

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

Location of Construction: NEWBERRY 48 Free St		Owner: Cotton St Associates		Phone:	Permit No: 981116
Owner Address:		Lessee/Buyer's Name: Harvard Palgrim Health Care		Phone:	Business Name:
Contractor Name: Sign Solutions		Address: 75 Bishop St Pld, ME 04103		Phone: 878-8000	<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: SEP 29 1998 CITY OF PORTLAND </div>
Past Use: Office		Proposed Use: Same		COST OF WORK: \$ PERMIT FEE: \$ 35.40 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: <i>Sign</i> Use Group: Type: <i>BICA 4</i> Signature: <i>[Signature]</i>	
Proposed Project Description: Erect Signage 52 Sq Ft				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____	
Permit Taken By: Mary Grawik		Date Applied For: 04 December 1997			

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..

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 provisions of the code(s) applicable to such permit

04 December 1997

SIGNATURE OF APPLICANT <i>Kyle Noyes</i>	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

Zone: CBL: 038-1-018

Zoning Approval:

Special Zone or Reviews:

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

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: _____

CEO DISTRICT 1

SIGNAGE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 48 FREE ST. ZONE: _____

OWNER: RICARDO QUESADA

APPLICANT: SIGN SOLUTIONS

ASSESSOR NO.: _____

SINGLE TENANT LOT? YES _____ NO X

MULTI TENANT LOT? YES X NO _____

FREESTANDING SIGN? YES _____ NO X DIMENSIONS _____
(ex. pole sign..)

MORE THAN ONE SIGN? YES _____ NO X DIMENSIONS _____

BLDG. WALL SIGN? YES X NO _____ DIMENSIONS 3'6" x 4'
(attached to bldg)

MORE THAN ONE SIGN? YES _____ NO X DIMENSIONS _____

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: NONE

LOT FRONTAGE (FEET) 245'

BLDG FRONTAGE (FEET) 70'

AWNING YES _____ NO X IS AWNING BACKLIT? YES _____ NO _____

HEIGHT OF AWNING: _____

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

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF THE PROPOSED SIGNS ARE ALSO REQUIRED.

OWNERS CONSENT AND AGREEMENT


I, NEW GMN, INC., being the owner of the premises located at
(print property owners name)

48 FREE STREET in Portland, Maine, hereby give consent to the
(print property address)

erection of a certain sign/~~signing~~/~~banner~~ owned by HARVARD PILGRIM HEALTH CARE, INC.
(print lessee's name)

~~over the sidewalk~~ or on building from said premises as described in
application to the Division of Inspection Services.

