

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

Location of Construction: 671 Forest Ave		Owner: Guidi, Joseph		Phone: 774-8191		Permit No: 980480	
Owner Address:		Lessee/Buyer's Name: Merle Norman Cosmetics		Phone:		Business Name:	
Contractor Name: Surr Signs		Address: 10 Suttonwood St. Bo. Portland, ME 04106		Phone: 799-1183		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: MAY 11 1998 CITY OF PORTLAND </div>	
Past Use:		Proposed Use:		COST OF WORK: \$ FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied			
Proposed Project Description: Erect Signage		Signature:		Signature: <i>[Signature]</i>		Zoning: CBL: 129-L-002	
Permit Taken By:		Date Applied For: 08 May 1998		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		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"/>	

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..

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

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 provisions of the code(s) applicable to such permit

11 May 1998

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

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

CEO DISTRICT

COMMENTS

960 Sign installed as per plans
OK to close permit
Marty

Permit# 980480
129-6-2

Inspection Record

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

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

**Building or Use Permit Application
Attached Single Family Dwellings/Two-Family Dwelling
Multi-Family or Commercial Structures and Additions Thereto**

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

NOTEIf 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: <i>671 Forest Ave.</i>		
Total Square Footage of Proposed Structure: <i>26.6 #</i>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Number Chart# <i>129</i> Block# <i>L</i> Lot# <i>2</i>	Owner: <i>Joseph Purdi</i>	Telephone#: <i>774-8191</i>
Owner's Address: <i>same</i>	Lessee/Buyer's Name (If Applicable) <i>Merck Norman Cosmetics</i>	Cost Of Work: <i>\$ 1,400. -</i>
Proposed Project Description:(Please be as specific as possible) <i>Install Wellmount Sqaure</i>		
Contractor's Name, Address & Telephone <i>Burr Signs 10 Bitterwood St. Portland, ME 04103</i>		
Current Use:	Proposed Use:	

Separate permits are required for Internal & External Plumbing, HVAC and Electrical installation.

- All construction must be conducted in compliance with the 1996 B.O.C.A. Building Code as amended by Section 6-Art II.
- All plumbing must be conducted in compliance with the State of Maine Plumbing Code.
- All Electrical Installation must comply with the 1996 National Electrical Code as amended by Section 6-Art III.
- HVAC(Heating, Ventillation and Air Conditioning) installation must comply with the 1993 BOCA Mechanical Code.

You must Include the following with you application:

- 1) A Copy of Your Deed or Purchase and Sale Agreement
- 2) A Copy of your Construction Contract, if available
- 3) A Plot Plan/Site Plan

Minor or Major site plan review will be required for the above proposed projects. The attached checklist outlines the minimum standards for a site plan.

4) Building Plans

Unless exempted by State Law, construction documents must be designed by a registered professional engineer or architect.

A complete set of construction drawings showing all of the following elements of construction:

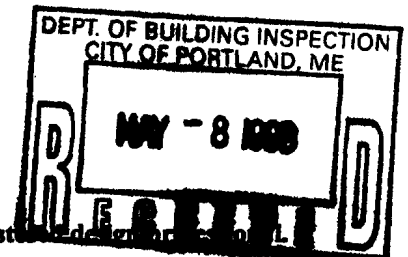
- Cross Sections w/Framing details (including porches, decks w/ railings, and accessory structures)
- Floor Plans & Elevations
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

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Signature of applicant:	Date: <i>5/8/98</i>
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Building Permit Fee: \$25.00 for the 1st \$1000.cost plus \$5.00 per \$1,000.00 construction cost thereafter.
Additional Site review and related fees are attached on a separate addendum



Mail to Craig at Burr Signs - card attached

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 671 Forest Ave. ZONE: B-2
OWNER: Merle Herman Beauty Salon / Joseph Bardi
APPLICANT: Ben Signs
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 32" x 10' 2666'
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? _____

