

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



# CITY OF PORTLAND BUILDING PERMIT

This is to certify that DELTA REALTY INC

Located At 710 FOREST AVE

Job ID: 2012-05-4067-SIGN

CBL: 130- G-007-001

has permission to replace 31" x 96" face in pylon 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

N/A

6/29/12

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

**City of Portland, Maine - Building or Use Permit Application**

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

Job No: 2012-05-4067-SIGN	Date Applied: 5/23/2012	CBL: 130- G-007-001	
Location of Construction: 710 FOREST AVE – Suite 22	Owner Name: DELTA REALTY LLC	Owner Address: 380 WARREN AVE PORTLAND, ME 04103	Phone: 207-828-4650
Business Name: Everchanging Seasons	Contractor Name: Sign Design, Inc, Roger	Contractor Address: 207 P.O. Box Westbrook ME 04098	Phone: (207) -856-2600
Lessee/Buyer's Name: Jennifer Thoits	Phone: 207-838-9779	Permit Type: SIGN - PERM - Signage - Permanent	Zone: B-2c
Past Use: Office – change of use permit to retail #2012-06-4164	Proposed Use: Retail – replace 31” x 96” face in existing pylon sign	Cost of Work:	CEO District:
		Fire Dept: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input checked="" type="checkbox"/> N/A Signature:	Inspection: Use Group: Type: Signature: 6/29/12
Proposed Project Description: face replacement in pylon sign		Pedestrian Activities District (P.A.D.)	
Permit Taken By: Brad		<b>Zoning Approval</b>	

<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>	<p><b>Special Zone or Reviews</b></p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetlands</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p><input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM</p> <p>Date: OK 6/29/12 ASU</p>	<p><b>Zoning Appeal</b></p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p><b>Historic Preservation</b></p> <p><input checked="" type="checkbox"/> Not in Dist or Landmark</p> <p><input type="checkbox"/> Does not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: ASU</p>
	<b>CERTIFICATION</b>		

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	PHONE

1-14-13  
CLOSE



# PORTLAND MAINE

*Strengthening a Remarkable City, Building a Community for Life* • [www.portlandmaine.gov](http://www.portlandmaine.gov)

Acting Director of Planning and Urban Development  
Gregory Mitchell

Job ID: 2012-05-4067-SIGN

Located At: 710 FOREST AVE

CBL: 130- G-007-001

## **Conditions of Approval:**

### **Building**

1. Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.

B-2c

Entered 5/23/12

753



# 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.

2012-05-4067-Sign

Location/Address of Construction: <u>710 Forest Ave.</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>130 G 007 001</u>	Owner: <u>Delta Realty/Alpine</u> <u>380 Warren Ave.</u> <u>Portland, ME 04103</u>	Telephone: <u>828-4650</u>
Lessee/Buyer's Name (If Applicable) <u>Everchanging Seasons</u> <u>Jennifer Hats</u> <u>838-9779</u>	Contractor name, address & telephone: <u>Sign Design, Inc.</u> <u>P.O. Box 207</u> <u>Westbrook, ME 04098</u> <u>856-2600</u>	Total s.f. of signage x \$2.00 <u>42.00</u> Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total <u>30.00</u> Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ <u>72.00</u>
Who should we contact when the permit is ready: <u>Roger/Diana</u> phone: <u>856-2600</u>		
Tenant/allocated building space frontage (feet): Length: <u>11'3"</u> Height: <u>15'</u> Lot Frontage (feet) <u>200'</u> Single Tenant or <u>Multi Tenant Lot</u>		
Current Specific use: <u>Office/retail</u> change of use permit <u>20-06-4164</u> If vacant, what was prior use: <u>office</u> Proposed Use: <u>Retail</u>		
Information on proposed sign(s): <u>face replacements only</u> <u>21SF</u> <u>2067SF</u> Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: <u>31" x 96"</u> Height from grade: <u>20'</u> Bldg. wall sign? (attached to bldg) Yes _____ No <input checked="" type="checkbox"/> Dimensions proposed: _____		
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.		
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 23 2012

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](http://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: Diana Olmstead Date: 5/18/12

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



# PORTLAND MAINE

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## Receipts Details:

