

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

BU **PERMIT** ION

Permit Number: 081351

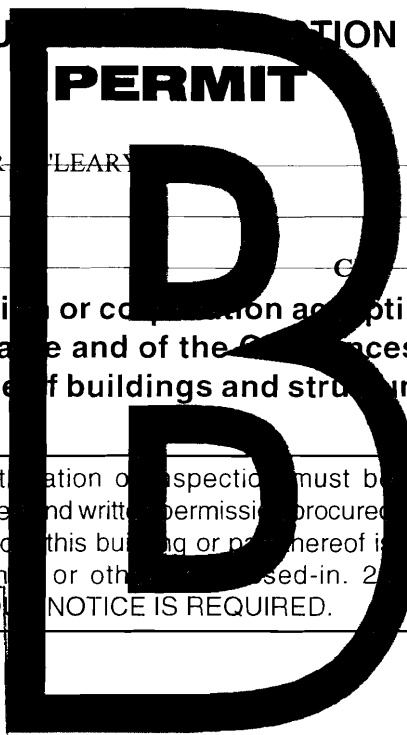
Please Read Application And Notes, If Any, Attached

This is to certify that CYR PETER J & HEATHER LEARN

has permission to install new signage (2 sf)

AT 85 BRACKETT ST C 044 1014001

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 used-in. 2 HO 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 \_\_\_\_\_

12/5/08 *[Signature]*  
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: 08-1351	Issue Date: 12/15/08	CBL: 044 1014001
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Location of Construction: 85 BRACKETT ST	Owner Name: CYR PETER J & HEATHER J O'L	Owner Address: 85 BRACKETT ST	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: R-6

Past Use: Single Family w/ Law Office (home occupation)	Proposed Use: Single Family w/ Law Office (home occupation) - install new signage (2sf)	Permit Fee: \$69.00	Cost of Work: \$69.00	CEO District: 2
Proposed Project Description: install new signage (2 sf)		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <b>B</b> Type: <i>Signage</i> <b>IBC-2005</b>	
		Signature:	Signature: <i>12/4/08</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

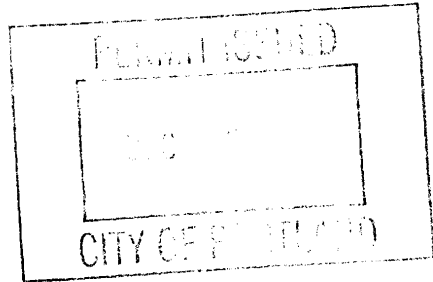
Permit Taken By: ldobson	Date Applied For: 10/19/2008	<b>Zoning Approval</b>		
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical 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
<input type="checkbox"/> Shoreland
<input type="checkbox"/> Wetland <i>give to planning. indication 14-366.5(g)</i>
<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"/>
OK Date: <i>12/4/08</i> <i>ARM</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>yes</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>12/4/08 ST12</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**

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

Permit No: 08-1351	Date Applied For: 10/19/2008	CBL: 044 I014001
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Location of Construction: 85 BRACKETT ST	Owner Name: CYR PETER J & HEATHER J O'L	Owner Address: 85 BRACKETT ST	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Single Family w/ Law Office (home occupation) - install new signage (2sf)	Proposed Project Description: install new signage (2 sf)
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<b>Dept:</b> Historic	<b>Status:</b> Approved	<b>Reviewer:</b> Scott Hanson	<b>Approval Date:</b> 12/04/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 12/04/2008
<b>Note:</b> A sign for a home occupation can't project more than one foot from the building. The proposed sign projecct: 20". Gave permit to planning under section 14-368.5(g).			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Chris Hanson	<b>Approval Date:</b> 12/15/2008
<b>Note:</b> 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Planning	<b>Status:</b> Approved	<b>Reviewer:</b> Deborah Andrews	<b>Approval Date:</b> 12/04/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>

<b>Comments:</b>
12/2/2008-amachado: Spoke to Heather O'Leary. Actual sign is less than 2 sf. She has spoken to historic about the sign type & placement.
12/2/2008-amachado: Gave sign to planning under section 14-368.5(g).
10/23/2008-ldobson: Reason for delay - Check got lost within city hall
10/24/2008-amachado: Sign projects 20" from building. Can only project 1' under home occupation criteria. Left voicemail for Heather O'Leary.

