

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT

This is to certify that BAXTER PLACE, LLC

Located At 305 COMMERCIAL ST

Job ID: 2011-10-2555-SIGN

CBL: 040-F-009-001

has permission to hang a 3' x 2.5' sign from existing sign

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

N/A

[Signature] 11/27/12

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD

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 Inspections 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.**

Final Inspection

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



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Director of Planning and Urban Development
Penny St. Louis

Job ID: 2011-10-2555-SIGN

Located At: 305 COMMERCIAL
ST

CBL: 040- F-009-001

Conditions of Approval:

Zoning

1. ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.

Historic

1. Approved subject to the condition that the proposed sign is hung from the existing Focus Photography sign—no separate location or bracket. Sign itself is approved as proposed.

Building

1. Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2011-10-2555-SIGN	Date Applied: 10/18/2011	CBL: 040- F-009-001	
Location of Construction: 305 COMMERCIAL ST	Owner Name: BAXTER PLACE, LLC	Owner Address: 305 COMMERCIAL ST PORTLAND, ME 04101	Phone:
Business Name: Waterglen Realty	Contractor Name: Josh Prokey, A Tech	Contractor Address: 28 Maine Ave., Portland, ME 04103	Phone: 207-899-8324
Lessee/Buyer's Name: Andrew Snyder	Phone: 207-831-9471	Permit Type: SIGN - PERM - Signage - Permanent	Zone: B-3
Past Use: Office	Proposed Use: Same - office - Weichert, Realtors - install 3' x 2.5' sign <i>will hang from existing sign.</i>	Cost of Work:	CEO District:
		Fire Dept: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: Type: <i>Sign</i> Signature: <i>APM</i> <i>11/27/12</i>
Proposed Project Description: Install New Signs for Weichert Realtors		Pedestrian Activities District (P.A.D.)	
Permit Taken By:	Zoning Approval		

<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 informatin may invalidate a building permit and stop all work.</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetlands</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p><input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM</p> <p>Date: <i>Ok w/condition</i> <i>10/27/11</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p>Historic Preservation</p> <p><input type="checkbox"/> Not in Dist or Landmark</p> <p><input type="checkbox"/> Does not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input checked="" type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>1/27/12</i> <i>D. Andrews</i></p>
	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 appication 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



B-3, historic

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: 305 COMMERCIAL ST.		
Tax Assessor's Chart, Block & Lot Chart# 040 Block# F Lot# 9	Owner: BAXTER PLACE, LLC	Telephone: 239-7993 PETER GELBERSON PROP. MANAGER
Lessee/Buyer's Name (If Applicable) WATERGLEN REALTY, LLC PHONE: 773-2425 CELL 831-9471	Contractor name, address & telephone: JOSH PROKEY A TECH 28 MAINE AVE PORTLAND, ME 04103 899-8324	Total s.f. of signage x \$2.00 = 815 Per s.f. plus \$30.00 For H.D. signage \$75.00 Fee: \$ 45 Awning Fee= cost of work NA Total Fee: \$ 45
Who should we contact when the permit is ready: ANDREW SNYDER phone: 831-9471 773-2425		
RECEIVED		
Tenant/allocated building space frontage (feet): Length: 38' Height: FIRST FLOOR		
Lot Frontage (feet) 167'- Single Tenant or Multi Tenant Lot		
Current Specific use: RETAIL/OFFICE		
If vacant, what was prior use: RETAIL/OFFICE		
Proposed Use: OFFICE (REAL ESTATE SALES)		
OCT 18 2011 Dept. of Building Inspections City of Portland Maine		
Information on proposed sign(s):		
Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions proposed: _____ Height from grade: _____		
Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No ___ Dimensions proposed: 3' x 2.5'		
Proposed awning? Yes ___ No <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> No ___ Dimensions: 3' x 2.5'		
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.		

10.27.11
121.00

PROPOSED SIGN CURRENTLY APPROVED AND ATTACHED TO 100 COMMERCIAL ST.

