Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

		_
CITY	OF PORTLAND	

Please Read Application And Notes, If Any, Attached

Permit Number: 061240

•	ns of the Statutes of I	ine and		ances of the C	ity of	Portland regula	ting
provided that th	he person or persons	rm or	dion	epting this pe	mit	shall comply with	4 9 11
AT 53 YORK ST				040 C030001			1
has permission to	Install one 28" x 38" bldg si				1		1
This is to certify that_	BELL MOUNTAIN LTD LI	The Signer	У			PERMIT 1330CD	1
				,		PERMIT ISSUED	

of buildings and

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and u this department.

Apply to Public Works for street line and grade if nature of work requires such information.

fication finspe n mus n and w en permi on proci re this lding or rt there ed or osed-in UR NOTICE IS REQUIRED.

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

OTHER	REQUIRED	APPROVALS
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Fire Dept. Health Dept. Appeal Board Other Department Name

ctures, and of the application on file in

PENALTY FOR REMOVING THIS CARD

RESPONSIBLE PERSON IN CHAR	OCE OF WORK TITLE			DATE		PHON	
SIGNATURE OF APPLICANT		ADDRE:	SS	DATE		PHON	IE
I hereby certify that I am the or I have been authorized by the conjurisdiction. In addition, if a poshall have the authority to ente such permit.	owner to make this appleermit for work describe	lication as his authorized in the application is	the proposed worked agent and I agre issued, I certify that	e to conform to t the code offi	o all applica cial's author	ble laws or ized repres	f this sentative
		Date: 9/8/06 78	Date:		Date:	1 res	06 1011 R
		٠٠٠ ١٠٠	_	ı			1
		Site Plan App				Approved Approved w/Conditions Denied	
False information may inv permit and stop all work		Subdivision Int		Interpretation			
3. Building permits are void within six (6) months of the		☐ Flood Zone ☐ Condit		tional Use	· Re	quires Revie	:w
2. Building permits do not in septic or electrical work.	ilding permits do not include plumbing,		Miscellaneous		Does Not Require Review		
	Applicant(s) from meeting applicable State and		☐ Variar	nce	Not in District or Landm		
This permit application do	<u> </u>	Special Zone or Revi	one or Reviews Zon		oning Appeal Histor		vation
Permit Taken By: dmartin	Date Applied For: 08/24/2006		Zoning Approval				
			Signature:	Date:			
			Action: Appr	oved Appr	oved w/Conditi	ions 🔲 🛭	Denied
Histair One 20 x 30 Glug sigi	ı		PEDESTRIAN ACT				
Proposed Project Description: Install one 28" x 38" bldg sign	n		Signature:		Signature: \int	~ ^	10/06
				Denied	IBC Signature: 3		
	bldg sign		FIRE DEPT:	Approved	INSPECTION Use Group: R		Гуре: 🔏
Commercial	I -	stall one 28" x 38" \$80.0		1	0.00	1	
Past Use:	Proposed Use:		Signs - Perman	Cost of Work	CEO	District:	63
Lessee/Buyer's Name	Phone:		Permit Type:			- 1:	Zone:
- 4011-055 F (W	The Signery	•	299 Forest Aver			77799 078 7 9770	اهر
Business Name:	Contractor Name		Contractor Addres	CITY O	F P() () PM	igha)	+
Location of Construction: 53 YORK ST	Owner Name:	ITAIN LTD LLC	Owner Address: PO BOX 2238		Pi	none:	
389 Congress Street, 04101		3, Fax: (207) 874-87.	_===			040 C 030	5001
City of Portland, Maine	•			Issue Date:	1	BL:	_ [
			Downit No.	Pl:R	MIT ISSU		—

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

Permit No: Date Applied For: CBL: City of Portland, Maine - Building or Use Permit 06-1240 08/24/2006 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 040 C030001 Location of Construction: Owner Name: Owner Address: Phone: 53 YORK ST BELL MOUNTAIN LTD LLC PO BOX 2238 Business Name: Contractor Name: Contractor Address: Phone 299 Forest Avenue Portland (207) 879-7700 The Signery Lessee/Buyer's Name Permit Type: Phone: Signs - Permanent Proposed Use: Proposed Project Description: Commercial install one 28" x 38" bldg sign Install one 28" x 38" bldg sign 09/28/2006 **Approval Date:** Dept: Historical Status: Approved Reviewer: Deborah Andrews Ok to Issue: Note: Reviewer: Ann Machado **Approval Date:** 09/08/2006 Dept: Zoning Status: Approved with Conditions Note: Per viocemail form owner. Two tenants in building. Lupchick is on the third floor. LMGL is on the second Ok to Issue: floor. One is an advertising business and one is a graphic design office. First floor is vacant. 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District. 10/10/2006 Status: Approved Reviewer: Tom Markley **Approval Date:** Dept: Building Ok to Issue:

Comments:

and approrval prior to work.

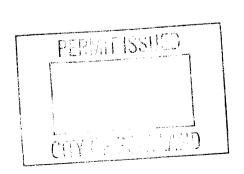
Note:

9/7/2006-amachado: Left message with George Vicenzi. Need to know if sign is for all the tenats or just one. Who are the tenants at this point?

