DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that Lynn Krauss

Located At 5 SOUTH ST

Job ID: 2012-05-4007-CH OF USE

CBL: 038- E-027-001

has permission to An A-Frame Sidewalk Sign

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

N/A

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months. If the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Acting Director of Planning and Urban Development Gregory Mitchell

Job ID: <u>2012-05-4007-CH OF USE</u> Located At: <u>5 SOUTH ST</u> CBL: <u>038- E-027-001</u>

Conditions of Approval:

Zoning

- Based on conversations with the lessee, only the A-Frame sign is required at this time. The separate wall sign attached to the building is not being attached at this time.
- 2. All sidewalk signs shall be removed when the business is closed or while any snow or ice exists on the walkway within eight feet of the sign in any direction. All sidewalk signs shall be located near the curb rather than the building face. The sidewalk shall maintain a width of no less than 4 1/2 feet of unobstructed sidewalk width perpendicular to major flows. For a single tenant listing, the maximum width is 24 inches or less if needed for the 4.5 feet of unobstructed sidewalk width. The maximum height of a sidewalk sign is 40 inches to the top of the sign in place. The minimum height of a sidewalk sign is 30 inches to the top of the sign in place.

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

Job No: 2012-05-4007-CH OF USE 2012-43974 SIGN	Date Applied: 5/15/2012 Owner Name: 5 SOUTH STREET LLC		CBL: 038- E-027-001			
Location of Construction: 5 SOUTH ST			Owner Address: 5 SOUTH ST PORTLAND, ME 04101			Phone: 761-5911
Business Name: South Street Linen	Contractor Name: Lessee		Contractor Address: 5 South Street		Phone: 892-4478	
Lessee/Buyer's Name: Lynn Krauss	Phone: 829-4478		Permit Type: SIGN			Zone: B-3
Past Use: 1 st floor = retail and artist	Proposed Use: Same: 1st floor = retail and		Cost of Work:		CEO District:	
studio workshop 2 nd floor = architect offices per #2012-04-4007	same: I" floor = retail and artist studio workshop 2 nd floor = architect offices - to erect an A-frame sidewalk sign		Fire Dept: Approved Denied N/A Signature:		Inspection: Use Group: Type: All Signature:	
Proposed Project Description: SIGN	:		Pedestrian Activ	ities District (P.A.D.)		
Permit Taken By: Brad				Zoning Approval		
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building Permits do not include plumbing, septic or electrial work. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work. 		Shoreland Wetland Flood Zo Subdivis Site Plan	Shoreland Varia Wetlands Misc Flood Zone Cond Subdivision Inter Site Plan App Deni MajMiń MM		Variance Miscellaneous Conditional Use Interpretation Approved Denied Denied Date: Historic Provides Approved Approved Date:	
hereby certify that I am the owner of re e owner to make this application as his e appication is issued, I certify that the enforce the provision of the code(s) ap	s authorized agent and I agree e code official's authorized re	to conform to	all applicable laws of the	his jurisdiction. In addition,	, if a permit for wor	rk described in

DATE

PHONE

6-20-12 DWM Lynn 232-9829 Sign Smalok

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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: 43/745 South Structure B-S

Tax Assessor's Chart, Block & Lot Owner: Telephone:

