

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

Permit Number: 030680

PERMIT
DB

This is to certify that Coffin Craig G Trustee /Bar Signs

has permission to Replace Existing Signage and Sign

AT 247 225 St John St 064-A-002 et AL
-064 F002001

provided that the person or persons who apply for or accept this permit shall comply with all of the provisions of the Statutes of the State 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 when permission is procured before this building or part thereof is occupied or otherwise closed-in. 24 HOUR NOTICE 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 _____

[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: 03-0680	Issue Date:	CBL 64-A-00280 -064 P002001
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Location of Construction: 225 St John St	Owner Name: Coffin Craig G Trustee	Owner Address: 222 St John St Ste 103	Phone:
Business Name:	Contractor Name: Barlo Signs	Contractor Address: 155 Maine Mall Road South Portland	Phone: 2078429002
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B2
Past Use: Margaritas Restaurant/Commercial	Proposed Use: Margaritas Restaurant/Commercial	Permit Fee: \$84.00	Cost of Work: \$84.00
		CEO District: 3	
Proposed Project Description: Replace Existing Signage and Awning		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: U Type: NA Signature: <i>[Signature]</i> 6/28/03
		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: gad	Date Applied For: 06/13/2003	Zoning Approval
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<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>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>OK 6/19/03</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 checked="" type="checkbox"/> Not in District 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 type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>[Signature]</i></p>
	<p><i>The Awning shall Not consist of backlit "glowing" materials</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 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: 03-0680	Date Applied For: 06/13/2003	CBL: 064 A002001
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Location of Construction: 242 St John St	Owner Name: Coffin Craig G Trustee	Owner Address: 222 St John St Ste 103	Phone:
Business Name:	Contractor Name: Barlo Signs	Contractor Address: 155 Maine Mall Road South Portland	Phone (207) 842-9002
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Margaritas Restaurant/Commercial	Proposed Project Description: Replace Existing Signage and Awning
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 06/19/2003

Note: **Ok to Issue:**

1) The awning materials shall not be "back-lit" nor glow.

Dept: Building **Status:** Pending **Reviewer:** **Approval Date:**

Note: **Ok to Issue:**

03-0680

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.

It is 242 St John St

Location/Address of Construction: <u>242 St John's Street</u>		
Total Square Footage of Proposed Structure <u>awning 315F - 265F sign</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>064</u> Block# <u>KA</u> Lot# <u>002</u>	Owner: <u>9511 Margaret's</u>	Telephone:
Lessee/Buyer's Name (If Applicable) <u>Margaret's</u> <u>1501 Timmons</u> <u>242 St. John's Street</u> <u>Portland, Me</u>	Applicant name, address & telephone: <u>Barlo Signs</u> <u>158 Greeley Street</u> <u>Hudson, NH 03051</u> <u>800 227 5674 x352</u>	Total s.f. of signage x <u>54</u> \$1.00 per s.f. plus \$30.00 = Total Fee: <u>84.00</u> \$ <u>84.00</u> Awning Fee = Cost Of Work: \$ <u>100.00 30.00</u> Total Fee: \$ _____
Current use: <u>Restaurant</u>		
If the location is currently vacant, what was prior use: <u>Restaurant</u>		
Approximately how long has it been vacant: _____		
Proposed use: _____		
Project description: <u>Install new sign-replacement and re-skin existing awning</u>		
Contractor's name, address & telephone: <u>Barlo Signs</u> <u>158 Greeley St, Hudson, NH 03051</u>		
Who should we contact when the permit is ready: <u>Messie Smith</u> <u>800 227 5674 x352</u>		
Mailing address: <u>158 Greeley St, Hudson, NH 03051</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: <u>800 227 5674 x352</u>		

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>Margaret R. Smith</u> (Agent)	Date: _____
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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.
- attach* 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.
- attached* 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.**