1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review

9/8/2006-amachado: George Vicenzi left me a viocemail. It is a directory sign two of the tenats in the building.

9/8/2006-amachado: Left message with George Vicenzi. Need a certificate of liability.

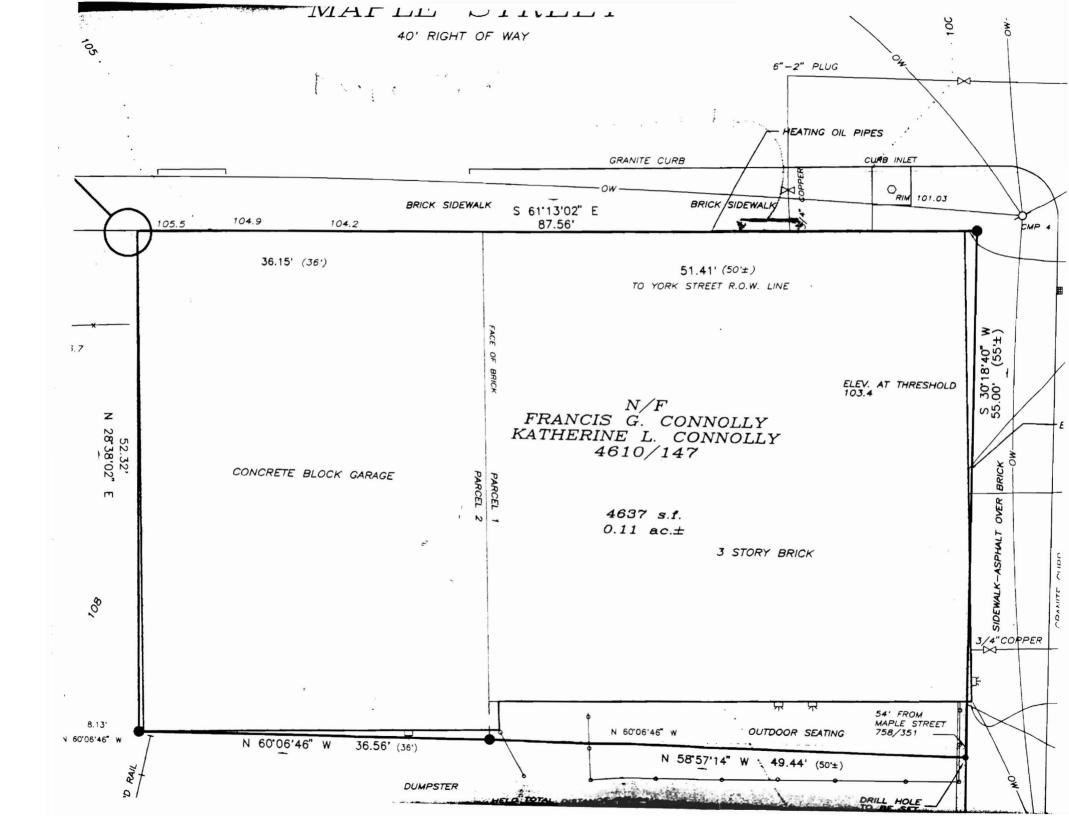


<u> </u>	ACORD CERTIFIC	ATE OF LIABIL	ITY INSU	RANCE	OPID AF	DATE (MAN/DD/YYYY)	
Tu	DUCER rner Barker Insurance e India Street	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.					
	rtland ME 04101 one:207-773-8156	07-773-6647	INCLIDEDE A	EEODONG OOM	704.05		
INSL				FFORDING COVE		NAIC#	
			INSURER A:	One Beacon	Insurance	20621	
	Bell Mountain LTD.	LLC	INSURER C				
ł	Bell Mountain LTD. By George A Vicenz PO Box 2238 Aspen CO 81612	1 Trust	INSURER D:				
	Aspen CO 81612		INSURER E:				
CO,	VERAGES						
AN M/	HE POLICIES OF INSURANCE LISTED BELOW HAY HY REQUIREMENT, TERM OR CONDITION OF ANY MY PERTAIN, THE INSURANCE AFFORDED BY TH DLICIES, AGGREGATE LIMITS SHOWN MAY HAVE	CONTRACT OR OTHER DOCUMENT WIT E POLICIES DESCRIBED HEREIN IS SUBJ	H RESPECT TOWHICH	I THIS CERTIFICATE N	IAY BE ISSUED OR		
NSR LTR	ADDTL INSRD TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DDYY)	POLICY EXPIRATION DATE (MIMODYYY)	LIMIT	<u> </u>	
	GENERAL LIABILITY				EACH OCCURRENCE	\$ 2000000	
A	X COMMERCIAL GENERAL LIABILITY	FM1U18788	01/03/06	01/03/07	PREMISES (Ea occurence)	\$ 300000	
	CLAIMS WADE X OCCUR				MED EXP (Any one person)	s 5000	
					PERSONAL & ADV INJURY	\$ 2000000	
	05111 100050175 1115 150 750				GENERAL AGGREGATE	s 4000000	
	POLICY PRO-				PRODUCTS - COMPIOP AGG	<u>\$ 4000000</u>	
	AUTOMOBILE LIABILITY ANY AUTO	-			COMBINED SINGLE LIMIT (Ea accident)	\$	
	ALL OWNED AUTOS SCHEDULED AUTOS				80DILYINJURY (Per person)	\$	
	HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$	
					PROPERTY DAMAGE (Per accident)	\$	
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	<u>\$</u>	
	ANY AUTO			ļ	OTHER THAN EA ACC	\$	
	EXCESS/UMBRELLA LIABILITY	.			EACH OCCURRENCE	<u>s</u>	
	OCCUR CLAIMS WADE	·			AGGREGATE	<u> </u>	
						\$	
	DEDUCTIBLE	•				\$	
	RETENTION \$					8	
	WORKERS COMPENSATION AND				TORY LIMITS ER		
	EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXCLUDED? If yea, describe under				E.L. DISEASE - EA EMPLOYEE	\$	
	SPECIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	<u>\$</u>	
A	Property Section Special Form	FM1U18788	01/03/06	01/03/07	Building Deductibl	\$1,265,000 \$1,000	
	RIPTION OF OPERATIONS/ LOCATIONS/ VEHIC	LES / EXCLUSIONS ADDED BY ENDORSE	MENT / SPECIAL PRO	/ISIONS			
	ffice Building LRO oof of insurance in rega	anda ta the incurred	eion which	h	ad to the		
	ilding.	itas to the instreas	Bigii, Wille	a to accacii	ad to the		
Ju.				į			
CE	RTIFICATE HOLDER		CANCELLATI	OM			
CEI	THIORIE HOLDEN	CIMYARI			BED POLICIES BE CANCELLED	REFORE THE EXPIRATION	
		CITYOF	-		R WILL ENDEAVOR TO MAIL		
No. of Post land				NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO			
City of Portland City Hall			- 1		Y OF ANY KIND UPON THE INSU		
389 Congress St			REPRESENTATI	i	_		
Portland ME 04101			Idn_{-}	Mo			
			_ Jalla	na Fog			
ACC)RD 25 (2001/08)					CORPORATION 1988	