Location/Address of Construction:	500TH STR	EET	6->	
Tax Assessor's Chart, Block & Lot	Owner:		Telephone:	
Chart# Block# Lot#	5 SOUTH STREET L	LC	207-761-5911	
038 E 027 001				
Lessee/Buyer's Name (If Applicable) LYNN KRAUSS @ SOUTH STREET LINEN	Contractor name, address & telephone:	Per s.f. plus For H.D. si Fee: \$ Awning I	f signage x \$2.00 s \$30.00 ignage \$75.00 Gee= cost of work :: \$144.00	
Who should we contact when the permit is ready	SOUTH STREET LINEN: LYNN KRAUS phone: 2	57-82	<u>3-4</u> 478	
Tenant/allocated building space frontage (feet)				
Current Specific use: PROFESSI	ONAL OFFICE / SMALL	L BUSV	UESS	
If vacant, what was prior use:				
Proposed Use:	3 X v	1' 12=	* 24	
Information on proposed sign(s): A FRAME Freestanding (e.g., pole) sign? Yes X No Dimensions proposed: 36" x 40" Bldg. wall sign? (attached to bldg) Yes X No Dimensions proposed: 30" x 15" Proposed awning? Yes No Is awning backlit? Yes No Height of awning: Length of awning: Depth: + 24 Is there any communication message trademark or symbol on it? Yes No 15				
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 No Dimensions: Bldg. wall sign? (attached to bldg) Yes No Dimensions: Awning? Yes No Sq. ft. area of awning w/communication: Awning? Yes No Sq. ft. area of awning w/communication:				
A site sketch and building sketch showing exactly where existing and new signage is lot and inspections. Sketches and/or pictures of proposed signage and existing building are also required to of proposed signage.				
Please submit all of the information of Failure to do so may result in the auto	utlined in the Sign/Awning Applic	ation Ch	ecklist.	
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 nauthorized by the owner to make this application as his a permit for work described in this application is issued	s/her authorized agent. I agree to conform to all a	pplicable law	s of this jurisdiction. In addition, if	

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

areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant:



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Receipts Details:

Tender Information: Check, Check Number: 498480

Tender Amount: 144.00

Receipt Header:

Cashier Id: bsaucier Receipt Date: 5/15/2012 Receipt Number: 43975

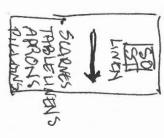
Receipt Details:

Referance ID:	6530	Fee Type:	BPSIGN2	
Receipt Number:	0	Payment Date:		
Transaction Amount:	144.00	Charge Amount:	144.00	

Job ID: Job ID: 2012-05-4007-CH OF USE - COU from Office to Retail; NO Construction

Additional Comments: 5 South

Thank You for your Payment!



STREET South PLEASANT STREET DAINTED SOI, X 40, ST SOUTH STREET MENT OR PAINTED (1/8" STEEL)
METAL ATTATCHED
WITH GROMMETS
AND SCREWS plywood



SOUTSTR-02

JSHIMINSKI

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/15/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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)

certificate holder in lieu of such endorsement(s).				
PRODUCER License # AGR8150	CONTACT NAME:			
Clark Insurance P O BOX 3543	PHONE (A/C, No, Ext): (207) 774-6257 FAX (A/C, No): (207) 774-299			
Portland, ME 04104	E-MAIL ADDRESS:			
	INSURER(S) AFFORDING COVERAGE		NAIC #	
	INSURER A: Continental Western Insurance Company			
NSURED	INSURER B:			
South Street Linen LLC	INSURER C:			
5 South Street	INSURER D:			
Portland, ME 04101	INSURER E:			
	INSURER F:			
COVERAGES CERTIFICATE NUMBER:	REVIS	ION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BE INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CON	DITION OF ANY CONTRACT OR OTHER DOCU	MENT WITH RESPECT TO WI	HICH THIS	

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS ADDL SUBR LIMITS TYPE OF INSURANCE POLICY NUMBER INSR WVD GENERAL LIABILITY 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) CPA0379544-11 3/30/2012 3/30/2013 50,000 COMMERCIAL GENERAL LIABILITY 10,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) \$ 1,000,000 PERSONAL & ADV INJURY \$ 2.000.000 GENERAL AGGREGATE \$ 2,000,000 \$ GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMPIOP AGG \$ POLICY COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY BODILY INJURY (Per person) S ANY AUTO ALL OWNED AUTOS SCHEDULED **BODILY INJURY (Per accident)** AUTOS NON-OWNED AUTOS PROPERTY DAMAGE S HIRED AUTOS \$ UMBRELLA LIAB EACH OCCURRENCE \$ OCCUR EXCESS LIAB AGGREGATE 8 CLAIMS-MADE \$ RETENTION \$ DED WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT \$ N/A E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)
Evidence of Insurance

CERTIFICATE HOLDER	CANCELLATION
City of Portland Congress Street Portland, ME 04101	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