**Tender Information:** Check , Check Number: 5845

**Tender Amount:** 72.00

## Receipt Header:

**Cashier Id:** bsaucier

**Receipt Date:** 5/23/2012

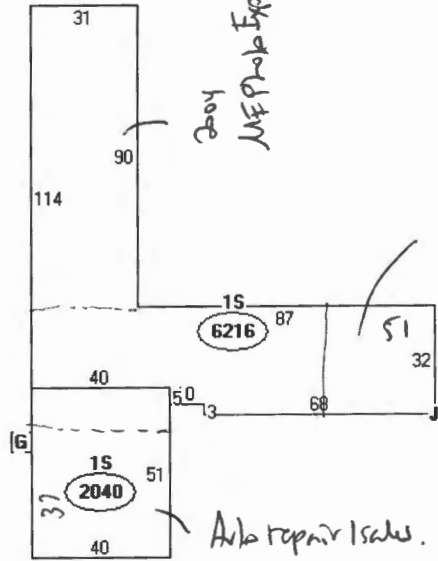
**Receipt Number:** 44231

## Receipt Details:

Referance ID:	6627	Fee Type:	BP-Signs
Receipt Number:	0	Payment Date:	
Transaction Amount:	72.00	Charge Amount:	72.00
Job ID: Job ID: 2012-05-4067-SIGN - Signage for Everchanging Seasons			
Additional Comments: 710 Forest Ave; 2 of 2			

**Thank You for your Payment!**

Concord St.



2004  
ME Photo Express

Growys loc.  
09-0607

Auto repair Isakw.  
2012-03-359

Forest

Descriptor/Area	
A: 053	4390 sqft
B: 034	1826 sqft
C: 084	2040 sqft
D: OVERHEAD DR-WOOD/MTL	132 sqft
E: 1S	6216 sqft
F: 1S	2040 sqft
G: SHED	36 sqft
H: PA1	15000 sqft
I: FN1	1200 sqft
J: RS1	36 sqft

Forest

Sawndus.



replaces  
this



This design is the property of **Sign Design Inc.**

306 Warren Ave. Portland, Maine  
Tel. 207.856.2600 Fax 207.856.7600  
email: signdesi@maine.rr.com

Client: Everchanging Seasons

File: Seasons

Revision: 1

Date: 5.14.12

Per Survey, Lexan Face Replacement With Vinyl Graphics



This job proof may reflect color shifts due to the conversion from ink to paint and/or vinyl. PMS colors will be approximated to the best of our ability. Client provided artwork will be used as is and Sign Design Inc. is not responsible for any artwork design faults nor for errors occurring due to improper review of this submitted job proof.

Design By: E.F.C. Comp. 2

- I Have Checked The Above Drawing For Layout And Spelling. I Find No Mistakes Or Errors. I Approve This Drawing For Final Completion.
- Do Not Proceed - Changes Requested

APPROVAL SIGNATURE



Concord St

Forest Ave



**Sign Contractors**

P.O. Box 207  
Westbrook, ME 04096  
(207) 856-2600 \* FAX: (207) 856-7800  
800 645 9037  
signdesign@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:

710 FOREST AVE  
PORTLAND, ME

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

ANDREA GIRARD  
Signature

5/17/2012  
Date

ANDREA GIRARD  
Print Name



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
5/22/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

<b>PRODUCER</b> Cross Insurance-Portland 2331 Congress Street PO Box 567 Portland ME 04112	<b>CONTACT NAME:</b> Jodi Odlin, ACSR <b>PHONE (A/C No. Ext):</b> (207) 780-1677 <b>E-MAIL ADDRESS:</b> jodlin@crossagency.com	<b>FAX (A/C No.):</b> (207) 780-6377
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURER A:</b> Acadia Insurance Group, LLC		<b>NAIC #</b> 31325
<b>INSURED</b> Jennifer Thoits, DBA: Everchanging Seasons 710 Forest Ave Suite 2 Portland ME 04103		
<b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>		

**COVERAGES** CERTIFICATE NUMBER: CL1252166319 REVISION NUMBER:

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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X	BINDERBOP	5/21/2012	5/21/2013	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Refer to policy for exclusionary endorsements and special provisions.

<b>CERTIFICATE HOLDER</b>  City of Portland 389 Congress Street Portland, ME 04101	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b>  Jodi Odlin, ACSR/JO2 <i>Jodi Francis Odlin</i>

## BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: [buildinginspections@portlandmaine.gov](mailto: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.**

### 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.