

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

Permit Number: 030494

This is to certify that Lafayette Square Limited Partnership East Signs
has permission to 2' x 3' sidewalk sign
AT 638 Congress St 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 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 altered or closed-in.
HEAVY 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]
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: 03-0494	Issue Date:	CBL: 045 A003001
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Location of Construction: 638 Congress St	Owner Name: Lafayette Square Limited Part	Owner Address: 130 Park St	Phone: 409-6828
Business Name:	Contractor Name: Fast Signs	Contractor Address: 413 Western Ave. So. Portland	Phone: 2077735499
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Side Walk	Zone: B3

Past Use: Ice cream shop	Proposed Use: Ice cream shop with 2' x 3' sidewalk sign	Permit Fee: \$42.00	Cost of Work: \$0.00	CEO District: 2
Proposed Project Description: 2' x 3' sidewalk sign		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: SIGN Type: NA 5/15/03 Signature: [Handwritten 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: kwd	Date Applied For: 05/09/2003	Zoning Approval
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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..	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: 5/15/03	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 <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:
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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

03-0494

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: ¹²³⁸⁻¹⁴⁰ 648 Congress		
Total Square Footage of Proposed Structure 12 FT	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# 045 Block# A Lot# 003	Owner: Lafayette Square Limited Partnership Hans Tebbenhoff	Telephone: 284-5161 409-6828
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: Hans Tebbenhoff 20 Beacon Ave Apt 11 Biddeford, Me. 04005 207-284-5161 / 207-409-6828	Total s.f. of signage x \$1.00 per s.f. plus \$30.00 = Total Fee: \$ 42.00 Awning Fee = Cost Of Work: \$ Total Fee: \$ 42.00
Current use: <u>Same</u>		
If the location is currently vacant, what was prior use: <u>Antique Shop</u>		
Approximately how long has it been vacant: _____		
Proposed use: <u>Ice Cream Shoppe</u>		
Project description: <u>A-Frame Sidewalk Sign</u>		
Contractor's name, address & telephone: <u>Fast Signs So. Portland</u>		
Who should we contact when the permit is ready: <u>Hans Tebbenhoff</u>		
Mailing address: <u>409-6828</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. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. 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>Hans Tebbenhoff</u>	Date: <u>5-8-03</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued.

CHECKLIST FOR SIGN/AWNING APPLICATION

Applicants for a sign or awning permit are required to submit the following information to the Code Enforcement Office at the time of application:

- 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. Amount must equal \$400,000.00.
- 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. Indicate on the plan all existing and proposed signs with their dimensions and specific locations.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, and construction method, as well as specifics of installation/attachment.
- Certificate of Flammability required for awning or canopy at time of application.
- UL# required for lighted signs at the time of Final Inspection. Failure to provide this information will invalidate the Sign Permit.
- Pre-Application Questionnaire completed and attached. Photos of existing signage attached.

**Permit Fee for signage or awning-with-signage:
\$30.00 plus \$1.00 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, plus \$7.00 for each additional \$1,000.000.**

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 648 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: 2'x3' X 12 SQ FT

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

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): _____

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: 5-8-03

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



PRESERVATION MANAGEMENT, INC.



NATIONAL PROPERTY MANAGEMENT SPECIALISTS

May 6, 2003

Hans Tebbenhoff
DBA Hans' Soft Serve
648C Congress St.
Portland, ME 04101

This letter is to officially give permission to place a sidewalk sign outside of the 648C Congress St. commercial space. This is part of your lease agreement with Lafayette Sq. L.P effective May 1, 2003.

Please call me at 774-7175, if you require information for this matter.

Sincerely,

Michelle Norton
Site Manager

LAFAYETTE SQUARE OFFICE

638 Congress Street • Portland, Maine 04101 • Tel: 207 • 774 • 7175 • Fax: 207 • 774 • 6751 • TDD: 1 • 800 • 437 • 1220

EQUAL HOUSING OPPORTUNITY



CERTIFICATE OF LIABILITY INSURANCE | DATE 05/07/03 (MM/DD/YY)

PRODUCER
 NORMAND M METHOT AGY INC
 319 MAIN STREET
 PO BOX 387
 BIDDEFORD ME 04005-

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

INSURER A: ZURICH INS. GROUP

INSURED
 HANS TEBBENOFF
 20 BEACON AVE. UNIT 11
 BIDDEFORD ME 04005

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.

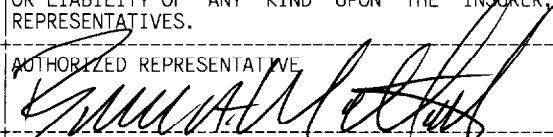
INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> [] CLAIMS MADE [] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY [] PROJECT [] LOC	PPS42082017	05/01/03	05/01/04	EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) \$ 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
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Each 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 LIABILITY <input type="checkbox"/> OCCUR [] CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY				[] WC STATUTORY [] OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE-EA EMPLOYEE \$ E.L. DISEASE-POLICY LIMIT \$
	OTHER				

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

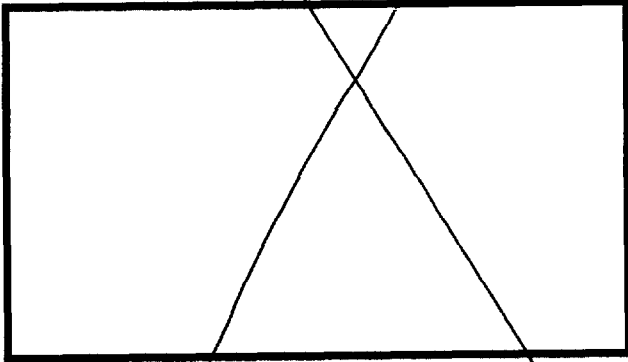
CERTIFICATE HOLDER [] ADDITIONAL INSURED; INSURED LETTER: CANCELLATION

CITY OF PORTLAND ATTN: CODE ENFORCE OFFICE
 389 CONGRES 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 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.

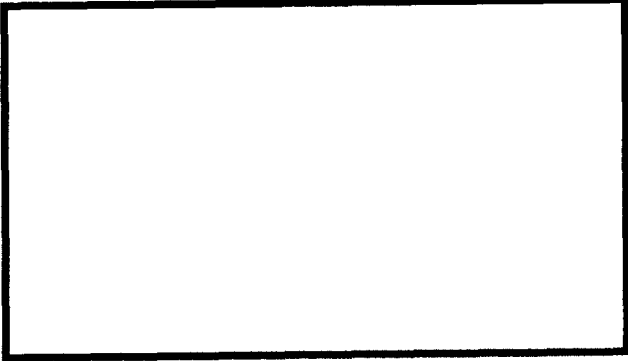
AUTHORIZED REPRESENTATIVE


HANS'
Soft Serve
Ice Cream



Cones **Floats**
Sundaes **Parfaits**
Shakes **Snowstorms**
Ice Cream Cakes

Hans'
Soft Serve
Ice Cream



Cones **Floats**
Sundaes **Parfaits**
Shakes **Snowstorms**
Ice Cream Cakes

1
36"
1

- 24" -