

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

BUILDING DEPARTMENT

## PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number: 081262

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This is to certify that BROWN J B & SONS  
 has permission to change existing banner to new banner sign DDO # 10010  
 AT 20 DANFORTH ST CE 040 D001001

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 lath or other work is set-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 \_\_\_\_\_

*[Handwritten Signature]*  
 10/27/08  
 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: 08-1262	Issue Date:	CBL: 040 D001001
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Location of Construction: 20 DANFORTH ST	Owner Name: BROWN J B & SONS	Owner Address: PO BOX 207	Phone:
Business Name: ADDO NOVO HOME	Contractor Name:	Contractor Address:	Phone
Lessee/Buyer's Name Helen Andreoli	Phone: 207-831-6922	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial - Art Gallery	Proposed Use: Commercial - Art Gallery - change existing banner to new banner sign "ADDO NOVO HOME"	Permit Fee: \$89.00	Cost of Work: \$89.00	CEO District: 1
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**Proposed Project Description:**  
change existing banner to new banner sign "ADDO NOVO HOME"  
6'x2'

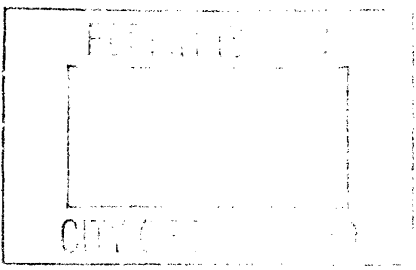
**FIRE DEPT:**  Approved  Denied  
Signature: *N/A*

**INSPECTION:** Use Group: *U* Type: *Sign*  
*IBC 2003*  
Signature: *[Signature]*

**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**  
Action:  Approved  Approved w/Conditions  Denied  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: Idobson	Date Applied For: 10/07/2008	<b>Zoning Approval</b>
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p><b>Special Zone or Reviews</b></p> <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"/> <i>OK w/cond. hor</i> Date: <i>10/1</i>	<p><b>Zoning Appeal</b></p> <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: _____	<p><b>Historic Preservation</b> <i>YLS</i></p> <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 checked="" type="checkbox"/> Approved w/Conditions <i>See notes</i> <input type="checkbox"/> Denied Date: <i>10/21/08</i> <i>D. Andrew B</i>
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**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> 08-1262	<b>Date Applied For:</b> 10/07/2008	<b>CBL:</b> 040 D001001
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<b>Location of Construction:</b> 20 DANFORTH ST (45 York)	<b>Owner Name:</b> BROWN J B & SONS	<b>Owner Address:</b> PO BOX 207	<b>Phone:</b>
<b>Business Name:</b> ADDO NOVO HOME	<b>Contractor Name:</b>	<b>Contractor Address:</b>	<b>Phone</b>
<b>Lessee/Buyer's Name</b> Helen Andreoli	<b>Phone:</b> 207-831-6922	<b>Permit Type:</b> Signs - Permanent	

<b>Proposed Use:</b> Commercial - Art Gallery - change existing banner to new banner sign "ADDO NOVO HOME" - 6' x 2'	<b>Proposed Project Description:</b> change existing banner to new banner sign "ADDO NOVO HOME"- 6' x 2'
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**Dept:** Historic      **Status:** Approved with Conditions      **Reviewer:** Deborah Andrews      **Approval Date:** 10/21/2008

**Note:** **Ok to Issue:**

- 1) \* On May 2, 2007, the Historic Preservation Board approved a comprehensive signage program for the York Street frontage of the subject building. As proposed, future signs solutions for individual tenants were (to the extent possible) to feature a combination of projecting banners and fascia sign. The specifications of the fascia sign were to match that of Whitney Art Works, formally located at this address. The goal of the master sign program, as proposed by the building owner and endorsed by the HP Board, was to achieve an element of consistency among individual storefronts on this warehouse structure.

Although the applicant is not required to install a fascia sign, the applicant should be aware that this signage element was strongly encouraged as part of the master sign plan. If, in the future, the tenant desires a fascia sign at this location, the Whitney Art Works solution shall be followed as a model.

**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Ann Machado      **Approval Date:** 10/14/2008

**Note:** **Ok to Issue:**

- 1) This permit is being issued with the condition that all the signs of the previous tenant must be removed.  
2) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 10/27/2008

**Note:** **Ok to Issue:**

- 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.

