <input type="checkbox"/>
Note:				

Comments:

05/08/2003-mjn: need structurals, height above the sidewalk, Carl Rickett at Leavitt & parris

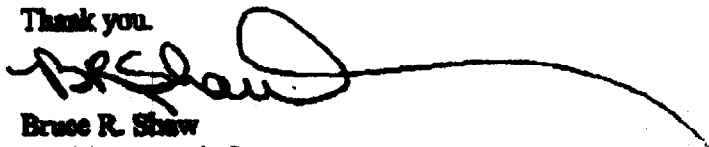
April 10th, 2003

To Whom it May Concern,

As the owner of Zack Inc, d/b/a Shahnaz Salon and Spa, duly authorize Leavitt and Parris, Inc to install a 30 foot awning on my premises.

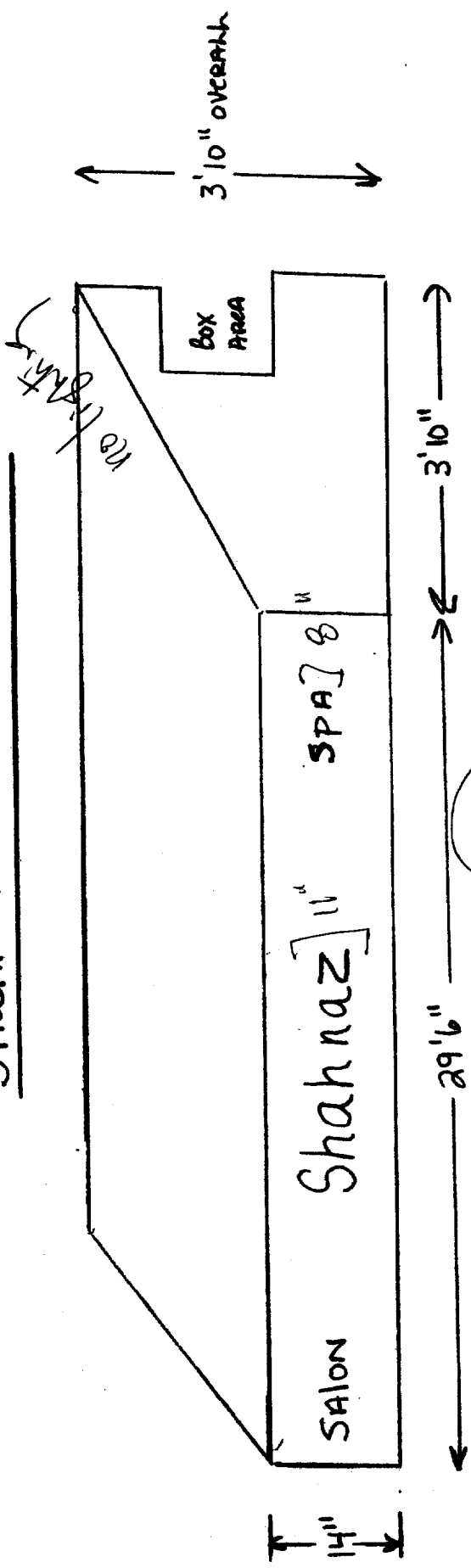
Should you have any questions or concerns please call me at 773-6363.

Thank you.



Bruce R. Shaw
President - Zack, Inc.

