CITY OF PORTLAND, I	MAINE
Department of Building Inspec	lions
Original Receipt	
Qua. 26.	01.7
Received from TR sign Durage-	
Location of Work 312 25 John	
Cost of Construction \$ Building Fee:	
Permit Fee \$ Site Fee:	
Certificate of Occupancy Fee:_	
Total;	
Building (IL) Plumbing (15) Electrical (12) Site	: Plan (U2)
Other 54	× 3 = 108.00
CBL: C65 AOII	+ 30.00
Cheek#: 4544 Total Collected	- X
No work is to be started until perm	
Please keep original receipt for you	
4 Taken by: <u>№700</u>	, , , , , , , , , , , , , , , , , , ,
Taken by: <u>130.00</u>	
WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy	

P.

¢

Form # P 04	DISPLAY	THIS CARD					
Please Read	-	CITY	OF	F PORT	LANDP	ERMIT IS	SUED
Application And		BL					

Please Read Application And Notes, If Any, Attached	PERMIT	Permit Nutiller: 709054010
This is to certify that Dominic Reali Realty	Llc/Sign sign Inc	City of Portland
has permission toErect 54 sq. ft freestar	nding sign	
AT <u>_312 St John St</u>	CI	065 A011001
	s of Mane and of the Constant	ting this permit shall comply with al es of the City of Portland regulating ures, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	Not ation on spectic must b give and writte permissi procure befor this builting or prochereof lath or oth sed-in. 2 HOL NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this build-
OTHER REQUIRED APPROVALS		/
Firs Dept		
Health Dept		(Λ)
Appeal Board		
Other Department Name	 ENALTY FOR REMOVING THIS	Director - Building & Inspection Services

.

ų,

City of Portland	Maine - Bui	lding or Use]	Permit Application	n Peri	nit No:	Issue Date:		CBL:	
389 Congress Stree	t, 04101 Tel: ((207) 874-8703	, Fax: (207) 874-871	6	10-1054			065 A0	11001
Location of Construction	:	Owner Name:		Owner	Address:	·		Phone:	
312 St John St		Dominic Reali	Realty Lic	312 S	t John St 2n	d Fl			
Business Name:		Contractor Name	;	Contra	ctor Address:			Phone	
Amato's		Sign Design In	IC	POB	ox 207 West	tbrook		20785626	500
Lessee/Buyer's Name		Phone:	·····	Permit	Туре:	· _ · _ · _ · _ · _ · _ · _ · _ · _ · _		Zone:	
			_	Sign	s - Permaner	nt			B-2.
Past Use:		Proposed Use:	Anatos	Permit	Fee:	Cost of Wor		EO District:	7
Commercial - Am	ta.	Commercial /]	,		\$138.00	5	0.00	2	
	·	freestanding si	gn.	FIRE] Approved] Denied	INSPEC Use Gro	up:	Type: Syn
Proposed Project Descri		L				185,2003			
Erect 54 sq. ft freest				0:			Cianatura	. //	$ \mathbf{l} $
Elect 34 sq. It neest	nomg sign.		Signature		ignature: Signature Signat				
				Action	: 📋 Approv	ved 🗌 App	voved w/C	Conditions	Denied
				Signat	ure:			Date:	
Permit Taken By:	Date A	pplied For:			Zoning	Approva			
gg	08/2	6/2010							<u> </u>
1. This permit app	ication does not	preclude the	Special Zone or Revie	:W9	Zonii	ng Appeal	ł	Historic Pres	ervation
Applicant(s) fro Federal Rules.	m meeting appli	cable State and	Shoreland		🚺 Variance	e	(🖌 Not in Distri	ct or Landn
2. Building permit septic or electric		plumbing,	Wetland	}	Miscella	incous	[Does Not Re	quire Revie
 Building permit within six (6) m 	s are void if wor		Flood Zone	See m	Conditional Use		(🔲 Requires Review	
False information may invalidate a building permit and stop all work			Subdivision	ł	Interpret	ation	[[Approved	
			Site Plan		Approve	d	[Approved w/	Conditions
PERM	T ISSU	FD	Maj 🗌 Minor 🗌 MM		Denied		1		
			Date: 9 30 10 MB		Datas			ten	
	30 2010		Date y 30 10 71		Date:		De		
1 - sy 14 - 1		(,							

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.

