| City of Portland, Maine | - Building or Hee | Dormit Annlicatio | Permit No: | PERMIT | SSTIFF BBL: | |
|---|---|--|---|------------------------------|------------------------------------|-----------------------|
| 389 Congress Street, 04101 | _ | | | | 016 A0 | 05001 |
| Location of Construction: | Owner Name: | | Owner Address | IUM - F | 200 Phone: | |
| 52 Frederic St | Yc Portland L | P | 307 Cumber and Av | /e | 800 339- | \$16 |
| Business Name: | Contractor Num | ! | Contractor Address: | | Phone | 1 |
| | Blackbear Sig | nworks | 19 Industrial Park R | 9446494 P(|)RTUANU_ | <u></u> |
| Lessee/Buyer's Name | Phone: | | Permit Type: | | | Zone: |
| | | | Signs - Permanent | | | <u> C-3/</u> |
| Past Use: | Proposed Use: | nian an iniah darih darih | | ost of Work: | CEO District: | |
| multifamily residence | sign (6 sq ft) | sidence with 16"x47" | \$42.00 FIRE DEPT: | \$0.00 Inst | PECTION: | |
| | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | ZĎNTOAGO I | Circup R2 | Type: 519h |
| | | | |) _ | TBC-20 | გ ვ |
| Proposed Project Description: | | _ | 7 | - | D. AAN | 7/1/ |
| erect freestanding 16"x47" sig | m at mutifamily residen | ce | Signature: | | ature: 1. YV | 1/6/05 |
| | | | PEDESTRIAN ACTIVE | TIES DISTRICT | r (P.ALDO) | // |
| | | | Action: Approved | Approved | w/Conditions | Denied |
| | | | Signature: | | Date: | |
| Permit Taken By: | Date Applied For: | _ | Zoning A | pproval | | |
| jharris | 06/20/2005 | Special Zone or Revie | ews Zoning | A 1 | Historic Pres | |
| This permit application de Applicant(s) from meeting Federal Rules. | | Shoreland | Variance | кррек и | Not in District | |
| 2. Building permits do not in septic or electrical work. | nclude plumbing, | ☐ Wetland | Miscellaneo | DOS | Does Nat Rea | quire Review |
| 3. Building permits are void within six (6) months of the | | ☐ Flood Zone | Conditional | l Use | Requires Rev | iew |
| False information may inv permit and stop all work | _ | Subdivision | [Interpretation | ממ | Approved | |
| | | Site Plan | Approved | 1 | Approved w/ | Conditions |
| | | Maj Minor (MM | Denjed | 2 | ☐ Deniad | |
| | | OK Task | 234 My ON MARTIN | | | ≫ |
| | | Date: 6/3/371 | Date: | <u> </u> | Date: | |
| I hereby certify that I am the ov I have been authorized by the o jurisdiction. In addition, if a po shall have the authority to enter | wner to make this applermit for work describe | cation as his authorize d in the application is i | he proposed work is at d agent and I agree to ssued, I certify that the | conform to all code official | applicable laws is authorized repr | of this esentative |
| such permit. | | . , | | • | | - |
| SIGNATURE OF APPLICANT | | ADDRES | <u>s</u> | DATE | РНО | NE |
| | | | | | | |

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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: 5 | 2 FREC | PECK_ | ST. POR | TAND, ME |
| Total Square Footage of Proposed Structu | ıre : | Square Foot | tage of Lot | |
| Tax Assessor's Chart, Block & Lot Chart# 076 Block# A Lot# 005 | OWNER AVE | STA HO BELAND | OSING AUE, POES | Telephone: 1-800-539-6516 |
| Lessee/Buyer's Name (If Applicable) | 19 INDU | (BEAR SI | GNWORKS PARK FIOA 04072 | Total s.f. of signage x \$\frac{\dagger}{1.00}\$ per s.f. plus \$30.00 = Total Fee: 6 5 Awning Fee = Cost Of Work: \$\frac{\dagger}{1.00}\$ |
| Current use: Klousing / Commer | rcial | | | DEPT. OF BUILDING INSPECTIO |
| If the location is currently vacant, what was Approximately how long has it been vacant Proposed use: | as priar use: | | | JUN 2 2005 |
| Project description: LOGANS PLACE | <u> </u> | <u> 16"</u> | ~ ~ ~ . | A = 489# |
| Contractor's name, address & telephone: Who should we contact when the permit is Malling address: | | 99R 50 | EN WORK | 5 286-8004 |
| We will contact you by phone when the preview the requirements before starting and a \$100.00 fee if any work starts before | ny work, with a | Plan Review | | |