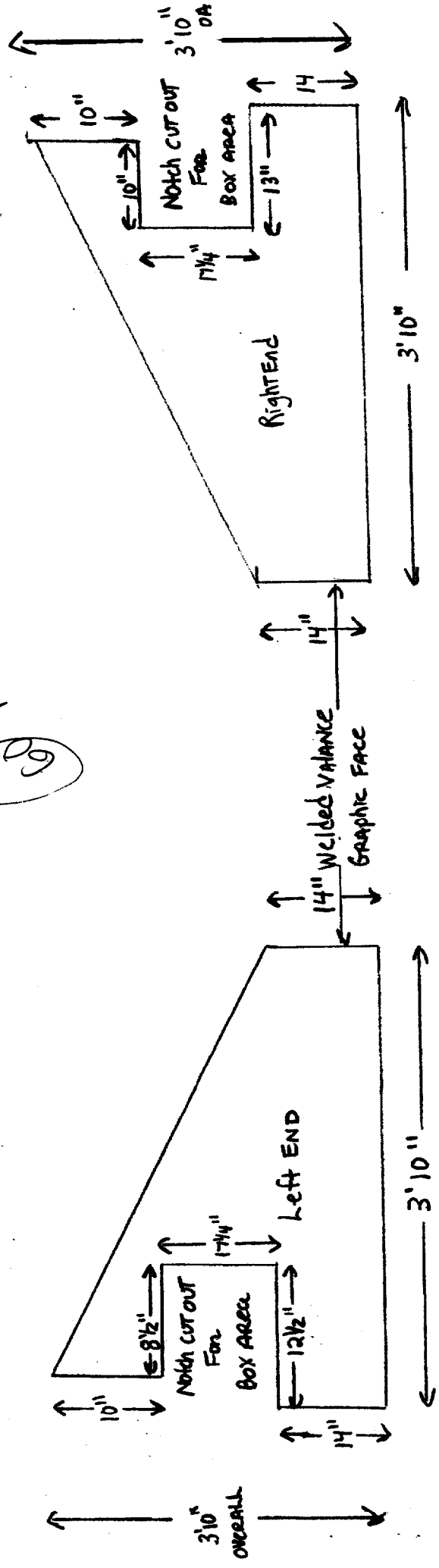
MINIMUM - FULL SERVICE STATION

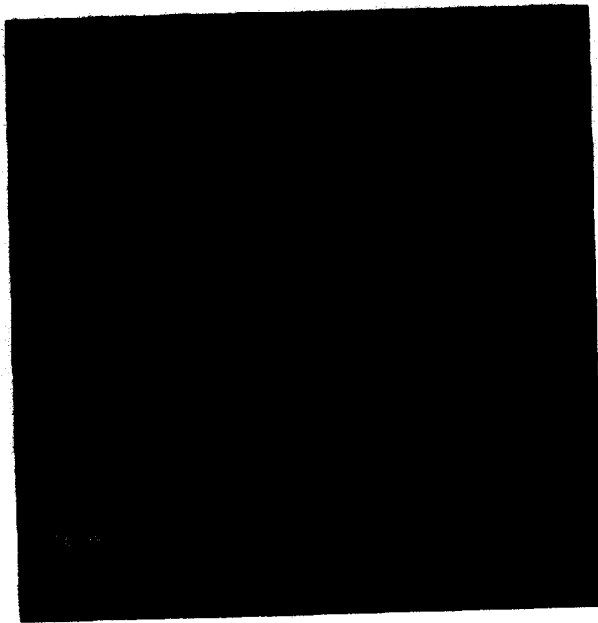


(AWNING COLOR
w/ WHITE HAND
PAINTED LETTERING)

60% MAX A Line

$1.17' \times 29.5' = 34.5'$





New Awning Location.

- 1) Box in existing area that old rollup awning was. w/ $\frac{1}{2}$ plywood - primed & painted.
- 2) Remove existing sign above & dispose of.
- 3) Install new stationary awning - over boxed area see drawing for details.

797-0100
03-0364
okay

~~use~~
Paid

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>490 CONGRESS STREET PORTLAND ME</u>		
Total Square Footage of Proposed Structure <u>120 SQ FEET APPROX</u>	Square Footage of Lot <u>4020 SQ FEET</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>037</u> Block# <u>I</u> Lot# <u>002</u>	Owner: <u>Kegle Corp.</u>	Telephone: <u>677-7550</u>
Lessee/Buyer's Name (if Applicable) <u>ZACK INC.</u> <u>BRUCE SHAW</u> <u>773-1236</u>	Applicant name, address & telephone: <u>BRUCE SHAW % SHAHNAZ</u> <u>SAKON & SPA 490 CONGRESS</u> <u>ST. PORTLAND ME.</u>	Total s.f. of signage x \$1.00 per s.f. plus \$30.00 = Total Fee: \$ _____ Awning Fee = Cost of Work: \$ _____ Total Fee: \$ <u>150.00</u> ^{180 SQ'}
Current use: <u>SALON & SPA</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: _____		
Project description: <u>NEW STORE FRONT STATIONARY AWNING</u> <u>29'6" X 3'10"</u>		
Contractor's name, address & telephone: <u>LEAVITT & PARRIS AWNINGS & TENTS</u> <u>256 READ STREET PORTLAND ME 04103.</u>		
Who should we contact when the permit is ready: <u>CARL M RIKETT III</u>		
Mailing address: <u>SAME AS ABOVE</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>207-797-0100</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT. WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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: 4-10-03

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

CHECKLIST FOR SIGN/AWNING APPLICATION

Applicants for a sign or awning permit are required to submit the following information to the Code Enforcement Office at the time of application:

- 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. Amount must equal \$400,000.00.
- 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. Indicate on the plan all existing and proposed signs with their dimensions and specific locations.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, and construction method, as well as specifics of installation/attachment.
- Certificate of Flammability required for awning or canopy at time of application.
- N/A UL# required for lighted signs at the time of Final Inspection. Failure to provide this information will invalidate the Sign Permit.
- Pre-Application Questionnaire completed and attached. Photos of existing signage attached.

