

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 02-1223	Issue Date:	CBL: 082 B027001
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Location of Construction: 157 Noyes St	Owner Name: Yiotos Kalianthe Life	Owner Address: 40 Berkeley St	Phone: 207-773-5393
Business Name: n/a	Contractor Name: Leavitt and Paris	Contractor Address: 256 Read St Portland	Phone: 2073476154
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Awnings	Zone:

Past Use: Commercial / Hair Salon	Proposed Use: Hair Salon / Erect Lettered Awning	Permit Fee: \$30.00	Cost of Work: \$825.00	CEO District: 3
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FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied NIA	INSPECTION: Use Group: B Type: 5B 10/31/02 Signature: <i>[Signature]</i>
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Proposed Project Description:
Erect Lettered Awning

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: gg	Date Applied For: 10/28/2002	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>[Signature]</i> 10/31/02</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 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: _____</p>
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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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING DEPARTMENT PERMIT

Permit Number: 021223

Please Read Application And Notes, If Any, Attached

This is to certify that Yiotos Kalianthe Life/Leavit and Paris
has permission to Erect Lettered Awning
AT 157 Noyes St 082 B027001

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 work on permit in progress before this building or part thereof is occupied or closed-in. **48 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

[Signature]
Director - Building & Inspection Services
10/31/02

PENALTY FOR REMOVING THIS CARD

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

Ownership

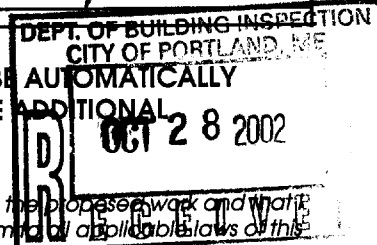
\$ 30.00 just 1,000.
\$ 7.00 additional 1,000.

Signage 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: # 9 Devonshire Street / 157 N Hayes		
Total Square Footage of Proposed Structure 53.2 sq. ft.	Square Footage of Lot 1,934 sq. ft.	
Tax Assessor's Chart, Block & Lot Chart# 82 Block# B Lot# 27	Owner: Lefco Poulas	Telephone: 773-5393
Lessee/Buyer's Name (If Applicable) Barbara J. Anderson	Applicant name, address & telephone: Barbara J. Anderson 326 Auburn St. #5 Portland - 878-2562	Total sq. ft. of signage x 1.00 per s.f. \$ plus \$30.00 base fee Fee: \$ 835.00
Current use: Hair Salon		Total = \$ 30.00
If the location is currently vacant, what was prior use: N/A		
Approximately how long has it been vacant: N/A		
Proposed use: Project description:		
Contractor's name, address & telephone: Leavi H + Parris, Inc. - 797-6100 256 Read St. Portland		
Who should we contact when the permit is ready: Barbara J. Anderson		
Mailing address: 326 Auburn St. Unit 15 Portland, ME 04103 mail to 9 Devonshire St Portland		
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 \$50.00 fee if any work starts before the permit is picked up. Phone: 761-7264		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE 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: Barbara J. Anderson	Date: 10-17-02
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This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

Leavitt & Parris, Inc. Sales Agreement

L&P LEAVITT & PARRIS, INC.

AWNINGS / TENTS

Est. 1919



AWNINGS & SIGNAGE
FLAGS & BANNERS

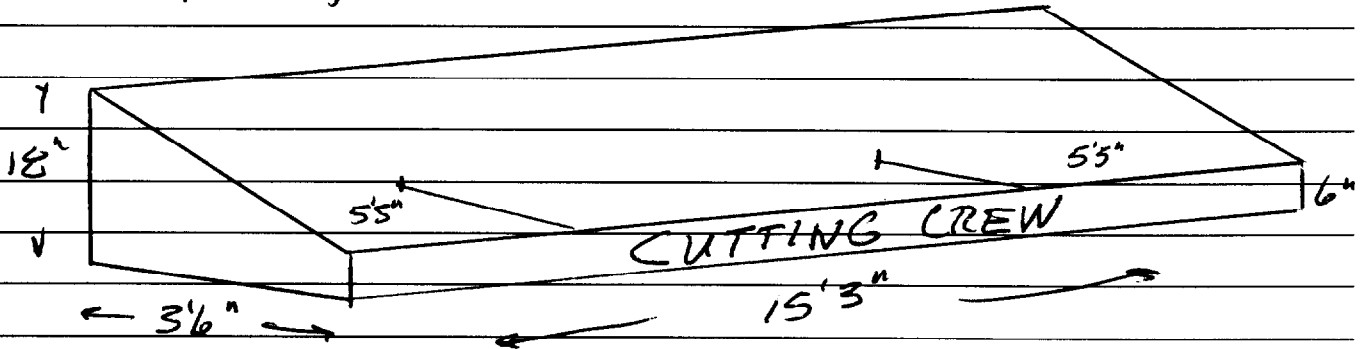
256 Read Street • Portland, Maine 04103
Phone (207) 797-0100 • FAX 797-4194
1-800-833-6679 in Maine



