

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read
Application And
Notes, If Any,
Attached

PERMIT ISSUED
DEC 17 2004
CITY OF PORTLAND

Permit Number 041739

This is to certify that Alpine Realty Corp /Sign De Inc

has permission to Install new 28 sq ft sign

AT 509 Forest Ave

127 A002001

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 written permission procured before this building or part thereof is loaded 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 _____

Jeanie Bourke
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Permit No: 04-1739		Permit Issued: DEC 17 2004		CBL: 127 A002001	
Location of Construction: 509 Forest Ave		Owner Name: Alpine Realty Corp		Owner Address: 120 Exchange St	
Business Name:		Contractor Name: Sign Design Inc		Contractor Address: PO Box 207 West	
Lessee/Buyer's Name		Phone:		Permit Type: Signs - Permanent	
Past Use: commercial space		Proposed Use: commercial space w/ new 28 sq ft sign		Permit Fee: \$86.00	
				Cost of Work: \$0.00	
				CEO District: 3	
Proposed Project Description:		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: B IBC 2003 Type: sign	
		Signature:		Signature: JMB 12/15/04	
		EDESTRIAN 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: jharris		Date Applied For: 11/23/2004		Zoning Approval	
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 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"/> Denied		Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved	
		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: 11/29/04	

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: 04-1739	Date Applied For: 11/23/2004	CBL: 127 A002001
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Location of Construction: 509 Forest Ave	Owner Name: Alpine Realty Corp	Owner Address: 120 Exchange St	Phone: () 828-4650
Business Name:	Contractor Name: Sign Design Inc	Contractor Address: PO Box 207 Westbrook	Phone: (207) 856-2600
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: commercial space w/ new 28 sq ft sign	Proposed Project Description: Install new 28 sq ft sign - general bldg sign
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Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 11/29/2004
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 12/16/2004
Note: 12/8/04 Left vm w/Roger from Sign Design for details on sign **Ok to Issue:**
12/16 spoke w/Douglas, he said the sign cabinet will have a UL # which he will send in when fabricated. Ok to issue.

- 1) The UL design # shall be submitted to this office.
- 2) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.

1

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

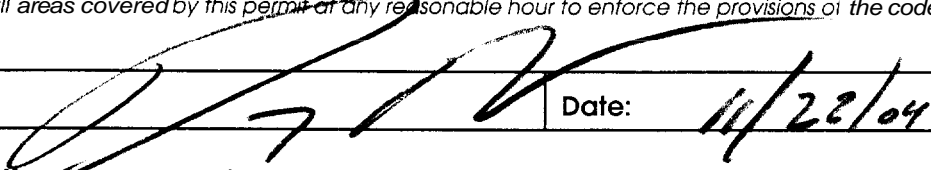
Signage Application

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: <u>509 forest Ave.</u>		
Total Square Footage of Proposed Structure <u>28 Sq. ft</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>127</u> Block# <u>A</u> Lot# <u>2</u>		Owner: <u>Delta Realty Co. Inc.</u> <u>120 Exchange Street Suite 207</u> <u>Portland ME 04101-6000</u>
Lessee/Buyer's Name (If Applicable)		Telephone: <u>828-4650</u>
Applicant name, address & telephone: <u>Sign Design Inc.</u> <u>P.O. Box 207</u> <u>Westbrook ME 04098</u> <u>1094 Planning</u>		Total s.f. of signage <u>8</u> x <u>2.00</u> per s.f. \$_____, plus \$30.00 base fee Fee: \$ <u>86</u>
Current use: <u>Multi-tenant</u>		
If the location is currently vacant, what was prior use: <u>N/A</u>		
Approximately how long has it been vacant: <u>N/A</u>		
Proposed use: <u>Replacement sign</u>		
Project description: <u>1 sign</u>		
Contractor's name, address & telephone: <u>Sign Design Inc. P.O. Box 207 Westbrook ME 04098</u>		
Who should we contact when the permit is ready: <u>Roger 856-0600</u>		
Mailing address:		
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:		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