**Permit Fee for signage or awning-with-signage:
\$30.00 plus \$1.00 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, plus \$7.00 for each additional \$1,000.000.**

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 490 Congress Street Portland ME 04102 ZONE: B-3

CBL: 037-I-002-001

SINGLE TENANT LOT? YES _____ NO MULTI TENANT LOT? YES NO _____
MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES _____ NO

INFORMATION ON PROPOSED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES _____ NO _____ DIMENSIONS PROPOSED: _____
BLDG. WALL SIGN? (attached to bldg) YES _____ NO _____ DIMENSIONS PROPOSED: _____

INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES _____ NO _____ DIMENSIONS: _____
BLDG. WALL SIGN(attached to bldg) ? YES NO _____ DIMENSIONS: BUT Removing w/awning is permitted
AWNING? YES NO _____ DIMENSIONS: 29'6" X 3'10" X 3'10"

LOT FRONTAGE (FEET): _____
TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET): 30' x 2 = 60' MAX

AWNING YES NO _____ IS AWNING BACKLIT? YES _____ NO
HEIGHT OF AWNING: 3'10" LENGTH OF AWNING: 29'6" DEPTH: 3'10"

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES NO _____
IF YES, TOTAL S.F. OF PANELS WITH COMMUNICATIONS/MESSAGE/TRADEMARK/SYMBOL? 30 s.f.

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 ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: [Signature] DATE: 4-10-03

***** FOR OFFICE USE ONLY *****

ACORD. CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
04/11/03

PRODUCER
Cross Insurance -CL/Bnda-P
(Formerly D&P/ARS)
P.O.Box 567
Portland, ME 04112

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.

INSURERS AFFORDING COVERAGE

INSURED
Leavitt & Parrie, Inc.
256 Road Street
Portland, ME 04108

INSURER A: One Beacon Insurance Company
INSURER B: Maine Employers Mutual Insurance Co.
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.

FROM LTH	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <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"/> PRO- JECT <input type="checkbox"/> LOC	YMR009379	04/30/02	04/30/08	EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/POP AGG \$2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALLOWED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> Drive Other Car	YMAH82371	04/30/02	04/30/08	COMBINED SINGLE LIMIT (Ex-accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ GARAGE LIABILITY <input type="checkbox"/> ANY AUTO OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	<input type="checkbox"/> EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	1810085708	04/30/02	04/30/08	<input checked="" type="checkbox"/> WC STATU- TORY LIMITS <input type="checkbox"/> OTH- ER E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 RE: Shahnaz Salon & Sps, 480 Congress St., Portland ME 04101.

Certificate Holder is also an Additional Insured with respect to the General Liability Policy only.

CERTIFICATE HOLDER	ADDITIONAL INSURED; INSURER LETTER	CANCELLATION
City of Portland 388 Congress St. Portland, ME 04101		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE 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 <i>[Signature]</i>

Certificate of Flame Resistance



REGISTERED
APPLICATION
CONCERN NO.
FA-36801

ISSUED BY
Glen Raven Custom Fabrics, LLC
1831 N. Park Avenue
Glen Raven, NC 27217
(Phone) 336/227-6211 (Fax) 336/229-4039

Date treated or
manufactured

This is to certify that the materials described on the reverse side herof have been flame-retardant treated (or are inherently nonflammable).

FOR ADDRESS CITY

Certification is hereby made that: (Check "a" or "b")

(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used
Method of application

(b) The articles described on the reverse side herof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric or material used
Reg. No. FA-36801
FR Sunbrella®
Will not
(will or will not)

GLEN RAVEN CUSTOM FABRICS, LLC
By
Glen Raven Custom Fabrics, LLC
Name of Applicator or Production Superintendent

LEAVITT & PARRIS, INC.

