

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 020780

This is to certify that Sawyer Harrison H

has permission to Place 1 "A" frame 24" x 40" on sidewalk

AT 17 Pleasant St L 038 E023001

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

Notification of inspection must
given and written permission procured
before this building or part thereof
leased or occupied enclosed-in.
HOURS NOTICE IS REQUIRED.

A certificate of occupancy must be
procured by owner before this build-
ing or part thereof is occupied.

PERMIT

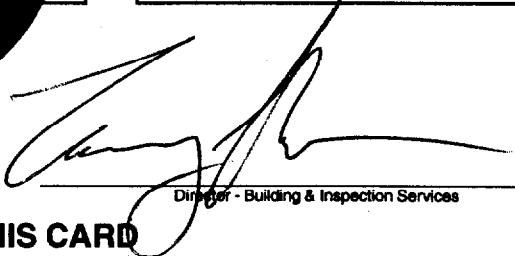
CITY OF PORTLAND, MAINE
PORTABLE SIDEWALK SIGN

ISSUED

7-2002

PORTLAND

REMOVING THIS CARD



Director - Building & Inspection Services

_____ EXPIRES _____

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

PERMIT ISSUED

Issue Date:
DEC 27 2002

CITY OF PORTLAND

Permit No: 02-0780 Issue Date: DEC 27 2002 CBL: 038 E023001

Location of Construction: 17 Pleasant St	Owner Name: Sawyer Harrison H	Owner Address: Po Box 7225	Phone: 207 772-6579
Business Name:	Contractor Name:	Contractor Address:	
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Side Walk	Zone: B-3

Past Use: Hair Salon	Proposed Use: Crafts - How to Shop	Permit Fee: \$69.60	Cost of Work: \$0.00	CEO District: 2
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Proposed Project Description: Place 1 "A" frame 24" x 40" sign on sidewalk <i>And add signage to Bldg.</i>	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: V Type: Signs BOCA 99 Signature: _____ Signature: <i>[Signature]</i>
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PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: jmy	Date Applied For: 07/16/2002	Zoning Approval
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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 <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>7/22/02</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 type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>12/27/02</i>
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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

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

02-0780

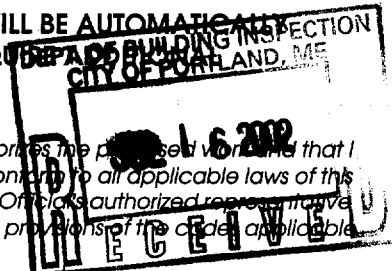
Signage Application

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>17 Pleasant Street Portland ME</u>			
Total Square Footage of Proposed Structure		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>038</u> Block# <u>E</u> Lot# <u>023</u>		Owner: <u>H H Sawyer Realty Company</u>	Telephone: <u>772-6579</u>
Lessee/Buyer's Name (If Applicable): <u>Pamela J. Manning</u>		Applicant name, address & telephone: <u>Pamela Manning</u>	Total s.f. of signage 34.60 x 1.00 per s.f. \$ <u>2</u> , plus \$ <u>30.00</u> base fee 30.00 Fee: \$ <u>69.60</u>
Current use: <u>Hair Salon</u>		new 8.8'	
If the location is currently vacant, what was prior use: _____		8.80 30.00 new \$ <u>38.80</u>	
Approximately how long has it been vacant: _____			
Proposed use: <u>Crafts, how to, interior design, Feng shui How to's</u>			
Project description: <u>A Frame 24" X 40" / dedicated to my 84" X 104"</u>			
Contractor's name, address & telephone: _____			
Who should we contact when the permit is ready: <u>Pamela J. Manning</u>			
Mailing address: <u>41 Maplewood St. Portland ME 04103</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 \$50.00 fee if any work starts before the permit is picked up. Phone: <u>207 831 6117 cell</u> <u>207 878 5374 home</u>			

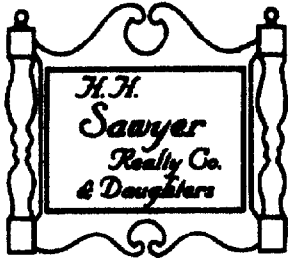
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the person named herein that I have been authorized by the owner to make this application as his/her authorized agent. I agree to comply with all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Officers authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the code applicable to this permit.