36" allowed

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: none

*** TENANT BLDG. FRONTAGE (IN FEET): 18'
*** **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: _____ DATE: _____

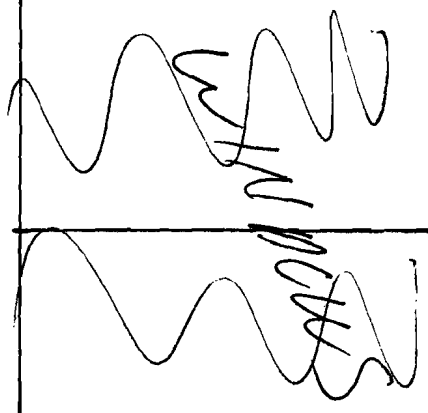
671 Forest Ave

PROPOSED
LOCATIONS
32" x 10"
26.67

Knights
Flooring

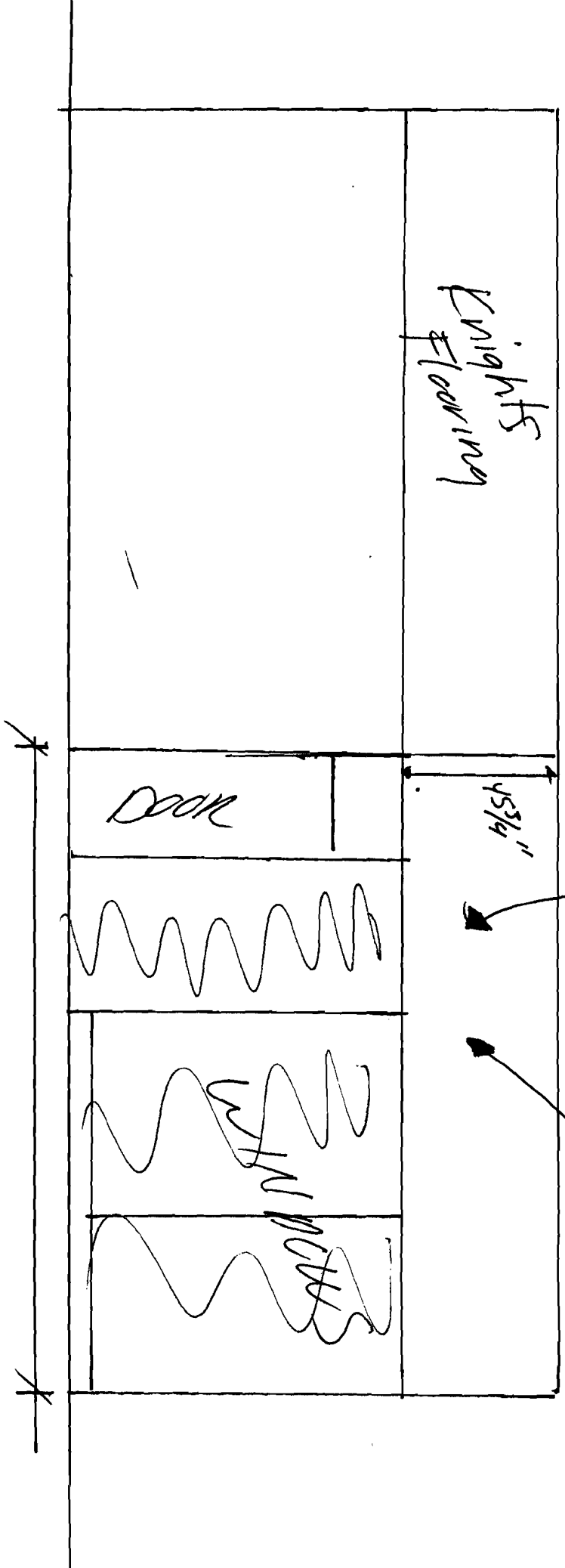
15 3/4"

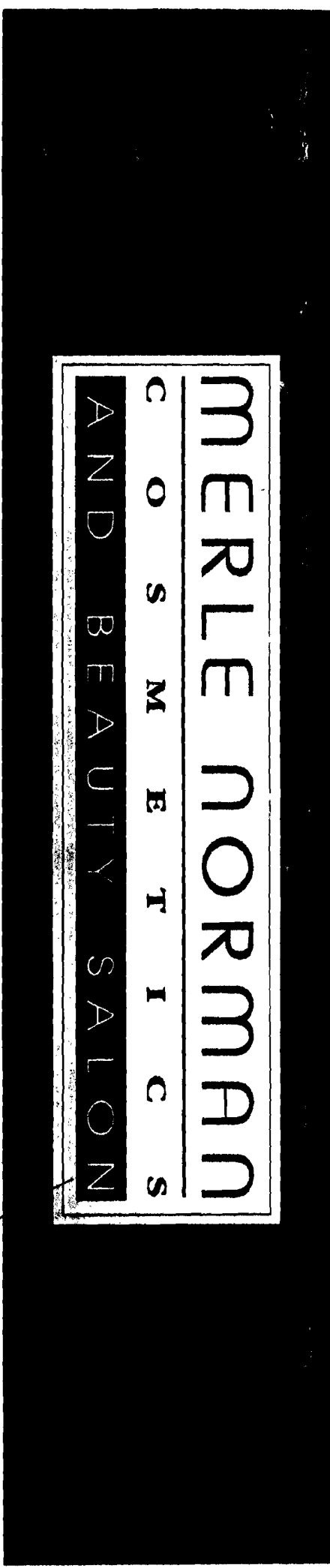
Door



18'-0"

