

City of Portland, Maine - Building or Use Permit Application

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

| | | |
|-----------------------|-------------|---------------------|
| Permit No: 10-0459 | Issue Date: | CBL: 040 D001001 |
|-----------------------|-------------|---------------------|

| | | | |
|---|---|---|---------------------|
| Location of Construction: 30 DANFORTH ST | Owner Name: BROWN J B & SONS | Owner Address: PO BOX 207 | Phone: |
| Business Name: | Contractor Name: Curvwork LLC/Robert Verrier | Contractor Address: 228 Free Street Portland | Phone 2077757110 |
| Lessee/Buyer's Name | Phone: | Permit Type: Signs - Permanent | Zone: B-3 |

| | | | | |
|--|--|--|---|--------------------|
| Past Use: Commerical - offices | Proposed Use: Commercial -offices in conjunction with permit #09-0655-- install a 7' x .5 Sign "environments at work" | Permit Fee: \$72.00 | Cost of Work: \$72.00 | CEO District: 1 |
| Proposed Project Description: install a 7' x .5 Sign "environments at work" | | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: <input checked="" type="checkbox"/> Type: Sign <i>IBC 2003</i> | |

| | |
|--|------------|
| Signature: | Signature: |
| 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: 05/03/2010 | Zoning Approval | | |
|-----------------------------|---------------------------------|------------------------|--|--|

- 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 <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"/> Date: <i>MS 5/11/10</i> | Zoning Appeal <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: | Historic Preservation <i>with in</i> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>5/14/10</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 _____

City of Portland, Maine - Building or Use Permit

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| Permit No: 10-0459 | Date Applied For: 05/03/2010 | CBL: 040 D001001 |
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|---|---|---|-------------------------|
| Location of Construction: 30 DANFORTH ST | Owner Name: BROWN J B & SONS | Owner Address: PO BOX 207 | Phone: |
| Business Name: | Contractor Name: Curvwork LLC/Robert Verrier | Contractor Address: 228 Free Street Portland | Phone (207) 775-7110 |
| Lessee/Buyer's Name | Phone: | Permit Type: Signs - Permanent | |

| | |
|--|--|
| Proposed Use: Commercial -offices in conjunction with permit #09-0655-- install a 7' x .5 Sign "environments at work" | Proposed Project Description: install a 7' x .5 Sign "environments at work" |
|--|--|

| | | | | |
|---|---|----------------------------------|----------------------------------|---|
| Dept: Historic | Status: Approved | Reviewer: Deborah Andrews | Approval Date: | Ok to Issue: <input checked="" type="checkbox"/> |
| Note: | | | | |
| Dept: Zoning | Status: Approved with Conditions | Reviewer: Marge Schmuckal | Approval Date: 05/11/2010 | Ok to Issue: <input checked="" type="checkbox"/> |
| Note: | | | | |
| 1) This property at 30 Danforth on the first floor shall remain offices as discussed with the owner of the property. Any change of use shall require a separate permit application for review and approval. | | | | |
| Dept: Building | Status: Approved with Conditions | Reviewer: Tammy Munson | Approval Date: 05/20/2010 | Ok to Issue: <input checked="" type="checkbox"/> |
| Note: | | | | |
| 1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code. | | | | |

| |
|--|
| Comments: |
| 5/11/2010-mes: I spoke with Trish Weimer @ JB Brown - permit #09-0655 was for this area of the bldg - #30 for offices - this not a retail space per Trish. |
| 5/17/2010-gg: received permit from historic as of 05/17/10. /gg |
| 5/7/2010-mes: I do not see a use permit for the furniture store (Environments at work) in the system. We need the use established first before the sign permit can be issued- called Robert Verrier and let him know |

BUILDING PERMIT INSPECTION PROCEDURES

**Please call 874-8703 or 874-8693 (ONLY)
or email: buildinginspections@portlandmaine.gov**

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months, if the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a “Stop Work Order” and subsequent release to continue with construction.**

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

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

_____ 5.3. 2010 _____

Received from ION Design

Location of Work 30 Danforth

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 72

Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2)

Other _____

CBL: 40 D1

Check #: 9402 Total Collected \$ 72

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature]