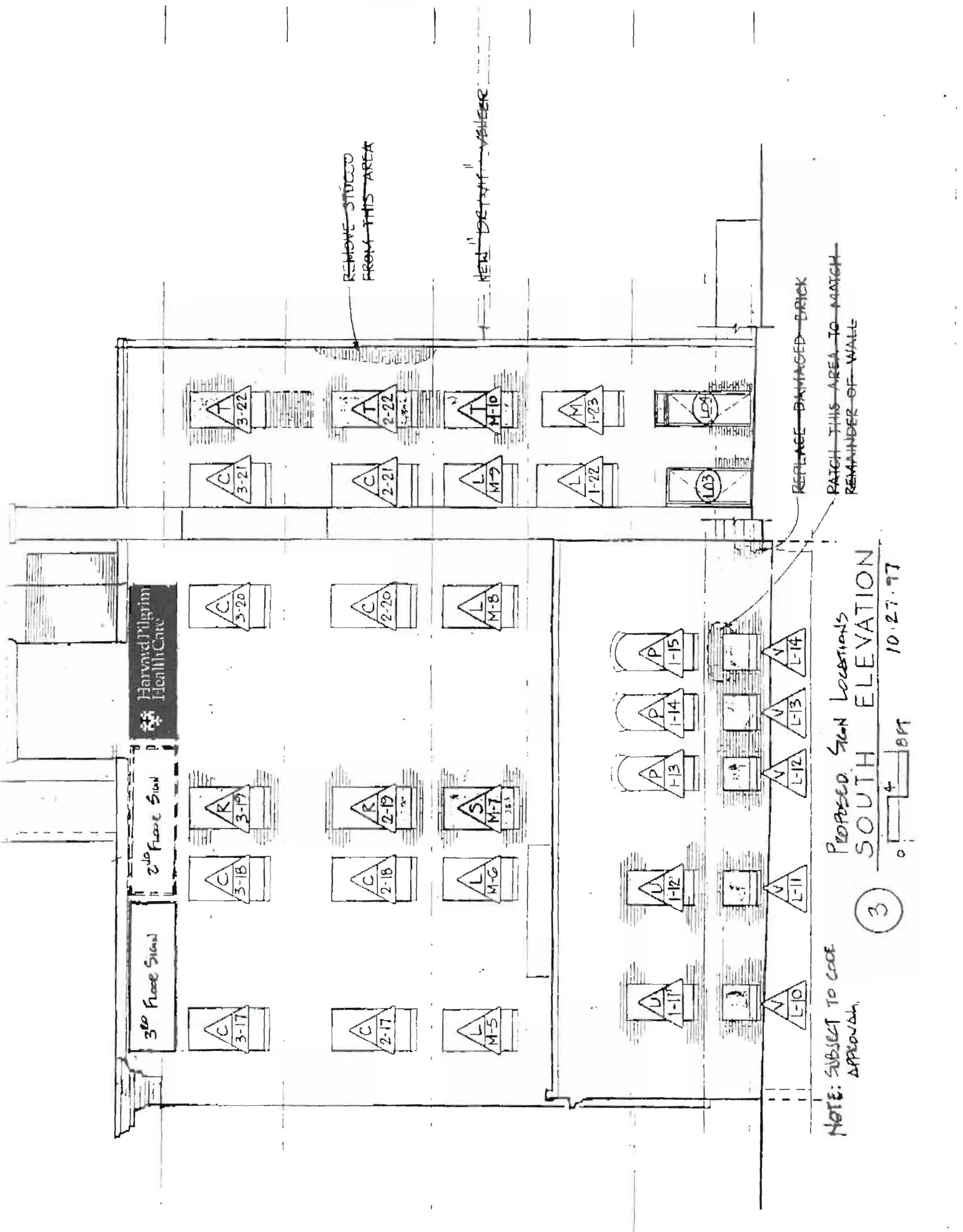
And in consideration of the issuance of said permit, owner of said premises,
in event said sign shall cease to serve the purpose for which it was erected
or shall become dangerous and in event the owner of said sign shall fail to
remove said sign or make it permanently safe in case the sign still serves
the purpose for which it was erected, hereby agrees for himself or itself,
for his heirs, its successors, and his or its assigns, to completely remove
said sign.


