

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 081103

Please Read
Application And
Notes, If Any,
Attached

This is to certify that SOUTHERN MAINE PROPERTIES CO./Seabrook Signshas permission to Install 2 new signsAT 10 FREE ST

038 A001002

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 procured before this building or part thereof is leased or occupied. Closed-in. 24 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 _____

PERMIT ISSUED

SEP 30 2008

Department Name _____

CITY OF PORTLAND

[Signature] 9/20/08
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

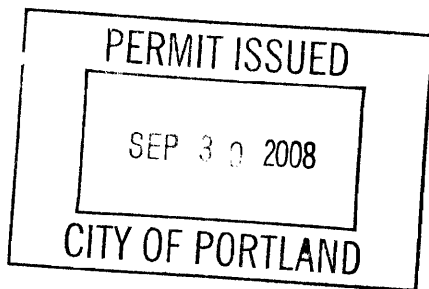
City of Portland, Maine - Building or Use Permit Application

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

Permit No: 08-1103		Issue Date: 9/30/08		CBL: 038 A001002	
Location of Construction: 10 FREE ST		Owner Name: SOUTHERN MAINE PROPRTIE		Owner Address: 5 MILK ST	
Business Name: Arabica Coffee Co.		Contractor Name: Scarboro Signs		Contractor Address: 680 US Rt. 1 Scarborough	
Lessee/Buyer's Name		Phone:		Permit Type: Signs - Permanent	
Past Use: Commercial - Coffee Shop (Restaurant) "Arabica Coffee Co." (Change of use #08-1087)		Proposed Use: Commercial - Coffee Shop (Restaurant) "Arabica Coffee Co." - Install 2 new signs		Permit Fee: \$117.00	
Proposed Project Description: Install 2 new signs		Cost of Work: \$117.00		CEO District: 1	
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: M Type: Signage IBC-2003 Signature: [Signature] Date: 9/29/08	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: D. Andrews Date: 9/29/08			
Permit Taken By: Idobson		Date Applied For: 09/03/2008		Zoning Approval	

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 <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> OK w/condition Date: 9/4/08 [Signature]	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:
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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:	Date Applied For:	CBL:
08-1103	09/03/2008	038 A001002

Location of Construction: 10 FREE ST	Owner Name: SOUTHERN MAINE PROPRTIE	Owner Address: 5 MILK ST	Phone:
Business Name: Arabica Coffee Co.	Contractor Name: Scarboro Signs	Contractor Address: 680 US Rt. 1 Scarborough	Phone (207) 883-6796
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial - Restaurant "Arabica Coffee Co." - Install 2 new signs (48" x 28")	Proposed Project Description: Install 2 new signs (28" x 48")
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Dept: PAD	Status: Approved	Reviewer: Deborah Andrews	Approval Date: 09/29/2008
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Zoning	Status: Approved with Conditions	Reviewer: Ann Machado	Approval Date: 09/09/2008
Note: Original application was for three signs. Tenant space only fronts on two street so can only have two signs. John Walsh will let me know which two he wants.			Ok to Issue: <input checked="" type="checkbox"/>
1) This permit is being issued for two 28" x 48" hanging signs; one located on Free Street & one located on Cross Street.			
Dept: Building	Status: Approved with Conditions	Reviewer: Chris Hanson	Approval Date: 09/30/2008
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.			

Comments:
9/4/2008-amachado: Can only have two signs not three. Waiting for applicant to notify me about which two he wants.
9/9/2008-amachado: John Walsh came in & said that he wanted the hanging sign on Free Street and the hanging sign on Corss Street.
9/29/2008-gg: received permit from historic as of 9/29/08. /gg



