

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number: 061645

PERMIT ISSUED

DEC - 6 2006

This is to certify that SHAHNAZ PROPERTIES INC /The Signory

has permission to Replace freestanding pole sign w/new

8' x 8' Sign

003

137 C00200

AT 769 751 FOREST AVE

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.

CITY OF PORTLAND

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 altered or closed-in. 24 HOUR 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

Thomas M. Manly 11/17/06
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

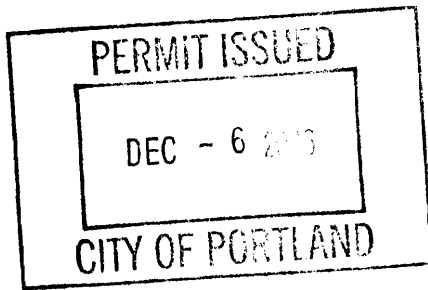
Permit No: 06-1645	Issue Date:	CBL: 137 C002001
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Location of Construction: 791 FOREST AVE	Owner Name: SHAHNAZ PROPERTIES LLC	Owner Address: 256 BANCROFT ST	Phone:
Business Name: Akropolis	Contractor Name: The Signery	Contractor Address: 299 Forest Avenue Portland	Phone 2078797700
Lessee/Buyer's Name	Phone: 207-879-2400	Permit Type: Signs - Permanent	Zone: B2

Past Use: Commercial/ Restaurant WAS "Shahnaaz Persian Grill"	Proposed Use: Commercial/ Restaurant- Replace freestanding pole sign w/new 8'x8' sign.	Permit Fee: \$158.00	Cost of Work: \$158.00	CEO District: 4
Proposed Project Description: Replace freestanding pole sign w/new 8'x8' sign "Akropolis"		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Bus Type: SB IBC 2003	
		Signature: Jm 11/17/06		
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: 11/07/2006	Zoning Approval
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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"/> Date: 11/16/06 ABM	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Date: 11/16/06 J. Andrew	Historic Preservation <input 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:
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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: 06-1645	Date Applied For: 11/07/2006	CBL: 137 C003001
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Location of Construction: 799 Forest Ave	Owner Name: Shahnaz Properties Llc	Owner Address: 256 Bancroft St	Phone:
Business Name: Acropolis	Contractor Name: The Signery	Contractor Address: 299 Forest Avenue Portland	Phone (207) 879-7700
Lessee/Buyer's Name	Phone: 207-879-2400	Permit Type: Signs - Permanent	

Proposed Use: Commercial/ Restaurant- Replace freestanding pole sign w/new 8'x 8' sign.	Proposed Project Description: Replace freestanding pole sign w/new 8' x 8' sign
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 11/16/2006

Note: Application did not meet the required 5' setback from property lines. Sent it to planning under section 14-368.5(g). Deb Andrews approved the sign placement. **Ok to Issue:**

- 1) This permit is for approval of the 8' x 8' free standing sign only.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 11/17/2006

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:** 11/16/2006

Note: Approved for placement. **Ok to Issue:**

Comments:

11/15/2006-amachado: Spoke to Zoe Katsamas. This sign is the most important one to her. The 64 s.f area meet the ordinance as does the proposed height which is 15'. The only question is if it meets the 5' setback. The placement of the original sign does not. Zoe told me that she wanted to place the sign there. It would need to be approved by Deb Andrews because it is less than 5' to the property line. Ther is a plan that shows new location for it which would work. I tried to call Zoe ack about this but got no answer or voicemail. I have a call into Deb.

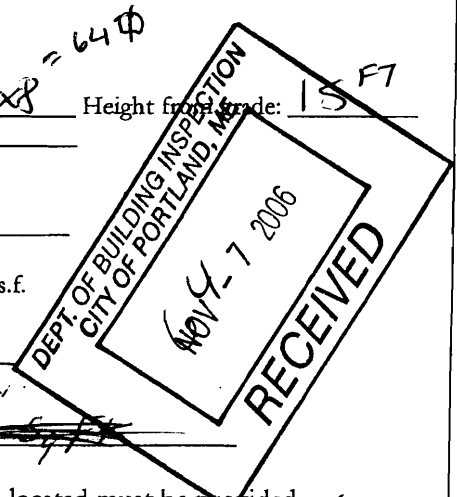
11/16/2006-amachado: Deb Andrews approved the sign under section 14-368.5(g).



