

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING INSPECTION

### PERMIT



Please Read Application And Notes, If Any, Attached

Permit Number: 081357

PERMIT ISSUED

This is to certify that ALL IN ENTERPRISES LLC Harbor S

has permission to New awning 42" x 3'

AT 53 YORK ST

City of Portland 040 C030001

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 HOUR 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

*Thomas M. MacKey* 10/31/08  
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: 08-1357	Issue Date:	CBL: 040 C030001
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Location of Construction: 53 YORK ST	Owner Name: ALL IN ENTERPRISES LLC	Owner Address: 144 FORE ST # D2	Phone:
Business Name:	Contractor Name: Scarboro Signs	Contractor Address: 680 US Rt. 1 Scarborough	Phone 2078836796
Lessee/Buyer's Name	Phone:	Permit Type: Awning, no signage	Zone: <b>B-3</b>

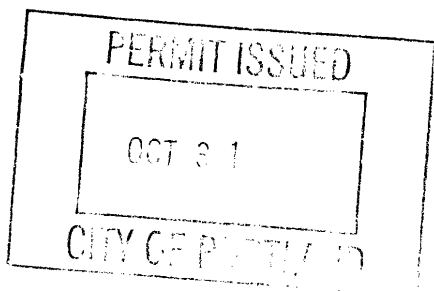
Past Use: Commercial - "Portland Pie"	Proposed Use: Commercial - "Portland Pie" - New awning 42" x 3' = <i>No Signage or logos on awning</i>	Permit Fee: \$30.00	Cost of Work: \$700.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <b>A2</b> Type: <b>5B</b> <b>IRC 2003</b>	

Proposed Project Description: New awning 42" x 3'	Signature:	Signature: <i>Jm 10/31/08</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: Idobson	Date Applied For: 10/24/2008	<b>Zoning Approval</b>
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input checked="" type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>ok with conditions</i> <i>5 10/27/08</i>	Date: _____	Date: <i>10/30/08</i> <i>D. Andrews</i>



**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



# 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>28 Maple St. Portland</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>40</u> Block# <u>C</u> Lot# <u>30</u>	Owner: <u>NAT GETCHELL</u> <u>Portland Pie</u>	Telephone: <u>632-1300</u>
Lessee/Buyer's Name (If Applicable) <u>Portland Pie</u> <u>(owner)</u> <u>NAT Getchell</u>	Contractor name, address & telephone: <u>Scarboro Signs</u> <u>608 US Rt 1</u> <u>Scarboro Me. 04074</u> <u>883-6796</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ <u>700.00</u> Awning Fee= cost of work Total Fee: \$ <u>700.00</u>
Who should we contact when the permit is ready: <u>Kyle Noyes</u> phone: <u>883 6796</u>		
Tenant/allocated building space frontage (feet): Length: <u>40'</u> Height: <u>30'</u> Lot Frontage (feet) <u>60'</u> Single Tenant or Multi Tenant Lot <u>Multi</u>		
Current Specific use: <u>Portland Pie Production</u> If vacant, what was prior use: _____ Proposed Use: <u>Manufacturing</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions proposed: _____ Height from grade: <u>10'</u> Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No ___ Dimensions proposed: <u>3x3' x 42"</u>		
Proposed awning? Yes <input checked="" type="checkbox"/> No ___ Is awning backlit? Yes ___ No <input checked="" type="checkbox"/> Height of awning: <u>3'</u> Length of awning: <u>42'</u> Depth: <u>3'</u> Is there any communication, message, trademark or symbol on it? Yes ___ No <input checked="" type="checkbox"/> 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: _____ <u>NONE</u>		
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.		

OCT 24 2008

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: <u>[Signature]</u>	Date: <u>10-21-08</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

**BUILDING PERMIT INSPECTION PROCEDURES**

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

**to schedule your inspections as agreed upon**

**Permits expire in 6 months, if the project is not started or ceases for 6 months.**

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

**By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.**

**A Pre-construction Meeting will take place upon receipt of your building permit.**

  X   **Final inspection required at completion of work.**

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

**If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

\_\_\_\_\_  
Signature of Applicant/Designee

*Thomas H. Malley*  
\_\_\_\_\_  
Signature of Inspections Official

\_\_\_\_\_  
Date

*10/31/08*  
\_\_\_\_\_  
Date

**City of Portland, Maine - Building or Use Permit**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>Permit No:</b> 08-1357	<b>Date Applied For:</b> 10/24/2008	<b>CBL:</b> 040 C030001
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<b>Location of Construction:</b> 53 YORK ST	<b>Owner Name:</b> ALL IN ENTERPRISES LLC	<b>Owner Address:</b> 144 FORE ST # D2	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Scarboro Signs	<b>Contractor Address:</b> 680 US Rt. 1 Scarborough	<b>Phone</b> (207) 883-6796
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Awning, no signage	