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>2 FREE STREET</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>038</u> Block# <u>A-001</u> Lot# <u>002</u>	Owner: <u>SOUTHERN MAINE PROPERTIES</u>	Telephone: <u>772-2761</u>
Lessee/Buyer's Name (If Applicable): <u>ARABICA COFFEE CO.</u>	Contractor name, address & telephone: <u>SCARBOROUGH SIGNS, LLC</u> <u>608 US ROUTE ONE</u> <u>SCARBOROUGH, ME 04074</u> <u>883-6796</u>	Total s.f. of signage x \$2.00 <u>315</u> 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>PAUL ADLER</u> phone: <u>883-6796</u>		
Tenant/allocated building space frontage (feet): Length: <u>25 FREE</u> Height: <u>14'</u> <u>75' CROSS ST.</u> Lot Frontage (feet): <u>117</u> Single Tenant or Multi Tenant Lot: <u>8x18 = 26 x 21</u>		
Current Specific use: <u>RETAIL STORE - DELI SHOP</u> If vacant, what was prior use: <u>DELI SHOP</u> Proposed Use: <u>COFFEE SHOP - Restaurant</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Dimensions proposed: <u>2' 28" x 48"</u> Height from grade: <u>20' 8"</u> Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: <u>1' 15" x 9"</u>		
Proposed awning? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Is awning backlit? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Height of awning: _____ Length of awning: _____ Depth: _____ Is there any communication, message, trademark or symbol on it? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, total s.f. of panels w/communications, message, trademark or symbol: _____ s.f.		
Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Dimensions: _____ being removed. Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions: <u>3' x 3'</u> Awning? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 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, 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: <u>[Signature]</u>	Date: <u>9/2/08</u>
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B-3 - PAD multi. This is not a permit; you may not commence ANY work until the permit is issued.