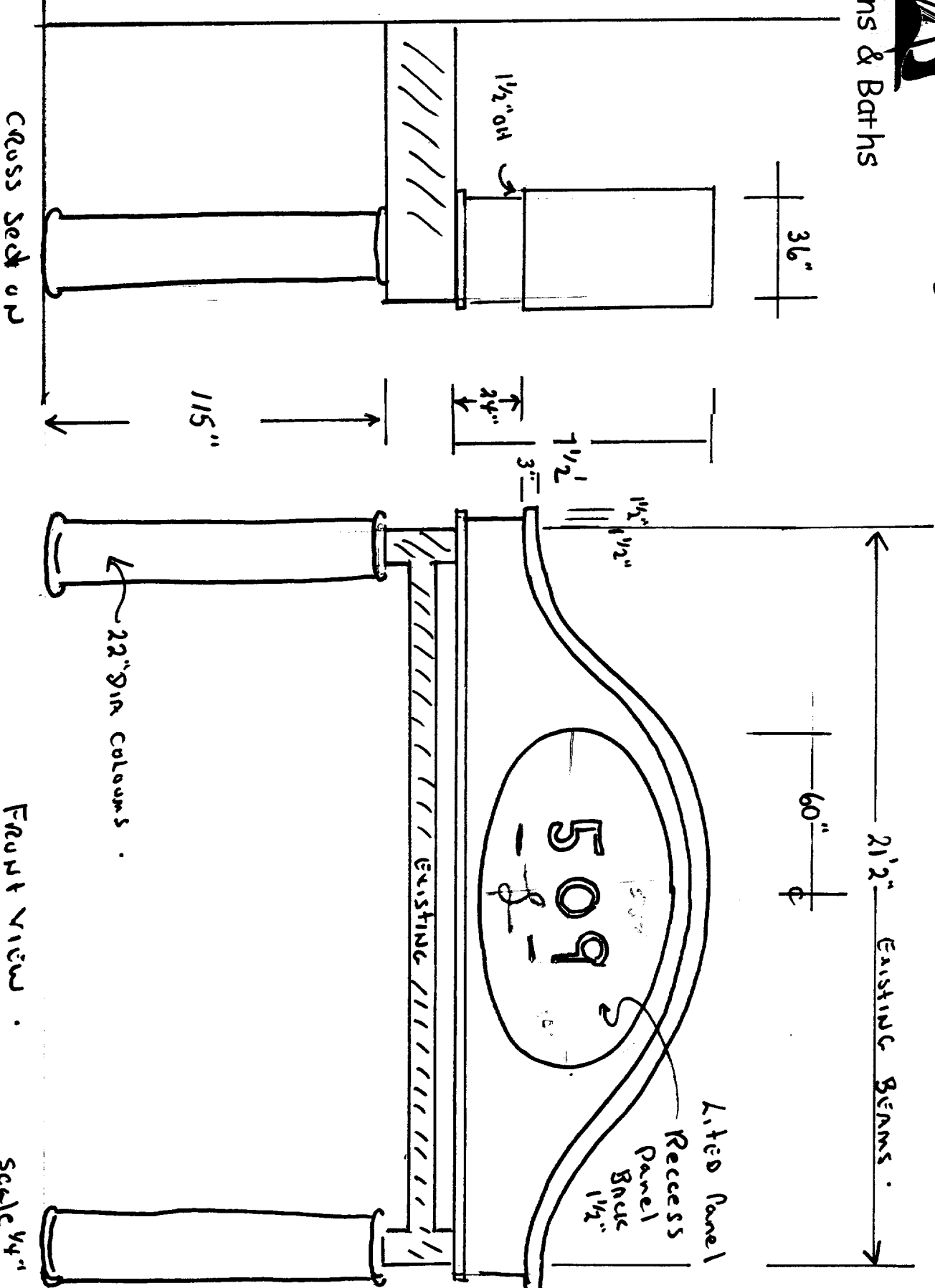
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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: 	Date: <u>11/22/04</u>
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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