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>795 - 799 Forest Ave, Portland, ME 04103</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: <u>Shahraz Mahager</u>	Telephone: <u>671-7550</u>
Lessee/Buyer's Name (If Applicable): <u>Nicki Furos & Zoe Katsunas</u>	Contractor name, address & telephone: <u>The Sign Agency Signalwerks 84 Cove Street - 5th Fl Portland ME Portland, ME 04110 207-899-7202</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ <u>1.58</u> Awning Fee= cost of work Total Fee: \$ <u>1.58</u>
Who should we contact when the permit is ready: <u>Nicki Furos Katsunas</u> phone: <u>210-8388</u>		
Tenant/allocated building space frontage (feet): Length: <u>62'</u> Height: <u>10'</u> Lot Frontage (feet) <u>110 FT</u> Single Tenant or Multi Tenant Lot <u>Multi Tenant</u> <u>2 lots</u>		
Current Specific use: <u>Restaurant</u> If vacant, what was prior use: <u>N/A</u> Proposed Use: <u>Restaurant</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: <u>8x8 = 64 sq ft</u> Height from grade: <u>15 FT</u> Bldg. wall sign? (attached to bldg) Yes <input type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: _____		
Proposed awning? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Is awning backlit? Yes <input type="checkbox"/> No <input type="checkbox"/> Height of awning: <u>6ft</u> Length of awning: <u>18'</u> Depth: _____ Is there any communication, message, trademark or symbol on it? Yes <input type="checkbox"/> No <input type="checkbox"/> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions: <u>4x4</u> Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions: <u>4x4</u> Awning? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Sq. ft. area of awning w/communication: <u>18 sq ft</u>		
A site sketch and building sketch showing exactly where existing and new signage is located must be provided. <input checked="" type="checkbox"/> Sketches and/or pictures of proposed signage and existing building are also required. <input checked="" type="checkbox"/>		



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: Nicki Furos Date: 11-2-06

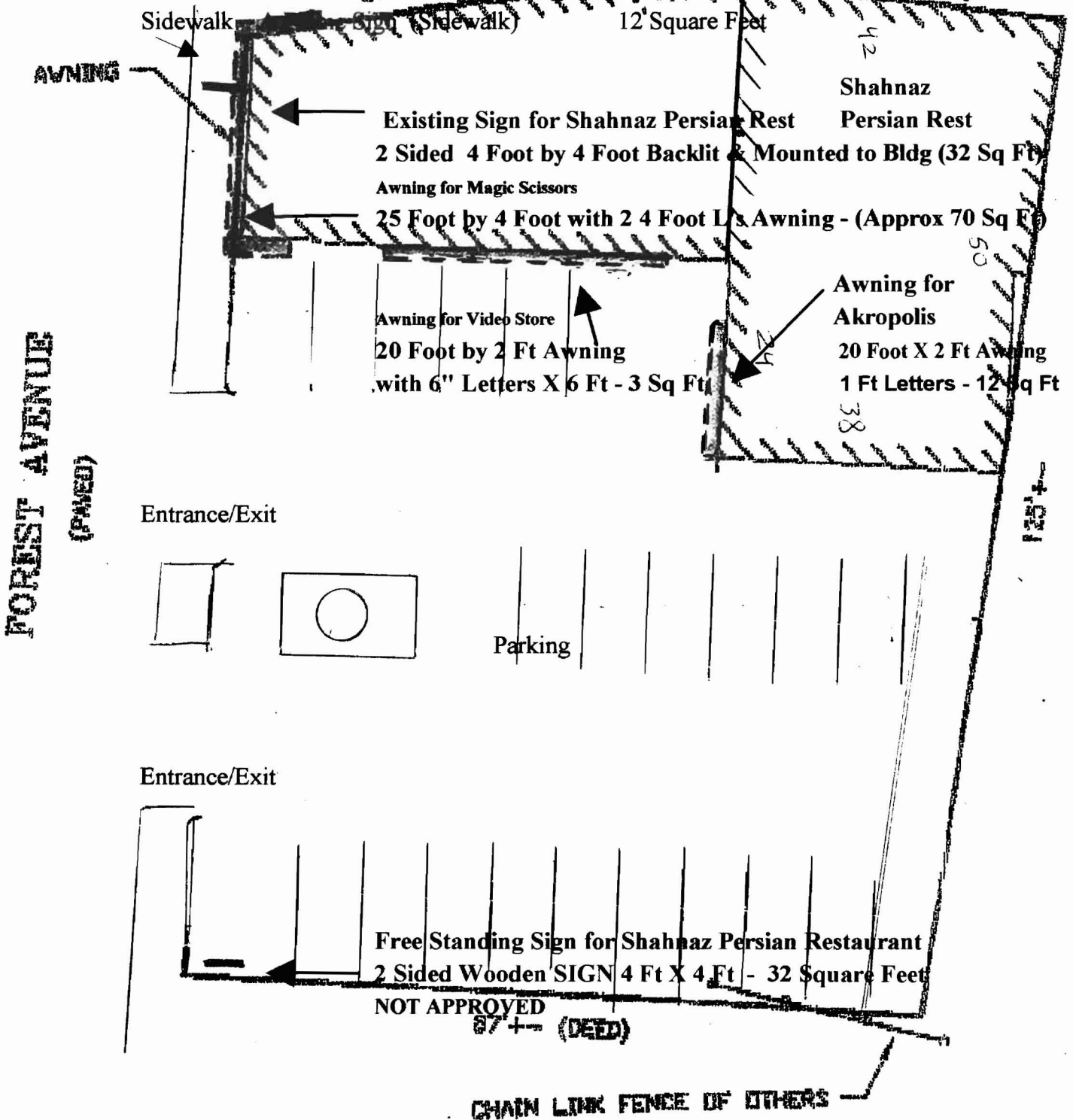
This is not a permit; you may not commence ANY work until the permit is issued.