Signature of applicant: <u>Pamela J. Manning</u>	Date: <u>7/16/02</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



395 Fore Street
P.O. Box 7225
Portland, ME 04112
Tel: (207) 772-6579
Fax: (207) 773-0680
sawyerrealty@cybertours.com

July 16, 2002

To Whom It May Concern;

H. H. Sawyer Realty Company gives Pam Manning, out tenant at 17 Pleasant Street, Portland, Maine to have a street sign for her retail space.

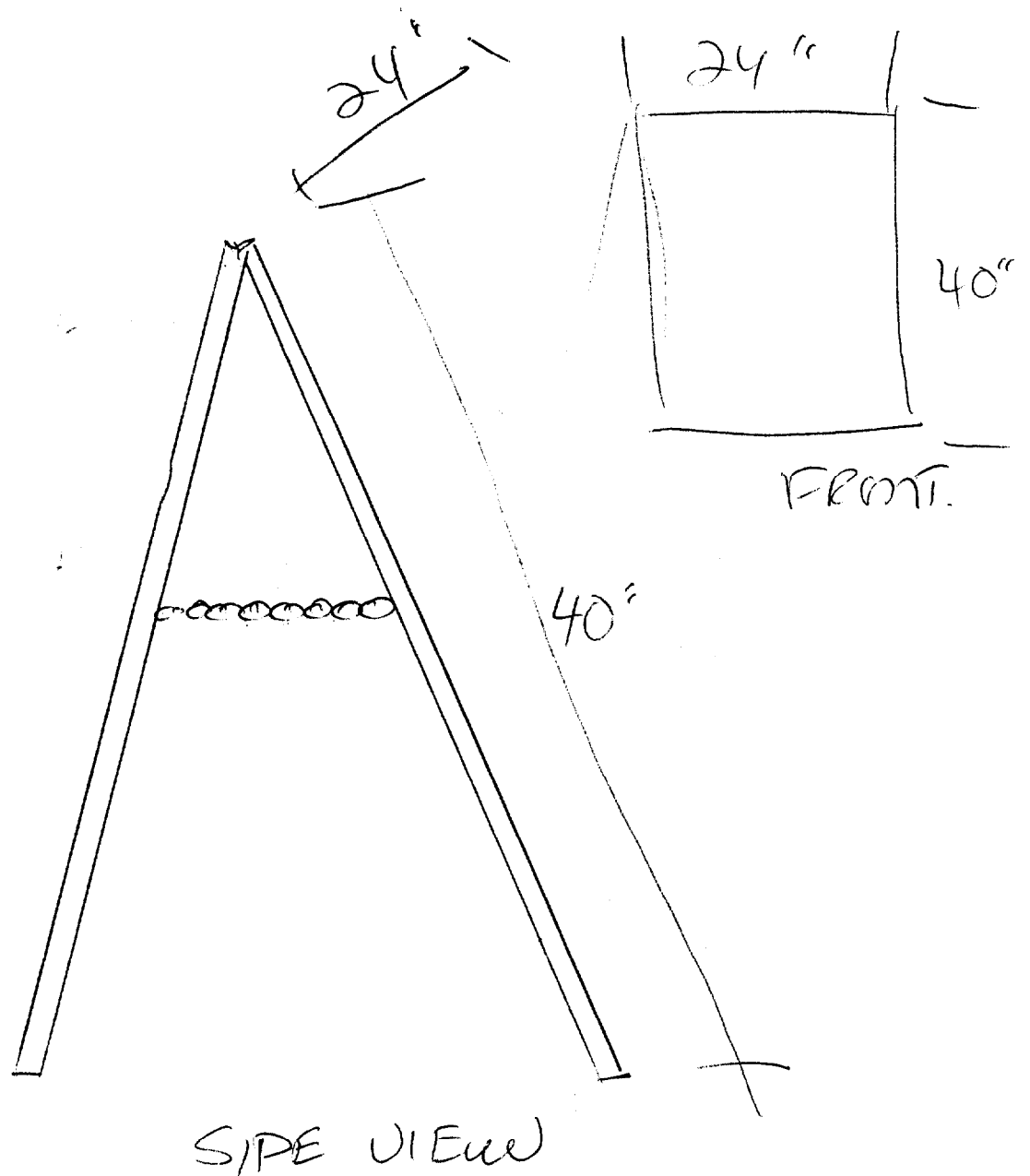
If you have any questions, please feel free to contact our office.

