

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT

PERMIT ISSUED

This is to certify that STREET ASSOCIATES LLC CONGRESS

Located At 1020 CONGRESS

City of Portland

Job ID: 2011-02-499-SIGN

CBL: 076 - - A - 018 - 001 - - - -

has permission to 5' x 5' Sign Paulin's Tire

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 the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY.

PENALTY FOR REMOVING THIS CAR

SCANNED

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, FAX: (207) 8716

PERMIT ISSUED

MAR 1

Job No: 2011-02-499-SIGN	Date Applied: 2/28/2011	CBL: 076 - - A - 018 - 001 - - - - -	
Location of Construction: 1020 CONGRESS STREET	Owner Name: STREET ASSOCIATES LLC CONGRESS	Owner Address: 10 RYE RD RYE, NY - NEW YORK 10580	Phone: City of Portland
Business Name:	Contractor Name: Sinnett Sign	Contractor Address: 75 Mighty ST GORHAMMAINE04038	Phone: 222-2413
Lessee/Buyer's Name: Beth Bernard - "Paulin's Tire"	Phone: 415-1729	Permit Type: SIGN - PERM - Signage - Permanent	Zone: I-L
Past Use: Auto repair	Proposed Use: Auto repair: "Paulin's Tire & Auto Care" - new freestanding sign - 7' x 5', maximum of 10' tall.	Cost of Work: Fire Dept: Signature: <i>[Signature]</i>	CEO District: Inspection: Use Group: Type: <i>Sign</i> Signature
Proposed Project Description: 1020 Congress St - new freestanding sign		Pedestrian Activities District (P.A.D.)	
Permit Taken By:	Zoning Approval		

	Special Zone or Reviews	Zoning Appeal	Historic Preservation
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.	<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in Dist or Landmark
2. Building Permits do not include plumbing, septic or electrical work.	<input type="checkbox"/> Wetlands	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does not Require Review
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work.	<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
	<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
	<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
	<input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
	Date: <i>ok w/ cad. has</i>	Date:	Date: <i>ABN</i>
	<i>3/1/11 ABN</i>		

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	PHON

PERMIT ISSUED

BUILDING PERMIT INSPECTION PROCEDURES City of Portland

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 Inspections 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.**

1.

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

Strengthening a Remarkable City, Building a Community for Life • City of Portland, www.portlandmaine.gov

Director of Planning and Urban Development
Penny St. Louis

Job ID: 2011-02-499-SIGN

Located At: 1020 CONGRESS

CBL: 076 - - A - 018 - 001 - - - -

Conditions of Approval:

Zoning

1. This permit is being approved on the basis of the plans submitted March 1, 2011. Any deviations shall require a separate approval before starting that work. The sign is 7' x 5' and the overall height is 10' maximum.
2. The sign must be located a minimum of 5' from the property lines.

Building

Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.

ILR-6.

Job Summary Report
Job ID: 2011-02-499-SIGN

Report generated on Feb 28, 2011 3:40:35 PM

Job Type:	Signs	Job Description:	1020 Congress St	Job Year:	2011
Building Job Status Code:	Initiate Plan Review	Pin Value:	754	Tenant Name:	Paulin's Tire & Auto Care
Job Application Date:		Public Building Flag:	N	Tenant Number:	
Estimated Value:		Square Footage:	25		
Related Parties:		STREET ASSOCIATES CONGRESS		<i>Property Owner</i>	
		Sinnett Sign - Sinnett Sign Sinnett Sign		<i>GENERAL CONTRACTOR</i>	

Job Charges

Fee Code Description	Charge Amount	Permit Charge Adjustment	Net Charge Amount	Payment Date	Receipt Number	Payment Amount	Payment Adjustment Amount	Net Payment Amount	Outstanding Balance
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Location ID: 11334

Location Details

Alternate Id	Parcel Number	Census Tract	GIS X	GIS Y	GIS Z	GIS Reference	Longitude	Latitude
C50280	076 A 018 001		M				-70.282724	43.653426

Location Type	Subdivision Code	Subdivision Sub Code	Related Persons	Address(es)
1				1020 CONGRESS STREET WEST

Location Use Code	Variance Code	Use Zone Code	Fire Zone Code	Inside Outside Code	District Code	General Location Code	Inspection Area Code	Jurisdiction Code
		NOT APPLICABLE					DISTRICT 6	ST JOHN ST

Structure Details

Structure: Paulin's Tire

Occupancy Type Code:

Structure Type Code	Structure Status Type	Square Footage	Estimated Value	Address
Service Stations & Repair Garages	0			1020 CONGRESS STREET WEST

