

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

Location of Construction: 51-53 York St		Owner: Andy Graham/Giclee Printing		Phone: 774-2689		Permit No: 981118	
Owner Address: 44 Macy St 04102		Lessee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: Prostyle Design, Ste 501		Address: 142 High St Portland, ME 04101		Phone: 775-3269		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: SEP 29 1998 CITY OF PORTLAND </div>	
Past Use: Offices		Proposed Use: Same		COST OF WORK: \$ _____ PERMIT FEE: \$ 31.00			
Proposed Project Description: Erect Signage		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____		INSPECTION: Use Group: Type:		Zone: CBL: 040-C-030	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		Zoning Approval: Special Zone or Reviews: <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"/>	
Permit Taken By: HG		Date Applied For: 24 August 1998					

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

26 August 1998

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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 



THIS IS NOT A PERMIT/CONSTRUCTION CANNOT COMMENCE UNTIL THE PERMIT IS ISSUED

**Building or Use Permit Pre-Application
Attached Single Family Dwellings/Two-Family Dwelling
Multi-Family or Commercial Structures and Additions Thereto**

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

NOTEIf 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 (include Portion of Building) <i>51-53 York St.</i>	
Total Square Footage of Proposed Structure	Square Footage of Lot
Tax Assessor's Chart, Block & Lot Number Chart# <i>040</i> Block# <i>C</i> Lot# <i>030</i>	Owner: <i>Andy Graham/Giclee Printing Co.</i> <i>44 Macy St.</i> <i>Portland, Me. 04102</i>
	Telephone#: <i>774 2689</i>
Owner's Address: <i>An 44 Macy St.</i> <i>Portland, Me. 04102</i>	Lessee/Buyer's Name (If Applicable)
	Cost Of Work: <i>\$ 30 S.F.</i> Fee <i>\$ 31-</i>
Proposed Project Description: (Please be as specific as possible) <i>1'-4" x 20' SIGN OF MDO PLYWOOD IN PINE FRAME MOUNTED FLUSH TO WALL, NOT PROJECTING</i>	
Contractor's Name, Address & Telephone <i>Prostyle design, Suite 501, 142 High St. Portland, ME 04101 775 3269</i>	Rec'd By <i>[Signature]</i>
Current Use:	Proposed Use: <i>Offices</i>

Separate permits are required for Internal & External Plumbing, HVAC and Electrical installation.

- All construction must be conducted in compliance with the 1996 B.O.C.A. Building Code as amended by Section 6-Art II.
- All plumbing must be conducted in compliance with the State of Maine Plumbing Code.
- All Electrical Installation must comply with the 1996 National Electrical Code as amended by Section 6-Art III.
- HVAC (Heating, Ventilation and Air Conditioning) installation must comply with the 1993 B.O.C.A. Mechanical Code.

You must include the following with you application:

- 1) A Copy of Your Deed or Purchase and Sale Agreement
- 2) A Copy of your Construction Contract, if available
- 3) A Plot Plan/Site Plan

Minor or Major site plan review will be required for the above proposed projects. The attached checklist outlines the minimum standards for a site plan.

4) Building Plans

Unless exempted by State Law, construction documents must be designed by a registered design professional.

A complete set of construction drawings showing all of the following elements of construction:

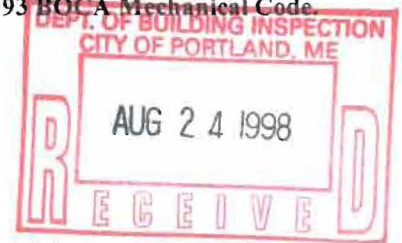
- Cross Sections w/Framing details (including porches, decks w/ railings, and accessory structures)
- Floor Plans & Elevations
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

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/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: <i>Anthony R. Taylor</i>	Date: <i>August 24, 1998</i>
--	------------------------------

Building Permit Fee: \$25.00 for the 1st \$1000. cost plus \$5.00 per \$1,000.00 construction cost thereafter.
Additional Site review and related fees are attached on a separate addendum



SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 51-53 York St. ZONE: B-3

OWNER: Andy Graham/dba Giclee Printing Co

APPLICANT: Andy Graham/dba Giclee Printing Co.

