

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT ISSUED

PERMIT

Permit Number: 101154

SEP 28 2010

Please Read Application And Notes, If Any, Attached

This is to certify that Union Station Lmt Partnership/Sign Design Inc

has permission to Erect 5' x 10' freestanding sign City of Portland

AT 235 St John St CBL 064 D007001

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 lathed or otherwise closed-in. 24 HOUR 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

James Burke 9/28/10
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: 10-1154	Issue Date:	CBL: 064 D007001
-----------------------	-------------	---------------------

Location of Construction: 235 St John St	Owner Name: Union Station Lmt Partnership	Owner Address: 12 Brook St	Phone:
Business Name:	Contractor Name: Sign Design Inc	Contractor Address: PO Box 207 Westbrook	Phone: 2078562600
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-2

Past Use: Commercial : Auto Repair / Sales <i>change of use #10-1118</i>	Proposed Use: Auto Repair / Sales: Erect 5' x 10' freestanding sign <i>on existing pole</i>	Permit Fee: \$130.00	Cost of Work: \$0.00	CEO District: 2
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>F-1/M</i> Type: <i>Sign</i> <i>IBC-2003</i> <i>Jan 29/28/10</i>	

Proposed Project Description: Erect 5' x 10' freestanding sign <i>on existing pole</i>	Signature:	Signature: <i>Jan 29/28/10</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: gg	Date Applied For: 09/14/2010	Zoning Approval		
------------------------	---------------------------------	------------------------	--	--

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	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	Historic Preservation <input checked="" 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
	Major <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>9/20/10</i> <i>JBM</i>	Date:	Date:

PERMIT ISSUED

SEP 28 2010

City of Portland

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: 10-1154	Date Applied For: 09/14/2010	CBL: 064 D007001
------------------------------	--	----------------------------

Location of Construction: 235 St John St	Owner Name: Union Station Lmt Partnership	Owner Address: 12 Brook St	Phone:
Business Name:	Contractor Name: Sign Design Inc	Contractor Address: PO Box 207 Westbrook	Phone (207) 856-2600
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Auto Repair / Sales: Erect 5' x 10' freestanding sign on top of existing pole	Proposed Project Description: Erect 5' x 10' freestanding sign on top of existing pole.
---	---

Dept: Zoning	Status: Approved with Conditions	Reviewer: Ann Machado	Approval Date: 09/20/2010
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) This permit is being issued with the conditon that the sign measured from grade to the top of the sign may not exceed 18'.			
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date:
Note:	Ok to Issue: <input type="checkbox"/>		
1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code. Sign to be installed on the existng pole.			
2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.			

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 Inspection 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 with construction.**

 X **Final inspection required at completion of work.**

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



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

Sept 14 2000

Received from T R Lynn Design Inc

Location of Work 235 So. Jordan

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 130.00

Building (IL) Plumbing (I5) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

CBL: 064 2009

Check #: 4570 Total Collected \$ 130.00

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature]

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy



Signage/Awning Permit Application

101154

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>235 St. John St.</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>064</u> Block# <u>D</u> Lot# <u>009</u>	Owner: <u>Len Kovit</u>	Telephone: <u>797-8943</u>
Lessee/Buyer's Name (If Applicable) <u>Saleban Mukhtar Gele</u> <u>541-9088</u>	Contractor name, address & telephone: <u>Sign Design, Inc.</u> <u>P.O. Box 209</u> <u>Westbrook</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ <u>130.00</u>
Who should we contact when the permit is ready: <u>Diana/Roger</u> phone: <u>850-2600</u>		
Tenant/allocated building space frontage (feet): Length: _____ Height: <u>25'</u> Lot Frontage (feet) <u>133'</u> <u>Single Tenant</u> or Multi Tenant Lot _____		
Current Specific use: <u>Auto repair/sales</u> If vacant, what was prior use: _____ Proposed Use: _____		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: <u>5'x10'</u> Height from grade: <u>20'</u> Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions proposed: <u>X</u>		
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 <input checked="" type="checkbox"/> No _____ Dimensions: <u>5'x10' x 20' OAH</u> Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions: _____ 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.		

50 s.f.
18'
20'
5 x 10 = 50
50 x 2 = 100
+ 30
130.00

RECEIVED

Please submit all of the information outlined in the Sign/Awning Application Checklist. SEP 14 2010
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.