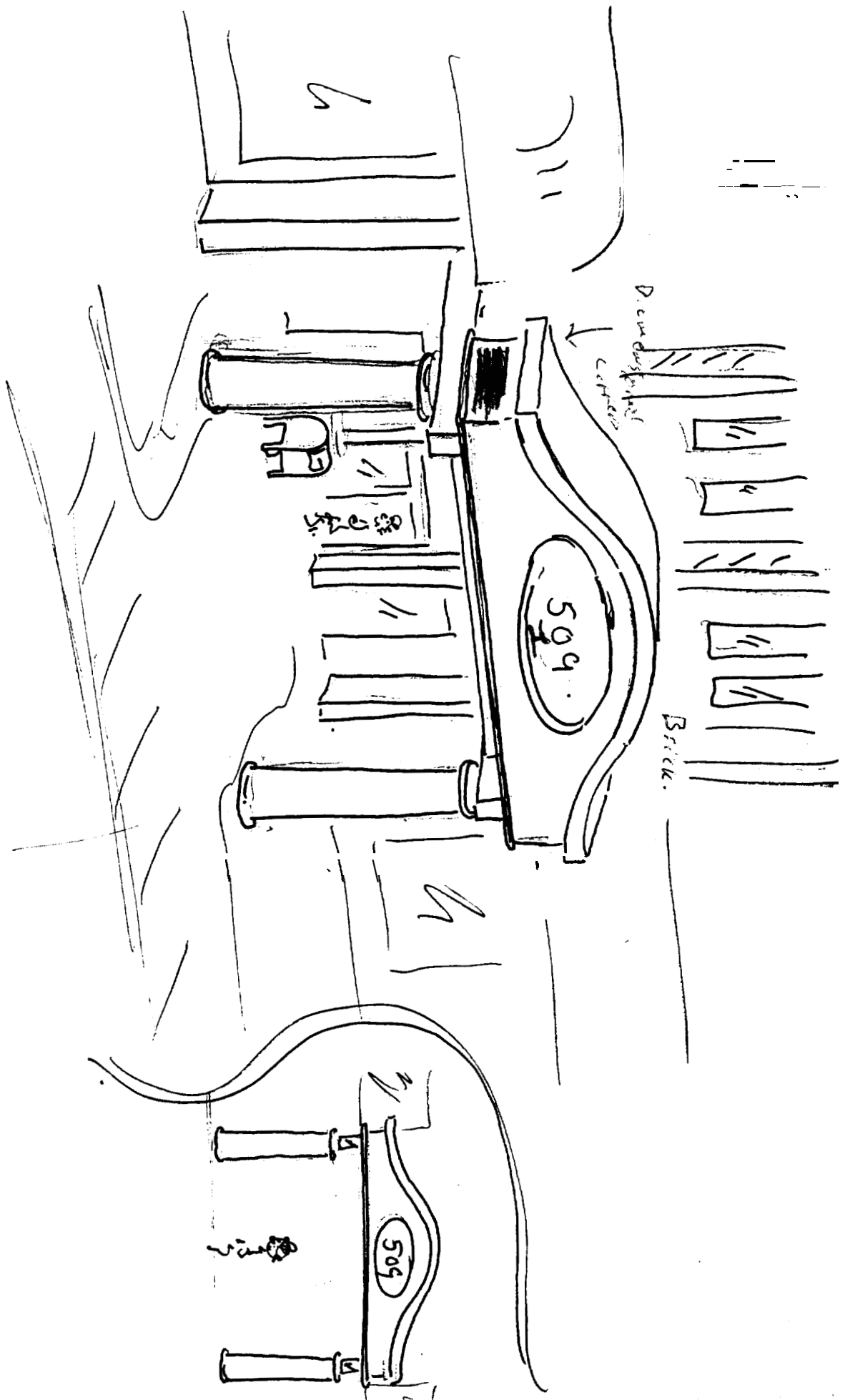
oval - 4' X 7'