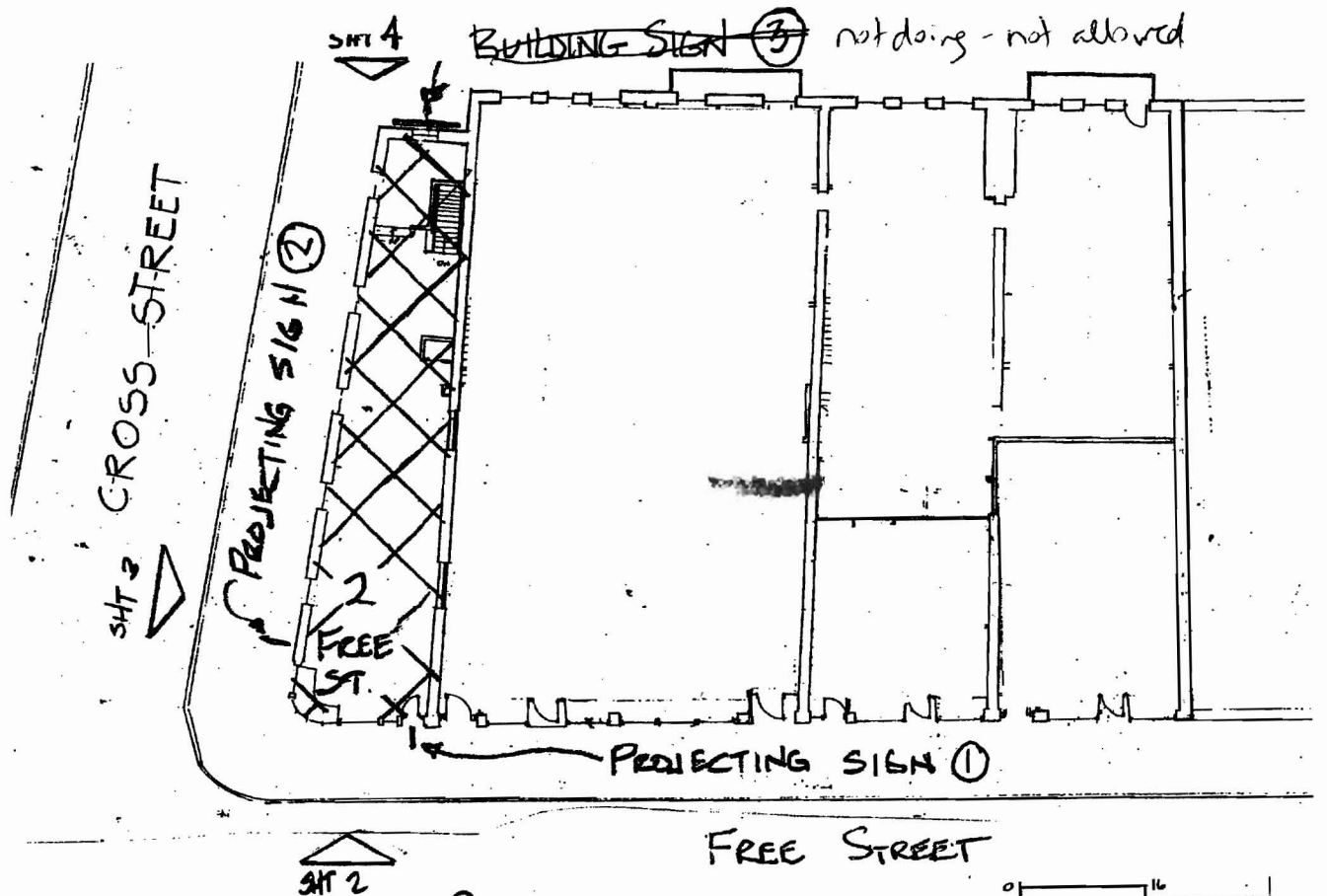
ind. gr 2x25 = 50 #

1 for each sheet that front on

48" x 26.14" = 1257.12 # = 8.73 #

8.73

17.46 #



SIGNAGE SITE PLAN PROPOSED 2 FREE STREET SIGNS

General Notes:

- All costs for signs, sign installation, maintenance, insurance, and removal are sole responsibility of the tenant.
- Tenant responsible for verifying the structural suitability of existing brackets, anchor, walls, etc.
- Use only non-corroding, non-galvanic acting anchors and guy wires. All anchors and wall penetrations to be into mortar joints only (not into face of bricks). All anchors to be mounted into lead shields and all penetrations to be sealed with silicone sealer. All anchors to be easily removable with out damaging adjacent brick or mortar.
- No anchors are to be fastened to or through any EFIS or flashing.
- Through wall penetrations for electrical wiring will be drilled thru the mortar joint on the exterior of the building. Penetration size will be no larger than $\frac{1}{2}$ " diameter. Penetrations shall be sloped down to the exterior to provide for positive drainage. All penetrations and ends of conduits shall be sealed. Exact locations of penetrations and locations of conduits, junction boxes, wiring, etc inside and outside the building must be approved in writing before the tenant or contractor begins any work. prior to tenant or contractor installing or beginning any electrical work.
- Any changes to the work shown on the attached plans must be approved in writing by the landlord before the tenant or the tenant's contractor begins any unapproved work.
- Tenant will remove the tenant's signs, brackets, anchors, light fixtures including fittings, conduits, anchors, boxes, wires. etc. both inside and outside the building at tenants sole cost and expense, if requested to do so at the end of the tenant's tenancy.

LIGHTING TO
MATCH EXIST.
ARABICA SIGN

ALIGN TOP OF
BRACKETS
& SIGNS



4 FT

NEW WOOD SIGN
W/ BRACKET &
GUYS (2)

RELOCATE EXIST.
SIGN TO EXIST.
BRACKET & INSTALL
LIGHTS TO MATCH
EXIST. ARABICA
SIGN.

EPIS BAND

GRANITE
BAND

REFER SH1 1 of 4
FOR ADDITIONAL
NOTES

2 FREE STREET

FREE STREET ELEVATION
PROPOSED 2 FREE ST PROJECTING SIGNS

6/21/08

0 2 14 FT

SH1 2 of 4

NOTE: FIELD VERIFY

EXIST. LIGHTING
JUNCTION BOX

NEW PROJECTING SIGN
LIGHT FIXTURES

BRACKET & GUYS MOUNTED
TO MASONRY

EXIST BRACKET & GUY

ARABICA
COFFEE CO.

4 FT

FACE OF BLDG.

REFER SH 1 of 4 FOR ADDITIONAL NOTES.

