

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION PERMIT

Permit Number: 080278

This is to certify that OAKHURST DAIRY

has permission to Temporary signs to be used approx concrete banner sign 5" x 14"

AT 364 FOREST AVE

PERMIT ISSUED
114A F001001 APR - 3 2008

provided that the person or persons who apply for or accept 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 procedure before this building or part thereof is closed or services closed-in. 4
YOUR 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

4/3/08 *Cheryl P. Hill*
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

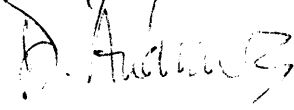
Permit No: 08-0278	Issue Date: 4/3/08	CBL: 114A F001001
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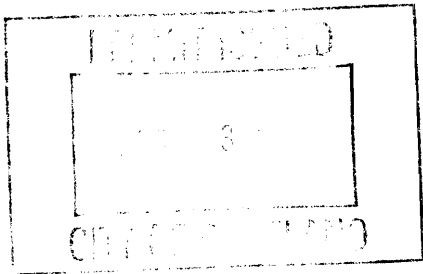
Location of Construction: 364 FOREST AVE	Owner Name: OAKHURST DAIRY	Owner Address: 364 FOREST AVE	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Temporary	Zone: B-2

Past Use: Oakhurst Dairy	Proposed Use: Oakhurst Dairy - Temporary signs to be used for approx 3 months - banner sign 16' x 34'	Permit Fee: \$158.00	Cost of Work: \$158.00	CEO District: 2
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>Signage</i> Type: <i>IBC - 2003</i>	

Proposed Project Description: Temporary signs to be used for approx 3 months - banner sign 16' x 34'	Signature:	Signature: <i>4/3/08 CU</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature: _____ Date: _____		

Permit Taken By: Idobson	Date Applied For: 03/27/2008	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> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>4/2/08</i>	<p>Zoning Appeal</p> <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: _____	<p>Historic Preservation</p> <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: <i>ABM</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	PHONE

City of Portland, Maine - Building or Use Permit

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

Permit No: 08-0278	Date Applied For: 03/27/2008	CBL: 114A F001001
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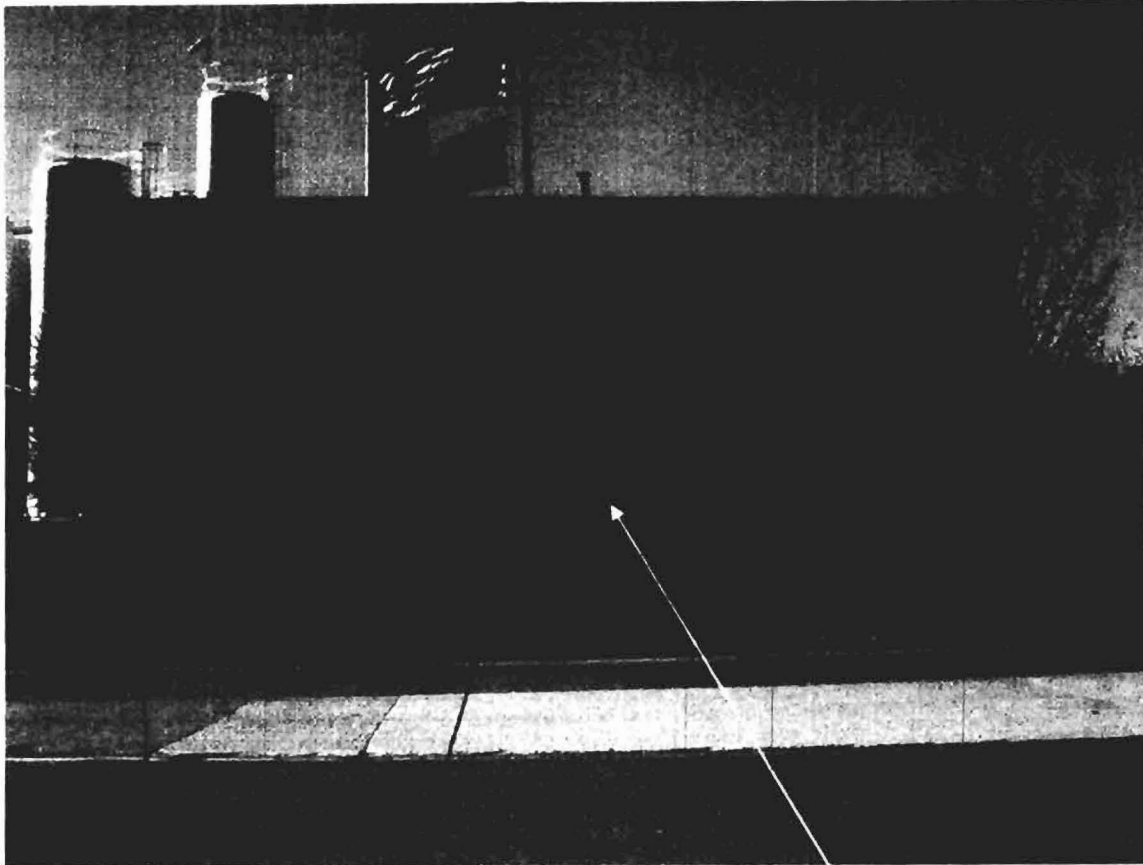
Location of Construction: 364 FOREST AVE	Owner Name: OAKHURST DAIRY	Owner Address: 364 FOREST AVE	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Temporary	