Dept. of Building Inspections
City of Portland Maine

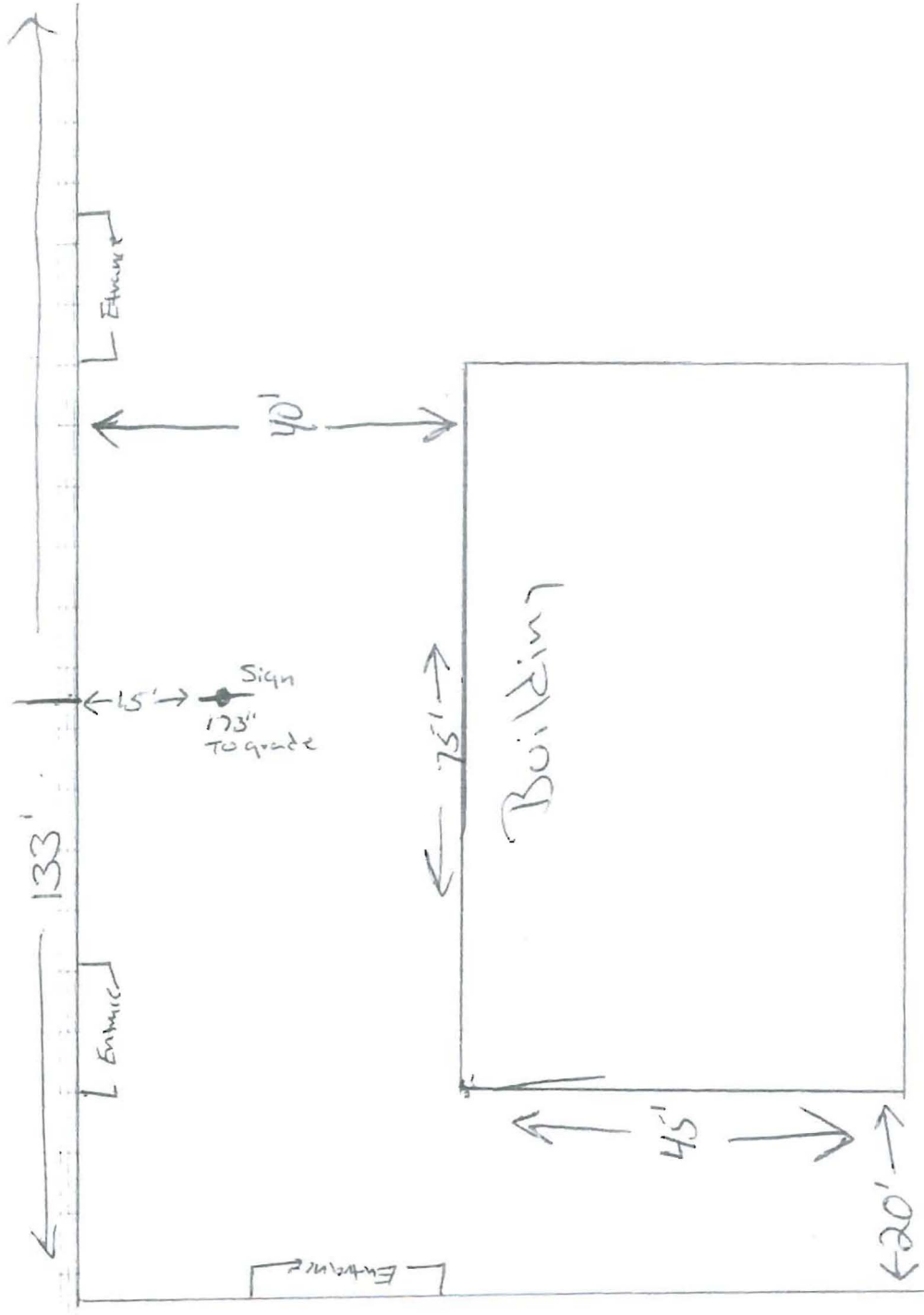
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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: Diana Olmstead Date: 9/10/10

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

B-2 - signposts - freestanding < 200'
65' max - 5'x10' = 50 s.f. max height 18' max = 18'

ST John St



+ 000 + 5 ()



**South Street
AUTO CENTER**
772-2471
Complete Auto Care



**Small Engine
Repair**



This Design Is The Property Of **Sign Design Inc.**

306 Warren Ave. Portland, ME
Phone: 207.856.2600 Fax: 207.856.7600
signdesi@maine.rr.com

Double Sided, Lexan Face Replacement With Vinyl Graphics (Pending Survey)

120 1/2 in



**Salebaan
Motors, Inc.**

**BUY HERE
PAY HERE**

SALES - SERVICE - RENTALS (207) 541-9088

**2 LINE - 6" CHARACTER
READERBOARD**

60 1/4 in

This proof may reflect color shifts due to the color conversion from ink to paint and or vinyl. Also, PMS colors will be approximated to the best of our ability.

Customer supplied artwork files (300 dpi required) will be used as is, and Sign Design Inc. is not responsible for any faults in the design.

Any black outlines appearing on this proof are for representation only. They are to distinguish sign components such as borders, retainers, faces and reveals. Unless otherwise specified, they are not considered as part of the sign graphics.

Sign Design Inc. is not responsible for errors occurring due to improper review of this submitted proof.

Client: Salebaan Motors Rev. 1
File: salebaan comp. 2
Date: 9.3.10

Approval:

Customer approval is a signed confirmation that dimensions, colors, spelling, graphics and all other job specifics are correct.



Sign Contractors

P.O. Box
Westbrook, CT
(203) 388-2800 * FA
1-800-949
signdesi@mail
A Full Service Sign

RE: Salebaan

To Whom It May Concern:

As the owner (or owner representative) of the property located at:

235 St. John

I authorize Sign Design Inc. to install signs/sign face replacements as detailed on attached paperwork.

[Handwritten Signature]
Signature

9/3/2010
Date

Leonard Kost
Print Name



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
9/7/2010

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.

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: O'Hearn Insurance Agency
INSURED: Salebean Motor
CONTACT NAME: ARGONAUT INSURANCE COMPANY
PHONE: 207-797-9400
FAX: 207-797-0956

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.

Table with columns: INSR LTR, TYPE OF INSURANCE, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS. Includes sections for General Liability, Automobile Liability, Umbrella Liab, and Workers Compensation.

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

CERTIFICATE HOLDER: CITY OF PORTLAND
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