ANNEX FIN. FLR
FREE ST

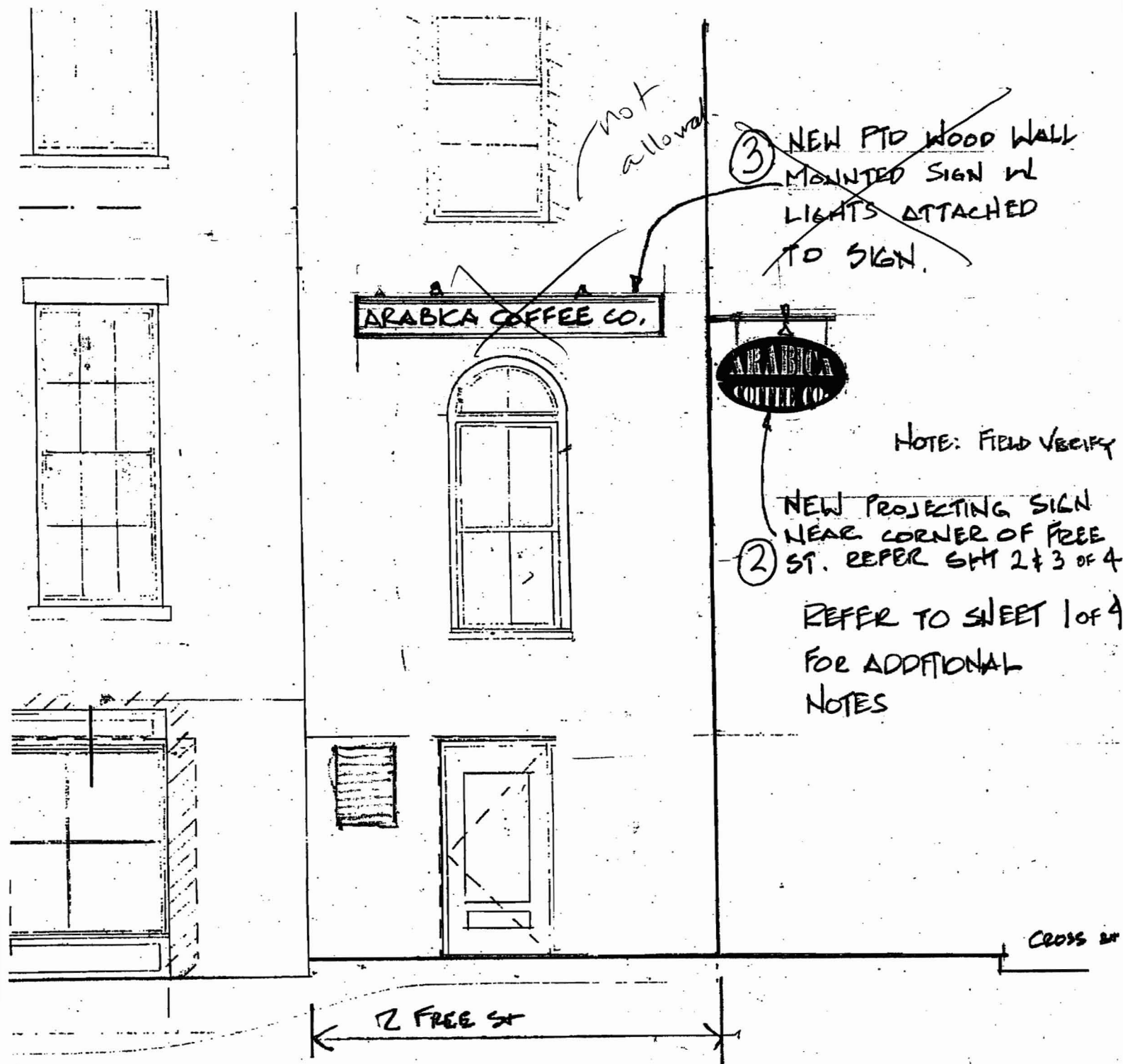
Cross St. ~~OAK STREET~~ ELEVATION

PROPOSED 2 FREE ST. PROJECTING SIGNS

6/21/06

0 2 4F

SH 3 of 4



SPRING STREET ELEVATION