W.D. # MAR-63838


RECEIVE & INSTALL
ITEMS LISTED BELOW

DETAIL DRAWINGS

SEE PAGE ONE

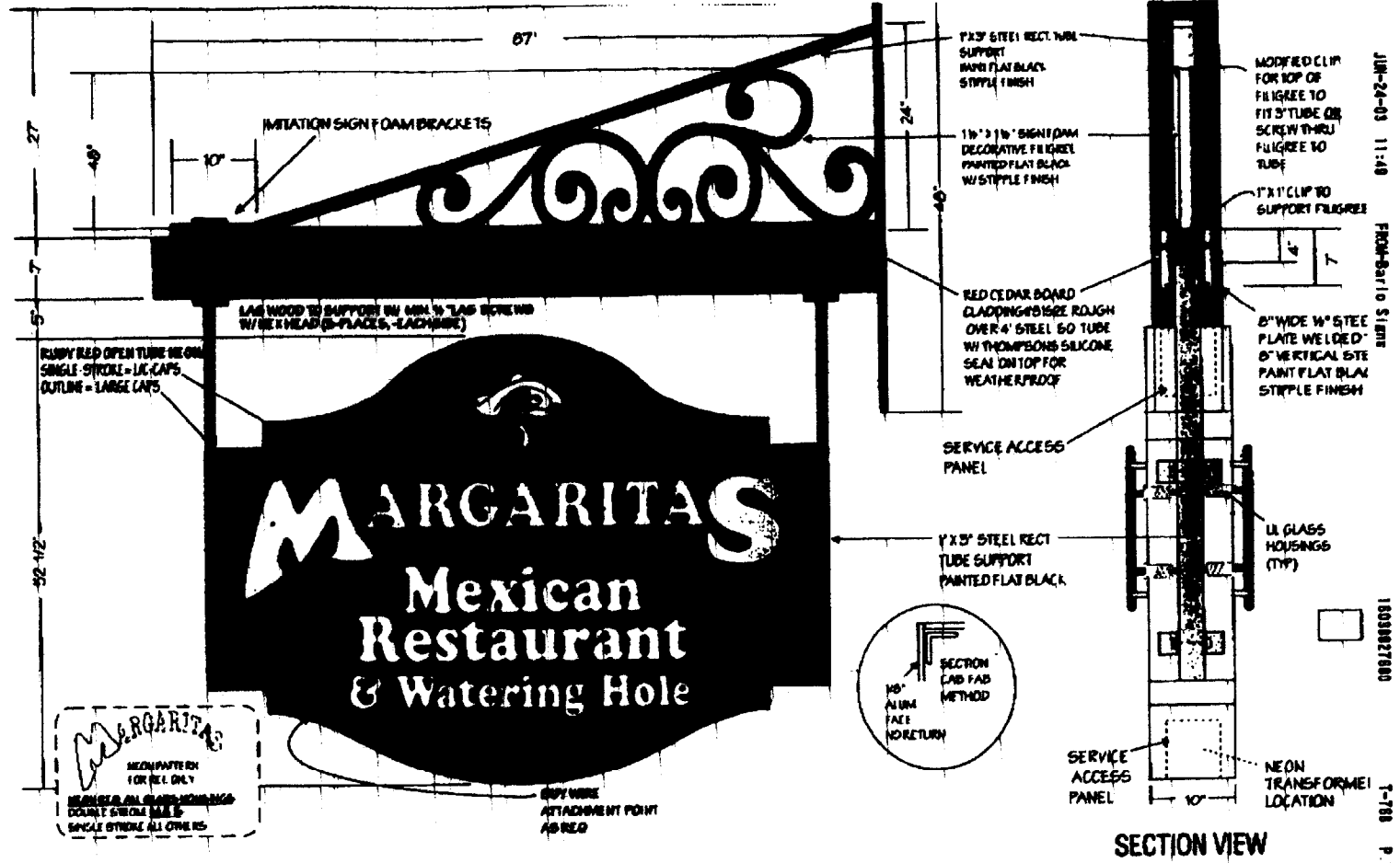
Check for Bids Leave @ Site Dispose
 Check for Customers Obsolete OK

ALL DIMENSIONS ARE FOR REPRESENTATION ONLY
 SEE ACTUAL SAMPLES FOR COLOR AND FINISH.
 ALL DIMENSIONS UNLESS OTHERWISE SPECIFIED

 **WATERWORKS INTERNATIONAL INC.**

GENERAL INFO.