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy



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>30 Denforth</u> | | |
| Tax Assessor's Chart, Block & Lot Chart# <u>x 40</u> Block# <u>D</u> Lot# <u>1</u> | Owner: <u>J.B. BROWN & SONS</u> | Telephone: <u>774-5908</u> |
| Lessee/Buyer's Name (If Applicable) <u>Amy Lalezari</u> <u>C 207.710.6026</u> | Contractor name, address & telephone: <u>CURVWORK LLC</u> <u>ROBERT VERRIER</u> <u>22A FREE ST. Portland</u> <u>207.775.7110</u> | Total s.f. of signage x \$2.00 - <u>x 8 sq' = 16</u> Per s.f. plus \$30.00/\$65.00 - <u>65</u> For I.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ _____ |

Who should we contact when the permit is ready: ROB VERRIER phone: 207.775.7110

Tenant/allocated building space frontage (feet): Length: 25' show x 2 = 50' max Allowed Height _____
 Lot Frontage (feet) 25' Single Tenant or Multi Tenant Lot _____

Current Specific use: _____
 If vacant, what was prior use: _____
 Proposed Use: Office Furniture Show room

Information on proposed sign(s):
 Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions proposed: _____ Height from grade: 11'
 Bldg. wall sign? (attached to bldg) Yes No ___ Dimensions proposed: 8' x 7'
7 x 0.5 3.5 sq ft

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):
 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: _____

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.

16
65
81

3.5 x 2 + 6.5 = 7.2

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, 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: _____ |
|--|-------------|

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



Signage/Awning Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

- Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way.
- Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
- A sketch plan of lot indicating location of buildings, driveways and any abutting streets or rights of way, lengths of building frontages, street frontages and all existing setbacks. Please indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building façade dimensions for any signage attached to the building.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.
 - Certificate of flammability required for awning or canopy.
 - A UL# is required for lighted signs at the time of final inspection.
- Photos of existing signage
- Details for sign fastening, attachment or mounting in the ground.

Permit fee for signage or awning-with-signage: \$30.00 plus \$2.00 per square foot of sign.

Permit fee for awning-without-signage is based on cost of work:
\$30.00 for the first \$1,000.00, \$10.00 per additional \$1,000.00 of cost.

Base application fee for any Historic District signage is \$65.00 + 16

J. B. BROWN & SONS
36 Danforth Street
P.O. Box 207
Portland, Maine 04112-0207
Phone 207-774-5908
Fax 207-774-0898

April 21, 2010

City of Portland
389 Congress Street
Portland, ME 04101

Re: 20-36 Danforth Street

Permission is granted to Curve Work to install lettering on the "I" beam for the signage relating to Environments At Work.

If you should have any questions, please do not hesitate to call.

Sincerely,



Willow D. Williams
Property Manager

EAWsign

5/11/10 - spoke with TRISH Weiner @ JB Brown
- The PAST use WAS AN office use - It
is still AN office use - NOT A retail
use - New tenant is in conjunction
with work done on permit # 09-0655

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID RC
IONDES1

DATE (MM/DD/YYYY)
03/12/10

PRODUCER
LIBERTY MUTUAL AGENCY MARKETS
SERVICE CENTER
100 LINCOLNWAY WEST
MISHAWAKA IN 46544

Fax: 800-845-3666

INSURED

Ion Design Group Sign Systems
of Maine Inc
22 Rear Free 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 | NAIC # |
|---------------------------------------|--------|
| INSURER A: Peerless Insurance Company | 24198 |
| 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.

