

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

## BUILDING INSPECTION

# PERMIT

Permit Number: 030222

Please Read  
Application And  
Notes, if Any,  
Attached

This is to certify that Lafayette Square Limited Partnership East Signs

has permission to Erect 1- 8'x18" Attached Sign and 1- 2' Freestanding Sign

AT 638 Congress St City of Portland, Oregon 045 A003001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Oregon 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 work in progress must be reported before this building or part thereof is occupied or services are used-in. HOUR NOTIFICATION 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]*  
5/28/05  
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:<br>03-0222 | Issue Date: | CBL:<br>045 A003001 |
|-----------------------|-------------|---------------------|

|  |  |  |                      |
|--|--|--|----------------------|
| Location of Construction:<br>638 Congress St | Owner Name:<br>Lafayette Square Limited Part | Owner Address:<br>130 Park St                        | Phone:<br>253-5454   |
| Business Name:                               | Contractor Name:<br>Fast Signs               | Contractor Address:<br>413 Western Ave. So. Portland | Phone:<br>2077735499 |
| Lessee/Buyer's Name                          | Phone:                                       | Permit Type:<br>Signs - Permanent                    | Zone:<br>B3          |

|  |  |  |  |                    |
|--|--|--|--|--------------------|
| Past Use:<br>Retail Clothing   | Proposed Use:<br>Apparel Shop/Embroidary | Permit Fee:<br>\$48.80   | Cost of Work:<br>\$48.80   | CEO District:<br>2 |
| Proposed Project Description:<br>Erect 1- 8'x18" Attached Sign and 1- 2' x3' Hanging Sign                                |  | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION:<br>Use Group: <i>Sign Type</i><br><i>3/28/03</i><br><i>Amjad</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:<br>gad | Date Applied For:<br>03/21/2003 | <b>Zoning Approval</b> |  |  |
|-------------------------|---------------------------------|------------------------|--|--|

|   |  |   |   |
|---|--|---|---|
| <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<br><input type="checkbox"/> Wetland<br><input type="checkbox"/> Flood Zone<br><input type="checkbox"/> Subdivision<br><input type="checkbox"/> Site Plan<br>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/><br>Date: <i>ok - S</i> <i>3/25/03</i> | <p><b>Zoning Appeal</b></p> <input type="checkbox"/> Variance<br><input type="checkbox"/> Miscellaneous<br><input type="checkbox"/> Conditional Use<br><input type="checkbox"/> Interpretation<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied<br>Date: _____ | <p><b>Historic Preservation</b></p> <input type="checkbox"/> Not in District or Landmark<br><input type="checkbox"/> Does Not Require Review<br><input type="checkbox"/> Requires Review<br><input checked="" type="checkbox"/> Approved<br><input type="checkbox"/> Approved w/Conditions<br><input type="checkbox"/> Denied<br><i>to D.A 3/25/03</i><br>Date: _____ |
|---|--|---|---|

*MA 8/26/03*

**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

03-0222

# 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.

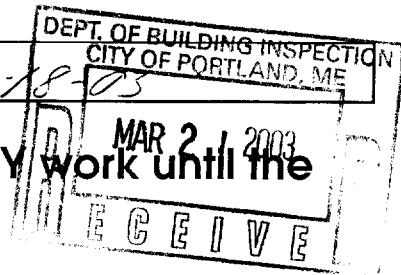
|   |  |   |
|---|--|---|
| Location/Address of Construction: <u>650 Congress St. Portland, Maine 04101</u>   |  |   |
| Total Square Footage of Proposed Structure<br><u>750 sq ft</u>  | Square Footage of Lot<br><u>750 sq ft</u>  |   |
| Tax Assessor's Chart, Block & Lot<br>Chart# <u>045</u> Block# <u>A</u> Lot# <u>003</u>  | Owner:   | Telephone:  |
| Lessee/Buyer's Name (If Applicable)<br><u>Pramod &amp; Tamara Shrestha</u>  | Applicant name, address & telephone:<br><u>Pramod &amp; Tamara Shrestha<br/>650 Congress St.<br/>Portland, Me 04101<br/>(207) 253-5454</u> | Total s.f. of signage x <u>18.¢</u><br>\$1.00 per s.f. plus \$30.00<br>= Total Fee:<br>\$ <u>30.00</u><br>Awning Fee = Cost Of Work: \$ <u>58.80</u><br>Total Fee: \$ <u>148.80</u> |
| Current use: <u>Store for apparel</u>   |  |   |
| If the location is currently vacant, what was prior use: <u>Scott's Trade</u>   |  |   |
| Approximately how long has it been vacant: <u>1 1/2 mos</u>   |  |   |
| Proposed use: <u>selling apparel &amp; embroidery</u>   |  |   |
| Project description: <u>one 8' x 18" attached sign<br/>one 0' x 3' hanging sign</u>   |  |   |
| Contractor's name, address & telephone:   |  |   |
| Who should we contact when the permit is ready: <u>Fast Signs</u>   |  |   |
| Mailing address: <u>Setport Plaza<br/>413 Western Ave.<br/>Portland, Me 04106<br/>(207) 73-5499</u>   |  |   |
| We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. <b>A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up.</b> PHONE: |  |   |

**IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT. WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.**

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: <u>3-18-03</u> |
|--|----------------------|

**This is NOT a permit, you may not commence ANY work until the permit is issued.**



**SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE**

**PLEASE ANSWER ALL QUESTIONS**

ADDRESS: 650 Congress St. Portland, Me. 04103 ZONE: B-3

CBL: \_\_\_\_\_

SINGLE TENANT LOT? YES \_\_\_\_\_ NO  MULTI TENANT LOT? YES  NO \_\_\_\_\_  
MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES  NO \_\_\_\_\_

**INFORMATION ON PROPOSED SIGN(S):**

FREESTANDING (e.g., pole) SIGN? YES  NO  DIMENSIONS PROPOSED: \_\_\_\_\_

BLDG. WALL SIGN? (attached to bldg) YES  NO  DIMENSIONS PROPOSED: \_\_\_\_\_

*2 attached to Bldg - (1) 2 x 3 = 6 sq ft  
(2) 1.5 x 8 = 12 sq ft  
18 sq ft*

**INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):**

FREESTANDING (e.g., pole) SIGN? YES \_\_\_\_\_ NO  DIMENSIONS: \_\_\_\_\_

BLDG. WALL SIGN(attached to bldg) ? YES \_\_\_\_\_ NO  DIMENSIONS: \_\_\_\_\_

AWNING? YES \_\_\_\_\_ NO  DIMENSIONS: \_\_\_\_\_

LOT FRONTAGE (FEET): \_\_\_\_\_  
TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET): 15.5' given x 2 = 31' MAX

**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

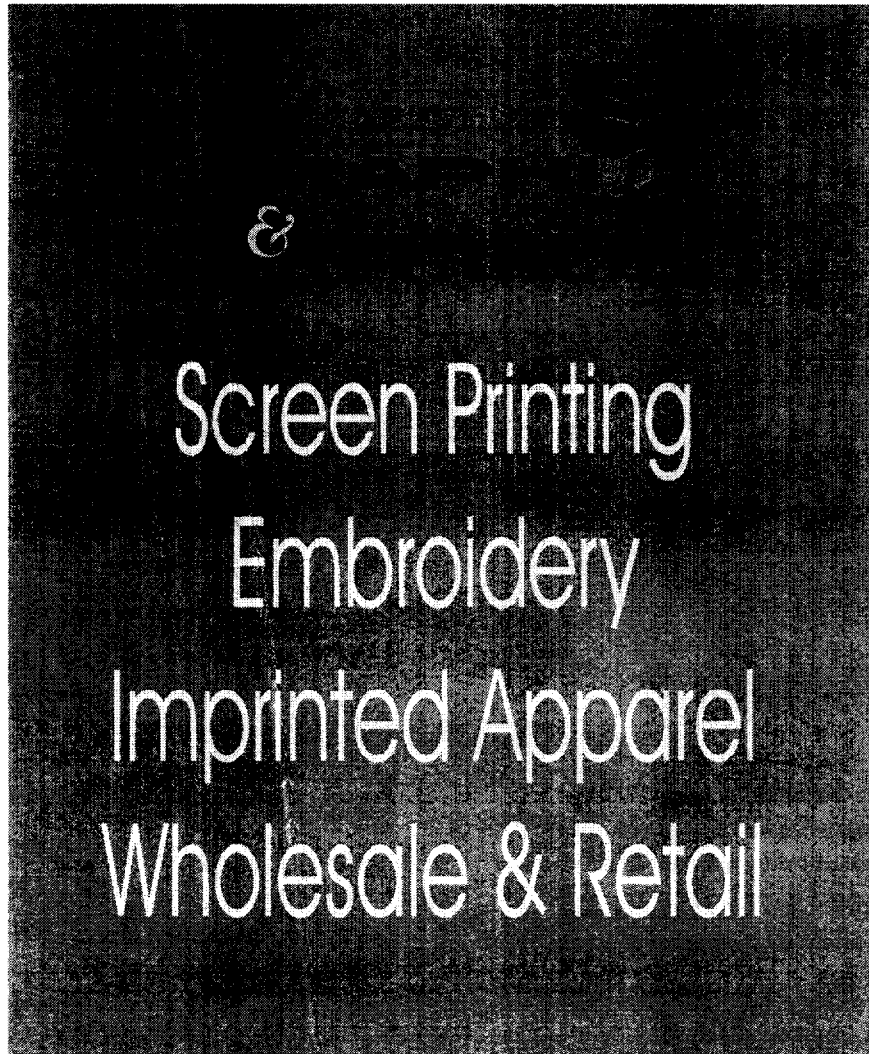
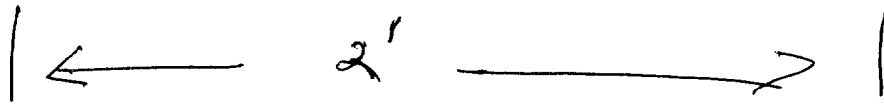
IF YES, TOTAL S.F. OF PANELS WITH COMMUNICATIONS/MESSAGE/TRADEMARK/SYMBOL? \_\_\_\_\_ s.f.