**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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Inspections Official

\_\_\_\_\_  
Date



# 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>85 Brackett St.</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>44</u> Block# <u>I</u> Lot# <u>14</u>	Owner: <u>Heather J. O'Leary</u> <u>Peter J. Cyr</u>	Telephone: <u>207-409-3705</u> <u>207-730-3591</u>
Lessee/Buyer's Name (If Applicable) <u>N/A</u>	Contractor name, address & telephone: <u>N/A</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ <u>99.-</u> Awning Fee= cost of work <u>0</u> Total Fee: \$ <u>99.-</u>

Who should we contact when the permit is ready: Heather O'Leary phone: 207-409-3705

Tenant/allocated building space frontage (feet): Length: 15'4" Height: 13'5"  
Lot Frontage (feet) 28 FT Single Tenant or Multi Tenant Lot Single

Current Specific use: Home Occupation in R6 zone  
If vacant, what was prior use: N/A  
Proposed Use: N/A

Information on proposed sign(s):  
 Freestanding (e.g., pole) sign? Yes  No  Dimensions proposed: 1 Height from grade: \_\_\_\_\_  
 Bldg. wall sign? (attached to bldg) Yes  No  Dimensions proposed: 1 x 2 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: 1 x 2 Ft.  
 Awning? Yes  No  Sq. ft. area of awning w/communication: N/A

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.

2 x 2 + 65 = 69

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.

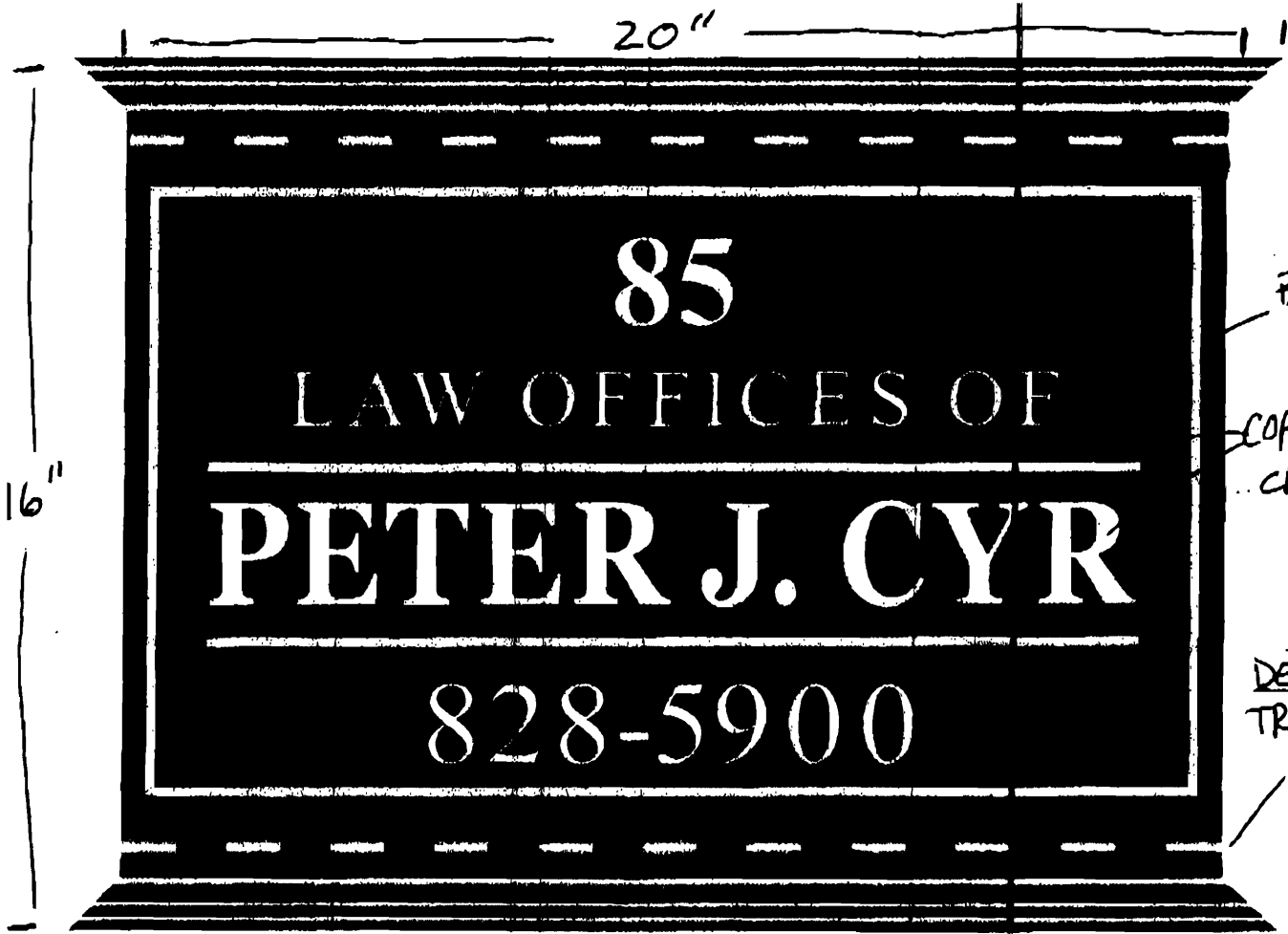
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), stop by the Building 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:	Date: <u>9-26-08</u>
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home occupation  
 2<sup>nd</sup> allowed = 16" x 20" = 2.2 ft  
 not to extend a fixed building sign project more than 1' beyond bldg. - projects 20"