Qty: 1 14 ft 28.25



SECTION VIEW

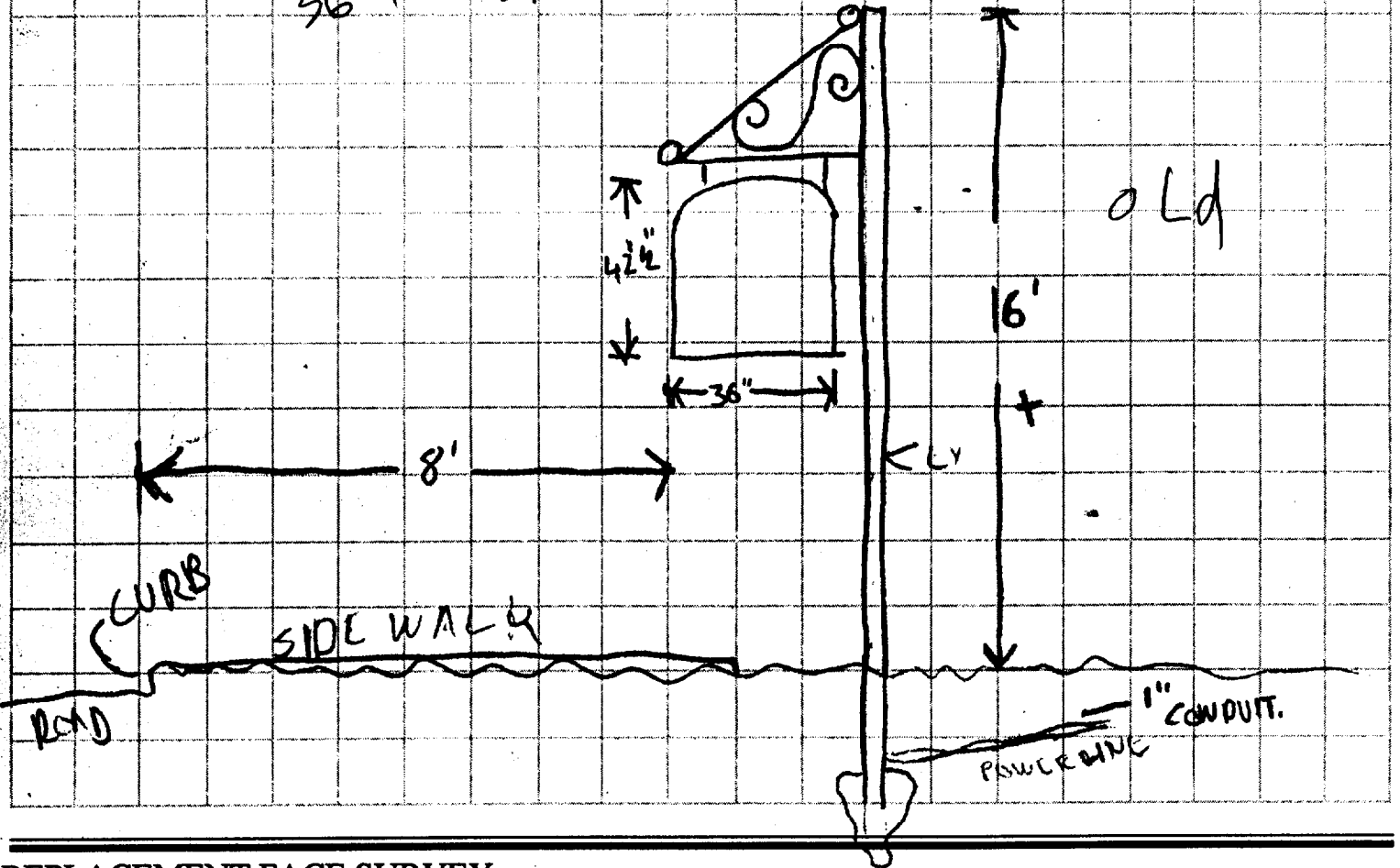
Type	Mat	Net Size	Box Depth	Dist. Between by producer	By	Job Name
Face Mat	Telephone	Copy		Sec't	Exp.	Location
Face Cover Mat	Hgt	Depth				242 ST. JOHN'S ST. PORTLAND, ME
Labels	Explan	Face-LH	Back-LH	FOO	Draw Mats	Y N
Face Mat	Tr	Return Mat	Depth			
Signs	Dist Mat	Mass	Revs	MM		
Sign Location	SPAC	ORAL	Wing	N BK	% Light	Phy way
Materials	Glass	Pt's	DEL	Backs	RPA	Mfg
	Mfg	Mat	Dist	Time	Back	< Clip

Job Name	Location	Drawn By	Check By	Date
MARGARITAS	242 ST. JOHN'S ST. PORTLAND, ME	DJR	CL	6/8/03
<small>© COPYRIGHT 2003 THE ONE SOURCE ALL RIGHTS RESERVED. NO PART OF THIS PUBLICATION MAY BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM.</small>				

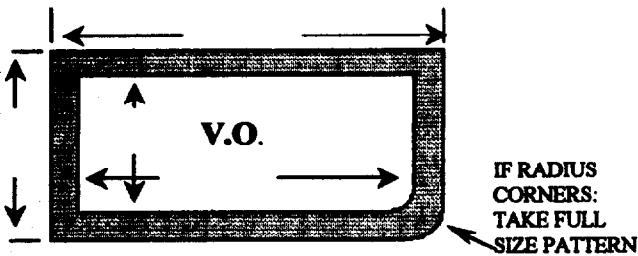
16308027800
 T-788 P. 02/02 F-45T
 14 MARK PORT ST. JOHN'S
B-03-02-37
 SHEET 2 OF 2

Job Name _____ Location _____
 Completed by _____ Date _____

$$36" \times 42.5" = 1530 \div 144 = 10.625'$$



REPLACEMENT FACE SURVEY



Cabinet
 (outside dimensions): _____ "H x _____ "W x _____ "D

Retainer Size: _____ " Retainer opening: _____

Draw side view with retainer

Face
 Cut size: _____ "H x _____ "W

V.O: _____ "H x _____ "W

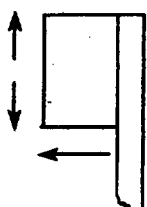
Existing Thickness: _____ Max: _____

Material: Lexan Plexi Flex Corr.