Sincerely,

A handwritten signature in black ink, appearing to read "Cathy-Ann Wirth".

Cathy-Ann Wirth
H.H. SAWYER REALTY COMPANY

"A" Frame Sign



SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 17 Pleasant Street ZONE: B-3

OWNER: Pamela J. Manning

APPLICANT: Pamela J. Manning

ASSESSOR NO. _____

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES NO MULTI-TENANT LOT? YES NO

FREESTANDING SIGN? (ex. Pole Sign) YES NO --- DIMENSIONS _____ HEIGHT _____

MORE THAN ONE SIGN? YES NO DIMENSIONS _____ HEIGHT _____

SIGN ATTACHED TO BLDG.? YES NO DIMENSIONS _____

MORE THAN ONE SIGN? YES NO DIMENSIONS _____

AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK _____

IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? _____

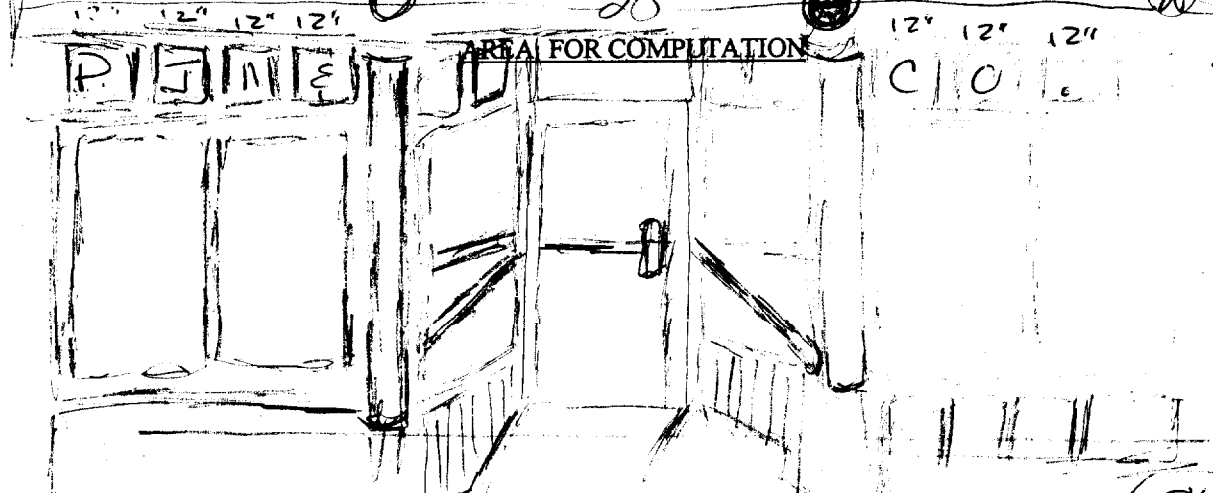
LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

12" x 4" +
4ft + 3' = 7ft
Bldg Sign
OK

20 x 2 = 40ft

*** TENANT BLDG. FRONTAGE (IN FEET): 20 x 2 = 40ft

*** REQUIRED INFORMATION



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: Pamela Manning

DATE: 9/1/02

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
06/27/2002

PRODUCER (207)774-6257 FAX (207)774-2994
Clark Associates
2385 Congress Street
P O Box 3543
Portland, ME 04104

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

INSURER A: Zurich-American Ins Group
INSURER B: Maine Employers Mutual
INSURER C:
INSURER D:
INSURER E:

INSURED PJM & Company
DBA: Pamela Manning
41 Maplewood Street
Portland, ME 04103

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 LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	TBD	06/27/2002	06/27/2003	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$ 1,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 2,000,000
					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	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 AUTO ONLY. EA ACC	\$
					AGG	\$
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input type="checkbox"/> RETENTION \$					\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	TBD	07/10/2002	07/10/2003	WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	\$ 100,000
					E.L. DISEASE - EA EMPLOYEE	\$ 100,000
					E.L. DISEASE - POLICY LIMIT	\$ 500,000
	OTHER					

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

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

HH Sawyer Realty Company & Daughters
Cathy
PO Box 7225
Portland, ME 04112

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

Teri Maloney-Kelly/TMK

Sheresa Maloney-Kelly

Par. this is your copy that was faxed.