**Dept:** Fire      **Status:**      **Reviewer:** Capt Greg Cass      **Approval Date:**

**Note:** **Ok to Issue:**

<b>Comments:</b> 10/14/2008-amachado: Left voicemail for Helen Andreoli. She needs the certificate of flamibility for the banner.
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# 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>45 YORK ST.</u>		
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>040-D-001-001</u>	Owner: <u>J. B. BROWN</u>	Telephone: <u>207-774-5908</u>
Lessee/Buyer's Name (If Applicable) <u>ADDO NOVO HOME INC.</u>	Contractor name, address & telephone:	Total s.f. of signage x \$2.00 <u>12 x 2 = \$24</u> Per s.f. plus \$30.00/\$65.00 <u>r 465</u> For I.D. signage= Total Fee: \$ <u>#89-</u> Awning Fee= cost of work _____ Total Fee: \$ <u>89</u>

Who should we contact when the permit is ready: Helen Andreoli phone: 207-831-6932

Tenant/allocated building space frontage (feet): Length: 35ft. Height: 11 ft.  
Lot Frontage (feet) 350 ft. Single Tenant or Multi Tenant Lot Multi Tenant

Current Specific use: ART GALLERY (was Whiskey)  
If vacant, what was prior use: \_\_\_\_\_  
Proposed Use: \_\_\_\_\_

**Information on proposed sign(s):**  
 Freestanding (e.g., pole) sign? Yes \_\_\_\_\_ No X      Dimensions proposed: 6'x2' Height from grade: 10'  
 Bldg. wall sign? (attached to bldg) Yes X No \_\_\_\_\_      Dimensions proposed: 1'

**Proposed awning?** Yes \_\_\_\_\_ No X      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):**  
 Freestanding (e.g., pole) sign? Yes \_\_\_\_\_ No X      Dimensions: \_\_\_\_\_  
 Bldg. wall sign? (attached to bldg) Yes X No \_\_\_\_\_      Dimensions: \_\_\_\_\_  
 Awning? Yes \_\_\_\_\_ No X      Sq. ft. area of awning w/communication: \_\_\_\_\_

*12x2 + 65*

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.

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>Helen Andreoli</u>	Date: <u>9.30.08</u>
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multi-tenant B-3  
small. 1st floor tenant  
35 x 2 = 70 sq ft