PROPOSED 2 FREE ST. SIGNAGE
 6/21/08

0 4 8 FT

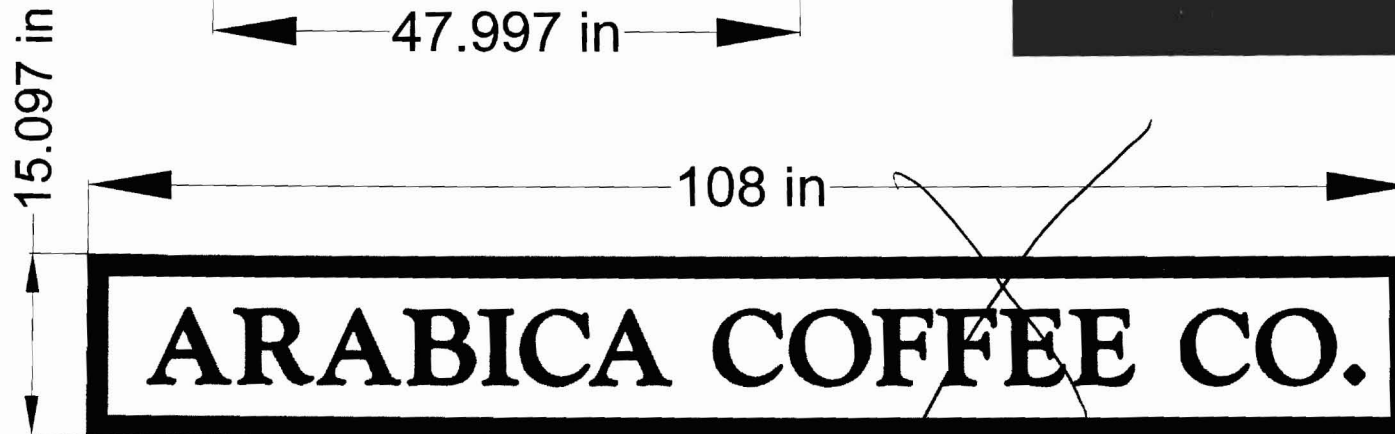
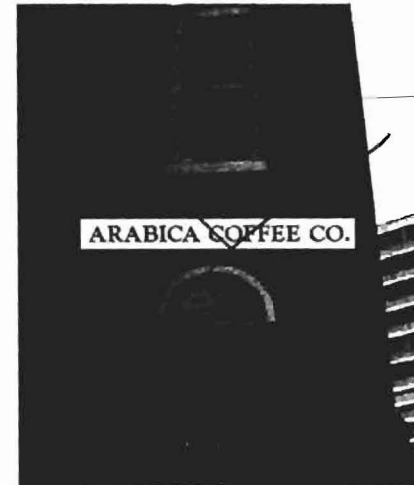
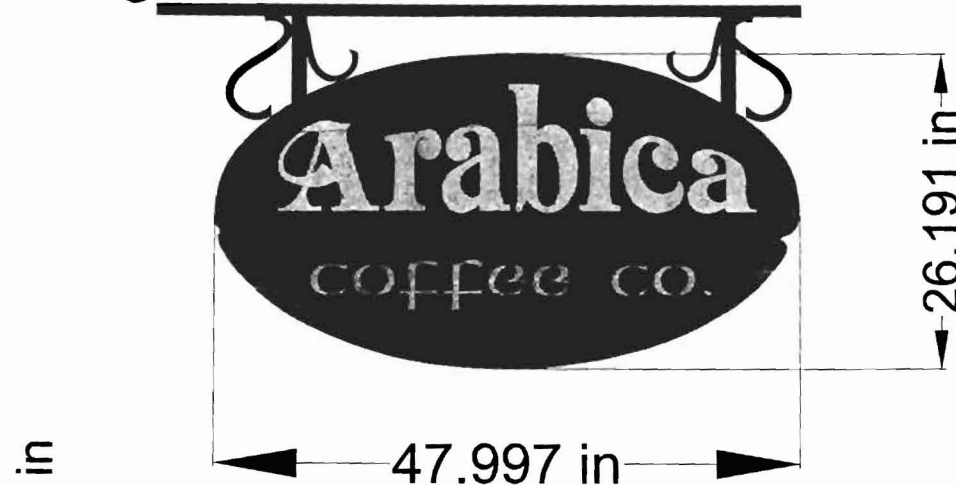
SHT 4 of 4

ARABICA COFFEE CO.