ORDER TAKEN BY <i>NEC</i>	DATE <i>8-4-02</i>	PURCHASE ORDER NO.	
JOB PHONE	OFFICE #	PHONE <i>761-7264</i>	FAX
SITE PERSON		CONTRACT PERSON <i>BARBIE ANDERSON</i>	
INSTALL LOCATION		BILL TO <i>Cutting Crew</i>	
ADDRESS		ADDRESS <i>9 Devonshire St.</i>	
CITY	STATE	ZIP	CITY STATE ZIP <i>Portland ME 04103</i>

We hereby submit specifications and estimates for:

1 - STANDARD AWNING - COMPLETE



*Per to 4665 Concord
WHITE Lettering*

In case of cancellation, deposit will be forfeited.

We propose to furnish material and labor — complete in accordance with the specifications above and conditions set forth on the reverse side of this Proposal, for the sum of: *SEVEN HUNDRED FIFTY* dollars (\$ *750.*).

Payment to be made as follows: Deposit of 50% upon acceptance *\$375.*
\$375. BALANCE DUE ON INSTALLATION.

ATTENTION: CUSTOMERS' RESPONSIBILITY TO CHECK WITH LOCAL MUNICIPALITY CONCERNING PERMITS REQUIRED FOR INSTALLATION.

LEAVITT & PARRIS, INC.

By *[Signature]*
Authorized Representative

ALL ELECTRICAL WORK IS CUSTOMER'S RESPONSIBILITY.

NOTE: The proposal is withdrawn if not accepted within five business days.

Acceptance of Proposal — The prices, specifications and conditions as set forth above and on the reverse side of this proposal are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined herein.

Signature _____

Date of Acceptance _____

Signature _____

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
10/23/2002

PRODUCER (207)846-3716 FAX (207)846-4514
Stevens Insurance Agency Inc.
10 Forest Falls Drive, Suite 4
Yarmouth, ME 04096
Jr, Kent Hilton

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.

INSURERS AFFORDING COVERAGE

INSURED Barbara Anderson
9 Devonshire
Portland, ME 04101

INSURER A: **MMG Insurance Company**
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	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	BP0418640	11/09/2002	11/09/2003	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$ 50,000
	<input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5,000
					PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				
	<input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY 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
City of Portland named as additional insured in regards to awning.

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER: A

CANCELLATION

Cit of Portland
389 Congress St
Portland, ME 04101

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY 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 COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Kent Hilton, Jr/KEH

Kent E Hilton, Jr

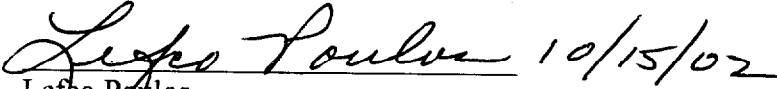
October 1, 2002

Lefco Poulos
40 Berkley St.
Portland, ME 04103

RE: Proposed Awning at 9 Devonshire St.

To Whom it May Concern:

I, Lefco Poulos, Owner/Landlord of the property located at 9 Devonshire Street, in the City of Portland, County of Cumberland, and State of Maine, do hereby give my permission for an awning to be installed at the aforementioned property.


Lefco Poulos 10/15/02

Certificate of Flame Resistance



REGISTERED
APPLICATION
CONCERN No.

F-368

ISSUED BY

UNITED TEXTILE & SUPPLY - EAST
311 ROOSEVELT AVENUE
PAWTUCKET, RI 02860

Date work performed

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).

FOR LEAVITT & PARRIS AT P.O. BOX 3926
CITY PORTLAND STATE MAINE 04104

Certification is hereby made that: (Check "a" or "b")



(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used _____ Chem. Reg. No. _____

Method of application _____



(b) The articles described on the reverse side hereof are made from a flame-resistant fabric registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric used 46" FIRESTIST SUNBRELLA Reg. No. F-368

The Flame Retardant Process Used WILL NOT Be Removed By Washing
(will or will not)

Name of Applicator

By Robert D. Stacker
Title

We hereby certify this to be a true copy of the original "CERTIFICATE OF FLAME RESISTANCE" issued to us, "original copy" of which has been filed with the California State Fire Marshal.

Signed Leavitt & Parris Inc

By Neil G. Toland

BARBARA ANDERSON