Proposed Use: Oakhurst Dairy - Temporary sign to be used for approx 3 months - banner sign 16' x 4'	Proposed Project Description: Temporary sign to be used for approx 3 months - banner sign 16' x 4'
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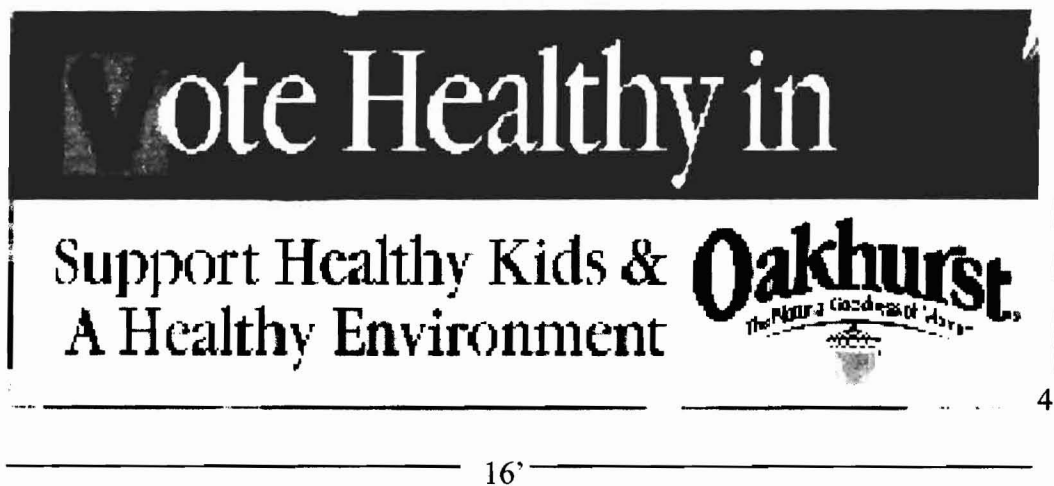
Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 04/02/2008
Note: Did not meet section 14-370 for temporary signs. It is supposed to be up for three months and it is 64 sf which is bigger than the allowance for a temporary sign. Sent the permit to Deb Andrews and she approved it under section 14-526(a)(23).
 1) This permit is being issued with the understanding that this banner is only temporary and it that it will be removed after three months.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Residential Plan Revie **Approval Date:** 04/03/2008
Note: **Ok to Issue:**
 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.
 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

Dept: Planning **Status:** Approved **Reviewer:** Deborah Andrews **Approval Date:** 04/02/2008
Note: **Ok to Issue:**



- Building is approximately 30'H x 28'L
- 16' x 4' Sign to be placed over window Sign Here
- Sign to look like below image. Made of vinyl and hung by grommets at four corners.



temporary - 30 day / renew me



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>304 Forest Avenue Portland, ME</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>114A</u> Block# <u>BF</u> Lot# <u>001</u>	Owner: <u>Oakhurst Dairy</u>	Telephone: <u>772 7468</u>
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone:	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ <u>150.00</u> Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>Dani Kolben</u> phone: <u>207.232.8709</u>		
Tenant/allocated building space frontage (feet): Length: <u>30'</u> Height: <u>20'</u> Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot <u>Single tenant</u>		
Current Specific use: <u>Oakhurst Dairy headquarters</u> If vacant, what was prior use: _____ Proposed Use: _____		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions proposed: _____ Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No ___ Dimensions proposed: <u>16' x 4'</u> = 64 sq ft 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. #Temporary sign to be used for approx 2-3 months is being permitted		
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.		

