

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any. Attached

Permit Number: 090166  
ISSUED  
2009

This is to certify that FRYE ASSOCIATES /Utopia Signs/ Street Signs  
has permission to One new sign - 12'x2' & 2' x3' (31 sf)  
AT 44 OAK ST

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 written permission procured before this building or part thereof is lathed or otherwise red-in. 24 HOURS 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 \_\_\_\_\_  
Department Name

*Chris A. Ma* 3/20/09  
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: 09-0166	Issue Date: 3/20/09	CBL: 039 B011001
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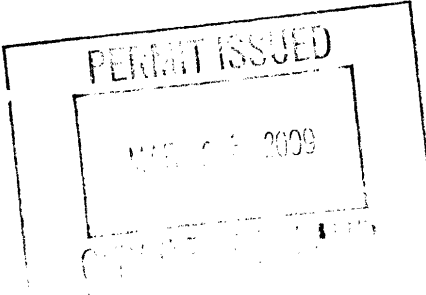
Location of Construction: 44 OAK ST (116 Free St.)	Owner Name: FRYE ASSOCIATES	Owner Address: 44 OAK ST	Phone:
Business Name:	Contractor Name: Utopia Designs/ Sterling Morse	Contractor Address: 74 County Road Gorham	Phone 2078394385
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial - Hair Salon/Spa	Proposed Use: Commercial - Hair Salon/Spa - "Head Games" - one new sign 12'x2' & 2' x3'.6" (31 sf)	Permit Fee: \$92.00	Cost of Work: \$92.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: Signage IBC-2003	

Proposed Project Description: One new sign - 12'x2' & 2' x3'.6" (31 sf)	Signature:	Signature: <i>CL 3/20/09</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: Ldobson	Date Applied For: 03/03/2009	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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/conditions Date: 3/16/09 ABM	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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: ABM
	<b>P.A.D. APPROVED W/ CONDITIONS 3/18/09 STA</b>		



**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

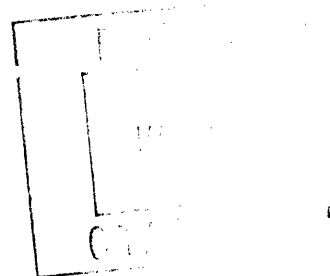
<b>Permit No:</b> 09-0166	<b>Date Applied For:</b> 03/05/2009	<b>CBL:</b> 039 B011001
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<b>Location of Construction:</b> 44 OAK ST (116 Free St.)	<b>Owner Name:</b> FRYE ASSOCIATES	<b>Owner Address:</b> 44 OAK ST	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Utopia Designs/ Sterling Morse	<b>Contractor Address:</b> 74 County Road Gorham	<b>Phone</b> (207) 839-4385
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	

<b>Proposed Use:</b> Commercial - Hair Salon/Spa - "Head Games" - one new sign 12'x2' & 2' x3'.6" (31 sf)	<b>Proposed Project Description:</b> One new sign - 12'x2' & 2' x3'.6" (31 sf)
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<b>Dept:</b> PAD	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Scott Hanson	<b>Approval Date:</b> 03/18/2009
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) Bottom of sign to be aligned with the bottom of the glass in the flanking transoms (approximately 4' above the position shown in the submitted drawing).			
<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 03/06/2009
<b>Note:</b> Change of use permit for salon & spa (#08-1011). "Head Games" & "The Landing" are both part of the salon/spa use.			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) Signs in PAD overlay zone shall be subject to the the standards set forth in the Downtown Urban Design Guidelines.			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Chris Hanson	<b>Approval Date:</b> 03/20/2009
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) Separate permits are required for any electrical, plumbing, HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.			
2) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.			

**Comments:**  
3/20/2009-gg: received permit from historic on 3/18/09. /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>44 Oak</u>		
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>039</u> <u>B</u> <u>011</u>	Owner: <u>Rick Goduti</u>	Telephone: <u>775-3184</u>
Lessee/Buyer's Name (If Applicable) <u>Head Games</u> contact: <u>Alanna</u>	Contractor name, address & telephone: <u>UTOPIA DESIGNS</u> <u>sterling Morse</u> <u>207-839.4385</u>	Total s.f. of signage x \$2.00 <u>62</u> <u>31.50</u> Per s.f. plus \$30.00/\$65.00 <u>30</u> For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ <u>92.00</u>
Who should we contact when the permit is ready: <u>ROB VERRIER</u> phone: <u>207.775.7110</u>		
Tenant/allocated building space frontage (feet): Length: <u>80</u> Height: <u>17</u> Lot Frontage (feet) <u>321</u> ? Single Tenant or Multi Tenant Lot _____		
Current Specific use: <u>SALON &amp; SPA / YOGA</u> If vacant, what was prior use: _____ Proposed Use: <u>SMB</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes _____ No _____ Dimensions proposed: _____ Height from grade: <u>10'6"</u> Bldg. wall sign? (attached to bldg) Yes <u>X</u> No _____ Dimensions proposed: <u>12' x 2' + 2' x 3'6"</u>		
Proposed awning? Yes _____ No _____ Is awning backlit? Yes _____ No _____ Height of awning: _____ Length of awning: _____ Depth: _____ Is there any communication, message, trademark or symbol on it? Yes _____ No _____ If yes, total s.f. of panels w/communications, message, trademark or symbol: _____ s.f.		
Information on existing and previously permitted sign(s): <u>N/A</u> 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: _____		
MAR - 4 2009		
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.		