Longitude	Latitude	GIS X	GIS Y	GIS Z	GIS Reference	User Defined Property	Value

Permit #: 20111582

Permit Data

Location Id	Structure Description	Permit Status	Permit Description	Issue Date	Reissue Date	Expiration Date
11334	Paulin's Tire	Initialized	5' x 5' Sign Paulin's Tire			

Job Summary Report
Job ID: 2011-02-499-SIGN

Report generated on Feb 28, 2011 3:40:35 PM

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Inspection Details

Inspection Id	Inspection Type	Inspection Result Status	Inspection Status Date	Scheduled Start Timestamp	Result Status Date	Final Inspection Flag
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Fees Details

Fee Code Description	Charge Amount	Permit Charge Adjustment	Permit Charge Adj Remark	Payment Date	Receipt Number	Payment Amount	Payment Adjustment Amount	Payment Adj Comment
Signs	\$80.00							



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: <u>1020 Congress Street, Portland</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>076</u> Block# <u>A</u> Lot# <u>018</u>	Owner: <u>Alan Palestine</u>	Telephone: <u>914-698-1188</u>
Lessee/Buyer's Name (If Applicable) <u>Mark Paulin</u>	Contractor name, address & telephone: <u>Sinnott Sign</u> <u>222-2413</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For I.I.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ <u>80</u>
Who should we contact when the permit is ready: <u>Beth Bernard</u> phone: <u>415-1729</u> will P/u.		
Tenant/allocated building space frontage (feet): Length: <u>52</u> Height: <u>10'</u> Lot Frontage (feet) _____ <u>SSg x 2 + 30'</u> <u>Single Tenant</u> or Multi Tenant Lot _____		
Current Specific use: <u>Automobile Repair & Service</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' x 5' approx</u> Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions proposed: _____		
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: _____ 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.		

#5061

RECEIVED
FEB 28 2011
Dept. of Building Inspections
City of Portland Maine

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

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: [Signature] Date: 2-15-11

IL
single tenant - 35' max
10' max height.

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

7



**Paulin's Tire
& Auto Care 774-5508**

**BUY 3 GET ONE FREE
WITH LIFETIME
BALANCING
STATE INSPECTION STICKER 4**

10' OVERALL

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MAR - 1 2011

Dept. of Building Inspections
City of Portland Maine

5'