Established 1919

Awnings
Porch Curtains
Tarps/lin
Truck Covers
All Related Products

Professional Consultants
Awnings, Tents and Canvas Products
For Home, Industry and Marine

284 Road Street • Portland, Maine 04108
(207) 797-0100 • 1-800-833-6679 • Fax 797-4194
E-mail: leavitt@leavittandparris.com
Website: www.leavittandparris.com

Tents and
All Party Accessories
Rented for
Weddings and
All Occasions

490 CONG

877-8716

FAX COVER SHEET

DATE: 5-9-03

TO: MIKE NEUGENT

FROM: CARL RIKETT III

RE: AWNING LOAD SPECS

NUMBER OF PAGES INCLUDING COVER PAGE: 2

MESSAGE: PLEASE LET ME KNOW ASAP.

If you have not received all of the pages noted, please contact us. Thank you.

Members of Quality Tents and Party Related Accessories
Services for the Entertainment, Promotion, and Trade Show Industries

Members of the Northeast Canvas Products Ass'n & The Industrial Fabrics Association Int'l
American Rental Association
Chamber of Commerce of Greater Portland & Androscoggin County

LIVE LOAD = 15 PSF UPLIFT = 15 PSF SNOW = 4 PSF

PROJECTION	SCHEDULE 40	4'-0"	6'-0"	8'-0"	10'-0"	12'-0"	14'-0"	16'-0"	18'-0"	20'-0"	22'-0"	24'-0"
H MIN.	1'-0"	2'-0"	3'-0"	4'-0"	5'-0"	6'-0"	7'-0"	8'-0"	9'-0"	10'-0"	11'-0"	12'-0"
DIAGONAL	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1
VERTICAL	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
FRONT BAR	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1
BRACING	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
PROJECTION	4'-0"	6'-0"	8'-0"	10'-0"	12'-0"	14'-0"	16'-0"	18'-0"	20'-0"	22'-0"	24'-0"	
TOP ANCHOR	TENSION LB	300	450	600	750	900	1050	1200	1350	1500	1650	
FORCES	SHEAR LB	300	450	600	750	900	1050	1200	1350	1500	1650	
BOTT ANCHOR	TENSION LB	420	630	840	1050	1260	1470	1680	1890	2100	2310	
FORCES	SHEAR LB	0	0	0	0	0	0	0	0	0	0	

3" or 4" sp galvanized legs w/ lead shield anchor - hammer drilled into brick face behind deck.

LIVE LOAD = 15 PSF UPLIFT = 15 PSF SNOW = 75 PSF

PROJECTION	SCHEDULE 40	4'-0"	6'-0"	8'-0"	10'-0"	12'-0"	14'-0"	16'-0"	18'-0"	20'-0"	22'-0"	24'-0"
H MIN.	1'-0"	2'-0"	3'-0"	4'-0"	5'-0"	6'-0"	7'-0"	8'-0"	9'-0"	10'-0"	11'-0"	12'-0"
DIAGONAL	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1
VERTICAL	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
FRONT BAR	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1
BRACING	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
PROJECTION	4'-0"	6'-0"	8'-0"	10'-0"	12'-0"	14'-0"	16'-0"	18'-0"	20'-0"	22'-0"	24'-0"	
TOP ANCHOR	TENSION LB	400	600	800	1000	1200	1400	1600	1800	2000	2200	
FORCES	SHEAR LB	450	670	890	1110	1330	1550	1770	1990	2210	2430	
BOTT ANCHOR	TENSION LB	420	630	840	1050	1260	1470	1680	1890	2100	2310	
FORCES	SHEAR LB	0	0	0	0	0	0	0	0	0	0	

LIVE LOAD = 15 PSF UPLIFT = 15 PSF SNOW = 40 PSF

PROJECTION	SCHEDULE 40	4'-0"	6'-0"	8'-0"	10'-0"	12'-0"	14'-0"	16'-0"	18'-0"	20'-0"	22'-0"	24'-0"
H MIN.	1'-0"	2'-0"	3'-0"	4'-0"	5'-0"	6'-0"	7'-0"	8'-0"	9'-0"	10'-0"	11'-0"	12'-0"
DIAGONAL	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1
VERTICAL	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
FRONT BAR	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1	1/2	3/4	1
BRACING	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
PROJECTION	4'-0"	6'-0"	8'-0"	10'-0"	12'-0"	14'-0"	16'-0"	18'-0"	20'-0"	22'-0"	24'-0"	
TOP ANCHOR	TENSION LB	640	960	1280	1600	1920	2240	2560	2880	3200	3520	
FORCES	SHEAR LB	710	1060	1410	1760	2110	2460	2810	3160	3510	3860	
BOTT ANCHOR	TENSION LB	620	930	1240	1550	1860	2170	2480	2790	3100	3410	
FORCES	SHEAR LB	0	0	0	0	0	0	0	0	0	0	