

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that Forest Ave Plaza LLC

Located At 449 FOREST AVE

Job ID: 2011-05-1083-SIGN

CBL: 111 - - A - 016 - 001 - - - -

has permission to install a 3' by 10' (37 sq.) ft. sign

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues 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

06/01/2011

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD**

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 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. Close-In: (Electrical, Framing)
2. Final Inspection

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.



PORTLAND MAINE

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

Director of Planning and Urban Development
Penny St. Louis

Job ID: 2011-05-1083-SIGN

Located At: 449 FOREST

CBL: 111 - - A - 016 - 001 - - - -


Conditions of Approval:

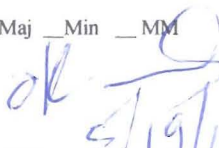

Building

1. Separate Permits shall be required for any new signage. Signage Installation to comply with Chapters 31 & 32 of the IBC 2009 building code.
2. Fastener Schedule Per IBC, 2009.
3. Separate permits are required for any electrical, plumbing, sprinkler, fire alarm HVAC systems, heating appliances, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2011-05-1083-SIGN	Date Applied: 5/13/2011	CBL: 111 - - A - 016 - 001 - - - - -	
Location of Construction: 449 FOREST AVE (Suite #1)	Owner Name: Forest Avenue Plaza LLC	Owner Address: 822 LEXINGTON ST WALTHAM, MA - MASSACHUSETTS 02452	Phone:
Business Name: Handle It! – Lesley Johnston	Contractor Name: Burr Signs	Contractor Address: 50 Downeast Dr., Yarmouth, ME 04096	Phone: 846-7622
Lessee/Buyer's Name:	Phone:	Permit Type: SIGN - PERM - Signage - Permanent	Zone: B-2b
Past Use: Retail (see permit #2011-50-016) 1084	Proposed Use: Same: Retail – to install 3’x10’ on building and to replace panels in existing freestanding sign	Cost of Work:	CEO District:
		Fire Dept: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input checked="" type="checkbox"/> N/A	Inspection: Use Group: Type: S-3 9
		Signature:	Signature: 
Proposed Project Description: 449 Forest Ave. – new signage		Pedestrian Activities District (P.A.D.)	

Permit Taken By: Lannie	Zoning Approval		
<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 informatin may invalidate a building permit and stop all work.</p>	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM Date: 	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 Dist 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: 
	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 appication 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



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: 449 FOREST AVE PORTLAND		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 111 A 016 001	Owner: FOLSTAVE PLAZA, LLC GOULD + CO. 715 BOSTON PLAZA BOSTON, MA 02116	Telephone: 617-266-4040
Lessee/Buyer's Name (If Applicable) Handle It! LESLEY JOHNSTON 553-7089	Contractor name, address & telephone: BURR SIGNS 50 DOWNCAST DR. YARMOUTH, ME 04096 846-7622 (KRISTI)	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For I.D. signage = Total Fee: \$ _____ Awning Fee = cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: LESLEY JOHNSTON phone: 553-7089 <i>Johnston Boston 37</i>		
Tenant/allocated building space frontage (feet): Length: 37 Height: 3 Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot mult <i>37 x 2 = 74.00</i>		
Current Specific use: RETAIL SPACE <i>+ 30.00</i> If vacant, what was prior use: Call center Proposed Use: retail space <i>104.00</i>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: 8.5" x 66" Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: 6 x 3 <i>panel in existing sign</i> <i>cl. rectory panel - 19" x 45"</i>		
Proposed awning? Yes _____ No _____ 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 _____ 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.		

RECEIVED

MAY 13 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: **5/13/11**

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



Gould & Company

May 13, 2011

To Whom It May Concern:

I, James Gould, owner of the property located at 449 Forest Avenue Portland Maine give my tenant, Lesley Johnston of Handle It permission to install her signage.

Please feel free to contact me with any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "James L. Gould".

James L. Gould

PRODUCER **207.781.3519** FAX **207.781.3907**
United Insurance
Bradish-Young Agency
202 U.S. Route One
Falmouth, ME 04105

INSURED **The Johnston Companies**
DBA: Handle It
449 Forest Avenue
Portland, ME 04101

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		NAIC #
INSURER A:	Peerless Indemnity Ins Co	18333
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	ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A			GENERAL LIABILITY	BOP3520685	05/24/2010	05/24/2011	EACH OCCURRENCE	\$ 1,000,000
			<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
			<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
							GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	
			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 / UMBRELLA LIABILITY				EACH OCCURRENCE	\$
			<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
								\$
			<input type="checkbox"/> DEDUCTIBLE					\$
			RETENTION \$					\$
			WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
			ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N				E.L. EACH ACCIDENT	\$
			If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
			OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
The Certificate Holder is named Additional Insured in regards to the Named Insured's sign

CERTIFICATE HOLDER	CANCELLATION
City of Portland Attn: Building Inspection Office 389 Congress St Portland, ME 04101	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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE Sandra Wing, AAI, CPIW/SLW <i>Sandra L. Wing</i>