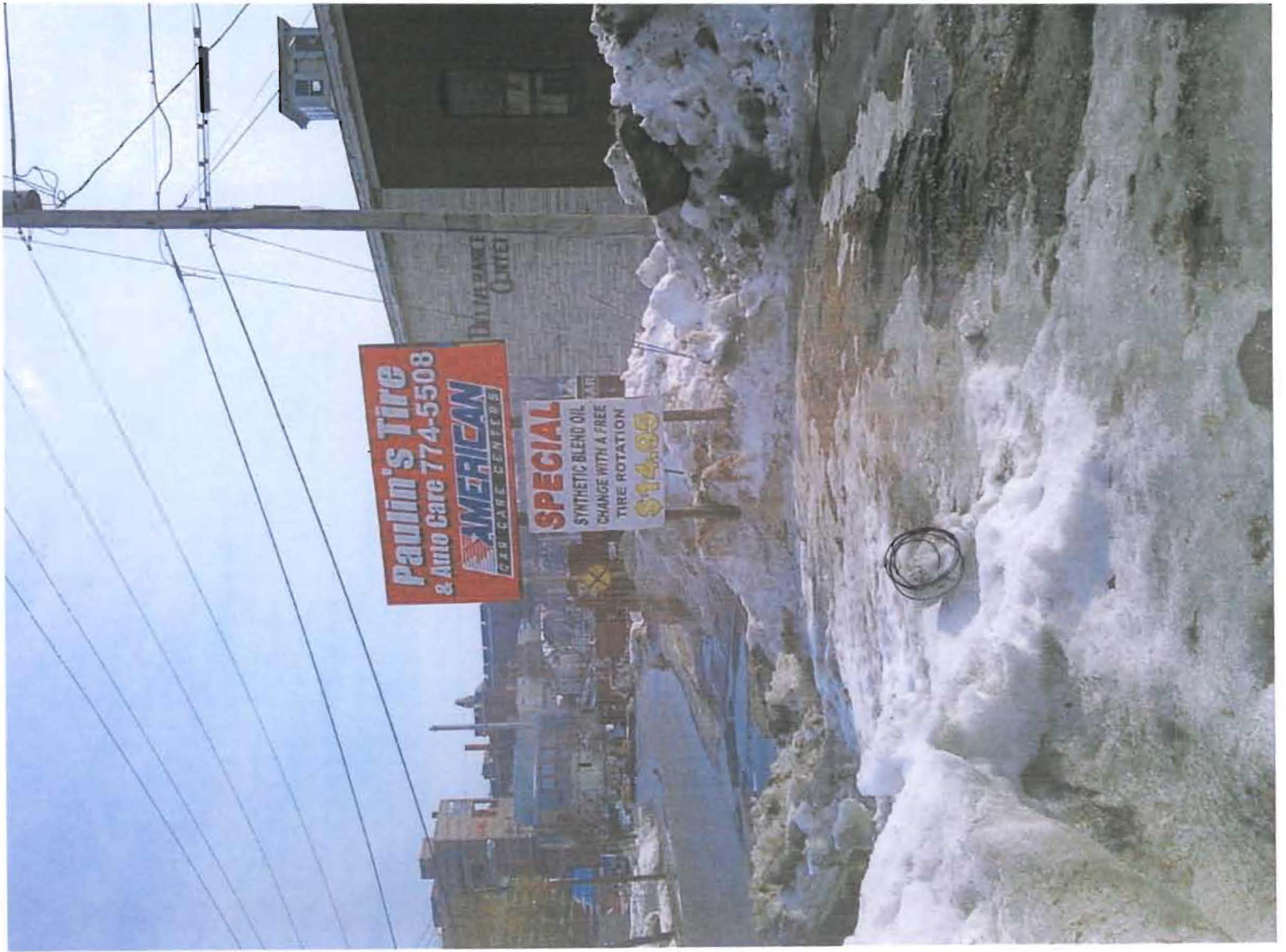
4 LINES OF 6"
CHANGEABLE COPY

7

Doublesided

*Sign will be
slaved over
pole and welded
in place.*

4' below grade
direct burial



RECEIVED

FEB 28 2011

Dept. of Building Inspections
City of Portland Maine

From: BETH BERNARD (bethbernard9@yahoo.com)
To: gg@portlandmaine.gov;
Date: Mon, February 21, 2011 4:29:08 PM
Cc:
Subject: Fw: Sign Permit for Paulin's Congress Street

Gayle, This goes with my other e-mails ie: Paulins Sign Permit

Beth Bernard

Affordable Business Services

207-415-1729

----- Forwarded Message -----

From: alan palestine <alan.palestine@verizon.net>
To: bethbernard9@yahoo.com
Sent: Thu, February 17, 2011 9:18:59 PM
Subject:

To: Mark Paulin
Paulin Tires
1020 Congress street
Portland, Me.

You have my permission to place a sign at the premises that you rent from us at 1020 Congress Street Portland, Me.

Congress Street Associates, LLC
Alan Palestine member/manager.

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FEB 28 2011

Dept. of Building Inspections
City of Portland, Maine

T A X R E C E I P T
City of Portland, Maine
P O Box 544
Portland ME 041120544
207-874-8856

Paid by: PAULINS TIRE AND AUTO LLC
1020 CONGRESS ST
PORTLAND ME 04102

Receipt#: 39676 / 926056
Batch: KELLYG 2/24/2011 00
Date paid: 2/24/2011

Account ID: 24933 Description: 076 A018001
1020 CONGRESS ST PERSONAL PROPERTY TAX
Owner: AC BRAKE & EXHAUST

Year	Value	Rate	Base	Pen & Int	Coll fee	Total paid
2011 1 PP	9000	17.92000	80.64	2.57		83.21
2011 2 PP	9000	17.92000	80.64			80.64
	Year total:		161.28	2.57		163.85

Printed: 2/24/11 13:08:53

Receipt total: 163.85

Tender: CHECK 5060 163.85

Thank you for your tax payment; City of Portland, Maine Treasury Staff

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FEB 28 2011

Dept. of Building Inspections
City of Portland, Maine

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/17/2011

PRODUCER 207.283.1486 FAX 207.283.4258
P&C Insurance
260 Main St.
P.O. Box 356
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.

INSURED Paulin Tire & Auto LLC
DBA: dba Paulin Tire & Auto
1036 Forest Avenue
Portland, ME 04101

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Peerless Insurance Company	24198
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	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY	CBP3118350	03/29/2010	03/29/2011	EACH OCCURRENCE \$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below WC STATU-TORY LIMITS OTH-ER 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
As respects General Liability coverage, certificate holder and any other person is an Additional Insured when required by contract, agreement or permit.

CERTIFICATE HOLDER

City of Portland
City Hall
Congress Street
Portland, ME 04103

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Doug Willett

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

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Dept. of Building Inspections
City of Portland Maine