8/7/08

© COPYRIGHT 2008 BY SCARBORO SIGNS LLC - ALL DESIGNS PRESENTED ARE THE SOLE PROPERTY OF SCARBORO SIGNS LLC, AND MAY NOT BE REPRODUCED IN PART OR WHOLE WITHOUT WRITTEN PERMISSION FROM SCARBORO SIGNS LLC.

SIGNS ① & ②



SIGN ③

THIS PROOF DRAWING IS FOR YOUR REVIEW & APPROVAL BEFORE FABRICATION BEGINS. SIGNED APPROVAL INDICATES THAT YOU HAVE READ & APPROVE OF THE SPECIFICATIONS STATED. SCARBORO SIGNS, LLC WILL NOT BE RESPONSIBLE FOR ERRORS THAT COULD HAVE BEEN PREVENTED BY THE PROPER REVIEW OF THIS FORM. THANK YOU.



608 US Route One, Scarborough, Me. 04074
207-883-6796 Fax: 207-885-0088
email: info@scarborosignsllc.com

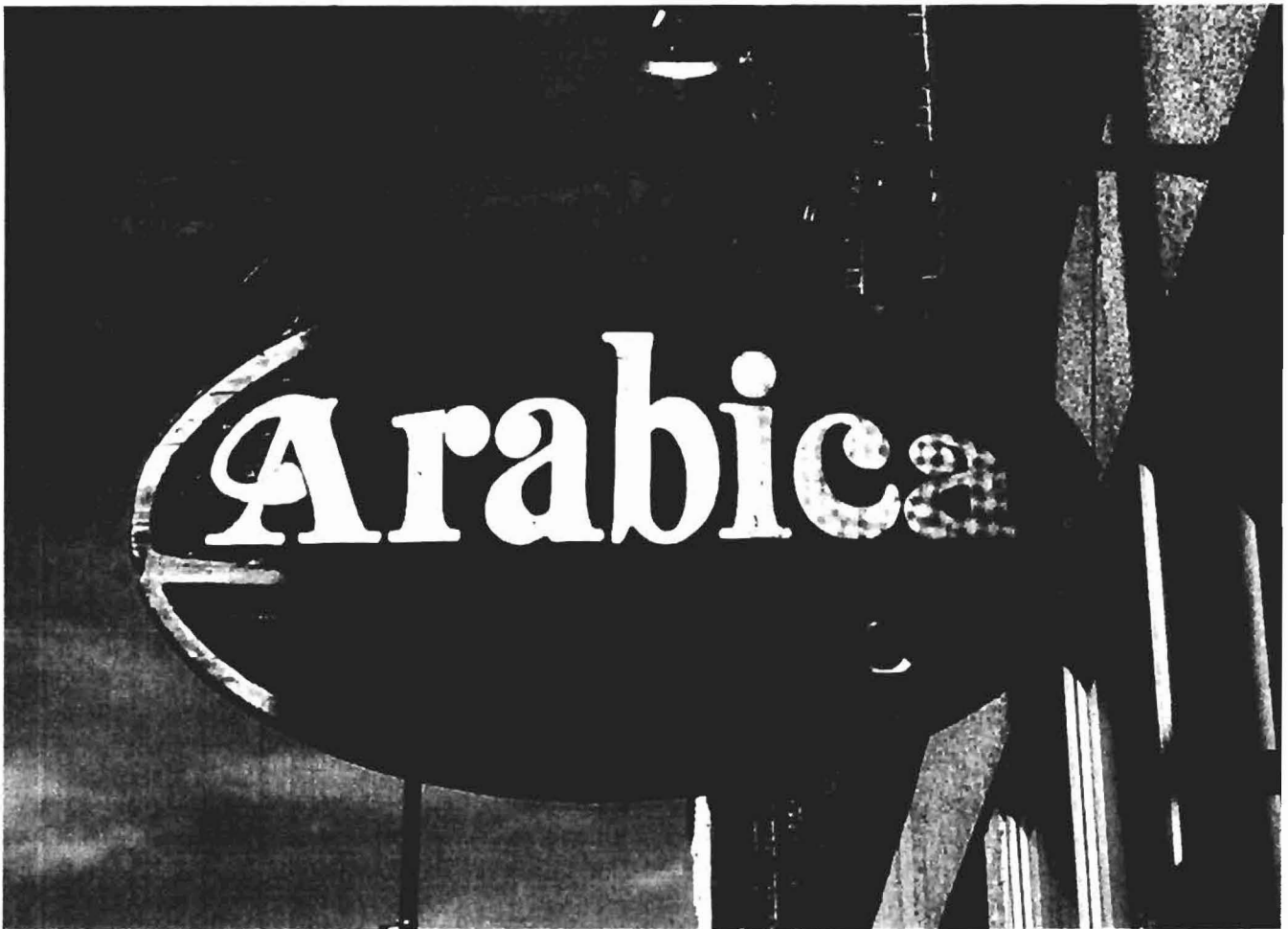
Client Name: JOHN WALSH
Location: PORTLAND