FX- 874-8716

construction

*how attached to
building*

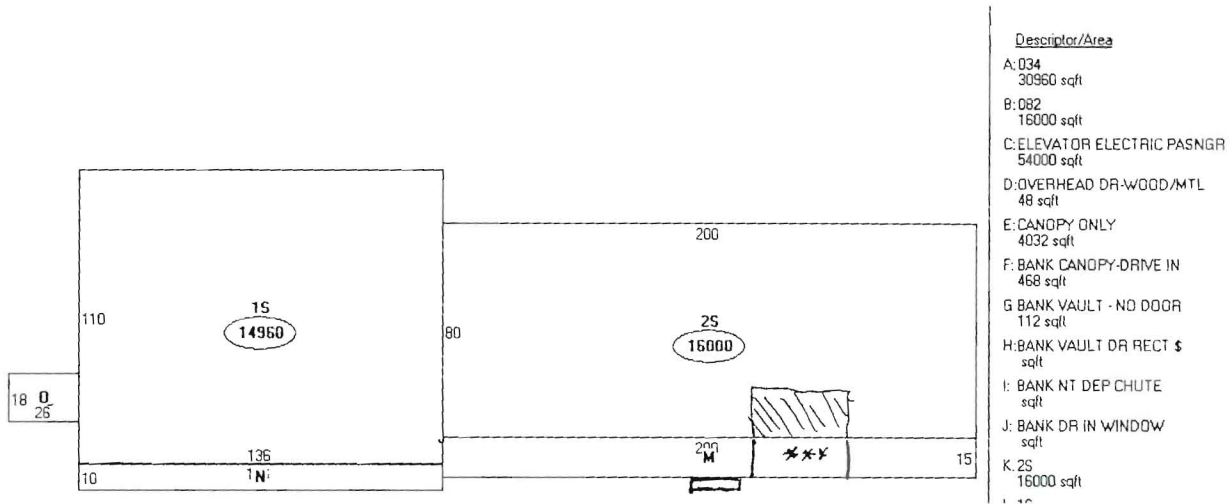
IMPORTANT

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

This Certificate of Insurance 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.



↑
SIGN
3x10'

30¢

48' tenant frontage
per application x 1.5 =
72¢ max

HANDLE IT! - Building Sign Options
 Scale: 1" = 10" Square Footage: 30



Internally Illuminated Cabinet with white acrylic face. 3M translucent vinyl graphics (green) and 3M High Performance vinyl graphics (black) on face - applied first surface. Cabinet is illuminated with High Output lamps. Will be through bolted to the red stripes on the building for mounting. Cabinet is constructed of aluminum extrusion. V.O. is 33"x117"

BURR
signs
 50 Downeast Drive
 Ferris, IA 52406
 Phone: 207-646-7622
 Fax: 207-646-7623

CLIENT	DRAWING NAME	DATE
	Handle It! Building Sign FS	5/13/2011
ADDRESS	SALES PERSON	DESIGNER
		Kristi
CONTACT	CLIENT SIGNATURE & APPROVAL DATE	
	11	

REVISION HISTORY	
DATE	REVISION HISTORY

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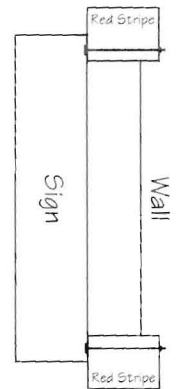
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HANDLE IT! - Building Sign (reconditioned cabinet 3'x10')

Scale: 1" = 50"

Square Footage: 30



Attachment Details



50 Downeast Drive
Yarmouth, ME 04096
Phone: 207-848-7622
Fax: 207-848-7623

CLIENT	DRAWING NAME	DATE	REVISION HISTORY	
	Handle It! Building Sign FS	5/11/2011	DATE	REVISION HISTORY
ADDRESS	SALES PERSON	DESIGNER		
		Kristi		
CONTACT:	CLIENT SIGNATURE & APPROVAL DATE			