POSE-SMITH
FLOORING





45 3/4"

18'-0"

Sign Elevation - 2'8" x 10'1" S/F Illuminated Wallmount
Scale - 1" = 20"

Sign to be secured
to wall w/ 1/2" LAGS
& SHIELDS

PROPOSED 2664
32" x 10' sign
Illuminated

FROM :

PHONE NO. :

P01

OWNERS CONSENT AND AGREEMENT

I, Joseph P. Guidi, being the owner of the premises located at
(print property owners name)

671 Forest Ave. in Portland, Maine, her-by give consent to the
(print property address)

erection of a certain sign/awning/signage owned by Eva Kelley
(print lessee's name)

over the sidewalk or on building from said premises as described in

application to the Division of Inspection Services.

And in consideration of the issuance of said permit, owner of said premises, in event said sign shall cease to serve the purpose for which it was erected or shall become dangerous and in event the owner of said sign shall fail to remove said sign or make it permanently safe in case the sign still serves the purpose for which it was erected, hereby agrees for himself or itself, for his heirs, its successors, and his or its assigns, to completely remove said sign.

Joseph P. Guidi
Signature of Property Owner

5-6-98
Date

Eva Kelley
Signature of Lessee

5-6-98
Date

CERTIFICATE OF INSURANCE

This certifies that

- STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
- STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois

insures the following policyholder for the coverages indicated below:

Name of policyholder Eva Smith Kelley dba Merle Norman Cosmetics & Beauty Salon
 Address of policyholder 930 Forest Avenue
Portland, ME 04103
 Location of operations 671 Forest Avenue
Portland, ME 04103

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY
		Effective Date	Expiration Date	
991190356F	<input checked="" type="checkbox"/> Comprehensive General Liability			<input type="checkbox"/> Dual Limits for: Each Occurrence \$ _____ Aggregate \$ _____ BODILY INJURY AND PROPERTY DAMAGE Each Occurrence \$ _____ Aggregate* _____ <input checked="" type="checkbox"/> Combined Single Limit for: Each Occurrence <u>500,000</u> Aggregate <u>4,000,000</u>
	<input type="checkbox"/> Manufacturers and Contractors Liability			
	<input type="checkbox"/> Owners, Landlords, and Tenants Liability			
This insurance includes: <ul style="list-style-type: none"> <input type="checkbox"/> Products - Completed Operations <input type="checkbox"/> Owners or Contractors Protective Liability <input type="checkbox"/> Contractual Liability <input checked="" type="checkbox"/> Professional Errors and Omissions <input checked="" type="checkbox"/> Broad Form Property Damage <input checked="" type="checkbox"/> Broad Form Comprehensive General Liability 				
POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		CONTRACTUAL LIABILITY LIMITS (if different from above):
		Effective Date	Expiration Date	BODILY INJURY
				Each Occurrence _____
				PROPERTY DAMAGE
				Each Occurrence _____
				Aggregate _____
	EXCESS LIABILITY			BODILY INJURY AND PROPERTY DAMAGE (Combined Single Limit)
	<input type="checkbox"/> Umbrella			Each Occurrence \$ _____
	<input type="checkbox"/> Other _____			Aggregate \$ _____
	<input type="checkbox"/> Workers' Compensation and Employers Liability			Part 1 STATUTORY
				Part 2 BODILY INJURY
				Each Accident \$ _____
				Disease Each Employee \$ _____
				Disease - Policy Limit \$ _____

*Aggregate not applicable if Owners, Landlords, and Tenants Liability Insurance excludes structural alterations, new construction, or demolition.

THIS CERTIFICATE OF INSURANCE IS NOT A CONTRACT OF INSURANCE AND NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS, OR ALTERS THE COVERAGE APPROVED BY ANY POLICY DESCRIBED HEREIN.

Name and Address of Certificate Holder

City of Portland
389 Congress St.
Portland, Maine

Donald M. Ostroff
 Signature of Authorized Representative

President

5/5/98

Date