Cross Section

FRONT VIEW

Scale 1/4"



ACORD CERTIFICATE OF LIABILITY INSURANCE		CSR AP DELTREZ	DATE (MM/DD/YYYY) 10/28/04
PRODUCER PRATT INSURANCE AGENCY INC P O BOX 439 WESTBROOK ME 04098 Phone: 207-854-9745	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 DELTA REALTY CO INC. & ARTHUR GIRARD 120 EXCHANGE STREET SUITE 204 PORTLAND ME 04101-0000	INSURERS AFFORDING COVERAGE INSURER A: Middlesex Mutual Assurance INSURER B: INSURER C: INSURER D: INSURER E:	NAC # 	

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.

RISK CODE (LR INSRG)	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CB0100008998	08/31/04	08/31/05	EACH OCCURRENCE \$1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100000 MED EXP (Any one person) \$5000 PERSONAL & ADV INJURY \$1000000 GENERAL AGGREGATE \$2000000 PRODUCTS - COMP/OP AGG \$2000000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				ALTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ ALTO ONLY: AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				WC STATO-TORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 509 FOREST AVE - OFFICE BUILDING. CITY OF PORTLAND IS ADDED AS AN ADDITIONAL INSURED

CERTIFICATE HOLDER CITY OF PORTLAND 389 CONGRESS STREET PORTLAND ME 04101	CANCELLATION 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 Alexander T Pratt III
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Sign Contractors

P.O. Box 207
Westbrook, ME 04098
(207) 856-2800 • FAX: (207) 856-7600
1-800-949-9037
signdesi@maine.rr.com
A Full Service Sign Company

RE:

To Whom It May Concern:

As the owner (or owner representative) of the property located at:

509 Forest Ave, Portland, ME

I authorize Sign Design Inc. to install signs/sign face replacements
as detailed on attached paperwork.

Signature Jay Wise

Date 10/26/04

Print Name Jay Wise

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 509 Fairfax Ave ZONE: B2b

OWNER: Delta Realty Co. Inc. 120 Exchange St. Suite 207 Portland

APPLICANT: Sign Design Inc. P.O. Box 207 Westbrook ME 04092

ASSESSOR NO. _____

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES NO MULTI-TENANT LOT? YES NO

FREESTANDING SIGN? (ex. Pole Sign) YES NO --- DIMENSIONS _____ HEIGHT _____

MORE THAN ONE SIGN? YES NO DIMENSIONS _____ HEIGHT _____

SIGN ATTACHED TO BLDG.? YES NO DIMENSIONS Proposed 4x7' 5.5x10 = 55'

MORE THAN ONE SIGN? YES NO DIMENSIONS _____

AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK _____

IS THERE ANY MESSAGE TRADEMARK OR SYMBOL ON IT? 2 existing 4x7' or 50 Sq. ft each.

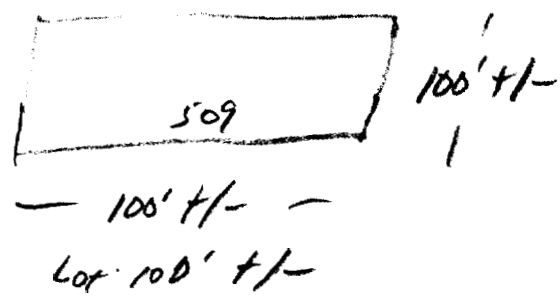
LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

2 Awnings approx 2' x 25' +/- symbol sign area

*** TENANT BLDG. FRONTAGE (IN FEET): 100 x 1.5 = 150 ft

*** REQUIRED INFORMATION

AREA FOR COMPUTATION



YOU SHALL PROVIDE:

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

SIGNATURE OF APPLICANT: [Signature] DATE: 11/22/04