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: S1-	53 YOUT ST, POUTL	nd, ME, 04101
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: Bell MTA LTd., LLC	Telephone:
40.C -30,31,38	Box 2738 Aspen Co. 81612	70-423-71-70
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone: The Signery &4 Con ST.	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total
	Portland, ME. OHIOI	Fee: \$ 60 Awning Fee= cost of work Total Fee: \$ 70
	267-879-7700	
Who should we contact when the permit is read	ly. George Vicenzi phone: 9	30-352-11016
Tenant/allocated building space frontage (f Lot Frontage (feet)		Tolto
Current Specific use:	x CC	
If vacant, what was prior use: Proposed Use: building ID Sign Information on proposed sign(s):	- I thank - Lupchick - this - LMGL - secon	altor - advertising
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes		
Proposed awning? Yes No Is aw Height of awning: Length of Is there any communication, message, tradem If yes, total s.f. of panels w/communications,	awning: Depth: nark or symbol on it? Yes No	DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME AUG 2 1 2006
Information on existing and previously perm Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes Awning? Yes No \(\sum_\) Sq. ft. are	No Dimensions: No Dimensions:	RECEIVED
A site sketch and building sketch showing e Sketches and/or pictures of proposed signal	xactly where existing and new signage is loge and existing building are also required.	ocated must be provided.
Please submit all of the information of Failure to do so may result in the aut		cation Checklist.
In order to be sure the City fully understands the additional information prior to the issuance of a Building Inspections office, room 315 City Hall	permit. For further information visit us on-lin	
I hereby certify that I am the Owner of record of the authorized by the owner to make this application as he a permit for work described in this application is issue areas covered by this permit at any reasonable hour to	is/her authorized agent. I agree to conform to all add, I certify that the Code Official's authorized repr	applicable laws of this jurisdiction. In addition, if resentative shall have the authority to enter all
Signature of applicant:	Was Date	: S/11/06
	you may not commence ANY work until the	e permit is issued.
invitiblement - Bld IDsisn 5% of woll would rea	will = 87 Tx 30=	1064 \$ = 7.39\$
5% of wollarea	2°"x 36"=	1064 A = 7.39A





PLEASE REVIEW THIS PROOF CAREFULLY!

- O Approved as is
- O Approved with corrections
- O Make changes and resend new proof

Signature:	 	
_		

Date:



JOB INFO #10318

DESIGNER

(x1) Black A umakre - Cut to shape or not - 28 x 38"

PROOF PAGE 1 of 2

Painted PAss mater 55351 - Paint viny so while instilled, screws can be midden Painted PAss mater 55351, snapstim around perimeter HP Borge header - 3.5% x (2.125)

(x4) 040 Alaminum - Do not round co-ners - 4.25% x 36% Sheat out with HP beige, HP Routle Green Copy. I with Wimaki Print on HP Attached to Alumailte using Blind Screws in Corners FILE vicenza directory 28 maple 10318 ptt - 05-05vicenzi directory





George Vicenzi