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 APROVE 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.

| | <u> </u> | | |
|-------------------------|----------------------------|---------------|--|
| Signature of applicant: | Wara RA | Date: 6/8/as- | |
| | Carried Talefolder () The | 4/ 0/ 0/ | |
| | | | |

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

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

| DISPLAT THIS CA | AND ON PHINCIPAL PHON | INGE OF WORK |
|--|--|--|
| CI | TY OF PORTLAN | ID |
| Please Read Application And | ECTION | PERMIT ISSUED |
| Notes, if Arry, Attached | PERMIT | Permit Number: 050815 JUN - 6 2005 |
| This is to certify thatYo Portland Lp /Blackh | pear S works | JUN = 0 2003 |
| has permission toerect freestanding 16"x | 47" si at mutifi y residenc | CITY OF PORTLAND |
| AY _52 Frederic St | 9076 | A005001 |
| provided that the person or person | | this permit shall comply with all |
| of the provisions of the Statutes the construction, maintenance as | | of the City of Portland regulating s, 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. | N fication inspect in must grand with a permit on procuble re this toding or tothered labeled or to the control of the control | 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 _____

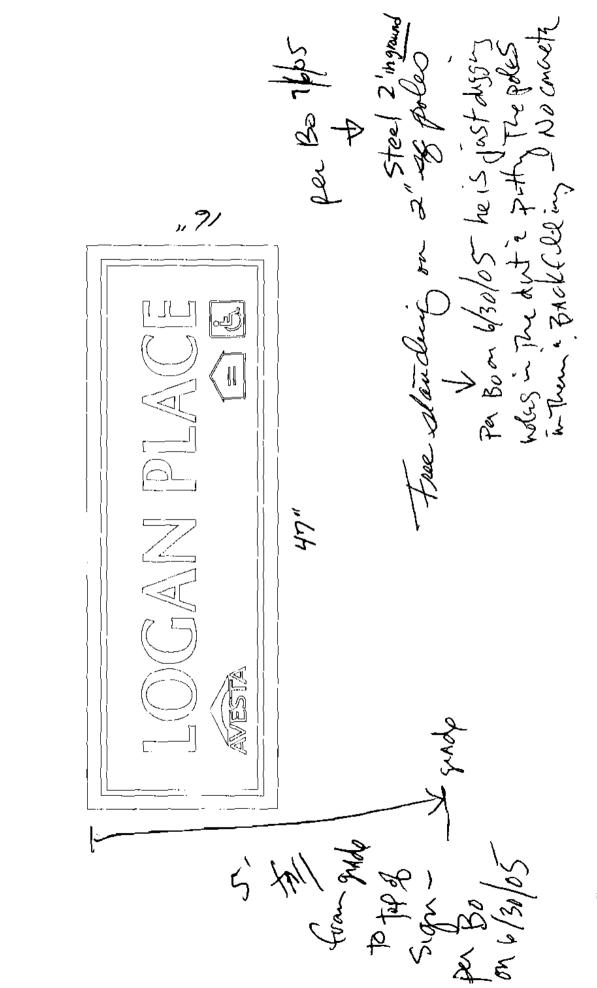
Jeanie Bourke 7/6/05

| ACORD. CERT | IFICATE OF LIA | | _ | | 0478 06/08/2005 |
|---|---|---|--|---|----------------------|
| Producer SOUTHERN MAINE INBURAL | KCIS | ONLY AN | D CONFERS N | UED AS A MATTER C O RIGHYS UPON TH TE DOES NOT AME! | Æ CERTIFICATE |
| 432 US RTE 1 | | ALTER TH | E COVERAGE AF | FORDED BY THE POLI | ICIES BELOW. |
| P.O. Box 6803 | | | | | |
| ECARBOROUGH M | E 04070-6863 | | INSURERS | AFFORDING COVERAG | 12 |
| NSURED | | NSURER A ZU | RICH | | |
| Black bear signworks | | MSURER B HA | RTFORD | | |
| 19 INDUSTRIAL PARK RO | ND. | MAURER C | | | |
| | - 0.45-15 | INSURER D | | | |
| SACO M COVERAGES | E 04072- | MEURER E: | _ | | |
| THE POLICIES OF INSURANCE LISTE REQUIREMENT, TERM OR CONDITIO THE INSURANCE AFFORDED BY TI AUGREGATE LIMITS SHOWN MAY HA | n of any contract or other du He policies described herein i | cument with respect is subject to all th | f TO WHICH THIS C | ERTIFICATE MAY BE ISSUI | ED OR MAY PESTAIN. |
| NSR TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MMDBOYY) | POLICY EXPIRATION | Light | |
| A GENERAL LIABILITY | <u> </u> | / / | / / | EACH OCCURRENCE | 1,000,000 |