freestanding 4' front frontage < 200'
6.5' max
18' high
setback? same plan as existing?

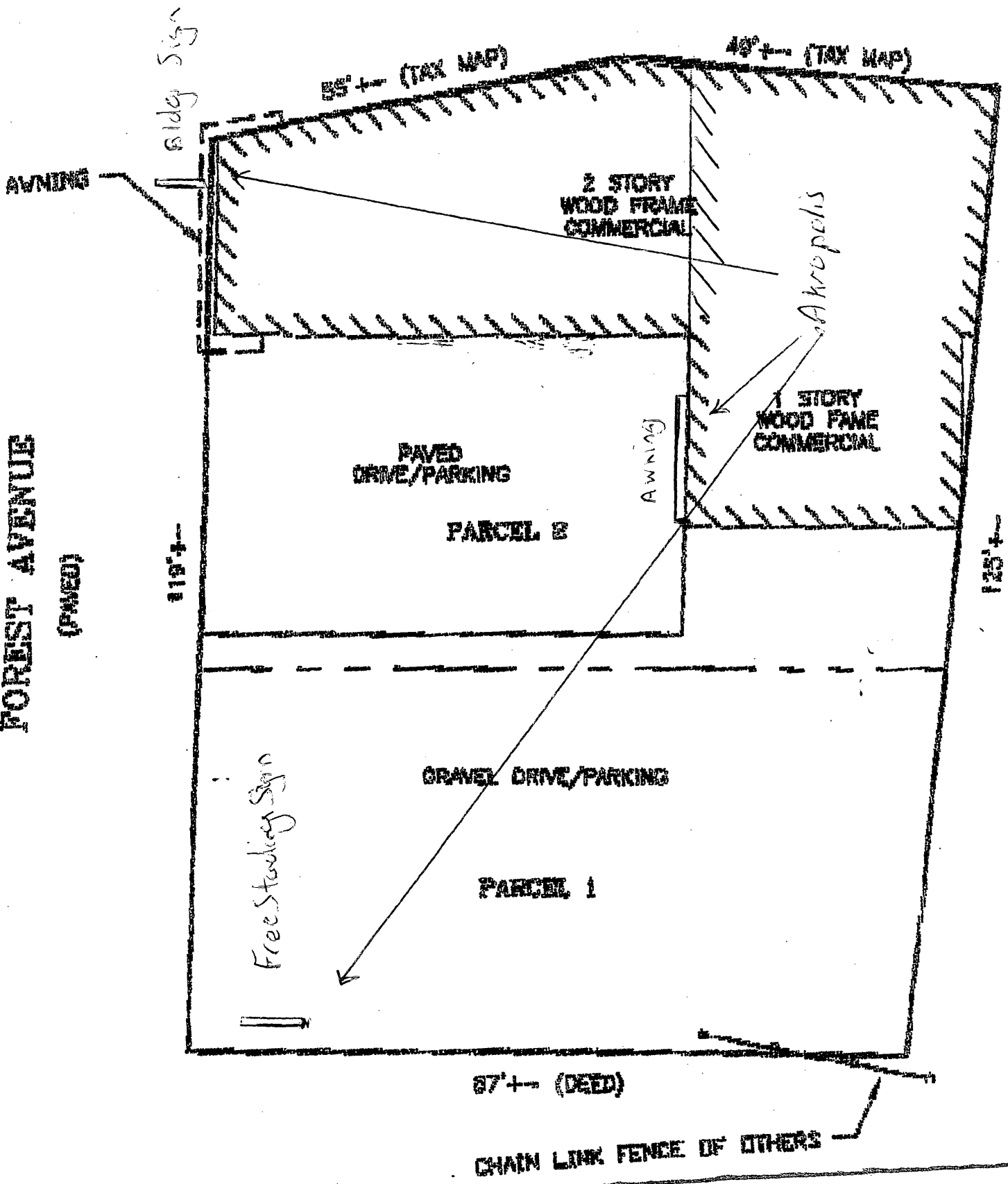
Shahnaz Persian Restaurant, Existing Signs and Lot

