

City of Portland, Maine – Building or Use Permit Application 339 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <i>156 156 Woodford St</i>		Owner: <i>Dean Johnson</i>		Phone:		Permit No 960279	
Owner Address:		Leasee/Buyer's Name: <i>Reo Window Shade</i>		Phone:		Business Name:	
Contractor Name: <i>Signature Signs</i>		Address: <i>P.O. Box 1023 Portland, ME 04104</i>		Phone: <i>125-7-005</i>		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> APR 23 1996 </div> CITY OF PORTLAND </div>	
Past Use: <i>Retail</i>		Proposed Use: <i>Same w/signage</i>		COST OF WORK: \$ _____ FIRE-DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____			
Proposed Project Description: <i>Erect Signage (45" x 18')</i>				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____			
Permit Taken By: <i>Mary Gresik</i>		Date Applied For: <i>18 April 1996</i>					

1. This permit application doesn't 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..

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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT <i>[Signature]</i>		ADDRESS:		DATE: <i>18 April 1996</i>		PHONE: <i>803-7500</i>	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						PHONE:	

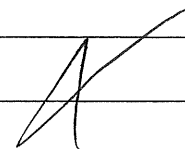
Zone: <i>B-2</i>		CBL: <i>125-7-005</i>	
Zoning Approval:			
Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>			
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			
Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review			
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date: _____			
CEO DISTRICT		<div style="border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> 6 </div>	

A. Kowt

COMMENTS

7/29/96

Completed



Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

Location of Construction: 156 Woodford St		Owner: Dean Johnson		Phone:		Permit # 960279
Owner Address:		Leasee/Buyer's Name: Reo Window Shade		Phone:		
Contractor Name: Signature Signs		Address: P.O. Box 1023 Portland, ME 04104		Phone: 125-F-005		<div style="border: 1px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED APR 23 1996 CITY OF PORTLAND </div>
Past Use: Retail		Proposed Use: Same w/signage		COST OF WORK: \$ _____ PERMIT FEE: \$ 39.40		
Proposed Project Description: Erect Signage (45" x 18')		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____ Date: _____		INSPECTION: Use Group: _____ Type: _____ Signature: <i>[Signature]</i>		Zone: B-2 CBL: 125-F-005 Zoning Approval: _____ Special Zone 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"/> mm <input type="checkbox"/>
				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		
Permit Taken By: Mary Gresik		Date Applied For: 18 April 1996				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 Historic Preservation <input type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date: <i>4/19/96</i>

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SIGNATURE OF APPLICANT: *[Signature]* Keith Morin ADDRESS: _____ DATE: 18 April 1996 PHONE: 803-2500

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: _____ PHONE: _____

CEO DISTRICT 6
A. Rowle

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

April 22, 1996

Signature Signs
P. O. Box 1023
Portland, Maine 04104

RE: 156 Woodford Street

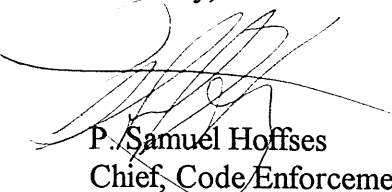
Dear Sir,

Your application to erect two signs has been reviewed and a permit is herewith issued subject to the requirements listed below. This permit does not excuse the applicant from meeting applicable State and Federal laws.

1. This permit is being issued with the understanding that you supply this office a detail of how the signs will be attached to the building **before work begins.**
2. As previously requested by Ms. Schmuckal, this office must be supplied with the building frontage **before work begins.**

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,



P. Samuel Hoffses
Chief, Code Enforcement Division

cc: M. Schmuckal, Asst C, Code Enf Div

SIGNAGE

PLEASE ANSWER ALL QUESTIONS

PLANNING & ZONING DEPARTMENT
CITY OF PORTLAND, ME.

ADDRESS: 156 woodford st. Portland, me. ZONE: B-2

OWNER: Red window shade

APPLICANT: Signature signs

ASSESSOR NO.: _____

SINGLE TENANT LOT? YES NO _____

MULTI TENANT LOT? YES _____ NO

FREESTANDING SIGN? YES _____ NO DIMENSIONS 3.75' x 18'

MORE THAN ONE SIGN? YES NO _____ DIMENSIONS 45" x 18"

BLDG. WALL SIGN? YES NO _____ DIMENSIONS 45" x 18"

MORE THAN ONE SIGN? YES NO _____ DIMENSIONS 45" x 18"

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: no signs @ site

= 67.5' x 2
135' total

None LOT FRONTAGE (FEET) _____

→ BLDG FRONTAGE (FEET) _____

AWNING YES _____ NO IS AWNING BACKLIT? YES _____ NO _____

HEIGHT OF AWNING: _____

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? _____

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF THE PROPOSED SIGNS ARE ALSO REQUIRED.