| X COMMERCIAL GENERAL LIABILITY | | • | | FIRE DAMAGE (Any one fre) | 1,000,000 |
| CLAMS MADE X OCCU | R PP334634190 | 03/15/2005 | 03/15/2006 | MEQ EXP (Anyone person) | 10,000 |
| | -1 | | | PERSONAL & ADV INJURY | 3 1,000.000 |
| <u> </u> | - \ | | / / | GENERAL AGGREGATE | \$ 2,000,000 |
| GENT AGGREGATE LIMIT APPLIES PE | R: | | | PRODUCTS - COMP/OP AGG | 2.000,000 |
| B AUTOMORILE MARILITY | 04UECUX4468 | 03/15/2005 | 03/15/2006 | COMBINED SINGLE LIMIT | 300,000 |
| ALL OWNED AUTOS X SCHEDULED AUTOS | | // | 11 | BODILY NLURY (Per person) | |
| HIRED AUTOS | | | 11 | | · |
| NON-CIMED AUTOS | ļ | | | BOD LY INJURY (Perspecialent) | \$ |
| <u> </u> | | / / | / / | PROPERTY DAMAGE (Per accident) | |
| GARAGE LIABILITY | 1 | | _ | AUTO CINLY - EA ASCIDENT | \$ |
| ANY MUTO | 1 | / / | 1 1 | OTHER THAN EA ACC | 5 |
| <u></u> | <u> </u> | · | | AUTO ONLY: AGG | <u> </u> |
| EXCESS LIABILITY | | / / | / / | EACH OCCURRENCE | <u> </u> |
| OCCUR CLAMS MADE | ŧ į | | | AGGREGATE | \$ |
| <u></u> | (| 111 | 11 | <u></u> _ | |
| RETENTION \$ | | ' ' | , , | | <u> </u> |
| WORKERS COMPENSATION AND | 04WSCGU8077 | 03/15/2005 | 03/15/2006 | X YGATAIR, | |
| SAFEOTERS DADELLY | | | | EL EACH ACCIDENT | 100,000 |
| | ļ | /// | / / | E.L. DISEASE - EA EMPLOYEE | 100,000 |
| <u>i </u> | <u></u> | | | <u>≨ L.</u> DISEASE - POLICY LMIT | £ 500,000 |
| OTHER | | // | 11 | | |
| DESCRIPTION OF OPERATION SLOCATIONS | MEHICLES/EXCLUSIONS ACCED BY ENDOS | | ons . | | |
| CERTIFICATE HOLDER | CHIONAL INSURED, INSURER LETTER: | CANCELLATI | DN | | |
| | | SHOULD ANY | OF THE ABOY® DE | OCMBED FOLIGIES BE CAN BELLING INSURER WILL | |
| | | | | HE CERTIFICATE HOLDER MA | |
| CITY OF PORTLAND | | 1 | 30 Skall Hapote N Gents or Represen | O OBLIGATION OR LIABIL TY (TATIVES. | OF ANY KIND UPON THE |
| Portland | ME 04101- | AUTHORIZED REI | RESENTATIVE | Welch | |
| PORTLAND | NE VALVA. | | **** | - 1 AACOND. | CORPORATION 19 |

ACORD 25-9 (7/97) (1) 1NS025S (9910).01

ELECTRONIC LASER FORMS, INC. (600)327-0545

Page 1 of 2



19 And The state of the s R. B. So HARANCE 52 B KEDRICK CONDESS BT

Table 2.2

Institutional Uses in Residential Zones

(Regulations apply to institutions permitted as conditional uses in residential zoning districts. Such uses may include, but are not necessarily limited to, churches, schools, private clubs, fraternal organizations and hospiof Show 4.81# -5 high 7'setback from properties tals.)