Signature of Property Owner
PETER U. QUESADA
VICE PRESIDENT
11/7/97
Date

Signature of Lessee

Date

170



3rd Floor Sign

2nd Floor Sign

Harvard Pilgrim HealthCare

REMOVE STUCCO FROM THIS AREA

REPLACE DAMAGED BRICK

REPLACE DAMAGED BRICK

PATCH THIS AREA TO MATCH REMAINDER OF WALL

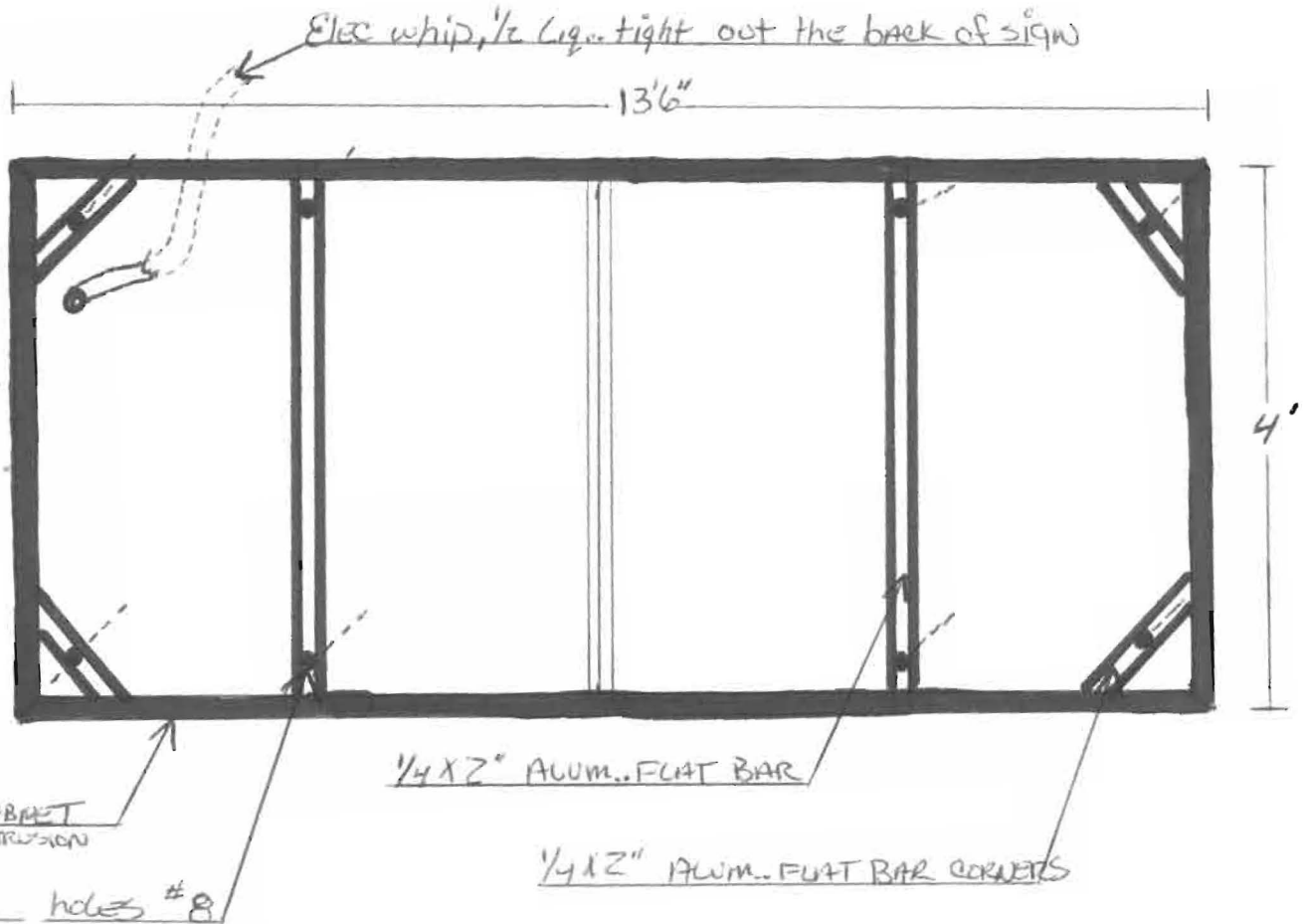
PROPOSED SIGN LOCATIONS
SOUTH ELEVATION

NOTE: SUBJECT TO CODE APPROVAL

3

0 4 8 FT

10.27.77



ALL ALUM... IS WELDED 100%. CABINET WILL BE ATTACHED USING 4" MASONRY STEEL ANCHORS. TOTAL # OF ANCHORS 8. FOUR IN CORNERS, FOUR IN MIDDLE.

75 BISHOP ST.
 PORTLAND, ME 04103
 (207) 878-8000
 1-800-347-6245
 FAX (207) 878-7790