**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 ARE ALSO REQUIRED.**

SIGNATURE OF APPLICANT: [Signature] DATE: 3-18-03

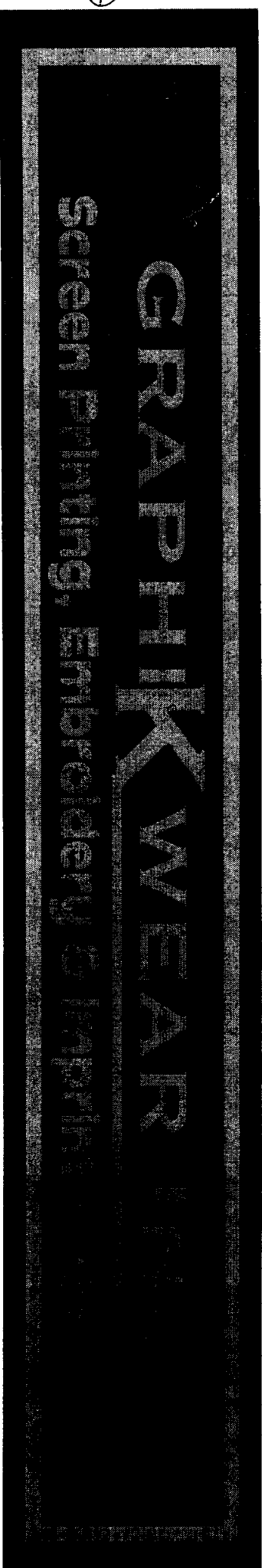
\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*

Hanging



$$2 \times 3 = 6 \text{ ft}$$

For the wall



18"

$$1.5 \times 8 = 12 \#$$

# Graphix & Apparel

Graphix & Apparel  
650 Congress St  
Portland  
ME 04101

Phone: (207)253-5454  
FAX: (207) 253 5559  
email: sales@graphixandapparel.com

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Wednesday, March 19, 2003

To The City of Portland,

We have recently rented a store front location at 650 Congress Street in Portland. We don't plan to change any structures. We are going to be doing embroidery, heat transfers and selling apparel from this location.

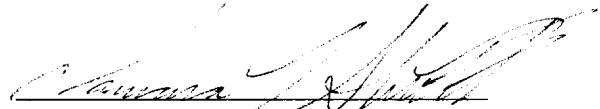
We hope that you accept our application to do so, (and hope that when we do open, that you will come check us out). If you have any questions, then please do call me on my cell phone at (207)232-2779. Thank you.

Sincerely,



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Pramod Shrestha  
(owner)



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Tamara Shrestha  
(owner)

# ACORD™ INSURANCE BINDER

DATE  
03/21/2003

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM.