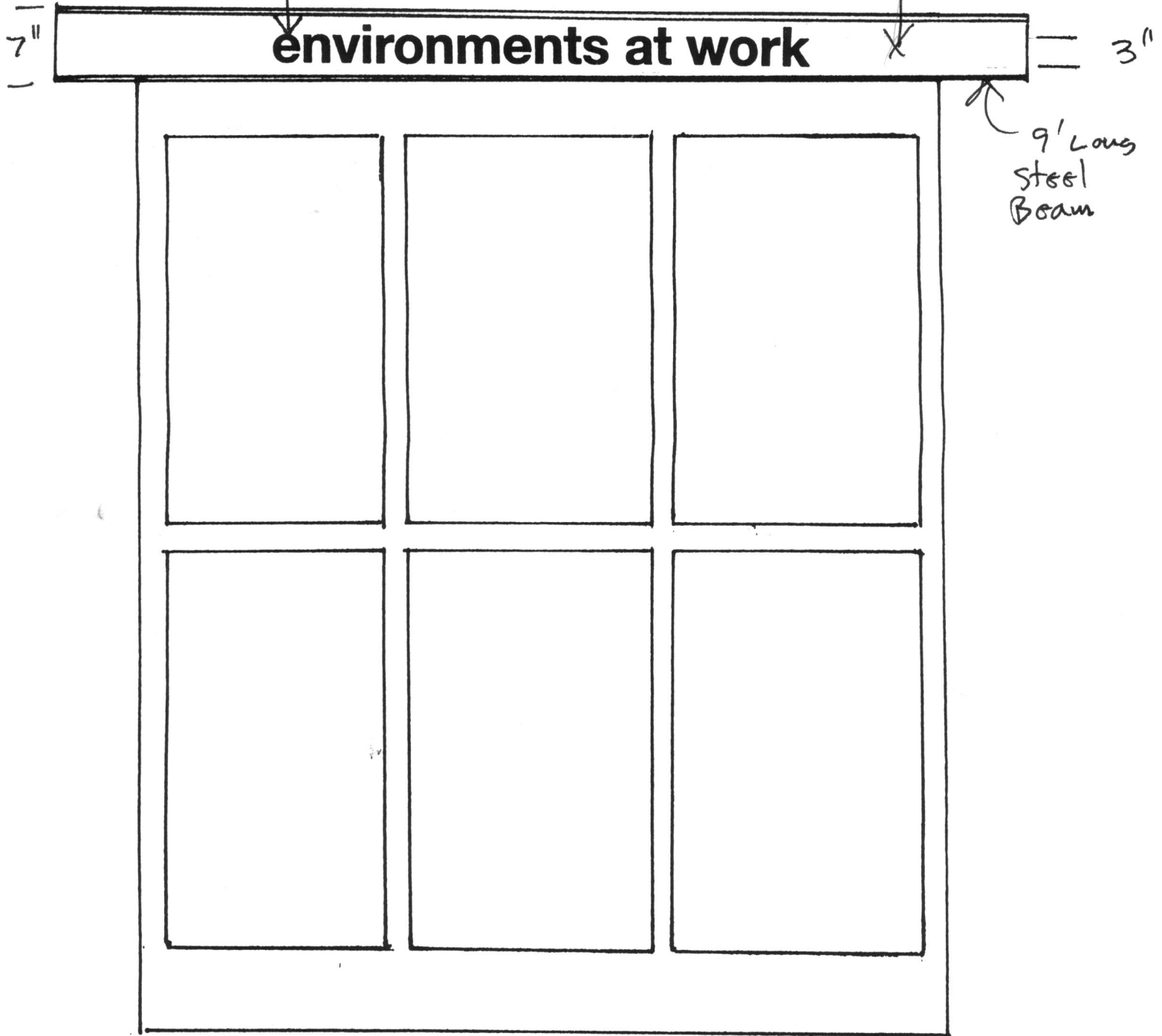
| INSR ADD'L LTR INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|-------------------------|---|---------------|-------------------------------------|--------------------------------------|---|
| A | GENERAL LIABILITY | BOP9201910 | 10/10/09 | 10/10/10 | EACH OCCURRENCE \$ 1000000 |
| | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50000 |
| | <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR | | | | MED EXP (Any one person) \$ 5000 |
| | <input checked="" type="checkbox"/> Business Owners | | | | PERSONAL & ADV INJURY \$ 1000000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | GENERAL AGGREGATE \$ 2000000 |
| | <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | | | | PRODUCTS - COMP/OP AGG \$ 2000000 |
| | | | | | |
| | AUTOMOBILE LIABILITY | | | | COMBINED SINGLE LIMIT (Ea accident) \$ |
| | <input type="checkbox"/> ANY AUTO | | | | BODILY INJURY (Per person) \$ |
| | <input type="checkbox"/> ALL OWNED AUTOS | | | | BODILY INJURY (Per accident) \$ |
| | <input type="checkbox"/> SCHEDULED AUTOS | | | | PROPERTY DAMAGE (Per accident) \$ |
| | <input type="checkbox"/> HIRED AUTOS | | | | |
| | <input type="checkbox"/> NON-OWNED AUTOS | | | | |
| | GARAGE LIABILITY | | | | AUTO ONLY - EA ACCIDENT \$ |
| | <input type="checkbox"/> ANY AUTO | | | | OTHER THAN EA ACC \$ |
| | | | | | AUTO ONLY: AGG \$ |
| | EXCESS/UMBRELLA LIABILITY | | | | EACH OCCURRENCE \$ |
| | <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE | | | | AGGREGATE \$ |
| | <input type="checkbox"/> DEDUCTIBLE | | | | \$ |
| | RETENTION \$ | | | | \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | | WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | | | | E.L. EACH ACCIDENT \$ |
| | If yes, describe under SPECIAL PROVISIONS below | | | | E.L. DISEASE - EA EMPLOYEE \$ |
| | OTHER | | | | E.L. DISEASE - POLICY LIMIT \$ |
| | | | | | PROPERTY 44346 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
OFFICES-ALL OTHER