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



- A) 1" CNC ROUTED SIGN (HDU) SUBSTRAIGHT DOUBLE FACED
- B) DECORATIVE TRIM MOLDING TOP / BTM
- C) DECORATIVE SCROLL BRACKET ATTACHED W/ BLACK 3/4" LONG - 3/16 DIAMETER SCREWS

COST ESTIMATE: NO MORE THAN 550.00 WITH TAX

DEPOSIT OF \$250.00 TO START.

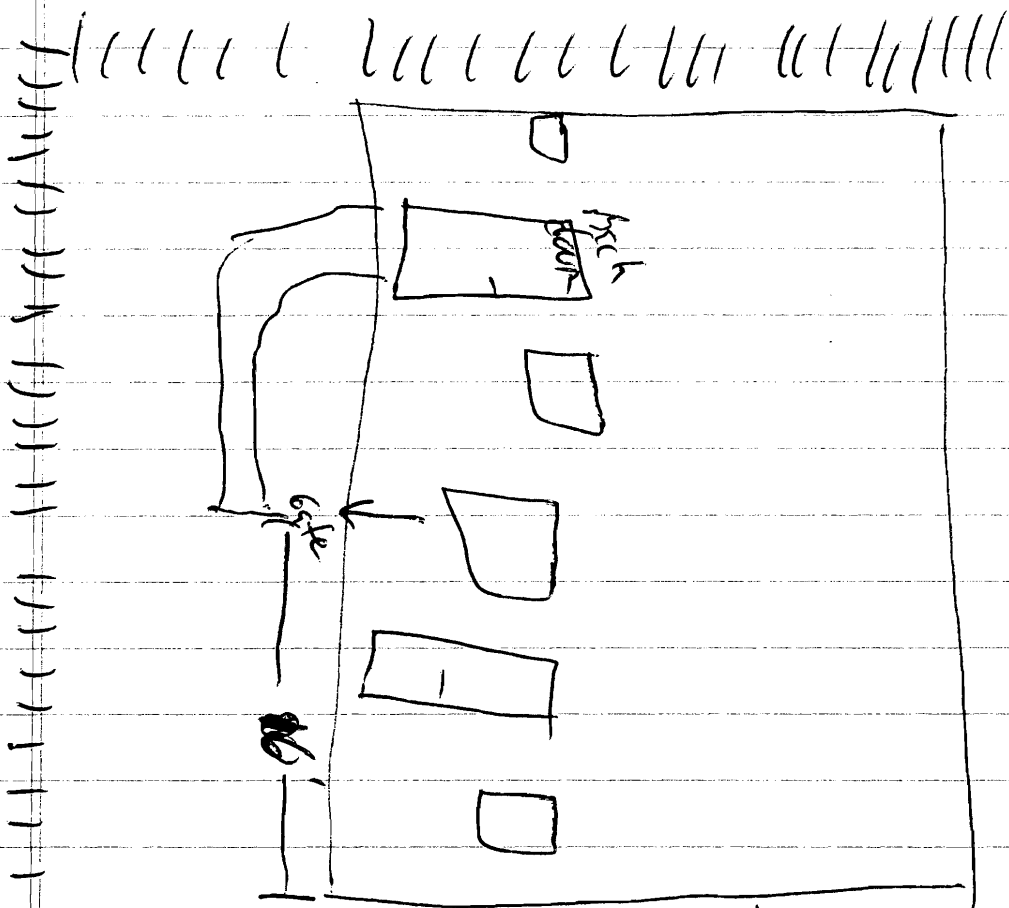
THANKS CHRIS  
SUNSET SIGNS

721-8604

Heather, my question:  
What happens if phone # changes?