| PRODUCER<br><b>Whitney &amp; Sanborn Agency</b><br>P.O. Box 1028<br>3 Main Street<br>Gray ME 04039 | PHONE (A/C, No., Ext): (207) 657-2827<br>FAX (A/C, No.):  | COMPANY<br><b>HARLEYSVILLE-WORCESTER INS. CO.</b>  | BINDER #<br>3067 |           |  |            |  |      |      |      |      |          |       |          |          |  |  |  |      |
|--|---|--|------------------|-----------|--|------------|--|------|------|------|------|----------|-------|----------|----------|--|--|--|------|
| CODE:  | SUB CODE:   | THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY #: |                  |           |  |            |  |      |      |      |      |          |       |          |          |  |  |  |      |
| AGENCY CUSTOMER ID: 2382   | DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (Including Location)<br><b>SCREEN PRINTING AND IMPRINTED APPAREL AND EMBROIDERY</b>   |  |                  |           |  |            |  |      |      |      |      |          |       |          |          |  |  |  |      |
| INSURED<br><b>GRAPHIK WEAR, INC.</b><br>650 CONGRESS STREET<br>PORTLAND, ME 04104                  | <table border="1"> <tr> <th colspan="2">EFFECTIVE</th> <th colspan="2">EXPIRATION</th> </tr> <tr> <td>DATE</td> <td>TIME</td> <td>DATE</td> <td>TIME</td> </tr> <tr> <td>03/21/03</td> <td>10:00</td> <td>04/21/03</td> <td>12:01 AM</td> </tr> <tr> <td></td> <td></td> <td></td> <td>NOON</td> </tr> </table> |  |                  | EFFECTIVE |  | EXPIRATION |  | DATE | TIME | DATE | TIME | 03/21/03 | 10:00 | 04/21/03 | 12:01 AM |  |  |  | NOON |
| EFFECTIVE  |   | EXPIRATION   |                  |           |  |            |  |      |      |      |      |          |       |          |          |  |  |  |      |
| DATE   | TIME  | DATE   | TIME             |           |  |            |  |      |      |      |      |          |       |          |          |  |  |  |      |
| 03/21/03   | 10:00   | 04/21/03   | 12:01 AM         |           |  |            |  |      |      |      |      |          |       |          |          |  |  |  |      |
|  |   |  | NOON             |           |  |            |  |      |      |      |      |          |       |          |          |  |  |  |      |