•	- Building or Use Permit	07) 074 0716	Permit No: 10-1054	Date Applied For: 08/26/2010	CBL: 065 A011001					
Location of Construction:	Tel: (207) 874-8703, Fax: (2		wner Address:		Phone:					
312 St John St	Dominic Reali Realty L		Jwner Adaress: 312 St John St 2n	d Fl	rnode:					
Business Name: Contractor Name: Contractor Address: Phone										
Amato's	Sign Design Inc	(PO Box 207 West	throok	(207) 856-2600					
Lessee/Buyer's Name	Phone:		ermit Type:		(207) 830-2000					
			Signs - Permaner	nt						
Proposed Use:		[Proposed	Project Description	:						
	Commercial - Amatos/ Replace part of freestanding sign - 89" x 87" - 37" x 87" is electronic message center. Replace part of freestanding sign - 89" x 87" - 37" x 87" is electronic message center.									
	atus: Approved with Conditions I. Permit #97-0762 had 9' x 6' ex- tion already existing.		Ann Machado igna and 2' x 6' C	Approval I heck Cashing sign fo	-					
1) Any LED display SHALL	NOT continuously flash, nor cor e messages more than once every									
Dept: Building Sta Note:	atus: Approved with Conditions	Reviewer:	Jonathan Rioux	Approval I	Date: 09/09/2010 Ok to Issue: 🗹					
 Application approval base and approrval prior to wor 	d upon information provided by a k.	applicant. Any	deviation from ap	proved plans require	s separate review					
2) Signage Installation to cor	untressith Chapters 21 9-22 of th		1.1							

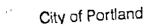
PERMIT ISSUED



AUG 30 2010 · .

1

•



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.

<u>X</u> Electrical & 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.

PERMIT ISSUED

- ----

AUG 3 0 2010

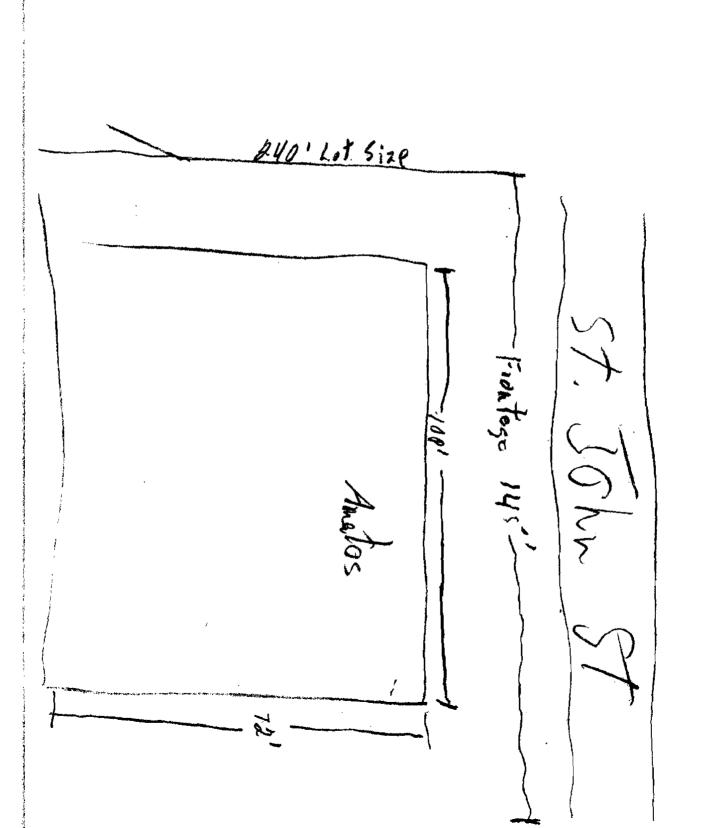
City of Portland



10 1054 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.