12x2 = 24  
2x3.5 = 7  
31'

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](http://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: \_\_\_\_\_

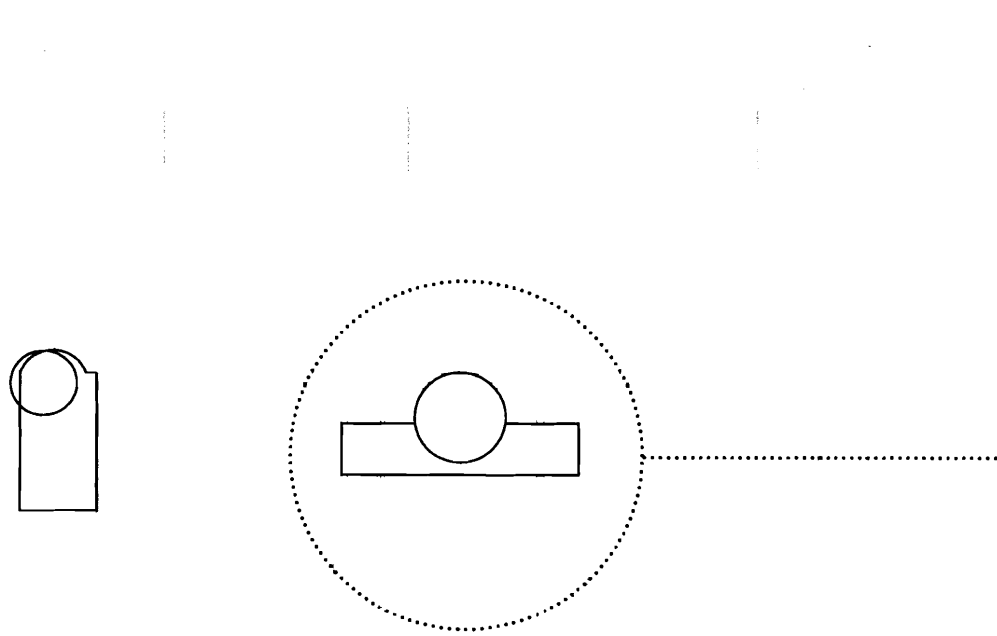
Date: 3/23/09

B3 - multi-tenant.  
frontage. 38 x 2 = 76

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

sign is 12' x 2' = 24'  
2 x 3.5' = 7'  
31' OK.

44 Oak Street signage  
*Lead Games*

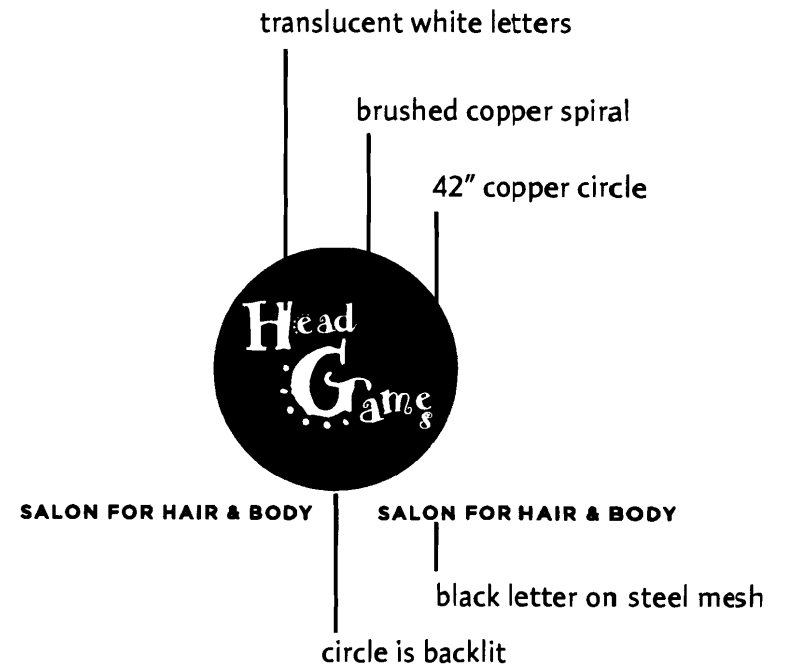


front

*Free Street Entrance*

top

uelle design



**ACORD CERTIFICATE OF LIABILITY INSURANCE** DATE (MM/DD/YYYY)  
2/25/2009

PRODUCER (207)781-5553 FAX: (207)781-5571 Smithwick & Mariners Ins. Inc. 366 US Route One  Falmouth ME 04105  INSURED Frye Associates 44 Oak Street  Portland ME 04101	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: <b>One Beacon Insurance</b> INSURER B: INSURER C: INSURER D: INSURER E:	NAIC #

**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	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	FM1U02559	12/31/2008	12/31/2009	EACH OCCURRENCE \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
 Permit for outside sign

<b>CERTIFICATE HOLDER</b>  City of Portland 389 Congress Street Portland, ME 04101	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> 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 <i>Margaret C. Goffe</i>
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# **Frye Associates**

44 Oak Street  
Portland, ME 04101  
207-772-7647 T  
207-774-0846 F  
marino@maine.rr.com

DATE \ March 3, 2009

To Whom It May Concern:

Frye Associates is aware that Head Games and The Landing have plans to install signs on the exterior of our building at 116 Free Street, Portland. We have seen these signs and where they are to be placed and have given them our approval.

Sincerely,

Diane D. Rollins  
Property Manager

# HEAD GAMES

1" = 1' 0"

PLAN VIEW