| CERTIFICATE HOLDER | CANCELLATION |
|--|---|
| CITPOR4 CITY OF PORTLAND MAINE PO BOX 544 PORTLAND ME 04112 | 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 <i>Jan Nell</i> |

Adhesion: Foam tape & silicone Adhesive
to Steel Beam

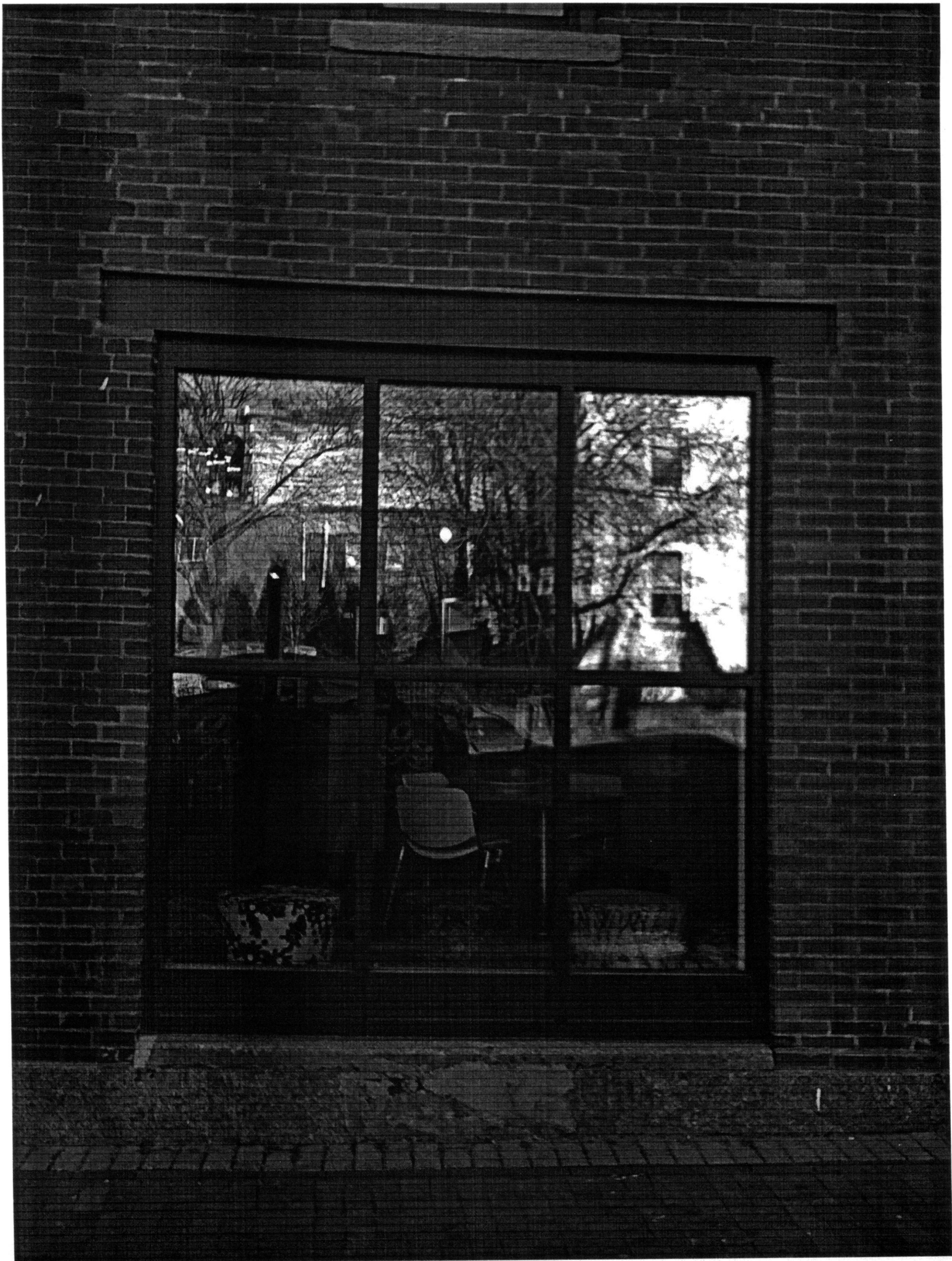