ASSESSOR NO. _____

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES NO MULTI-TENANT LOT? YES NO
FREESTANDING SIGN? (ex. Pole Sign) YES NO --- DIMENSIONS _____ HEIGHT _____
MORE THAN ONE SIGN? YES NO DIMENSIONS _____ HEIGHT _____
SIGN ATTACHED TO BLDG.? YES NO DIMENSIONS 1'-9" x 20'-0" = 3
MORE THAN ONE SIGN? YES NO DIMENSIONS 1.25 x 20 = 25#
AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK 9'-0"
IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? _____

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: none

*** TENANT BLDG. FRONTAGE (IN FEET): 60' x 2 = 120#
*** REQUIRED INFORMATION

AREA FOR COMPUTATION

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

SIGNATURE OF APPLICANT: Anthony R Taylor DATE: July 24 2013

LESS



ISSUE DATE: 03/12/1998

Policy Number: BOP9229746		Prior Policy:	
Billing Type: AGENCY BILL			
Coverage Is Provided In The PEERLESS INSURANCE COMPANY			
Named Insured and Mailing Address: GICLEE PRINTING CO LLC 43 MACY STREET PORTLAND ME 04102		Agent: TURNER BARKER INSURANCE ONE INDIA ST PORTLAND ME 04101	
		Agent Code: 8210213 Agent Phone: (207)-773-8156	

**COMMERCIAL PROTECTOR POLICY DECLARATIONS
SPECIAL (INCLUDING EQUIPMENT BREAKDOWN)**

In return for the payment of premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

POLICY PERIOD: From: 03/12/1998 To: 03/12/1999 at 12:01 AM Standard Time at your mailing address shown above.

FORM OF BUSINESS: OTHER

BUSINESS DESCRIPTION: BUILDING OWNER

DESCRIPTION OF PREMISES

Prem. No.	Bldg. No.	Location Occupancy, Construction/Fire Protection
001	001	51-53 YORK STREET PORTLAND ME 04102 BUILDINGS OR PREMISES-OFFICE-LESSOR RISK- NO APT. OCC. JOISTED MASONRY

PROPERTY COVERAGE

Prem. No.	Bldg. No.	Coverage	Limits of Insurance
001	001	BUILDING (ACTUAL CASH VALUE)	\$ 300,000

DEDUCTIBLE: \$ 1,000 On Building and Business Personal Property

AUTOMATIC INCREASE: Building Coverage Shall Be Increased 4% Annually.

MORTGAGE HOLDERS: REFER TO ADDITIONAL INTERESTS SCHEDULE

Forming a part of

Policy Number: BOP 9229746	
Named Insured: GICLEE PRINTING CO LLC	Agent: TURNER BARKER INSURANCE
	Agent Code: 8210213 Agent Phone: (207)-773-8156

COMMERCIAL PROTECTOR POLICY DECLARATIONS (Continued)
SPECIAL (INCLUDING EQUIPMENT BREAKDOWN)

LIABILITY AND MEDICAL PAYMENTS COVERAGE

Except for Fire Legal Liability, each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to Paragraph D.4. of the Liability Coverage Form.

Coverage	Limits of Insurance
LIABILITY AND MEDICAL EXPENSES	\$ 1,000,000
MEDICAL EXPENSES (PER PERSON)	\$ 5,000
FIRE LEGAL LIABILITY	\$ 50,000

FORMS AND ENDORSEMENTS APPLICABLE TO THIS POLICY:

(Applicable Forms and Endorsements are omitted if shown in specific Coverage Part/Coverage Form Declarations)

Form Number	Description
21-8	- 1094 ADDITIONAL INTERESTS SCHEDULE
ILG913	- 0182 INSURANCE INSPECTION SERVICES EXEMPTION FROM LIABILITY
IL0247	- 0392 MAINE CHANGES-CANCELLATION AND NONRENEWAL
ILG003	- 0689 CALCULATION OF PREMIUM
BP0417	- 0689 EMPLOYMENT-RELATED PRACTICES EXCLUSION
BP0412	- 0187 LIMITATION OF COVERAGE TO DESIGNATED PREMISES/PROJECT
BP0148	- 0197 MAINE CHANGES-CONCEALMENT, MISREPRESENTATION OR FRAUD
BP0123	- 0187 BUSINESSOWNERS STANDARD FIRE POLICY PROVISIONS
BP0009	- 0689 BUSINESSOWNERS COMMON POLICY CONDITIONS
BP0007	- 0190 EFFECTIVE TIME CHANGES-REPLACEMENT OF 12 NOON
44-41	- 0997 COMMERCIAL PROTECTOR LIABILITY COVERAGE FORM
44-120	- 0997 COMMERCIAL PROTECTOR COVERAGE EXTENSION
44-115	- 0497 COMML PROTECTOR SPECIAL PROP COV (INCL EQ BRKDWN COV)

PREMIUM

Total Policy Premium \$ 543.00

Countersigned: By William R. Exley 4/3/98
Authorized Representative Date

Includes copyrighted material of Insurance Services Office, Inc. with its permission. Copyright, Insurance Services Office, Inc. 1982,1983, 1984, 1985.

Date Issued: 03/26/1998