<b>Proposed Use:</b> Commercial - "Portland Pie" - New awning 42" x 3' with no signage	<b>Proposed Project Description:</b> New awning 42" x 3' with no signage
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<b>Dept:</b> Historic	<b>Status:</b> Approved	<b>Reviewer:</b> Deborah Andrews	<b>Approval Date:</b> 10/30/2008	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b>				
<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 10/27/2008	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b>				
1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.				
2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. It is understood that there is no signage (street number only) or logos to be placed on this proposed awning.				
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tom Markley	<b>Approval Date:</b> 10/31/2008	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b>				
1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.				
2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.				

To: Kyle Noyes Fr: Nat Getchell

**CITY OF PORTLAND, MAINE**  
**HISTORIC PRESERVATION BOARD**

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John Turk, Chair  
Rick Romano, Vice Chair  
Otis Baron  
Martha Deprez  
Michael Hammen  
Ted Oldham  
Cordelia Pitman

September 29, 2008

Nat Getchell  
Portland Pie Company  
144 Fore Street #D2  
Portland, Maine 04101

Re: Awning installation; 53 York Street

Dear Mr. Getchell:

This office has reviewed and approved your request for a Certificate of Appropriateness for installation of an awning over the entrance on the east façade of 53 York Street. Approval is for the application as submitted.

All improvements shall be carried out as shown on the plans and specifications submitted as part of your application dated 9-5-08. Changes to the approved plans and specifications and any additional work which may be undertaken must be reviewed and approved by this office prior to construction, alteration, or demolition. If, during the course of completing the approved work, conditions are encountered which prevent completing the approved work, or which require additional or alternative work, you must apply for and receive a Certificate of Appropriateness or Non-Applicability PRIOR to undertaking additional or alternative work.

This Certificate is granted upon condition that the work authorized herein is commenced within twelve (12) months after the date of issuance. If the work authorized by this Certificate is not commenced within twelve (12) months after the date of issuance or if such work is suspended in significant part for a period of one year after the time the work is commenced, such Certificate shall expire and be of no further effect; provided that, for cause, one or more extensions of time for periods not exceeding ninety (90) days each may be allowed in writing by the Department.

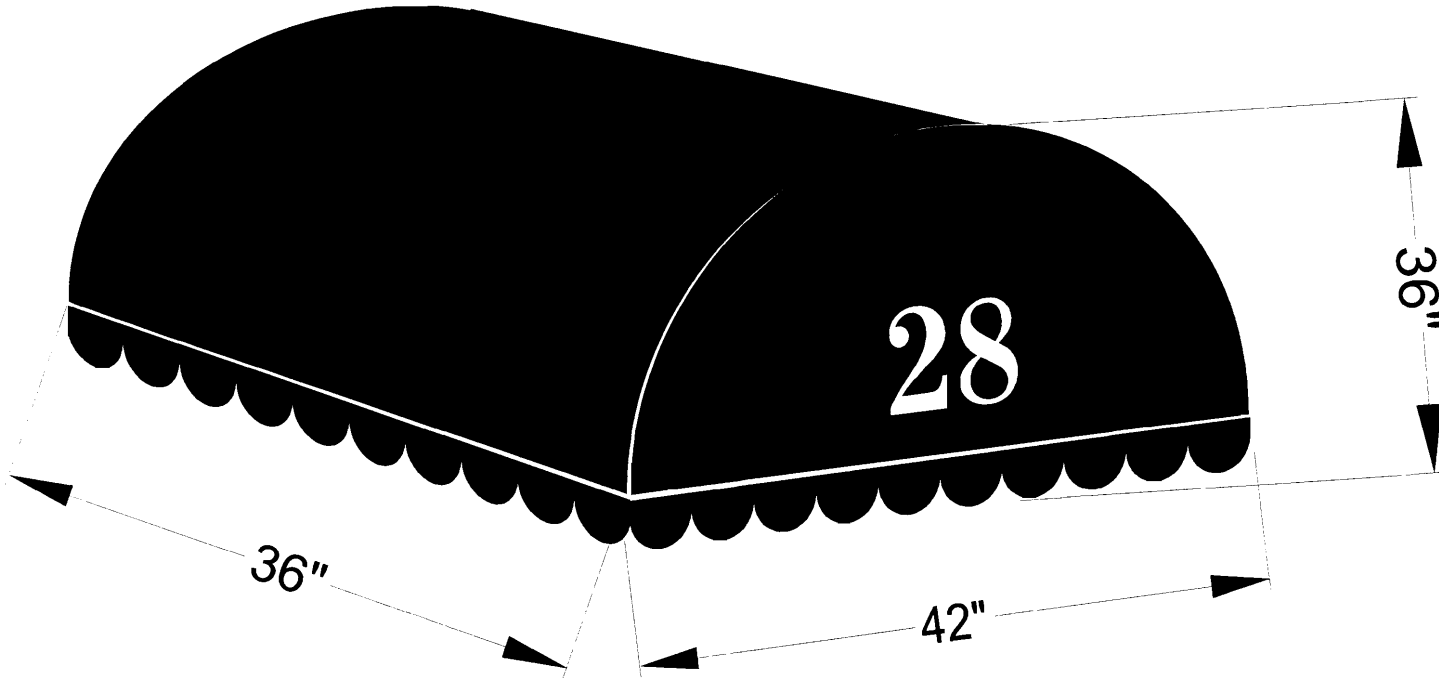
Note: Your project may also require a building permit. Please call Building Inspections (874-8703) to make this determination.