Lamps: _____

Ballasts: _____

HANGING BAR SIZE (FACE VIEW)



A. INDICATE IF BAR IS ON FACE OR BACK OF SHEET.

B. DRAW IF BAR HAS A SHAPE.

Form # 001

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date _____

Permit # _____

CBL# _____

LOCATION: 242 St. Johns St METER MAKE & # _____
 CMB ACCOUNT # _____ OWNER Margarita's
 TENANT Margarita's Restaurant PHONE # _____

					TOTAL EACH FEE
OUTLETS	Receptacles	Switches	Smoke Detector		.20
FIXTURES	Incandescent	Fluorescent	Strips		.20
SERVICES	Overhead	Underground	TTL AMPS	<800	15.00
	Overhead	Underground		>800	25.00
Temporary Service	Overhead	Underground	TTL AMPS		25.00
					25.00
METERS	(number of)				1.00
MOTORS	(number of)				2.00
RESID/COM	Electric units				1.00
HEATING	Oil/gas units	Interior	Exterior		5.00
	APPLIANCES	Ranges	Cook Tops	Wall Ovens	2.00
	Insta-Hot	Water heaters	Fans		2.00
	Dryers	Disposals	Dishwasher		2.00
	Compactors	Spa	Washing Machine		2.00
	Others (denote)				2.00
MISC. (number of)	Air Cond/win				3.00
	Air Cond/cant		Pools		10.00
	HVAC	EMS	Thermostat		5.00
	x Signs				10.00
	Alarms/res				5.00
	Alarms/com				15.00
	Heavy Duty(CART)				2.00
	Cirous/Carry				25.00
	Alterations				5.00
	Fire Repairs				15.00
	E Lights				1.00
	E Generators				20.00
PANELS	Service	Remote	Main		4.00
TRANSFORMER	0-25 Kva				5.00
	25-200 Kva				8.00
	Over 200 Kva				10.00
				TOTAL AMOUNT DUE	
				MINIMUM FEE	135.00
				MINIMUM FEE/COMMERCIAL	45.00

INSPECTION: Will be ready _____ or will call _____

CONTRACTOR'S NAME Bark Sana (Jeff Zuchinsky) MASTER LIC. # _____
 ADDRESS 158 Greeley St. Hudson, NH LIMITED LIC. # LN50016435 exp 9-0
 TELEPHONE 1-800-220-5676 x352
 SIGNATURE OF CONTRACTOR Jeff Zuchinsky

Attention: Town/City of Portland, ME

Date: 5/20/03

Street: 242 Saint John's Street

City/State/Zip: Portland, ME

Landlord Authorization Form
FORM MUST BE SIGNED BY OWNER OF PROPERTY

As owner of 242 Saint John's Street, Portland, ME ST JOHN STREET REALTY TRUST
(Property Address)

I hereby authorize Jennifer Robichaud / Kris Loughlin / Carol Bugbee or Hazel Hopkins of Barlo Signs Company of Hudson, NH, to **APPLY FOR SIGN PERMITS** for this site.

Signed: John A. Sevigny, V.P. Agent / Attorney in Fact
(Owner)
Printed: JOHN A. SEVIGNY
Address: Suite 134
222 ST JOHN STREET
PORTLAND, MAINE 04102

As owner of 242 Saint John's Street, Portland, ME ST JOHN STREET REALTY TRUST
(Property Address)

I hereby authorize Jenn Robichaud or Authorized Representative of Barlo Signs Company of Hudson, NH, to **APPEAR BEFORE THE PLANNING BOARD and/or SIGN REVIEW BOARD and/or the ZBA** for this site.

Signed: John A. Sevigny, V.P. Agent / Attorney in Fact
(Owner)
Printed: JOHN A. SEVIGNY
Address: Suite 134
222 ST JOHN STREET
PORTLAND, MAINE 04102

Job Reference: Margarita's
Job No: 63937

Lili Mendonca
PLEASE FAX BACK to Attn: _____
AND MAIL ORIGINAL. THANK YOU.
Barlo Signs, 158 Greeley Street, Hudson, NH 03051 Fax # 603-882-7680
If you have any questions, please call me at 1-800-227-5674 ext. 397

This certificate is executed by Liberty Mutual Insurance Group as respects such insurance as is afforded by those companies.

Certificate of Insurance

This certificate is issued as a matter of information only and confers no rights upon you the certificate holder. This certificate is not an insurance policy and does not amend, extend, or alter the coverage afforded by the policies listed below.

This is to certify that (Name and address of Insured)

MARGARITAS MANAGEMENT GROUP, INC., ETAL
 655 PORTSMOUTH AVE
 GREENLAND, NH 038402246



is, at the issue date of this certificate, insured by the Company under the policy(ies) listed below. The insurance afforded by the listed policy(ies) is subject to all their terms, exclusions and conditions and is not altered by any requirement, term or condition of any contract or other document with respect to which this certificate may be issued.