Last Revision:
Job#: PA-0805005
Page: 1 of 1
File Name: SIGNAGE 8/7/08

Client Approval _____
Date _____
SIGNED APPROVAL OF ALL DRAWINGS MUST BE RECEIVED BEFORE PRODUCTION BEGINS

Sales Rep: PAUL ADLER
Designer: TIM WEEKS





SIGN ①

- EXISTING SIGN AT EXISTING LOCATION TO BE REFURBISHED AND RELOCATED.



SIGN ①

- EXISTING BRACKET TO BE REFURBISHED AND RELOCATED WITH SIGN TO NEW LOCATION.



SIGN ①

- NEW LOCATION PROPOSED OVER MAIN ENTRANCE UTILIZING BRACKET AND SIGN FROM PREVIOUS LOCATION.
- THIS PHOTO SHOWS THE PREVIOUS TENANT SIGNAGE IN PLACE.



SIGN (2)

- PROPOSED LOCATION FOR SIGN 2



SIGN ③

- ~~PROPOSED LOCATION FOR SIGN 3~~ not allowed



~~SIGN (3)~~

- EXAMPLE OF SIMILAR CONSTRUCTION AND FINISHES OF PROPOSED SIGN.

not allowed

ACORD**CERTIFICATE OF LIABILITY INSURANCE**OP ID SM
ARABI-2

DATE (MM/DD/YYYY)

09/03/08

PRODUCER

Noyes Hall & Allen Insurance
PO Box 2403
170 Ocean Street
South Portland ME 04116-2403
Phone: 207-799-5541 Fax: 207-767-7590

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.

INSURED

Arabica Coffee Co
2 Free Street
Portland ME 04101

INSURERS AFFORDING COVERAGE

NAIC

INSURER A: OneBeacon Insurance Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

COPY

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.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
A	GENERAL LIABILITY	FM 1U03815	04/01/08	04/01/09	EACH OCCURRENCE	\$ 1,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000	
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000	
					PERSONAL & ADV INJURY	\$ 1,000,000	
					GENERAL AGGREGATE	\$ 2,000,000	
					PRODUCTS - COMP/OP AGG	\$ 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$	
	<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 (Per accident)	\$	
	<input type="checkbox"/> HIRED AUTOS						
	<input type="checkbox"/> NON-OWNED AUTOS						
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$	
					AUTO ONLY: AGG	\$	
	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$	
						\$	
	<input type="checkbox"/> DEDUCTIBLE					\$	
	<input type="checkbox"/> RETENTION \$					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$	
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$	
	OTHER				E.L. DISEASE - POLICY LIMIT	\$	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

City of Portland is added as Additional Insured, with respect to the Insured's sign @ 2 Free Street, Portland.

CERTIFICATE HOLDER

CITY OF P

City of Portland
389 Congress Street
Portland ME 04101

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 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

Shela McDonough

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.