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

proposed 6'x2' = 12 sq ft

ADD  
NOVO

H O M E

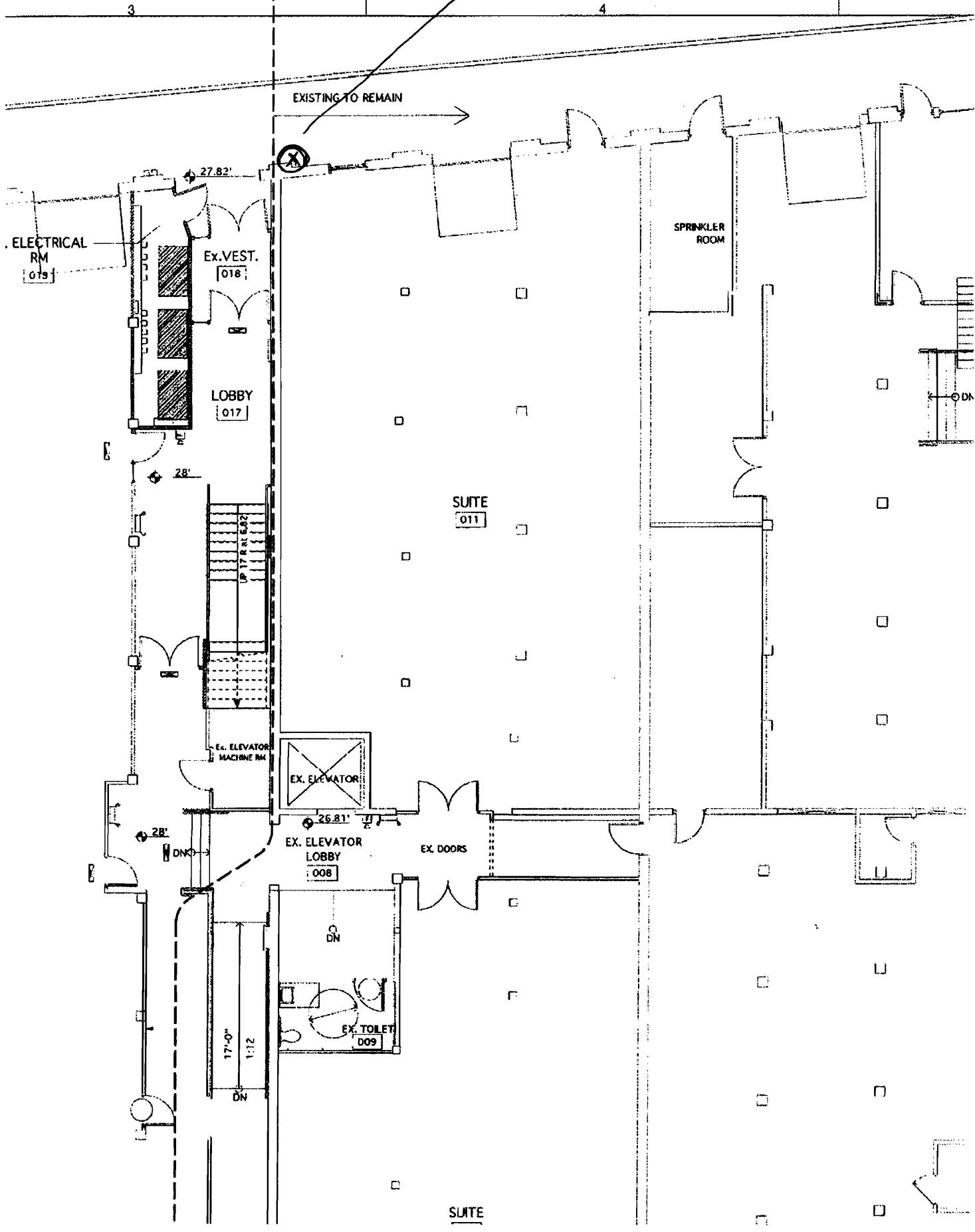
for the  
modern home

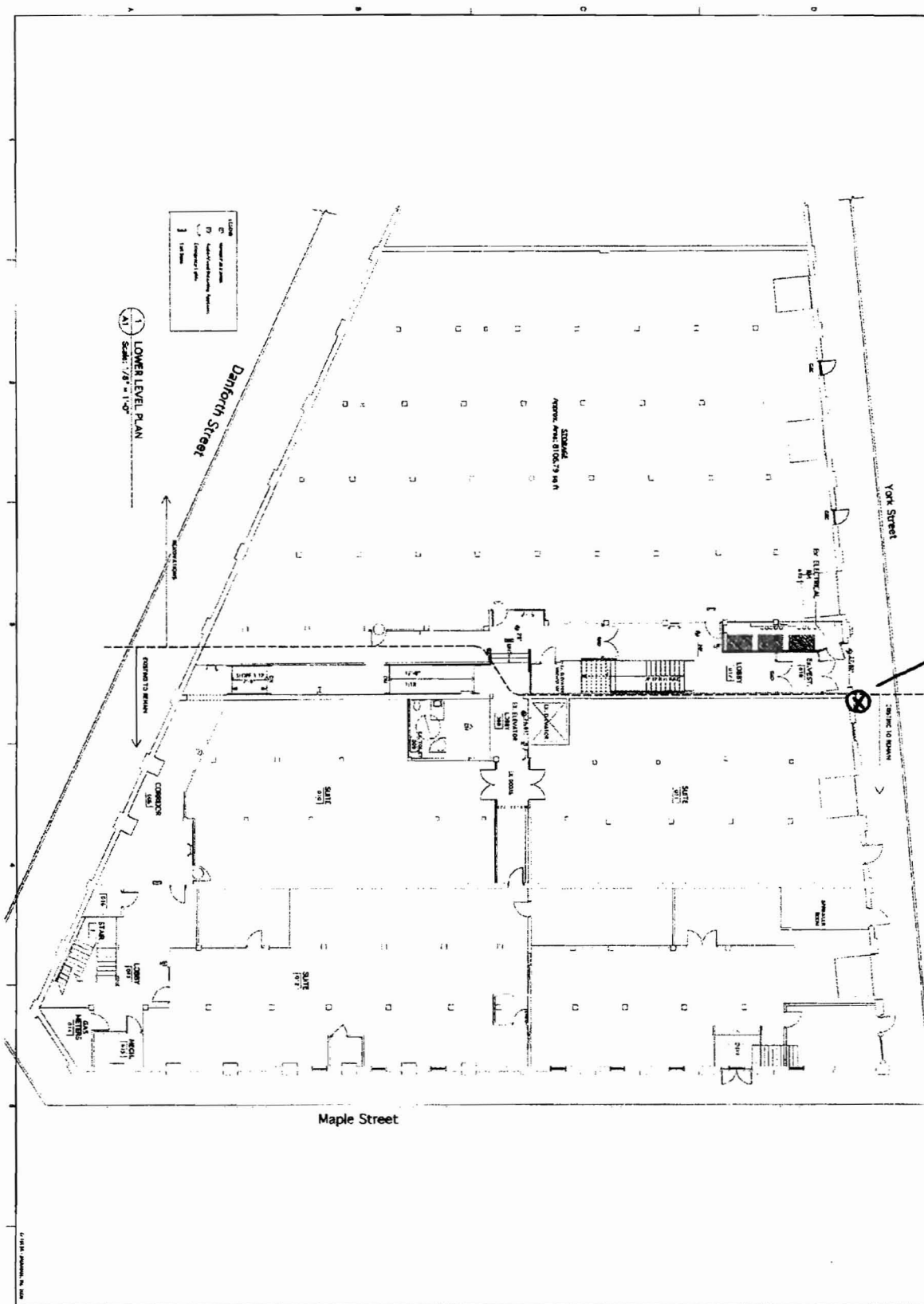
\* TO BE ATTACHED USING EXISTING POLE HARDWARE. PLEASE SEE PHOTO

\* MATERIALS -- EXTERIOR GRADE VINYL

\* DIMENSIONS -- 6 FT. X 3 FT.

BANNER LOCATION





EXISTING  
BANNER TO  
BE REPLACED  
BY PROPOSED  
BANNER

<p>A-1 1/2"</p>	<p>20 / 36 Danforth Street Interior Renovations J B Brown &amp; Sons Portland Maine 04104</p>		<p>HKTA Architects 1000 ... Portland, Maine</p>
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**J. B. BROWN & SONS**

482 CONGRESS STREET  
P.O. BOX 207  
PORTLAND, MAINE 04112  
PHONE 207-774-5908  
FAX 207-774-0898

September 19, 2008

City of Portland

J. B. Brown & Sons, owner of 20-36 Danforth Street (rear of the building on York Street) gives permission to Addo Novo to install an approved sign at 45 York Street.

The previous tenant was Whitney Artworks.

If you have any questions, please feel free to call me.

Sincerely,

A handwritten signature in cursive script that reads "Willow D. Williams".

Willow D. Williams



<b>ACORD CERTIFICATE OF LIABILITY INSURANCE</b>	DATE (MM/DD/YYYY) 10/06/2008	
<b>PRODUCER</b> TD BANKNORTH INSURANCE AGENCY INC P O BOX 406 PORTLAND, ME 04112 (888) 661-3938 XW985                          700	<b>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>	