Freestanding

| | Street Frontage < 100' | Street Frontage 100' to 250' | Street Frontage > 250' |
|--------------------------------|------------------------|---------------------------------|------------------------|
| - Area | 15 sq. ft. | 25 sq. ft. | 50 sq. ft. |
| - Height | 5.5 | 8 ft. | 8 ft. |
| - Setback | ('5 ft.) | 5 ft. | 5 ft. |
| - # Freestanding signs per lot | 1/st. frontage (a)(b) | 1/st. frontage (a)(b) | 1/st. frontage (a)(b) |

- (a) Lots fronting on two or more streets are allowed one freestanding sign for each frontage. However, the area of each sign shall correspond to the length of the applicable frontage. Freestanding signs shall be positioned such that they are not readily concurrently visible.
- (b) Where one lot contains more than one affiliated use, each use shall be allowed one sign per street frontage.

late: Pertinent directional information shall, to the extent possible, be included on the principal freestanding sign. Additional directional signs shall be allowed only in the event that necessary information cannot fit reasonably within the permitted sign area. The size of additional signs shall be the minimum necessary to achieve the informational objective.

Building Signs (a)

| | <u> </u> |
|--|------------------|
| - Maximum permitted sign area | па |
| - % of wall area on which sign is to be placed | 5% |
| - # building signs permitted per lot | 1/bldg. face (b) |

- (a) Building signs shall be reviewed for compliance with sign standard(s) included in site plan ordinance and shall under no circumstances be internally illuminated.
- (b) One sign is allowed per building face provided such signs are not readily concurrently visible.



CITY OF PORTLAND, MAINE

Department of Building Inspections

| June 20 2005 |
|--|
| Received from Black Bear Signworks |
| Lappelon of Work 52 Trederic |
| |
| Cost of Construction \$ |
| Permit Fee \$ 43.00 |
| Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2) |
| com Sign |
| 0.76 ACC5 |
| Freck # (783 Total Collected & 1200 |

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the accept less \$10.00 or 10% whichever is greater.

CONTINAL
HITE - Applicant's Copy
SLLOW - Office Copy
VK - Permit Copy

| City of Portland, Ma | ine - Building or Use P | Permit | | Permit No: | Date Applied For: | CBL: |
|--|--|--|-------------------------|---|-------------------------------------|---|
| • | 101 Tel: (207) 874-8703, | | 74-8716 | 05-0815 | 06/20/2005 | 076 A005001 |
| Location of Construction: | Owner Name: | | Ю | wner Address: | | Phone: |
| 52 Frederic St | Ye Portland Lp | 1 | 3 | 07 Cumberland A | lve | 800-339-6516 |
| Busines: Name: | Contractor Name: | | C | ontractor Address: | | Phone |
| | Blackbear Sign | works | 1 | 9 Industrial Park | Road Saco | |
| Lessee/Buyer's Name | Phone: | | Pe | ermit Type: | | |
| | | } | Į š | Signs - Permanen | t | |
| roposed Use: | | | Proposed | Project Description: | ! | |
| multifamily residence with | n 16"x47" sign (6 sq ft) | | erect fire | estanding 16"x4) | 7" sign at mutifamily | residence |
| | | onditions Re | | · | | |
| Dept: Zoning | Status: Approved with Co | | eviewer: | Marge Schmuck | | Date: 06/30/2005 |
| Note: 6/30/05 talked to | | at is required wi | eviewer: | Marge Schmucka | al Approval E | Date: 06/30/2005 Ok to Issue: ☑ |
| Dept: Zoning Note: 6/30/05 talked to 1) This permit is based u | Status: Approved with Co | at is required with a by Bo Laveau | eviewer: rith a subm | Marge Schmucka | al Approval E | Date: 06/30/2003 Ok to Issue: submitted at the |
| Dept: Zoning Note: 6/30/05 talked to 1) This permit is based u time of application. Dept: Building | Status: Approved with Co Bo to get the information that pon verbal information given | at is required win by Bo Laveau anditions Re | eviewer: rith a subm | Marge Schmucks nittal ign company which | Approval E th was not properly : | Date: 06/30/2003 Ok to Issue: Submitted at the |