## COVERAGES

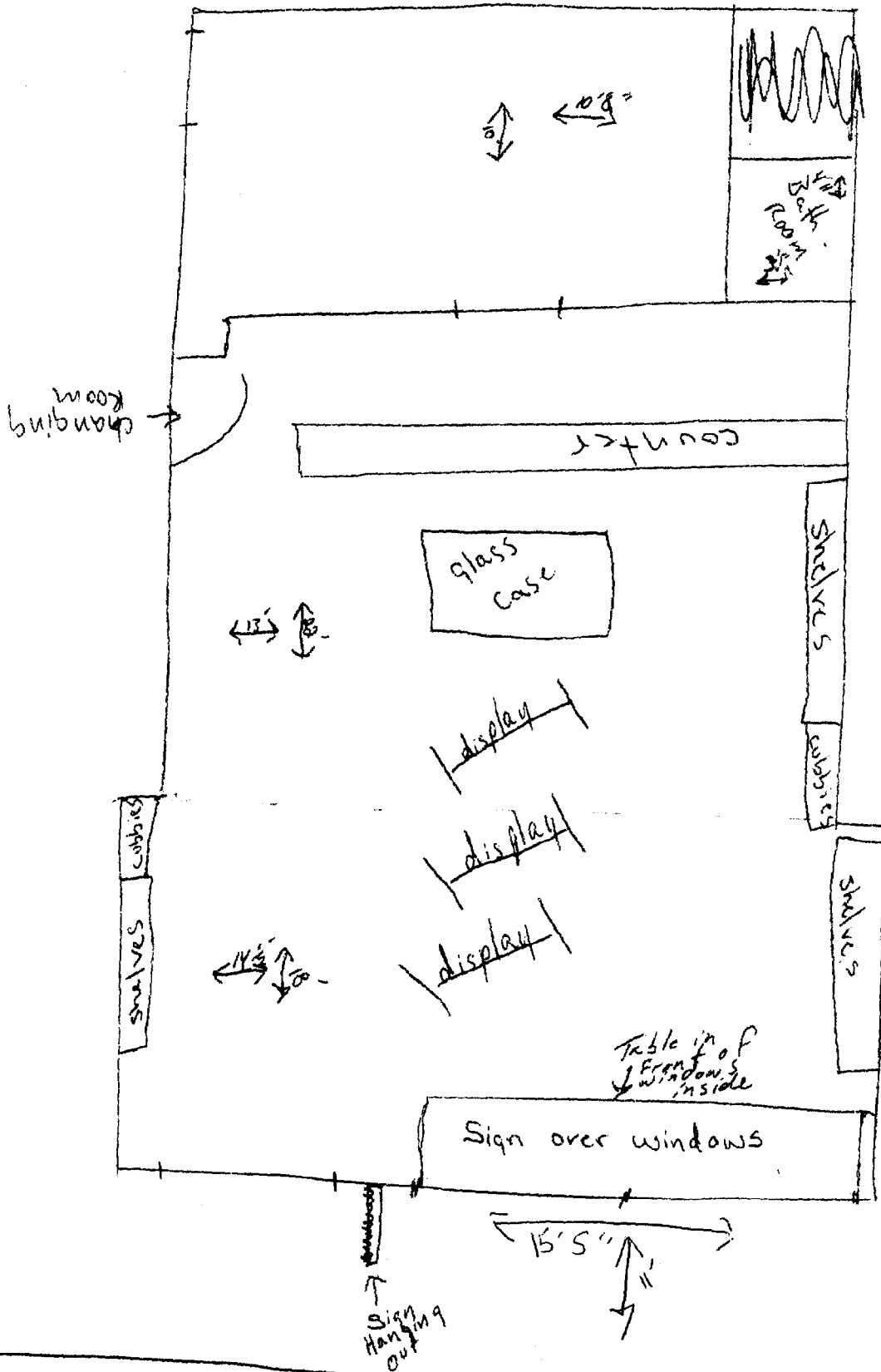
## LIMITS

| TYPE OF INSURANCE  | COVERAGE/FORMS   | DEDUCTIBLE                   | COINS % | AMOUNT      |
|--|--|------------------------------|---------|-------------|
| <b>PROPERTY</b><br>CAUSES OF LOSS<br><input checked="" type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input checked="" type="checkbox"/> SPEC   | <b>BUSINESS OWNERS POLICY</b><br><b>INVENTORY \$20,000</b><br><b>SCREEN PRINTER \$15,000</b><br><b>EMBROIDERY MACHINE \$10,000</b> | \$500.00                     | 80%     | \$45,000.00 |
| <b>GENERAL LIABILITY</b><br><input type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  | RETRO DATE FOR CLAIMS MADE:  | EACH OCCURRENCE              |         | \$1,000,000 |
|  |  | DAMAGE TO RENTED PREMISES    |         | \$100,000   |
|  |  | MED EXP (Any one person)     |         | \$5,000     |
|  |  | PERSONAL & ADV INJURY        |         | \$1,000,000 |
|  |  | GENERAL AGGREGATE            |         | \$2,000,000 |
|  |  | PRODUCTS - COMP/OP AGG       |         | \$2,000,000 |
| <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS |  | COMBINED SINGLE LIMIT        |         | \$          |
|  |  | BODILY INJURY (Per person)   |         | \$          |
|  |  | BODILY INJURY (Per accident) |         | \$          |
|  |  | PROPERTY DAMAGE              |         | \$          |
|  |  | MEDICAL PAYMENTS             |         | \$          |
|  |  | PERSONAL INJURY PROT         |         | \$          |
|  |  | UNINSURED MOTORIST           |         | \$          |
|  |  |                              |         | \$          |
| <b>AUTO PHYSICAL DAMAGE</b> DEDUCTIBLE<br><input type="checkbox"/> COLLISION: _____<br><input type="checkbox"/> OTHER THAN COL: _____  | <input type="checkbox"/> ALL VEHICLES <input type="checkbox"/> SCHEDULED VEHICLES  | ACTUAL CASH VALUE            |         |             |
|  |  | STATED AMOUNT                |         | \$          |
|  |  | OTHER                        |         |             |
| <b>GARAGE LIABILITY</b><br><input type="checkbox"/> ANY AUTO   |  | AUTO ONLY - EA ACCIDENT      |         | \$          |
|  |  | OTHER THAN AUTO ONLY:        |         |             |
|  |  | EACH ACCIDENT                |         | \$          |
|  |  | AGGREGATE                    |         | \$          |
| <b>EXCESS LIABILITY</b><br><input type="checkbox"/> UMBRELLA FORM<br><input type="checkbox"/> OTHER THAN UMBRELLA FORM   | RETRO DATE FOR CLAIMS MADE:  | EACH OCCURRENCE              |         | \$          |
|  |  | AGGREGATE                    |         | \$          |
|  |  | SELF-INSURED RETENTION       |         | \$          |
| <b>WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY</b>  |  | WC STATUTORY LIMITS          |         |             |
|  |  | E.I. EACH ACCIDENT           |         | \$          |
|  |  | E.I. DISEASE - EA EMPLOYEE   |         | \$          |
|  |  | E.I. DISEASE - POLICY LIMIT  |         | \$          |
| <b>SPECIAL CONDITIONS/ OTHER COVERAGES</b>   |  | FEES                         |         | \$          |
|  |  | TAXES                        |         | \$          |
|  |  | ESTIMATED TOTAL PREMIUM      |         | \$          |