Expiration Type	Expiration Date(s)	Policy Number(s)	Limits of Liability				
			Coverage afforded under WC law of the following states:	Employers Liability			
<input type="checkbox"/> Continuous*	12/31/2003	WC2-111-254252-062	CT, MA, ME, NH	Bodily Injury By Accident	Each Accident		
<input type="checkbox"/> Extended				Bodily Injury By Disease	Policy Limit		
<input checked="" type="checkbox"/> Policy Term				Bodily Injury By Disease	Each Person		
Workers Compensation				\$500,000.			
General Liability	01/01/2004	TB2-111-254252-023	General Aggregate-Other than Prod/Completed Operations			\$2,000,000.	
			Products/Completed Operations Aggregate			\$2,000,000.	
			Bodily Injury and Property Damage Liability		Per Occurrence	\$1,000,000.	
			Personal and Advertising Injury		Per Person / Organization	\$1,000,000.	
			Other Liability	Other Liability			
Automobile Liability	01/01/2004	AS2-111-254252-033	Each Accident - Single Limit - B. I. and P. D. Combined			\$1,000,000.	
			Each Person				
			Each Accident or Occurrence				
			Each Accident or Occurrence				

COMMENTS: RE: 242 St. John Street, Portland, ME City of Portland is an additional insured with respects to the General Liability Policy and sign being installed at Margaritas by Barlo Signs.

*If the certificate expiration date is continuous or extended term, you will be notified if coverage is terminated or reduced before the certificate expiration date. However, you will not be notified annually of the continuation of coverage.

Special Notice - Ohio: Any person who, with intent to defraud or knowing that he / she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Important information to Florida policyholders and certificate holders: in the event you have any questions or need information about this certificate for any reason, please contact your local sales producer, whose name and telephone number appears in the lower left corner of this certificate. The appropriate local sales office mailing address may also be obtained by calling this number.

Notice of cancellation: (not applicable unless a number of days is entered below) . Before the stated expiration date the company will not cancel or reduce the insurance afforded under the above policies until at least 30 days notice of such cancellation has been mailed to:

Office : BEDFORD, NH Phone: 603-472-7100

Certificate Holder:
 City of Portland
 389 Congress Street
 Portland, ME 04101

Linda A. Madden
 Authorized Representative

C STREET

ST. JOHN ST.

ENTRANCE
FOR STRIP
MALL

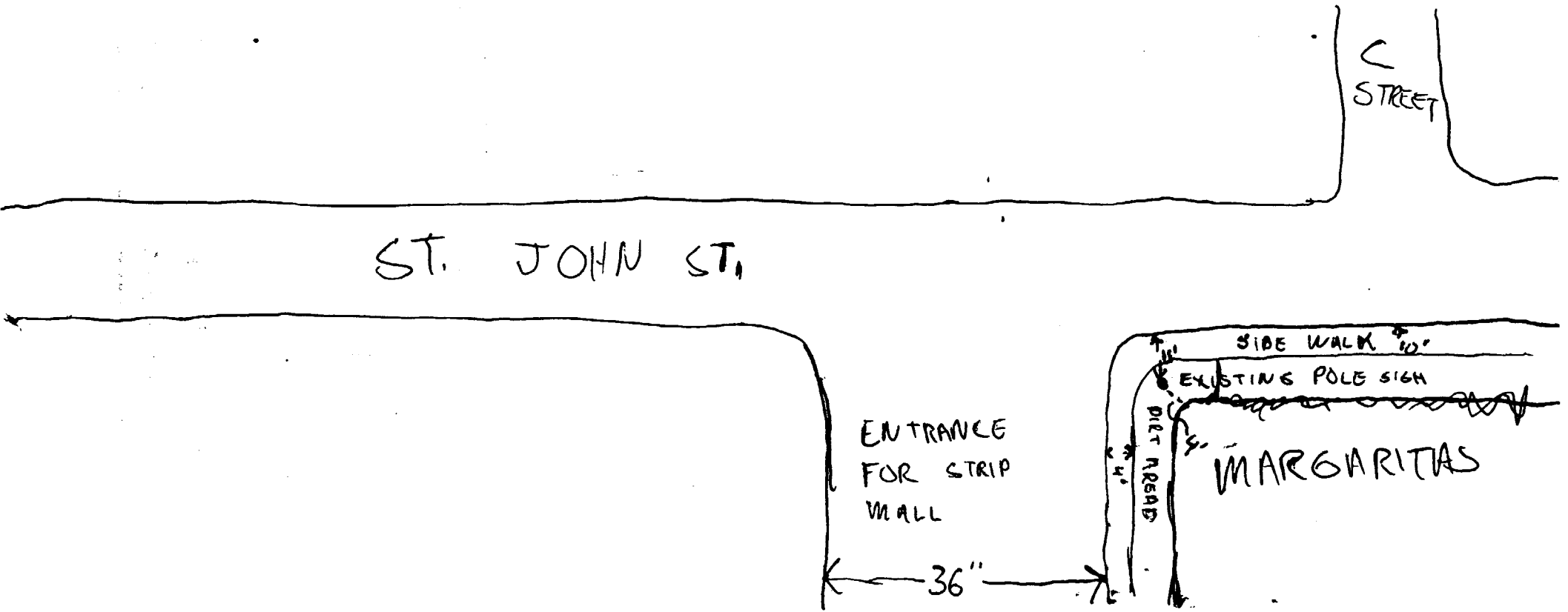
36"