<b>INSURED</b> ADDO NOVO, INC. 490 CONGRESS ST PORTLAND, ME 04102	<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>
	INSURER A: THE TRAVELERS INDEMNITY COMPANY OF AMERICA	
	INSURER B: TRAVELERS CASUALTY INSURANCE COMPANY OF AMERICA	
	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 LTR	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	<b>GENERAL LIABILITY</b>	680-4587L797-08	07/15/2008	07/15/2009	EACH OCCURRENCE \$1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000
		<input checked="" type="checkbox"/> HIRED AUTO <input checked="" type="checkbox"/> NON OWNED AUTO				MED EXP (Any one person) \$5,000
		GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
		<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b>				EACH OCCURRENCE \$ AGGREGATE \$ DEDUCTIBLE RETENTION \$
B		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	UB-4588L905-08	07/15/2008	07/15/2009	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$100,000 E.L. DISEASE - POLICY LIMIT \$500,000
		<b>OTHER</b>				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

AS RESPECTS TO GENERAL LIABILITY, CERTIFICATE HOLDER IS ADDITIONAL INSURED - DESIGNATED PERSON/ORGANIZATION, CG T4 91.

**CERTIFICATE HOLDER**

**CANCELLATION**

CITY OF PORTLAND 389 CONGRESS ST PORTLAND, ME 04101	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
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## **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

## **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.