## NAME & ADDRESS

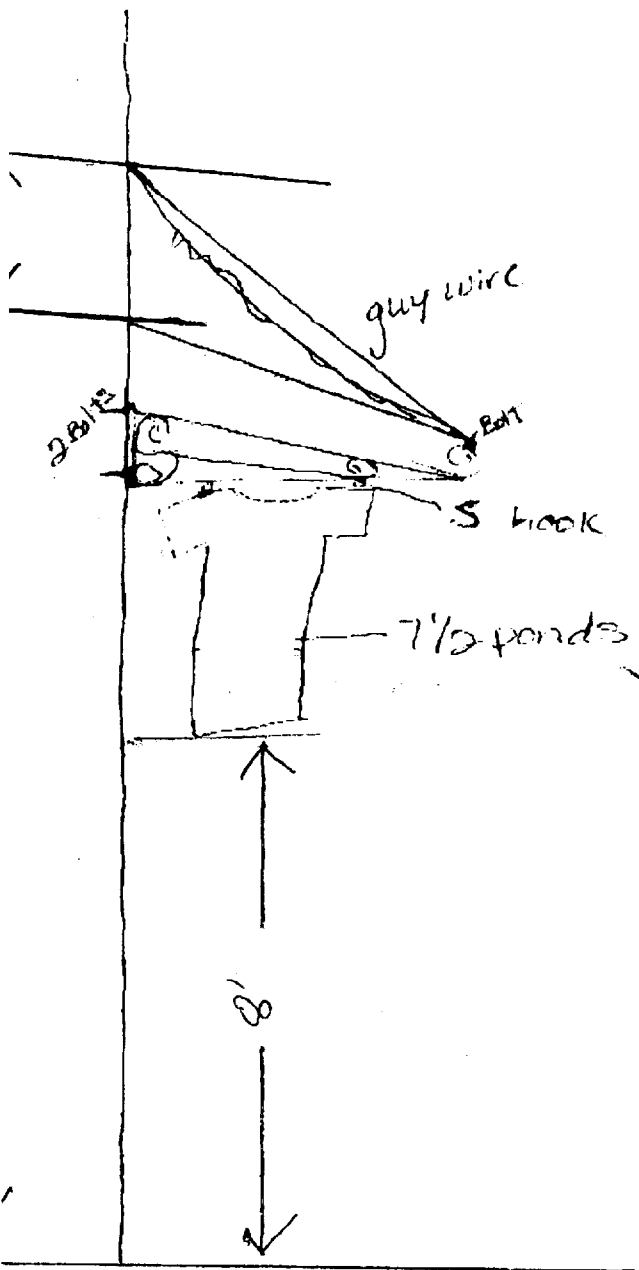
|   |  |
|---|--|
| <b>PRESERVATION MANAGEMENT, INC.</b><br>638 CONGRESS STREET<br>PORTLAND, MAINE 04104        | <input type="checkbox"/> MORTGAGEE <input checked="" type="checkbox"/> ADDITIONAL INSURED<br><input type="checkbox"/> LOSS PAYEE |
| <b>LAFAYETTE SQUARE LIMITED PARTNERSHIP</b><br>638 CONGRESS STREET<br>PORTLAND, MAINE 04104 | LOAN # _____<br>AUTHORIZED REPRESENTATIVE<br><i>Robert B. Fayer, Sr.</i>   |