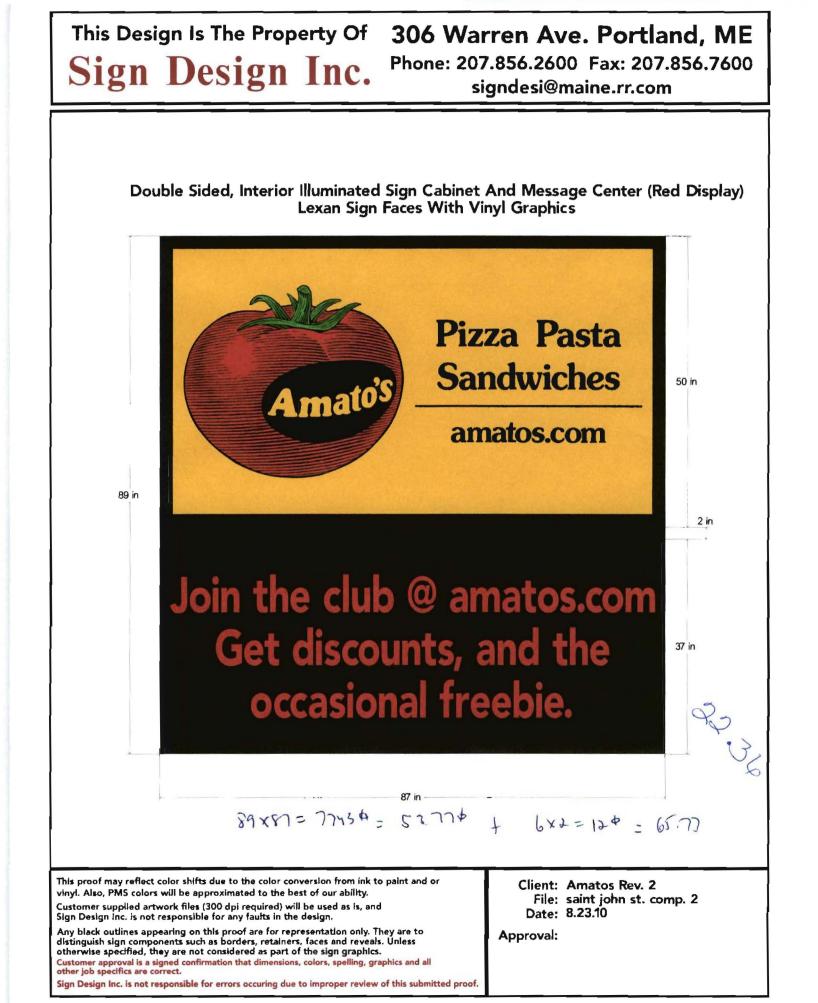
	r's Chart, Block	& Lot	Owner:		12	Telephone:
Chart#	Block#	Lqt#		o's, Jor		
Ch5	A			<i>,</i>	and the second se	828-5981
Lessee/Buyer	's Name (If Applie	:able)		une, address & telej		of signage x \$2.00
			Dign D	2017	• For HD	lus \$30.00/\$65.00 . signage= Total
		(IP.U. DOX	ok, me o	4/198 Pee: \$	
				-		Fee= cost of work
			856-26	-00		
Who should w	e contact w hen th	e permit is rea	or Koger/	Diana P	hone: <u>856-2</u>	(d) (d)
Tenant/alloc:	ated building so:	ice frontage ((feet) · I enoth	10 Heigh	· 20 ¹	
Lot Frontage (1	ted building sp.		Single Tenan	or Multi Tenant L		
	fic use: RE	L .)				
If vacant, what	was prior use	NA				
Proposed Use:			<u> </u>			
Information of	n proposed sign((s):	λ1- ^Γ	·	3	181
Bldg. wall sig	(e.g., pole) signr n7 (attached to b)	Les ک اطg) Yes	D	imensions proposed imensions proposed	1: Pleigt 1:	ut from grade: <u>18</u>
Proposed anni	mm ^a Voc N		mina hachlità. Var	No	۰ <u>ـ</u>	
Height of aw	oing:	_ Length of	swning:	Deptl	1:	1
Is there any c	omminication, m	essage, tradem	unt or symbol on	it? Yes No		54×2=108,
						- /
nformation on Freestanding	existing and pro (e.g., pole) sign?	viously perm Yes X	uitted eign(s): No Di	1 - Z X nensions: $1 - \varphi X$	g 6 66 5F	T 3010
Bldg. wall sign	(attached to bl	lg) Yes	No 🖳 Di	nensions:	43 66 5F	500,38.000
Awning Yes	Nº X	Sq. II, are:	t of awards w/cor	nmimicailon;		REOF
site sketch au	d building sketc	h showing ex	actly where exis	ting and new sign	age is located must	be provided EIVER
ketches aud/o	r pictures of pro	posed signag	e and existing bi	nlding are also re	quired.	·
lease submi	t all of the inf	ormation o	utlined in the	Sign/Awning	Application Che	ckhis AUG 2 6 2010
	so may result	ni me auto	matic deniai (of your permit.	Dei	Dt. of Building desciontor
order to be sur ditional informa	e the City fully un ation prior to the i	derstands the ssuance of a n	full scope of the p	roject, the Planning	g and Development i	Offering of Hingdon by Clor
ilding Inspectio	ons office, room 3	15 City Hall o	c call 87-1-8703.		5 017 mic .m. <u></u>	
creby certify that	I am the Owner of	record of the ne	aned property, or th	at the owner of reco	d authorizes the prope	esed work and that I have been
horized by the ov	meyto make this ap	plication as his,	/her authorized ages	nt. I agree to conform	n to all applicable laws	of this jurisdiction. In addition, if have the authority to enter all
				s of the codes applic		
	micante Di	ana_	Olms	land	Date: 8/25/	10
Signature of ap	puraur Gr			ι.		
Signature of ap B-J مس الم	This is r	20t a pennit; y	ou may not comm	ence ANY work u	otil the permit is issu	ed. 1 89 "xP7": \$3.774 hay 2x6 = 12# 66.774