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: <u>Danielle Kolben</u>	Date: <u>3/26/08</u>
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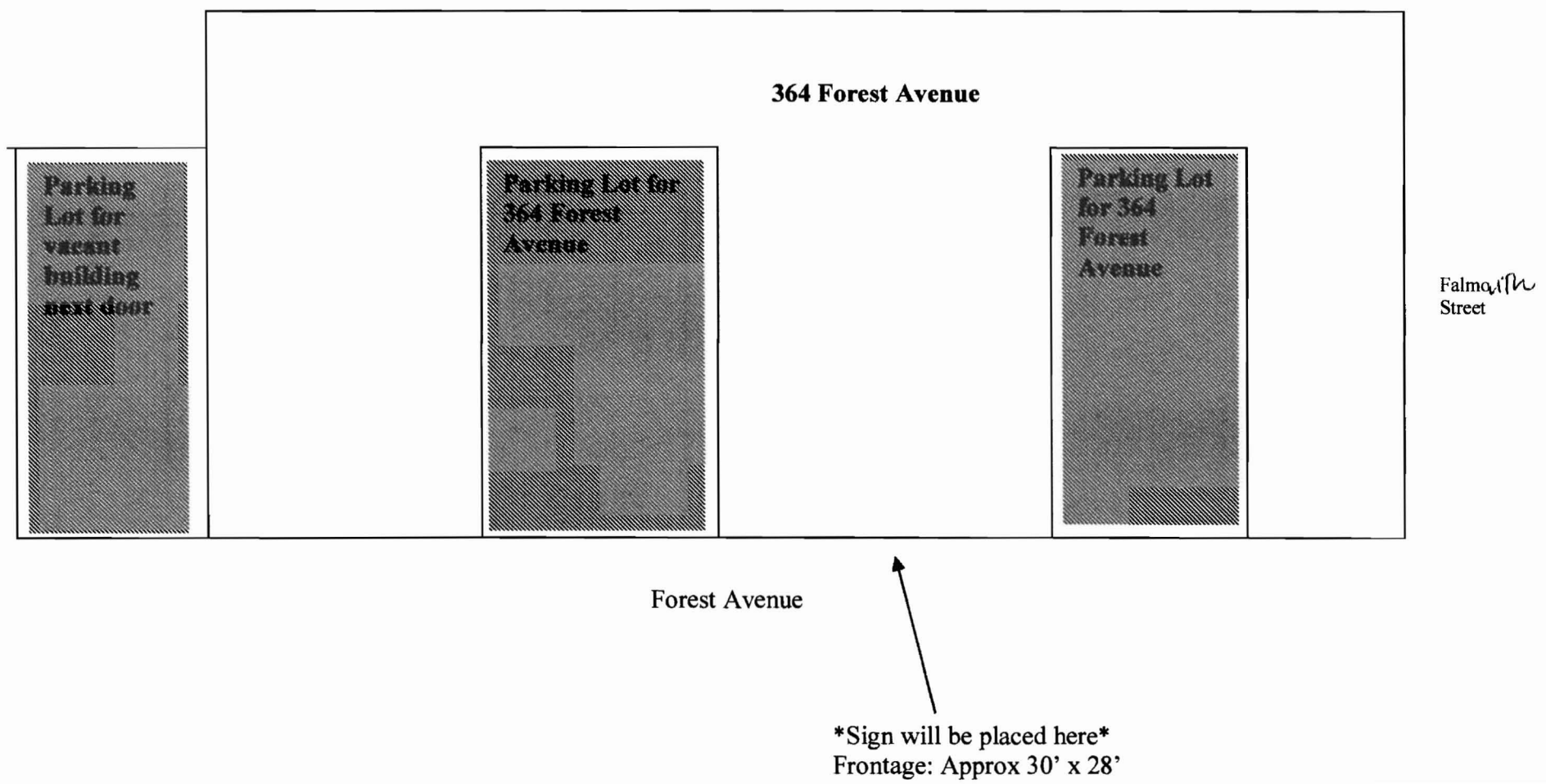
This is not a permit; you may not commence ANY work until the permit is issued.