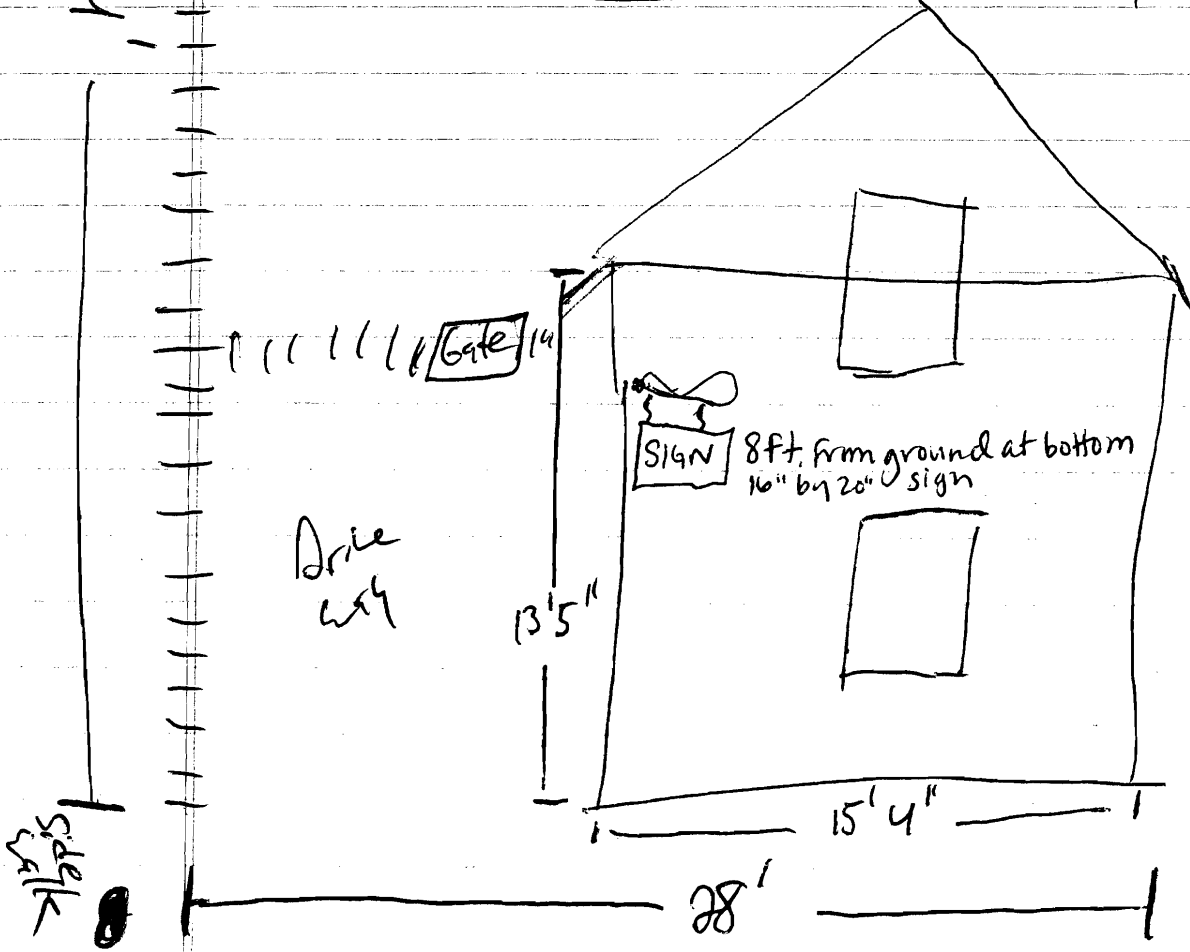
16" x 20" = 32¢  
= 22¢

Back Fence



lot size  
28' x 44'

44'



Side Walk

28'

15' 4"

13' 5"

Driveway

Gate

SIGN

8ft. from ground at bottom  
16" by 20" sign

LAW OFFICES OF  
**PETER J. CYR**  
85 BRACKETT STREET  
PORTLAND, MAINE 04102

TEL. 207-828-5900 FAX 207-828-5909 EMAIL: PETERJCYR@YAHOO.COM

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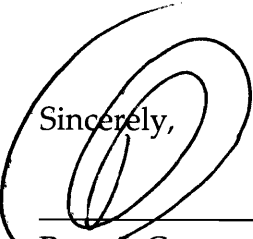
Inspections Division  
Portland City Hall  
389 Congress St.  
Room 315  
Re: Sign Permit Application

September 26, 2008

To Whom it may Concern,

Please herein find payment and documentation for our sign permit application for 85 Brackett st., Portland ME. Our sketch is a bit crude but hopefully it will serve for these purposes. We have followed all known requirements for this sign's placement and believe it to be within your standards. If there are any questions, concerns or further information required please do not hesitate to call or write us at above-mentioned address and phone number.

Sincerely,



\_\_\_\_\_  
Peter J. Cyr

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<b>ACORD CERTIFICATE OF LIABILITY INSURANCE</b>		OP ID DH CYRPE-1	DATE (MM/DD/YYYY) 02/15/08
PRODUCER  <b>Northeast Bank Insurance Group</b> 235 Western Ave Augusta ME 04330 Phone: 207-622-3188		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.	
INSURED  <b>Peter Cyr, Attorney</b> 23 Pineledge Drive Scarborough ME 04074		INSURERS AFFORDING COVERAGE INSURER A: <b>HANOVER INSURANCE</b> INSURER B: INSURER C: INSURER D: INSURER E:	NAIC #

**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	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>Business Owners</b> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	OBP204814900	10/12/07	10/12/08	EACH OCCURRENCE \$ <b>200000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>300000</b> MED EXP (Any one person) \$ <b>5000</b> PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ <b>4000000</b> PRODUCTS - COMP/OP AGG \$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" 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 EA ACC \$ AUTO ONLY: 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				WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				BUILDING 175000 PROPERTY 30000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS <b>ATTY OFFICE W/ exterior sign.</b>						

