

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING DEPARTMENT

PERMIT

This is to certify that FOREST AVENUE PLAZA / C / DMOR
has permission to Replace 10 signs with new signage
AT 449 FOREST AVE 111 A016092

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State 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 when permission is procured before this building or part thereof is altered or closed-in. **HEAR NOTICE IS REQUIRED.**

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

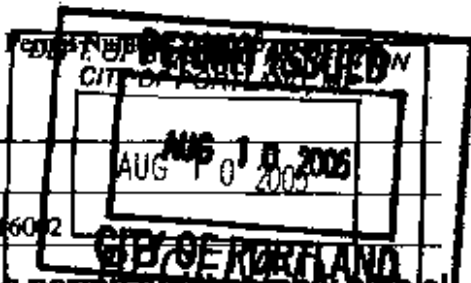
OTHER REQUIRED APPROVALS

Fire Dept. _____
Health Dept. _____
Appeal Board _____
Other _____

Department Name

Director - Building Inspection Services

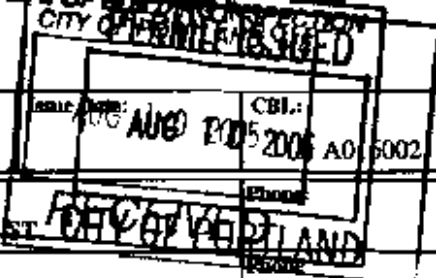
PENALTY FOR REMOVING THIS CARD



[Handwritten Signature]
8/10/05

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1020
 Issue Date: AUG 10 2005
 CBI: AD 6002



Location of Construction: 449 FOREST AVE	Owner Name: FOREST AVENUE PLAZA LLC	Owner Address: 715 BOYLSTON ST	Phone: 7819630570
Business Name:	Contractor Name: DMC Permits	Contractor Address: 4 Velma Rd Randolph,	Phone: 7819630570
Lessee/Buyer's Name:	Phone:	Permit Type: Signs - Permanent	

Past Use: Commercial	Proposed Use: Commercial replace 10 signs with new signage	Permit Fee: \$210.00	Cost of Work: \$210.00	CEO District: 1	B2b
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Proposed Project Description:
Replace 10 signs with new signage

FIRE DEPT: Approved Denied
 INSPECTION: Use Group: U Type: Sign
 Signature: [Signature] Signature: [Signature]
 PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
 Action: Approved Approved w/Conditions Denied
 Signature: _____ Date: _____

Permit Taken By: dmartin	Date Applied For: 07/27/2005	Zoning Approval	
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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 Zonr or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MMS <input type="checkbox"/> Date: 8/9/05	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 Date:	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 Date:
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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

 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE



Sign 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>449 FOREST AVE</u>		Zone: _____
Total square footage of proposed structure: _____		Square footage of lot: _____ Lot frontage: _____ Tenant frontage: _____
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: <u>FOREST AVE PIAZZA LLC</u> <u>C/O GAULO & CO. LLC</u> <u>715 BOYLSTON ST BOSTON MA 02111</u>	Telephone: <u>(617) 266-4040</u>
Lessee/buyer's name (if applicable) <u>TD BANK NORTH</u>	Current use: <u>BANK</u> Proposed use: <u>BANK</u>	Total s.f. of signage: <u>89.12</u> \$2.00 per s.f. <u>\$180.</u> plus \$65.00 base fee <u>+ 30</u> Fee: <u>\$210.00</u>
Applicant name, address & telephone: <u>DONNA CULLON - AGENT</u> <u>4 VELMA RD</u> <u>RANDOLPH, MA 02368</u>	If vacant, prior use: _____ How long has it been vacant? _____ Project description: _____ Number of tenants in lot? _____	Awning-without signage: <u>\$30.00 for first \$1,000</u> plus \$9.00 each addic. <u>\$1,000</u> Fee: \$ _____
Freestanding sign? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Dimensions _____	Height _____
More than one sign? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Dimensions _____	Height _____
Sign Attached to Building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Dimensions _____	Height _____
<u>DETAILS ATTACHED. SUMMARY ON BACK</u>		
Awning <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is awning backlit? <input type="checkbox"/> Yes <input type="checkbox"/> No	Height off sidewalk? _____
Awning Height: _____	Length: _____	Depth: _____
Is there any message, trademark or symbol on it? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, total s.f. of panels/graphics: _____		
Please describe: _____		
List ALL existing signage and their dimensions: <u>(956) 802-1677</u>		
Contractor's name, address & telephone: <u>NW STEW JUD 360 CRIDER AVE MORRISTOWN NJ 08857</u>		
Who should we contact when the permit is ready: <u>DONNA CULLON - AGENT</u>		
Mailing address: <u>4 VELMA RD RANDOLPH MA 02368</u> Phone: <u>(508) 380-5725</u>		
Once your permit is approved, we will notify you to come in and pick up your permit and review the requirements with our plan reviewer. Beginning work prior to receiving your permit will result in a violation fee of \$50.00.		

Please submit all of the information outlined in the Signage Application Checklist including a building sketch showing exactly where existing is and proposed signage will be located. Please include sketches/pictures of proposed signage. Failure to do so will result in the automatic denial of your permit.

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information 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: Donna Cullon - agent Date: 7/13/05

This is not a Permit; you may not commence any work until the Permit is issued.