Sincerely,

  
Deborah Andrews  
Historic Preservation Program Manager

cc: Approval File

**PORTLAND PIE CO.**



608 US Route One, Scarborough, Me. 04074  
 207-883-6796 Fax: 207-885-0088  
 email: ssigns1@maine.rr.com

Client Name:  
**PORTLAND PIE CO.**  
 Location:

Start Date:  
 Last Revision:  
 Job#:  
 Drawing#:  
 Page:

.....  
 Client Approval

.....  
 Landlord Approval

Sales Rep:  
 Paul Adler  
 Designer:  
 KYLE NOYES





(Install above door)  
Steel Brackets legs bolted into wall



# Certificate of Flame Resistance



ISSUED BY  
Glen Raven Custom Fabrics, LLC  
1831 North Park Avenue  
Glen Raven, NC 27217

(Phone) 336/227-6211 (Fax) 336/229-4039

Date treated or  
manufactured  
**1-30-2008**

*This is to certify that the materials described below have been flame-retardant treated (or are inherently nonflammable).*

FOR **BANGOR CANVAS SUPPLY**  
**PO BOX 1774**  
**BANGOR**  
**ME 04402**

Certification is hereby made that: (Check "a" or "b")

(a) The articles described below this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used \_\_\_\_\_ Chem. Reg. No. \_\_\_\_\_

Method of application \_\_\_\_\_

(b) The articles described below are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric or material used

**88008**  
**FIRESIST HUV BLACK**

Reg. No. **F-368.05**

**The Flame-Retardant Process Uscd WILL NOT Be Removed By Washing**

**Glen Raven Custom Fabrics, LLC**

*Name of Applicator or Production Superintendent*

By *Steven L. Ellington*  
*General Manager/Steven L. Ellington*

Control Number 39200

Order Number 88378

PO Number

Invoice Number 1517208

Quantity 10.00

# ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID WE  
PORTL22

DATE (MM/DD/YYYY)  
10/21/08

<b>PRODUCER</b>  Turner Barker Insurance 63 Marginal Way, Suite 101 Portland ME 04101 Phone: 207-773-8156 Fax: 207-773-6647	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.	
	<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>
<b>INSURED</b>  Portland Pie Company, LLC Steve Freese 51 York Street Portland ME 04101	INSURER A: Peerless Insurance Co.	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

**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	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <u>Liquor Liability-</u> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	BOP8082242	11/03/07	11/03/08	EACH OCCURRENCE \$ 2000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300000 MED EXP (Any one person) \$ 15000 PERSONAL & ADV INJURY \$ 2000000 GENERAL AGGREGATE \$ 4000000 PRODUCTS - COMP/OP AGG \$ 4000000
		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 AUTO ONLY: EA ACC \$ 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 OTHER				WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
 City of Portland is named as an Additional Insured for general liability as respects the awning at 28 Maple Street, Portland, ME.

<b>CERTIFICATE HOLDER</b>  CITYOFF  City of Portland City Hall 389 Congress St 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 10 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 William Exley <i>William R. Exley</i>
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