SIDE WALK 10'

EXISTING POLE SIGN

MARGARITAS

DIRT ROAD



Cooley Sign Products Test Data

Product Specifications (Minimum Values)

	Cooley·Brite™ Lite	Cooley·Brite™	Cooley·Brite™ II
Top Coating	None	None	Clear
Material Color	White back/Colored face	White back/Colored face	White back/Colored face
Surface/Back	White/White	White/White	White/White
Eradicable	Yes	Yes	Yes
1. Spray Paint	Recommended	Recommended	Recommended
2. Silk Screen	Recommended	Recommended	Recommended
3. P.S. Vinyl	Recommended*	Recommended*	Recommended*
Weight (GR/M ²)	542 +/- 33.9	678 +/- 50.9	678 +/- 50.9
Weight (Ounces/Yd ²)	16 +/- 1	20 +/- 1-1.5	20 +/- 1-1.5
Thickness (cm)	0.048 +/- 0.003	0.057 +/- 0.004	0.057 +/- 0.004
Thickness (Inches)	0.0190 +/- 0.0010	0.0225 +/- 0.0015	0.0225 +/- 0.0015
Tensile Strength (daN)	89 x 78	122 x 102	122 x 102
Tensile Strength (Lbs)	200 x 175	275 x 230	275 x 230
Tearing Strength (daN)	17.8 x 17.8	26.7 x 26.7	26.7 x 26.7
Tearing Strength (Lbs)	45 x 45	60 x 60	60 x 60
Elongation (%) @ Break	35%	30%	30%
Light Transmission (%)	22 - 24	18 - 20	18 - 20
Cold Resistance	-40Kc	-35Kc	-35Kc
	82Kc	82Kc	82Kc
	Treated	Treated	Treated
Fungus Resistance	Treated	Treated	Treated
Weather Resistance	3,000 hrs QUV	3,000 hrs QUV	4000 hrs QUV
Wicking Resistance	Antwick Treated	Antwick Treated	Antwick Treated
Warranty	5 Years**	5 Years**	8 Years**
Standard Sizes Available	6' 6" x 150'	6' 6" x 150'	6' 6" x 150'
	6' 6" x 48' to 147'	6' 6" x 75'	6' 6" x 75'
	6' 6" x 30' to 45'	6' 6" x 30'	6' 6" x 30'
UL Approved	48 & 94	48 & 94	48 & 94
Boca Code Section 2907.42	Yes	Yes	Yes
California State Fire Marshall	Yes	Yes	Yes
NFPA 701	Yes	Yes	Yes

Cooley offers a 5 year limited warranty with 3M[®] Scotchcal[®] Translucent Graphic Film Series 3630 and 3632 GPS and Scotchcal[®] 3640 GPS and 3642 GPS overlaminates. **For a copy of the Cooley-Brite warranty, please contact Cooley Sales at 800-992-0072.

Physical properties and chemical values as determined by other standard testing procedures are available upon request. Cooley Group Laboratory is a Department of Defense, Defense Supply Agency, Qualified Testing Laboratory for Chemical, Physical, and Biological Testing (QLL #5220).

The information contained herein or supplied by us, or on our behalf, is based upon data obtained through our own research and is considered accurate. However, no warranty is expressed or implied regarding the accuracy of this data, the results obtained from the use thereof, or that any such use will not infringe upon any patent. This information is furnished upon the condition that the person receiving it shall evaluate its suitability for the specific application. Cooley-Brite is a trademark of Cooley Group.

Cooley/Sign & Digital Products
WHERE CHARACTER MAKES THE DIFFERENCE

50 Esten Avenue, Pawtucket, RI 02860

Tel: 800-992-0072
 Tel: 401-724-8000
 Fax: 401-728-1910

TYE
 ZON
 OWN
 Street
 Prope
 orted with
 pleted in 1
 Void if cor

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 242 St. John's Street ZONE: B-2 (Historical)

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: old 6.625 ft New 26.25 ft 265 ft
65 ft min
BLDG. WALL SIGN? (attached to bldg) YES _____ NO _____ DIMENSIONS PROPOSED: _____
18 ft pole 6' x 4' 4.5"
OK

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: 4' x 7' 8" re-skin only

LOT FRONTAGE (FEET): _____
TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET): shall not be backlit
re-skin only

AWNING YES _____ NO _____ IS AWNING BACKLIT? YES _____ NO _____

HEIGHT OF AWNING: 4' LENGTH OF AWNING: 7' 8" DEPTH: existing

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES _____ NO _____ (315F)

IF YES, TOTAL S.F. OF PANELS WITH COMMUNICATIONS/MESSAGE/TRADEMARK/SYMBOL? 30.66 s.f.