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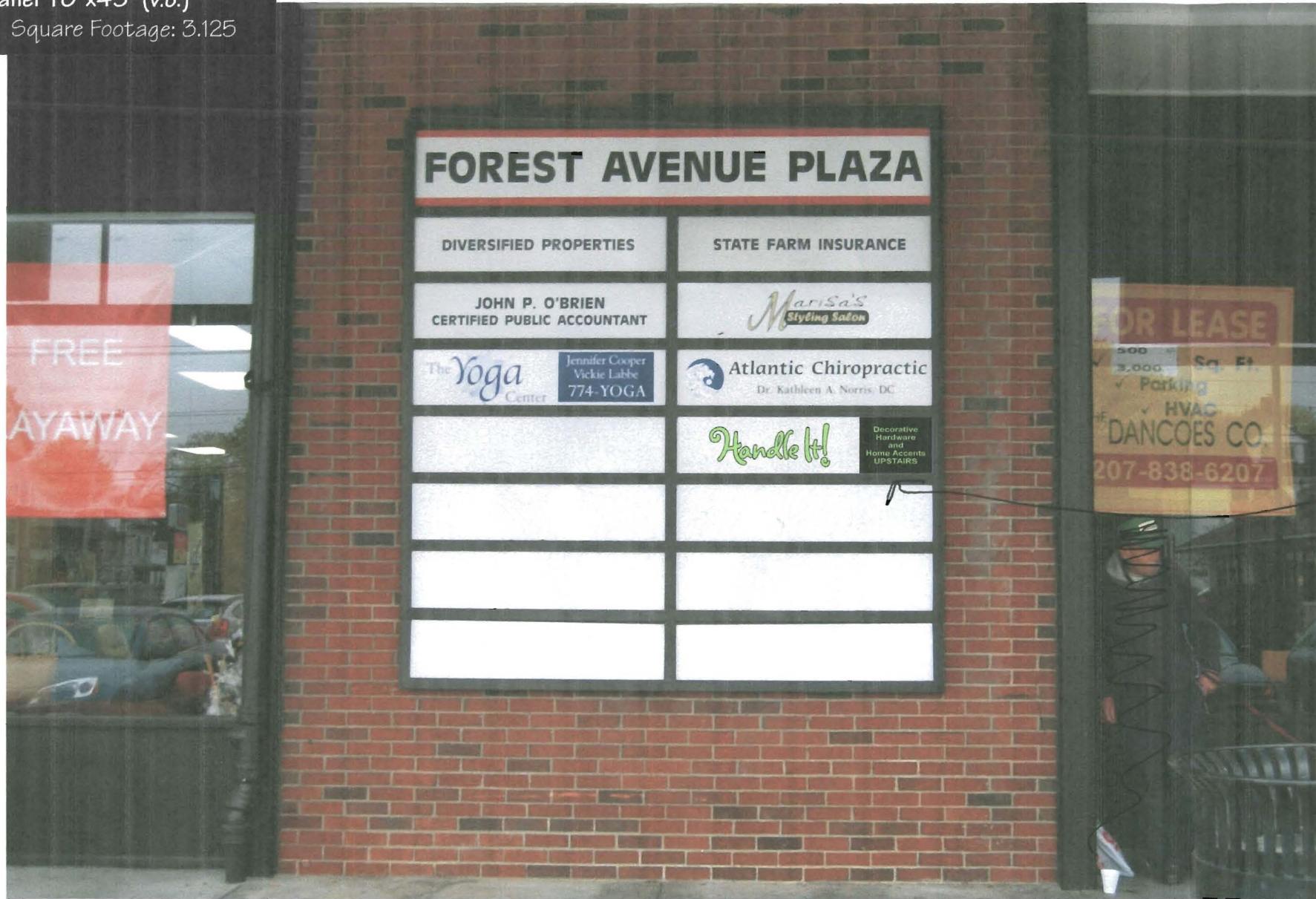
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HANDLE IT! - Directory Panel 10"x45" (v.o.)

Scale: 1" = 25"

Square Footage: 3.125



This is an existing sign holder on building -



50 Downeast Drive
Yarmouth, ME 04096
Phone: 207-846-7622
Fax: 207-846-7623

CLIENT
[Blank]

ADDRESS
[Blank]

CONTACT:
[Blank]

DRAWING NAME: HandleIt! Building Sign.FS DATE: 5/11/2011

SALES PERSON: [Blank] DESIGNER: Kristi

CLIENT SIGNATURE & APPROVAL DATE: [Blank]

REVISION HISTORY	
DATE	REVISION HISTORY

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HANDLE IT! - Tenant Panel (8.5x66)

Scale: 1" = 12"

Square Footage: 4

This is a panel on an existing marquis sign -

sq footage is for both sides.



Leapin' Lizards

INSTITUTE FOR FINANCIAL LITERACY.

America's Mattress

Handle It!

Decorative Hardware and Home Accents

Atlantic Chiropractic



50 Downeast Drive
Yarmouth, ME 04096
Phone: 207-846-7622
Fax: 207-846-7623

CLIENT	
ADDRESS	
CONTACT	

DRAWING NAME	DATE
Handle It! Building Sign.FG	5/11/2011
SALES PERSON	DESIGNER
	Kristi
CLIENT SIGNATURE & APPROVAL DATE	

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HANDLE IT! - Building Sign (reconditioned cabinet 3'x10')

Scale: 1" = 50"

Square Footage: 30

This is a new lighted box sign to be installed by Burr Signs



50 Downeast Drive
Yarmouth, ME 04096
Phone: 207-846-7622
Fax: 207-846-7623

CLIENT	
ADDRESS	
CONTACT:	

DRAWING NAME	DATE
HandleIt! Building Sign.FS	5/11/2011
SALES PERSON	DESIGNER
	Kristi
CLIENT SIGNATURE & APPROVAL DATE	
	//

REVISION HISTORY	
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