ĺ







AC	CER CER	TIFICATE OF	LIABILITY	INSURA	NCE	DATE (NNVDOYYYY) 8/24/2010
PROD	UCER (207)780-1677 FAX:	(207) 780-6377			UED AS A MATTER O	
	ss Insurance-Portland		HOLDER.	THIS CERTIFIC	ATE DOES NOT AME	ND, EXTEND OR
	1 Congress Street		ALTER T	HE_COVERAGE	AFFORDED BY THE P	OLICIES BELOW.
	Box 567	4110			EDAOE	
POT	tland ME 0	4112		AFFORDING COV adia Insura		NAIC #
	to's Sandwich Shop Inc			adia insura	nce Group, LLC	
	St. John Street		INSURER B:			
312			INSURER C: INSURER D:			
Por	tland ME 0	4101	INSURER E:			
	ERAGES		indy Ach L.			
AN MA PO	E POLICIES OF INSURANCE LISTED BE Y REQUIREMENT, TERM OR CONDITI Y PERTAIN, THE INSURANCE AFFORD LICIES. AGGREGATE LIMITS SHOWN N	ON OF ANY CONTRACT OR O	THER DOCUMENT WI	TH RESPECT TO V	HICH THIS CERTIFICATE	MAY BE ISSUED OR
INSR A		POLICY NUMBER	POLICY EFFECTIVE	POLICY EXPIRATION		15
	GENERAL LIASILITY X COMMERCIAL GENERAL LIABILITY				EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	s 1,000,000 s 250,000
A		CPP004301521	7/1/2010	7/1/2011	MED EXP (Any one person)	\$ 5,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 2,000,000
Í	GEN'L AGGREGATE LIMIT APPLIES PER				PRODUCTS - COMP/OP AGG	s 2,000,000
	X POLICY PRO- JECT LOC					
	AUTOMOBILE LIABILITY X ANY AUTO				COMBINED SINGLE LIMIT (En accident)	\$ 1,000,000
A	ALL OWNED AUTOS	CAP004301322	7/1/2010	7/1/2011	BODILY INJURY (Per person)	\$
	X HIRED AUTOS				BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE (Per accident)	\$
}	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	<u> </u>
					OTHER THAN EA ACC	<u>s</u>
	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$ 10,000,000
	X OCCUR CLAIMS MADE				AGGREGATE	\$ 10,000, <u>000</u>
						5
A	DEDUCTIBLE	CUA004301021	7/1/2010	7/1/2011		\$
	X RETENTION \$	<u> </u>		+	WC STATU- OTH-	\$
	AND EMPLOYERS' LIABILITY Y/A				TORY LIMITS ! ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE	\$
ĺ	(Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYER	<u> </u>
	OTHER					·
					<u> </u>	
	RIPTION OF OPERATIONS/LOCATIONS/VEH					
*10	day cancellation for non pa of Portland is listed as A	yment of premium.				
CED			CANCELLA			
VER		lesignaine.rr.com			ED POLICIES BE CANCELLED &	
	Sign Design				ER WILL ENDEAVOR TO MAIL	
	PO Box 207				R NAMED TO THE LEFT, BUT F	
	Westbrook, ME 04098					

The ACORD name and logo are registered marks of ACORD

@ 1988-2009 ACORD CORPORATION. All rights reserved.

REPRESENTATIVES.

Hope Cote/MLL

AUTHORIZED REPRESENTATIVE

Aper . (

ķ



Sign Contractors

P.O. Box 207 Westbrook, ME 04098 (207) 856-2600 * FAX: (207) 856-7600 1-800-949-9037 signdesi@maine.rr.com A Full Service Sign Company

RE: pylon sign

To Whom It May Concern:

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

312

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

(Alm

8-23-10

Signature

Date