Concess Street #

# USO - CONGRESS

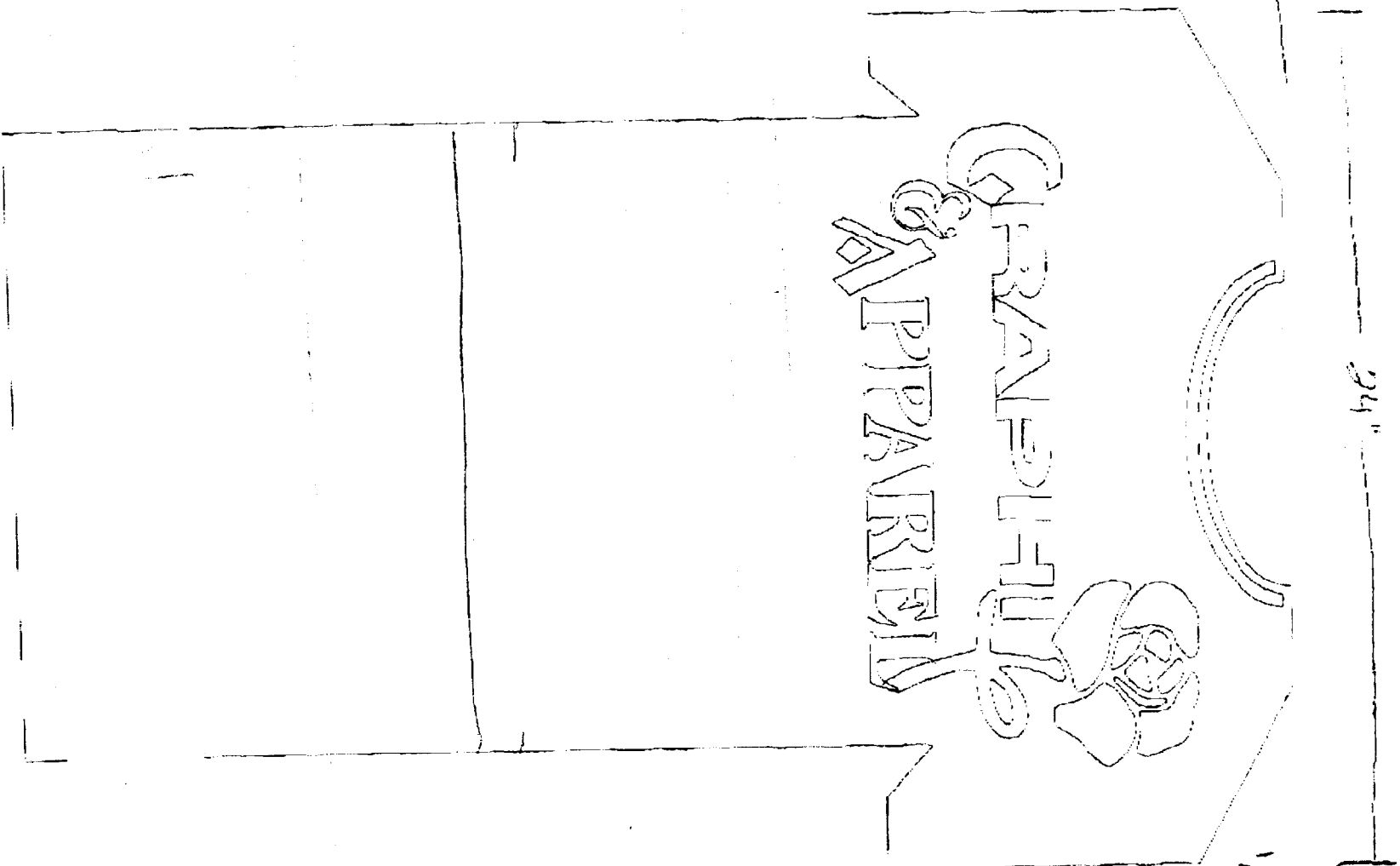


Bracket  
should be  
bolted into  
wall with  
two guy wires  
for additional  
support.

The building is wood with  
Brick behind it so  
we will be ~~use~~ using a  
Hammer Drill to drill  
holes to insert lag bolts  
on all outside signs.  
On the hanging signs  
we will be using a  
36" x 12" Iron scroll  
Bracket  $\frac{1}{8}$ " Thick,  
and connected by  
2 "S" hooks that would  
make the sign hang  
no lower than 8' from  
the sidewalk with 2  
guy wires for additional  
support.

03/3/2017 3:37:32 PM

Scale: 1:4.26 Height: 36.053 Length: 24.004 in

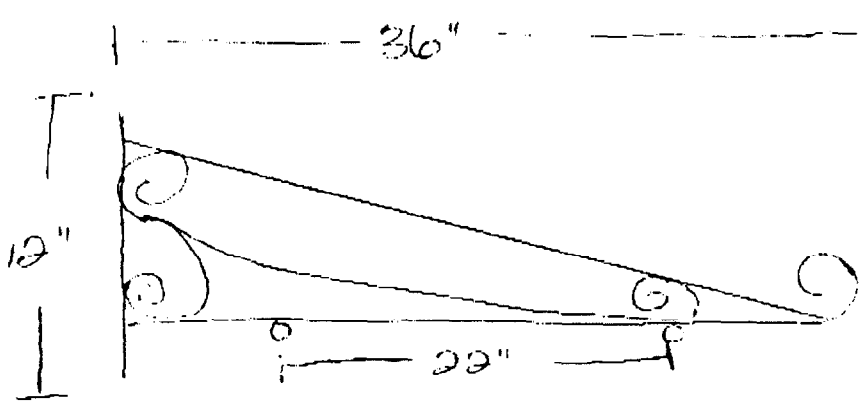


24"

