

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

Location of Construction: 494 Congress St		Owner: Shekinah Co		Phone:		Permit No: 961166	
Owner/Address: Lessee: 494 Congress St- Ptld ME		Leasee/Buyer's Name: L. A. Hails		Phone: 774-7715		Business Name: Helen G Fox	
Contractor Name:		Address:		Phone: <i>Call for pickup</i>		Permit Issued: NOV 26 1996	
Past Use: retail		Proposed Use: retail w sign		COST OF WORK: \$		PERMIT FEE: \$ 42X 31.00	
Proposed Project Description: erect sign apx 3'x10'		FIRE DEPT. ☐ Approved ☐ Denied		INSPECTION: Use Group: Type: DOCA 45		CITY OF PORTLAND	
		Signature:		Signature:		Zone: CBL:	
		PEDESTRIAN ACTIVITIES DISTRICT (C.D.)		Zoning Approval:		Special Zone or Reviews:	
Permit Taken By: L Chase		Date Applied For: 10/23/96		Action: ☐ Approved ☐ Approved with Conditions ☐ Denied		☐ Flood Zone ☐ Subdivision ☐ Site Plan ☐ major ☐ minor ☐ minor	

1. This permit application doesn't 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.

**PERMIT ISSUED
WITH LETTER**

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 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

ADDRESS:

DATE:

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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

Historic Preservation
☒ Not in District or Landmark
☒ Does Not Require Review
☐ Requires Review

Action:

☐ Approved
☐ Approved with Conditions
☐ Denied

Date:

CEO DISTRICT

2

A. Rowl

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

Location of Construction: 494 Congress St		Owner: Shelton Co		Phone:		Permit No: 961166	
Owner/Address: 494 Congress St- Portland ME		Lease/Buyer's Name: L. A. Halls		Phone: 774-7715		Business Name: Helen G Fox	
Contractor Name:		Address:		Phone:		PERMIT ISSUED NOV 26 1996 CITY OF PORTLAND	
Past Use: retail		Proposed Use: retail w sign		COST OF WORK: \$		PERMIT FEE: \$ 425 31.00	
Proposed Project Description: erect sign approx 3'x10'		FIRE DEPT. ☐ Approved ☐ Denied		INSPECTION: Use Group: Type:		Zone: CBL:	
		Signature:		Signature: <i>Hellen</i>		Zoning Approval: <i>OK</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: ☐ Approved ☒ Approved with Conditions ☐ Denied		Signature: <i>Hellen</i>		Date: <i>11/2/96</i>	
Permit Taken By: L Chase		Date Applied For: 10/23/96					

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SIGNATURE OF APPLICANT: ADDRESS: DATE: 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: *11/2/96*

CEO DISTRICT

2

COMMENTS

OK Above

	Type	Inspection Record	Date
Foundation:			
Framing:			
Plumbing:			
Final:			
Other:			

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

November 26, 1996

L. A. Nails
494 Congress St.
Portland, Maine
04101

RE : 494 Congress St.

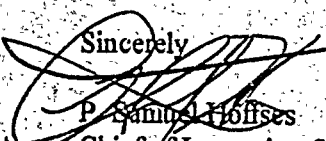
Dear Sir:

Your application erect a sign has been reviewed and a permit is herewith issued subject to the following requirements: This permit does not excuse the applicant from meeting applicable State and Federal laws.

Code Requirements

1. The original sign is approved on a temporary basis only. This is good until March 30, 1996. After this date the proposed permanent sign is to be installed in upper panel (where Wise Trading Company is now). The applicant MUST submit drawings showing dimensions of the proposed sign prior to installation.

Sincerely,


P. Samuel Hoffses
Chief of Inspection Services

cc: D. Andrews, Senior Planner
M. Schmuckal Asst. Chief of Code Enforcement

SIGNAGE APPLICATION

ADDRESS: 494 Congress St

OWNER: Nhan Tran William Groves

APPLICANT: Nhan Tran

ASSESSORS NO.: 37-I-2 ?

→ SINGLE TENANT LOT? YES: NO: X

→ MULTI-TENANT LOT? YES: X NO:

FREESTANDING SIGN? YES: NO: X

MORE THAN ONE SIGN?

BLDG. WALL SIGN? YES: X NO:

MORE THAN ONE SIGN?

DIMENSIONS:

DIMENSIONS:

DIMENSIONS: 3 x 10

DIMENSIONS:

LIST ALL EXISTING SIGNAGE, INCLUDING THEIR DIMENSIONS: N/A

→ LOT FRONTAGE (IN FEET):

→ BLDG FRONTAGE (IN FEET): ~53' x 2 - 106'

AWNING? YES: NO: X IS AWNING BACKLIT? YES: NO: X

HEIGHT OF AWNING: X

IS THERE ANY COMM. MESSAGE, TRADEMARK, OR SYMBOL ON IT?

PLEASE PROVIDE A SITE SKETCH AND A BUILDING SKETCH, SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED.

WE WILL NEED SKETCHES AND/OR PICTURES OF THE PROPOSED SIGNS INCLUDING STRUCTURAL COMPONENTS.