All Measurements Est

Signs	Total Free Standing Signs	32 Square Feet
	Total Bldg Mounted Signs	32 Square Feet
	Total Illuminated Awnings	82 Square Feet
	Total Non-Illuminated Awnings	3 Square Feet
	Sidewalk Sign (Sidewalk)	12 Square Feet

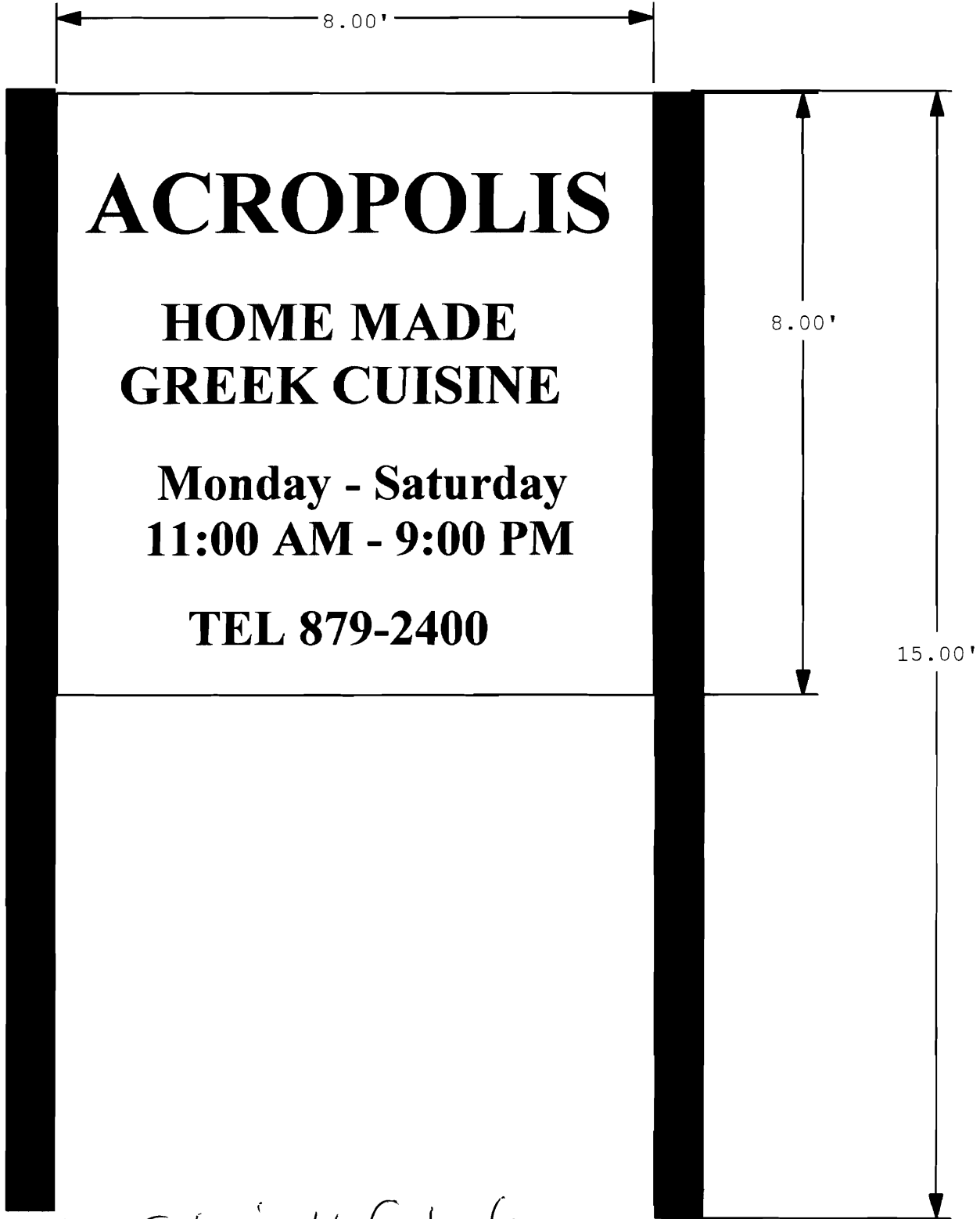


FOREST AVENUE
(PAVED)



Existing Signs





*Set in 4 feet of
concrete*

**Shahnaz Mahager
256 Bancroft Street
Portland, Maine 04103**

Tel 207-671-7550

**Code Enforcement
City of Portland
City Hall
389 Congress Street
Portland, Maine 04101**

To Whom it May Concern:

I grant my permission for the Tenant(s), Nickiforos and Zoe Katsamas to change the awning in front of the premises, the building sign located in front of the building and hung over the sidewalk, and the free standing sign in the front of the building and located on Parcel 1 as outlined on the attachment.

Respectfully,

**Shahnaz Mahager
Landlord**



Signage/Awning Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

- Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way.
- Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
- A sketch plan of lot indicating location of buildings, driveways and any abutting streets or rights of way, lengths of building frontages, street frontages and all existing setbacks. Please indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building façade dimensions for any signage attached to the building.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.
- Certificate of flammability required for awning or canopy.
- A UL# is required for lighted signs at the time of final inspection.
- Pre-application questionnaire completed and attached.
- Photos of existing signage
- Details for sign fastening, attachment or mounting in the ground.