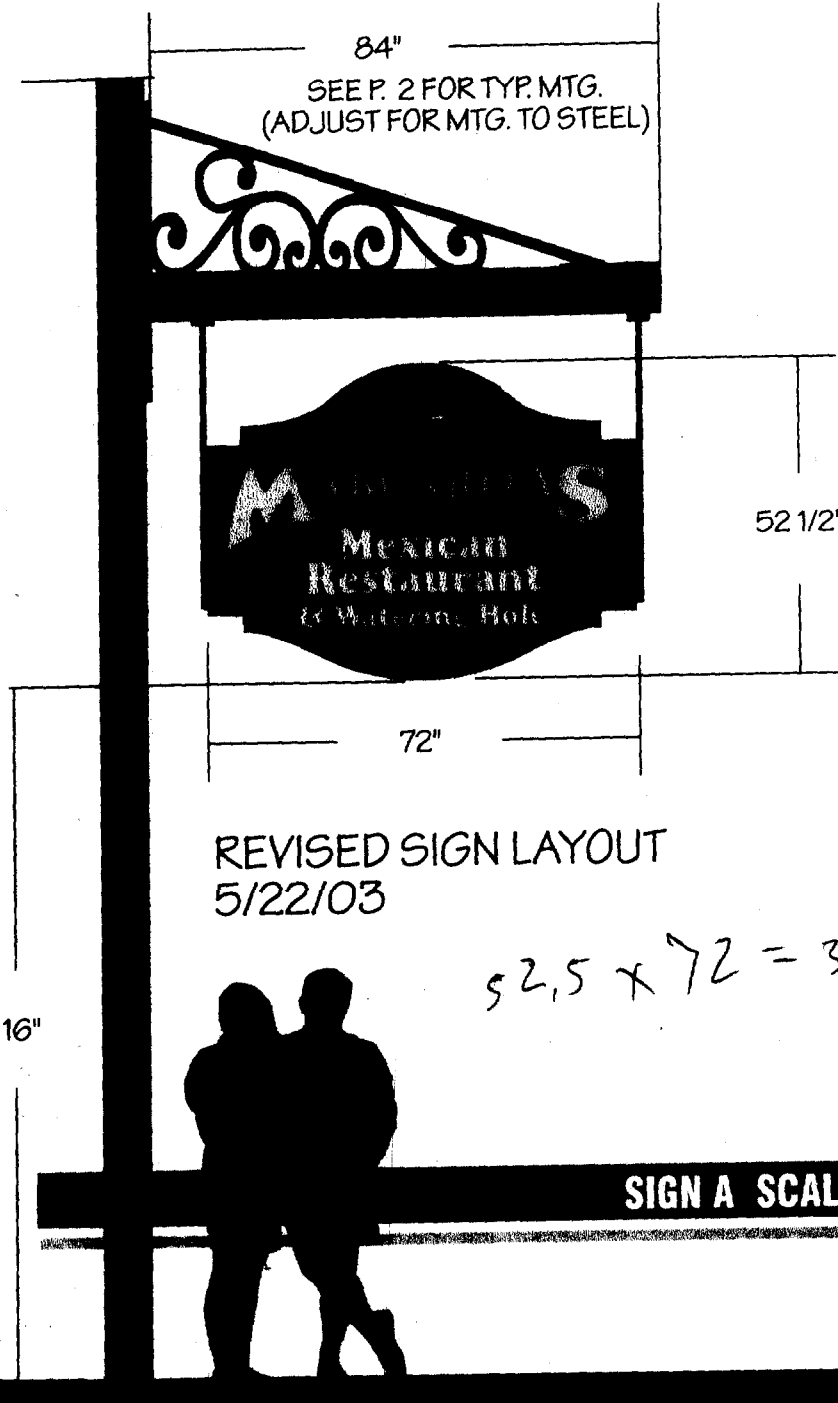
A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF PROPOSED SIGNAGE ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: Margaret N. Smith DATE: _____

B-2
zone

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

NEW 8" SQ. STEEL TUBE
SEE P. 2 FOR PREVIOUS BRACKET REF.
& CONSTRUCTION SPECIFICATIONS



Circuits			
Amp			
Voltage			
U.L.			
STEEL			
Size			
Length			
W. Thickness			
Stub Size			
Stub Length			
W. Thickness			
PLATE	W	L	Th
GUSSETS	W	L	Th
ANCHOR BOLTS	L	HOOK	Dia

Depth _____ Width _____ Length _____
Yds.