8 89 x 2 = 16
75
30

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: *Andrew Snyder* Date: 10/18/11

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

Revised 10/19/09

PLEASE MAIL PERMIT TO
ANDREW SNYDER
WATERGLEN REALTY
305 COMMERCIAL ST. STE C-103
PORTLAND, ME 04101

38 x 2 = 76' allowed
7.5 proposed (ok)

SHEET A1-D

313
311
309
307
306
303
301

STREET

EXISTING SIGN @ 11
"PLATES"

PROPOSED SIGN @ 40'
"WEICHERT, REALTORS - WATERGREEN GROUP"
EXISTING SIGN @ 45'
"FOCUS PHOTOGRAPHY"

EXISTING SIGN @ 90'
"KNAUGHTY HAIR SALON"

EXISTING SIGN @ 128'
"MAINE COAST KITCHEN DESIGN"

EXISTING SIGN @ 166'
"POND COVE PAINT & DECORATION"

89.4
41'
49'

65'
ENTRANCE
ENTRANCE

ENTRANCE
#1

167'

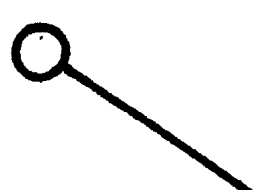
125'
181'

77.82

ENTRANCE
#3

2.97

83.77





WATERGLEN REALTY, LLC - PROPOSED SIGN FOR 305 COMMERCIAL ST.



WATERGLEN BEAUTY, LLC - PROPOSED SIGN PLACEMENT - 305 COMMERCIAL ST. * Will be hung from existing sign



WATERGLEN REALTY, LLC - PREVIOUS SIGN PLACEMENT - 100 COMMERCIAL ST.

**Weichert,[®]
Realtors**

Waterglen Group

207.773.2425

Independently Owned and Operated

WATERGLEN REALTY, LLC SIGN MOVING FROM 100 COMMERCIAL TO 305 COMMERCIAL



LATHROP PROPERTY MANAGEMENT

September 23, 2011

To Whom It May Concern:

Baxter Place, LLC does hereby grant permission for Waterglen Realty to install a fixed sign at 305 Commercial Street at a location of their choosing on the west end of the building.

Very truly yours,
Lathrop Property Management

A handwritten signature in black ink, reading 'Peter B. Gellerson' with a long horizontal flourish extending to the right.

Peter B. Gellerson
Property Manager



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/13/2011

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER CS&S/WILLIS OF DELAWARE, INC. PO BOX 946580 MAITLAND, FL 32794-6580 Phone - 800-854-9733 Fax - 877-763-5122	CONTACT NAME:		
	PHONE (A/C, No, Ext):	FAX (A/C, No):	
	EMAIL ADDRESS:		
	PRODUCER CUSTOMER ID #:		
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Continental Casualty Company		
INSURER B :			
INSURER C :			
INSURER D : Continental Casualty Company			
INSURER E :			
INSURER F :			

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY	Y	N	3011002341	10/12/2011	10/12/2012	EACH OCCURRENCE	\$1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP(Any one person)	\$10,000
							PERSONAL & ADV INJURY	\$1,000,000
							GENERAL AGGREGATE	\$2,000,000
							PRODUCTS - COMP/OP AGG	\$2,000,000
							GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC	
A	AUTOMOBILE LIABILITY	Y	N	3011002341	10/12/2011	10/12/2012	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	<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 checked="" type="checkbox"/> HIRED AUTOS							
<input checked="" type="checkbox"/> NON-OWNED AUTOS								
D	<input checked="" type="checkbox"/> UMBRELLA LIAB	N	N	3011002601	10/12/2011	10/12/2012	EACH OCCURRENCE	\$1,000,000
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE	\$1,000,000
	<input type="checkbox"/> DEDUCTIBLE							
	<input checked="" type="checkbox"/> RETENTION \$ 10,000							
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N					WC STATU-TORY LIMITS	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT	
	If yes, Describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	
							E.L. DISEASE - POLICY LIMIT	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Certificate Holder is added as an additional insured as provided in the blanket additional insured endorsement.

CERTIFICATE HOLDER City of Portland 389 Congress St. Portland, ME 04101	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 