INFORMATION REQUIREMENTS FOR SIGN PERMIT APPLICATION

APPLICANTS FOR A SIGN PERMIT WILL BE ASKED TO SUBMIT THE FOLLOWING INFORMATION TO THE CODE ENFORCEMENT OFFICE:

1. PROOF OF INSURANCE
2. LETTER OF PERMISSION FROM THE OWNER
3. A SKETCH PLAN OF THE LOT, INDICATING LOCATION OF BUILDINGS, DRIVEWAYS AND ANY ABUTTING STREETS OR RIGHT OF WAYS. LENGTHS OF BUILDING FRONTAGES AND STREET FRONTAGES SHOULD BE NOTED (SEE ATTACHED)
4. INDICATE ON THE PLAN ALL EXISTING AND PROPOSED SIGNS
5. COMPUTATION OF THE FOLLOWING:
 - A) SIGN AREA OF EACH EXISTING AND PROPOSED BUILDING SIGN
 - B) SIGN AREA HEIGHT AND SETBACK OF EACH EXISTING AND PROPOSED FREESTANDING SIGN

A SKETCH OF ANY PROPOSED SIGN(S), INDICATING DIMENSIONS, MATERIALS, SOURCE OF ILLUMINATION AND CONSTRUCTION METHOD (SEE ATTACHED)

FEE FOR PERMIT - \$25.00 PLUS \$0.20 PER SQUARE FOOT

NOTE: ONCE A SKETCH PLAN HAS BEEN FILED FOR A PROPERTY, THE CODE ENFORCEMENT OFFICE WILL KEEP A RECORD OF THE PLAN SO THAT A NEW SKETCH PLAN WILL NOT BE REQUIRED FOR LATER CHANGES TO SIGNAGE ON THE PROPERTY. IN SUCH AN INSTANCE, APPLICANTS WILL ONLY BE REQUIRED TO SUBMIT INFORMATION APPLICABLE TO THE NEW SIGNS.

ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

04/09/96

PRODUCER

C.M. Bowker Co.
835 Forest Avenue

Portland ME 04103

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.

COMPANIES AFFORDING COVERAGE

COMPANY LETTER **A** Maryland Casualty Co.

COMPANY LETTER **B** Maine Employers Mutual

COMPANY LETTER **C** Commercial Union

COMPANY LETTER **D**

COMPANY LETTER **E**

INSURED

Reo Window Shade Co
156 Woodford Street

Portland ME 04103

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
C	GENERAL LIABILITY	CMR 139581	07/28/95	07/28/96	GENERAL AGGREGATE \$ 2,000,000.	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG \$ 2,000,000.	
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR. <input type="checkbox"/> OWNERS' & CONTRACTOR'S PROT.				PERSONAL & ADV. INJURY \$ 1,000,000.	
A	AUTOMOBILE LIABILITY	ECA26880725	11/14/95	11/14/96	EACH OCCURRENCE \$ 1,000,000.	
					<input checked="" type="checkbox"/> ANY AUTO	FIRE DAMAGE (Any one fire) \$ 50,000.
					<input type="checkbox"/> ALL OWNED AUTOS	MED. EXPENSE (Any one person) \$ 5,000.
					<input type="checkbox"/> SCHEDULED AUTOS	COMBINED SINGLE LIMIT \$ 100,000
					<input checked="" type="checkbox"/> Hired AUTOS	BODILY INJURY (Per person) \$
					<input checked="" type="checkbox"/> NON-OWNED AUTOS	BODILY INJURY (Per accident) \$
					<input type="checkbox"/> GARAGE LIABILITY	PROPERTY DAMAGE \$
					<input type="checkbox"/> UMBRELLA FORM	EACH OCCURRENCE \$
					<input type="checkbox"/> OTHER THAN UMBRELLA FORM	AGGREGATE \$
					<input type="checkbox"/> WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	STATUTORY LIMITS
B	OTHER	18 10007027	04/18/95	04/18/96	EACH ACCIDENT \$ 100,000	
					DISEASE - POLICY LIMIT \$ 500,000	
					DISEASE - EACH EMPLOYEE \$ 100,000	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS AS RESPECTS VERIFICATION OF INSURANCE COVERAGE

CERTIFICATE NO.

SIGNATURE SIGNS
PO BOX 1023

PORTLAND ME 04104

CANCELLATION

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

KAREN PETERSON

DATE RECEIVED BY NO. 111
11/17/54
111

18'

Gold Letters
on Green

12" Letter

REGO WINDOW SHADE CO.

45"

Custom Draperies - Shades - Blinds - Verticals

Black Aluminum Border

White Panel
Green Letters

7-1/2" Letter