H: SIGNLST

37-I-2

Should fill width

L. A. NAILS
PROFESSIONAL NAIL CARE
TEL: 000-0000

10'

enamel surface with square tubing and
angle cold tie to framing, on all connections.
graphics design "L.A. NAILS" red color "Professional nail care" blue



illumination?
internal?

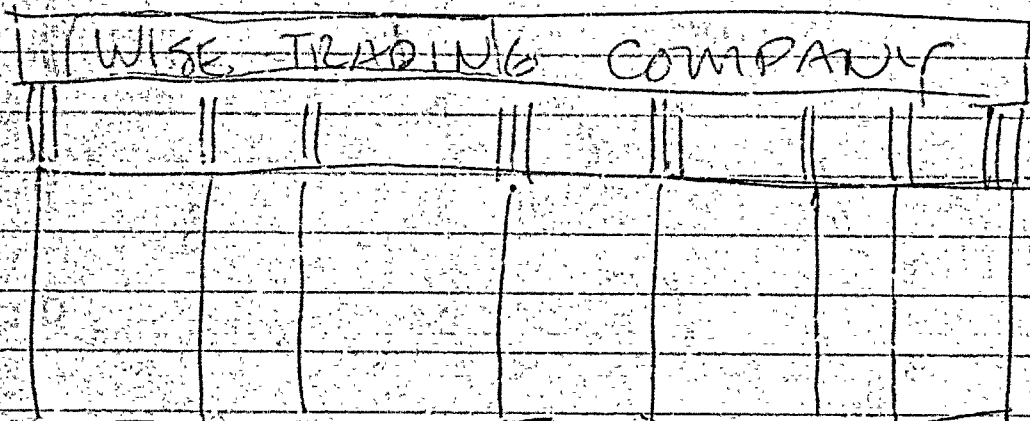
LUCA SIGN
1306 DORCHESTER AVE.
DORCHESTER, MA 02122
(617) 279-3636

hung properly
above
494 patient
above left hand

494 Cugram Street

719 Warren

~~113~~



Stavebank A

Central
Entry

Stavebank B

William Gowen
Shekinah Company
PO Box 1088
Windham, Maine

October 23, 1996

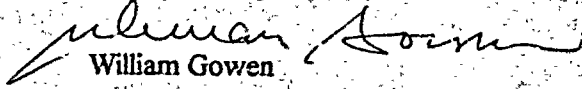
City of Portland
Code Enforcement

Dear Sir:

This letter is in reference to the sign that my tenant, Nhan Tran d/b/a L.A. Nails, plans to install at 494 Congress Street. As owner of the building I have approved the lay-out of the sign.

I have attached the plan that Nhan has given to me for your reference. Should you have any questions please feel free to contact me.

Sincerely,


William Gowen

8920984

ACORD CERTIFICATE OF LIABILITY INSURANCESP III DP
LESNA-1DATE (MM/DD/YY)
10/23/96

PRODUCER
LeBel Insurance Agency, Inc.
P.O. Box 59
637 Grattan Street
Chicago MA 01021-0059

John R. Eagan
Phone: 113-532-3221 Fax: 413-34-8982

INSURED

Nhan T. Tran DBA Le J Nail
Studio DBA L.A. Nail
5351 North Burdick Road, P4A
Fayetteville NY 13066

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
A CNA Insurance Co.
COMPANY
B
COMPANY
C
COMPANY
D

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	145027818	01/22/96	01/22/97	GENERAL AGGREGATE \$ 2000000
	☒ COMMERCIAL GENERAL LIABILITY				PROJECTS - COM/OP AGG \$ 2000000
	☐ CLAIMS MADE ☒ OCCUR				PERSONAL & ADV INJURY \$ 1000000
	☐ OWNERS & CONTRACTORS PROT				EACH OCCURRENCE \$ 1000000
					FIRE DAMAGE (Any one fire) \$ 100000
					MED EXP (Any one person) \$ 10000
A	AUTOMOBILE LIABILITY	SAME	01/22/96	01/22/97	COMBINED SINGLE LIMIT \$ 1000000
	☐ ANY AUTO				BODILY INJURY (Per person) \$
	☐ ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	☐ SCHEDULED AUTOS				PROPERTY DAMAGE \$
	☒ HIRED AUTOS				AUTO ONLY - EA ACCIDENT \$
	☒ NON-OWNED AUTOS				OTHER THAN AUTO ONLY \$
	GARAGE LIABILITY				EACH ACCIDENT \$
	☐ OWNED AUTO				AGGREGATE \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	☐ UMBRELLA FORM				AGGREGATE \$
	☐ OTHER THAN UMBRELLA FORM				
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				EL EACH ACCIDENT \$
	THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE ☐ INCL ☒ EXCL				EL DISEASE - POLICY LIMIT \$
					EL DISEASE - EA EMPLOYEE \$
A	OTHER Contractor - \$15000	SAMS	01/22/96	01/22/97	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
THIS POLICY INCLUDES FULL SIGN COVERAGE.

CERTIFICATE HOLDER

Helen Foxe
FAX: 207-879-9102

HELEN-1

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE
EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL
30 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

John R. Eagan

ACORD 25-S (1/95)

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