B-2

Maggie DeKane



Sketch Plan of Lot at 364 Forest Avenue
Contact: Dani Kolben 232.8209



Sign will be placed here
Frontage: Approx 30' x 28'

FAX COVERSHEET

TO: Ann Machado **FAX:** 207-874.8716
FROM: Dani Kolben **PHONE:** 232.8209
PAGES TO FOLLOW: 1

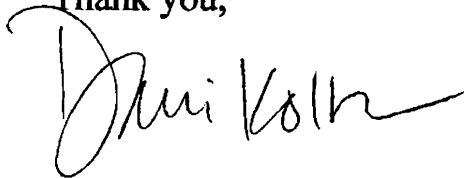
Comments:

Ann,

Please find attached instructions of how the temporary sign at 364 Forest Avenue will be hung.

Please call at the above number to confirm receipt.

Thank you,



APR - 3 2003



Permit Application for 364 Forest Avenue

Temporary Sign Hanging

The 16' x 4' temporary sign will be hung using eyebolts drilled into the side of the building at 364 Forest Ave by professional sign company, Mr. Signs, and Oakhurst Engineering Department. Heavy duty rope will be attached to sign with grommets at the four corners.

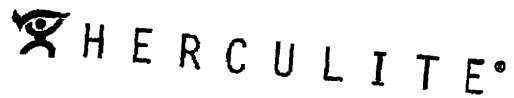
APR - 3 2003

Attn: Ann Machado

Re: Flamability Certificate
for Oakhurst Banner Permit

From: Gina C

APR - 2 2008



Herculite Products, Inc.
P.O. Box 435, Emigsville, PA 17318
(717) 764-1182 (800) 772-0036 Fax: (717) 764-5211
www.herculite.com

January 25, 2007

LABORATORY REPORT

The following fabrics are evaluated using our standard in-process testing for flame resistance, conducted to ASTM D6413 (Standard Test Method for Flame Resistance of Textiles [Vertical Test]), on the unconditioned fabrics. The internal specification is an average after flame of less than 5 seconds and an average char length of 7".

BANTEX 10 OZ 2-S
BANTEX 12 OZ 2-S
BANTEX 13 OZ 2-S
BANTEX 18 OZ 2-S
SIGNLINE 13 OZ 1-S GLOSS
BILLBOARD
BANTEX 13OZ 1-S

APR - 2 2008

Stephanie Mummert
Quality Analyst
Herculite Products, Inc.

The information contained in this bulletin is believed to be reliable. It is offered in good faith and intended for use as a general guide. Herculite makes no guarantee of results and assumes no obligation or liability whatsoever in connection with the possible use of this information. This bulletin, including any statements concerning the possible use of our products, is not a license to operate under, or intended to suggest infringement of any existing patents.



March 24, 2008

City of Portland
389 Congress Street
Portland, ME 04101

To Whom It May Concern:

I hereby grant, as owner of the property at 364 Forest Avenue, my permission for signage to be placed on the outside of the Oakhurst Dairy building at the same location previously listed above.

Sincerely,

William P. Bennett
Vice President of Operations

Oakhurst Dairy
(207)772-7468

364 Forest Avenue
Fax (207)874-0714

Portland, Maine 04101
www.oakhurstdairy.com

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/24/08

PRODUCER Cross Insurance P. O. Box 567 Portland, ME 04112 800 286-5352	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 Oakhurst Dairy 364 Forest Avenue Portland, ME 04101	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;">INSURERS AFFORDING COVERAGE</td> <td style="width:20%;">NAIC #</td> </tr> <tr> <td>INSURER A: Peerless Ins. Co.</td> <td>24198</td> </tr> <tr> <td>INSURER B: Boston Insurance Brokerage, Inc.</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: Peerless Ins. Co.	24198	INSURER B: Boston Insurance Brokerage, Inc.		INSURER C:		INSURER D:		INSURER E:	
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INSURER C:													
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INSURER E:													