BARLO:

BARLOMEX

- | | |
|-------------------|-----------------|
| 0-Art/Eng. _____ | 5-Neon _____ |
| 1-Pat/Vin. _____ | 6-Finish _____ |
| 2-Let. Fab. _____ | 7-Paint _____ |
| 3-Screen _____ | 8-Install _____ |
| 4-Met. Fab. _____ | 9-Misc. _____ |

production:	By:	Job Name: MARGARITAS				
Description	To Shop To Mex	Location: 242 ST. JOHN'S ST. PORTLAND, ME				
		Drawn By: DJR				
		Sales Rep: CL				
		Date: 6/9/03				
		Landlord:				
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Production:	Estimating:	dpi	SGIA	LANE	ISI	USA
Survey:	Sales:					



File Name: MARG PORT ST. JOHN 030237
B-03-02-37 SHEET 1 OF 2

W.O.#: MAR-63938

SCOPE OF WORK - BARLO

RECEIVE & INSTALL:

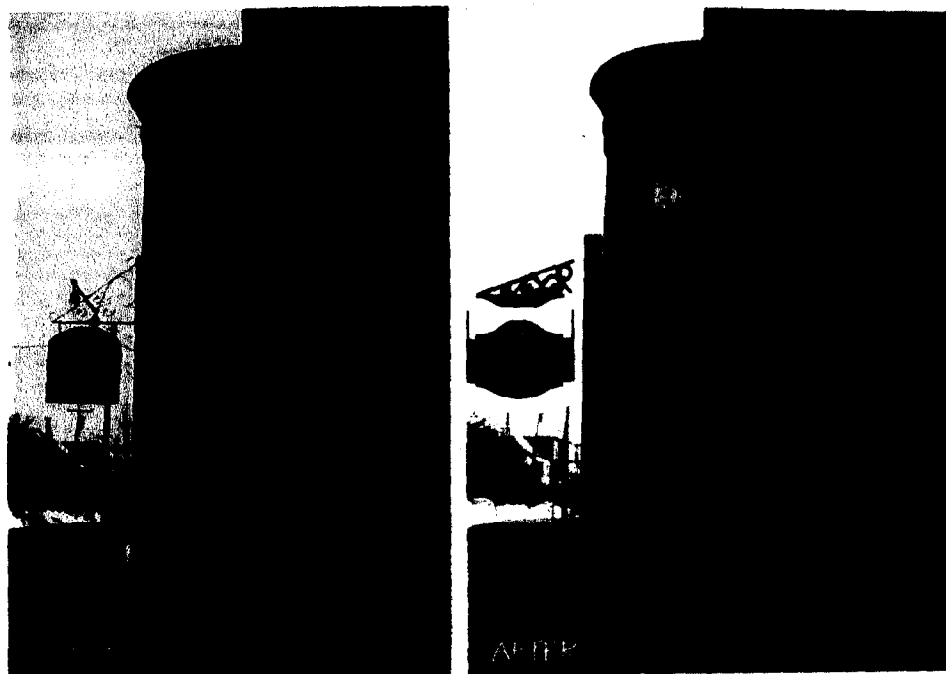
ITEMS LISTED BELOW

SCOPE OF WORK - BARLOMEX

MANUFACTURE & SHIP:

ONE (1) D/F, INT-ILLUM, FLAG MTD,
SIGN ON NEW 8" SQ. STEEL TUBE

GENERAL NOTES



COLORS

CABINET & BORDER: PTM 3630-33 RED

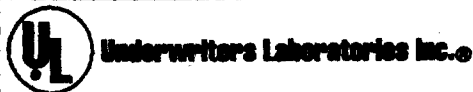
BACKGROUND: PAINTED TO MATCH
3630-157 SULTAN BLUE- SMOOTH FINISH.
LOGO: SCOTCH PRINT
MEXICAN RESTAURANT:
& WATERING HOLE: TO BE INCISED
7725-015 YELLOW

MARGARITAS LETTERS

7725-015 YELLOW LETTERS
W/ 7725-13 TOMATO RED 3/4" OUTLINES
W/ RUBY RED OPEN TUBE NEON 10MM

SIGN DISPOSITION

- Store for Barlo Leave @ Site Dispose
 Store for Customer Chargeable N/A



GENERAL INFO

Qty: 1 Sq. Ft: 26.25
S/F (D/F) (ILL) Non-ILL

SIGN A DETAIL SCALE: 1/2" = 1'-0"

INCISED: DONKEY/MEXICAN RESTAURANT & WATERING HOLE
OPEN TUBE RUBY RED NEON: MARGARITAS

SIGNS	Type:	Mat:	Ret. Size:	Box Depth:	Date Released for	
	Face Mat:	Thickness:	Copy:	Rev.#	Date	
	Pole Cover Mat.	Hgt:	Depth:			
	Interior Exterior	Face-Lit Back-Lit FCO	Drain Holes: Y N			
	Face Mat:	Th:	Return Mat:	Depth:		
	Mylar Size:	Back Mat:	Neon Rows:	MM:		
	Trans. Location:	30MA 60MA	Wiring: % BX % LiqLite Wireway N/A	Engineering:		
	Housings: Glass Pk's Dbl. Backs N/A	Mtg. Nut Sert Thru Back < Clip	Check By:			