Permit fee for signage or awning-with-signage: \$30.00 plus \$2.00 per square foot of sign.

Permit fee for awning-without-signage is based on cost of work:
\$30.00 for the first \$1,000.00, \$9.00 per additional \$1,000.00 of cost.

Base application fee for any Historic District signage is \$65.00.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/07/2006

PRODUCER (207) 883-8229
SOUTHERN MAINE INSURANCE
432 US RTE 1
P.O. Box 6803
SCARBOROUGH ME 04070-6803

INSURED
ACROPOLIS
795 FOREST AVE
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.

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: HARTFORD CASUALTY	
INSURER B:	
INSURER C:	
INSURER D:	
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 LTR	INSRD	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	PENDING	11/03/2006	11/03/2007	EACH OCCURRENCE	\$ 1,000,000
				/ /	/ /	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
				/ /	/ /	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
				/ /	/ /	PD	
		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		/ /	/ /	AUTO ONLY - EA ACCIDENT	\$
				/ /	/ /	OTHER THAN EA ACC	\$
				/ /	/ /	AUTO 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		/ /	/ /	WC STATU-TORY LIMITS	OTH-ER
				/ /	/ /	E.L. EACH ACCIDENT	\$
				/ /	/ /	E.L. DISEASE - EA EMPLOYEE	\$
				/ /	/ /	E.L. DISEASE - POLICY LIMIT	\$
		OTHER BOPPR	PENDING	11/03/2006	11/03/2007		
				/ /	/ /		
				/ /	/ /		

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
CERTIFICATE HOLDER NAMED ADDITIONAL INSURED WITH RESPECTS TO SIGN OVERHANGING BUILDING

CERTIFICATE HOLDER

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CITY OF PORTLAND

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
Michelle Imp