COVERAGES

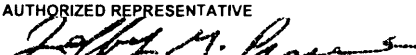
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

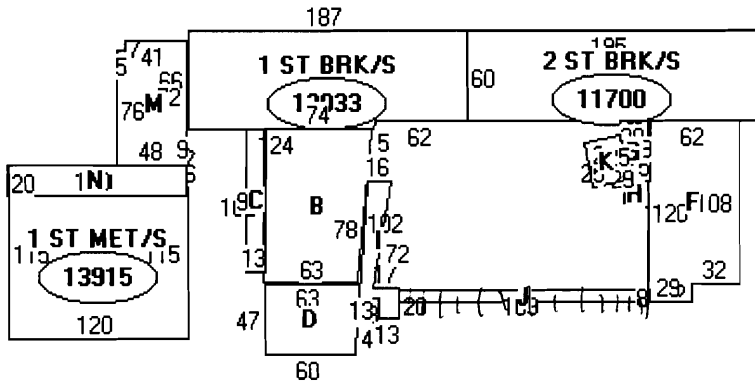
INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS												
A		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CBP9417077	05/01/07	05/01/08	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>EACH OCCURRENCE</td><td>\$1,000,000</td></tr> <tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$100,000</td></tr> <tr><td>MED EXP (Any one person)</td><td>\$5,000</td></tr> <tr><td>PERSONAL & ADV INJURY</td><td>\$1,000,000</td></tr> <tr><td>GENERAL AGGREGATE</td><td>\$2,000,000</td></tr> <tr><td>PRODUCTS - COMP/OP AGG</td><td>\$2,000,000</td></tr> </table>	EACH OCCURRENCE	\$1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000	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
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A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	BA9416579	05/01/07	05/01/08	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$1,000,000</td></tr> <tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr> <tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr> <tr><td>PROPERTY DAMAGE (Per accident)</td><td>\$</td></tr> <tr><td>AUTO ONLY - EA ACCIDENT</td><td>\$</td></tr> <tr><td>OTHER THAN AUTO ONLY EA ACC AGG</td><td>\$</td></tr> </table>	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$	AUTO ONLY - EA ACCIDENT	\$	OTHER THAN AUTO ONLY EA ACC AGG	\$
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A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$	CU9414282	05/01/07	05/01/08	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>EACH OCCURRENCE</td><td>\$9,000,000</td></tr> <tr><td>AGGREGATE</td><td>\$9,000,000</td></tr> <tr><td></td><td>\$</td></tr> <tr><td></td><td>\$</td></tr> <tr><td></td><td>\$</td></tr> </table>	EACH OCCURRENCE	\$9,000,000	AGGREGATE	\$9,000,000		\$		\$		\$		
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B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WMZ8005271022008	01/01/08	01/01/09	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> WC STATUTORY LIMITS</td> <td><input type="checkbox"/> OTHER</td> <td></td> </tr> <tr><td>E.L. EACH ACCIDENT</td><td></td><td>\$500,000</td></tr> <tr><td>E.L. DISFASE - EA EMPLOYEE</td><td></td><td>\$500,000</td></tr> <tr><td>E.L. DISEASE - POLICY LIMIT</td><td></td><td>\$500,000</td></tr> </table>	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	<input type="checkbox"/> OTHER		E.L. EACH ACCIDENT		\$500,000	E.L. DISFASE - EA EMPLOYEE		\$500,000	E.L. DISEASE - POLICY LIMIT		\$500,000
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E.L. DISEASE - POLICY LIMIT		\$500,000																
		OTHER																

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Certificate holder is listed as an Additional Insured re: general liability.

CERTIFICATE HOLDER

CANCELLATION

City of Portland 134 Congress Street Portland, ME 04101	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> 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 
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- Descriptor**
- A: 1 ST BRK
12033 sqft
 - B: 2 ST BRK
6936 sqft
 - C: 1 ST BRK
1330 sqft
 - D: 2 ST BRK
2890 sqft
 - E: 2 ST BRK
11700 sqft
 - F: 1 ST MET
6936 sqft
 - G: ENCLOSE
725 sqft
 - H: 1 ST MET
270 sqft
 - I: 1 ST BRK
1249 sqft
 - J: TUNNEL
1344 sqft
 - K: CARPOR
745 sqft
 - L: 1 ST MET