**CERTIFICATE HOLDER**

**CANCELLATION**

City of Portland 389 Cumberland Avenue Portland ME 04101	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> 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>Debra M.C. Hillier</i>
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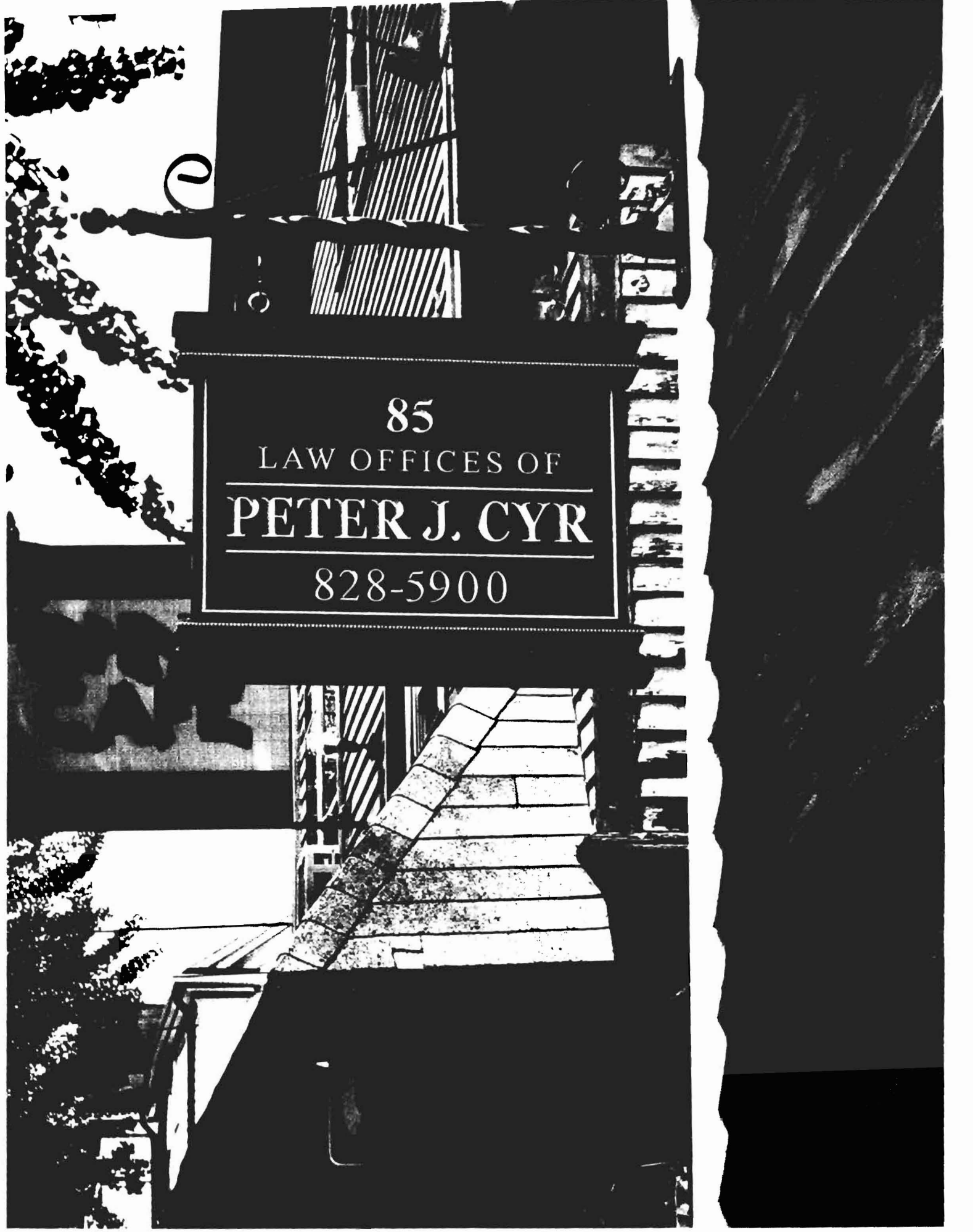
## IMPORTANT

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.



85

LAW OFFICES OF

PETER J. CYR

828-5900