1/8" MDO wood  
 2 sided  
 goes w/1  
 scroll bracket

26" ←

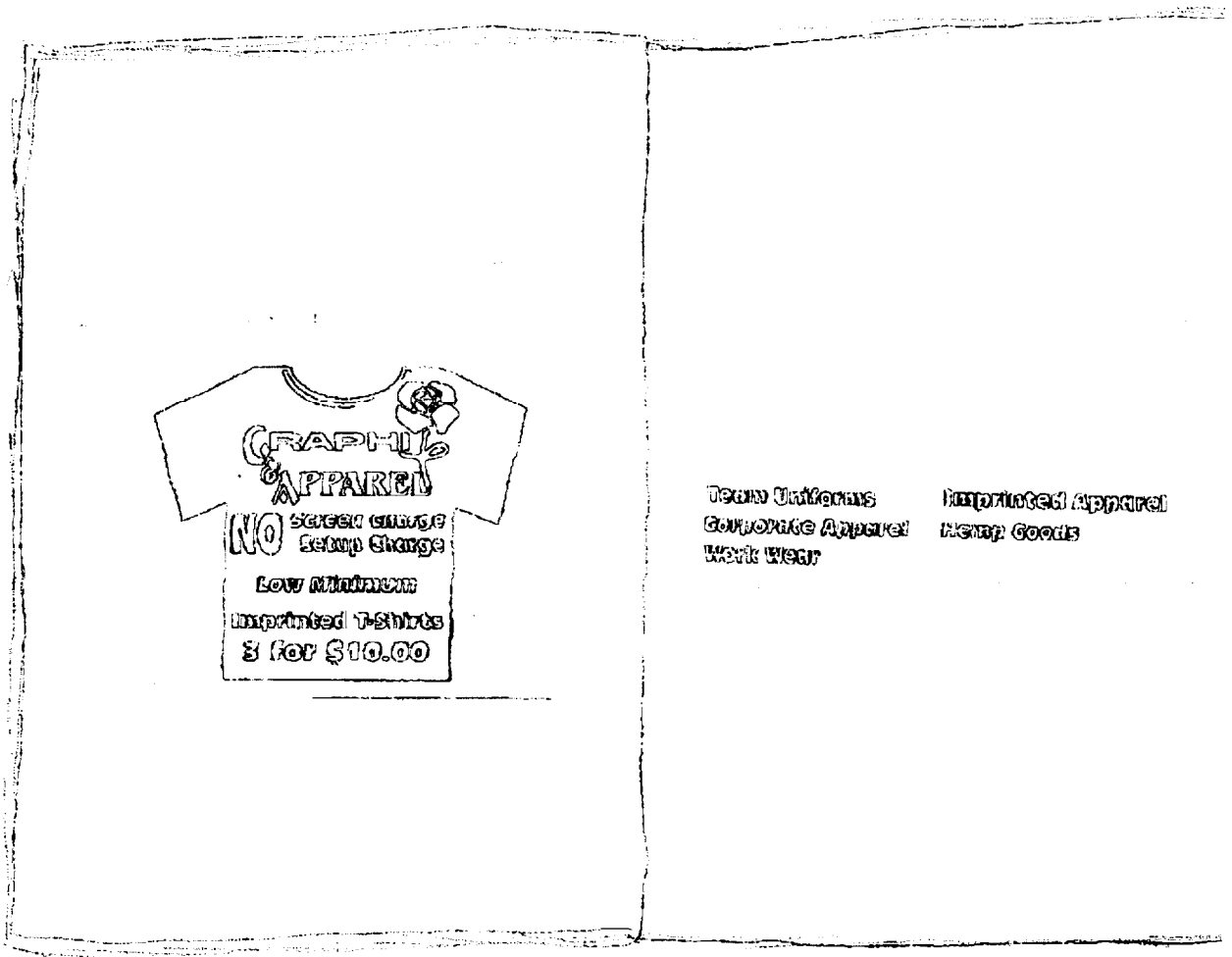
1/8" Iron  
Scroll Bracket



City of ~~South~~ Portland

Mike Nugent  
Ph# 874-8700  
Fax# 874-8716

# Front windows



77 1/2"

52 1/2"

52 1/2"

Team Uniforms      Imprinted Apparel  
Corporate Apparel    Kemp Goods  
Work Wear