Paint Color/Plk

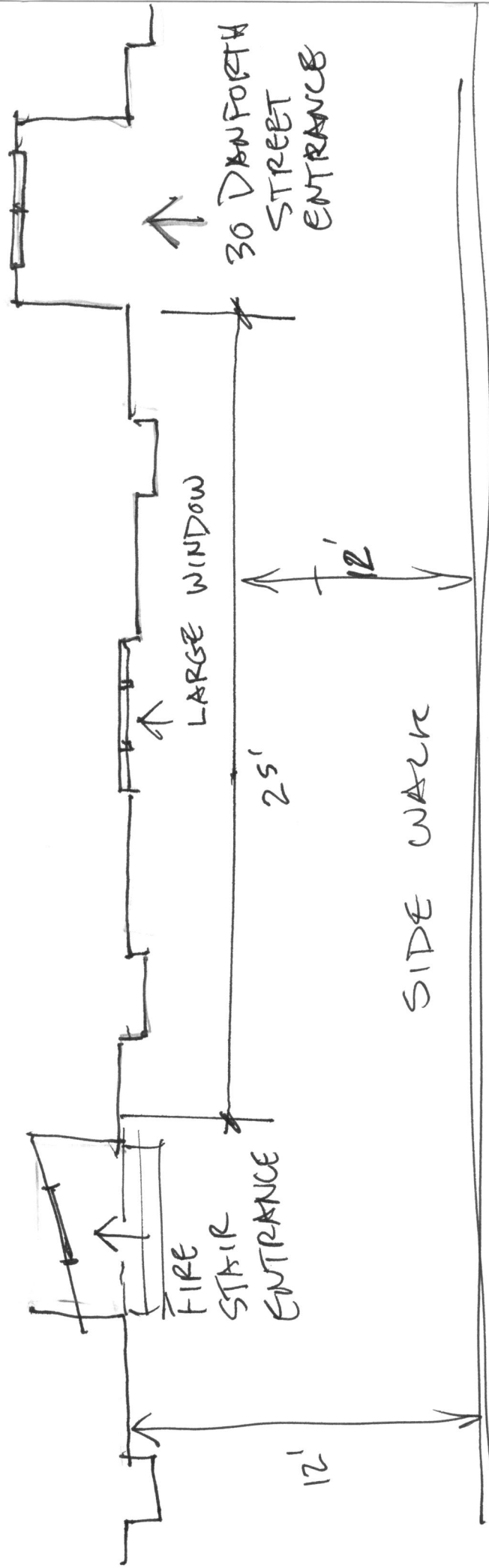


$3/4" = 1'0"$

Location 30 Danforth St.

3" X-Height, Dimensional Brushed Stainless Steel
Letters with a $1/2"$ Return.





FIRE
STAIR
ENTRANCE

LARGE WINDOW

30 DANFORTH
STREET
ENTRANCE

25'

12'

12'

SIDE WALK

DANFORTH ST.