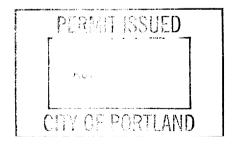
Form # **P**04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

	CI	TY OF	<u>POR IL</u>	LAND				
Application And Notes, If Any, Attached		PE	ERMIT		Permit Nur	mber: 051024		
This is to certify that	Shahnaz Properties Llo	. —				PERMIT I	SSUED	7
has permission to	install a 4x4 sign "Tag	g Wire / Unice		407 500	3	AUG -	9 2005	igg
AT 791 Forest Ave	o noreon or nere	one more	vion	L 137 C002		chalkeom	araly maith	}
of the provision	ne person or persons of the Statutes		of the					
the construction this department	n, maintenance a t.	nd u of buil	dings and str	tures, and	a or the	аррисац	on on til	e in
	orks for street line re of work requires	N ication gi and wr be e this t la d or o H R NOTIO	inspec in mus n permis in proc ding or in there losed-in DE IS REQUIRED.	ula A so pi	rocured b	te of occupa by owner before thereof is occ	ore this bui	
	IIRED APPROVALS				P		/0/	,
Fire Dept Health Dept					\\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	(/ 💆	1/110	2
						>		
Other	rtment Name				Director - Build	ng & Inspection Servi	ces	

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - But 389 Congress Street, 04101 Tel:	U	Permit No: 05-1024	Date Applied For: 07/27/2005	CBL: 137 C003001	
Location of Construction:	Owner Name:	(0	Owner Address:		Phone:
799 Forest Ave	Shahnaz Properties Llc		256 Bancroft St		
Business Name:	Contractor Name:	(Contractor Address:	Phone	
	Burr Signs		59 DownEast Drive	e Yarmouth	(207) 799-1 183
Lessee/Buyer's Name	Phone:	I	Permit Type:		
		L	Signs - Permanent		
Proposed Use:		Proposed	Project Description:		
Commercial/ install a 4x4 sign "Tag	Wireless/ Unicel	install	a 4x4 sign "Tag W	ireless/ Unicel	
Dept: Zoning Status: Note:	Approved	Reviewer:	Marge Schmucka		te: 08/04/2005 Ok to Issue: ✓
Dept: Building Status: Note:	Approved with Conditions	Reviewer:	Tammy Munson	Approval Da	te: 08/09/2005 Ok to Issue: ✓
1) Signage Installation to comply w	rith Chapter 31 of the IBC	2003 building c	ode.		



					PERIVIT		ED.		
200 C 044 04	101 T-1 (207) 974 9700	9 F (207) 974 971	Permi	t Nb: 05-1024	Issue Date			BL:	3 C00 2 001
Location of Construction:	101 Tel: (207) 874-8703	5, Fax: (207) 874-871	<u> </u>		LAUG _	9 200		none:	00,2001
791 Forest Ave	erties Llc	Owner Address: 256 Bancroft S					ione.		
Business Name:	: Contractor Address Y OF PO			ODTI	A N P	pone			
		1	_	rive Yarmout	UNIL/	AIVL	0779	1183	
Lessee/Buyer's Name	Burr Signs Phone:		Permit Type:					Zone) 🖈	
			Signs -	Perman	ent				\mathcal{D}^{\sim}
,PastUse:	Proposed Use:		Permit Fee: Cost of Work:			k:	CEO	District	t:
Commercial	install a 4x4 sign "Tag	all a 4x4 sign "Tag \$6200 \$62.00			L	4			
	Wireless/ Unio	cel			Approved	INSPE	STION	$\overline{\mathcal{O}}^-$	Type: 519
				7	Denied				and the
			1			-	121	A	7203
Proposed Project Description:			-} /'	\cup /		 	<i>(</i>)	_ (1
rroposed rroject Description.			Signature	/	U	Signatu		Z_{+}	
			<u> </u>	RIAN AC'	TIVITIES DIST			, 	
			Action.	Appr		proved w/			Denied
					710	proved no		-	
		1	Signature				Date:		
Permit Taken By: Idobson	Date Applied For: 07/27/2005			Zonin	g Approva	al		,	
1. This permit application	on does not preclude the	Special Zone or Revi	iews Zoning Appeal			Historic Preservation			
	eeting applicable State and	Shoreland	☐ Variance			Not in District or Landmark			
2. Building permits do i septic or electrical we		Wetland	Miscellaneous			Does Not Require Review			
3. Building permits are	void if work is not started of the date of issuance.	Flood Zone	Conditional Use			Requires Review			
	y invalidate a building	Subdivision		Interp	retation		A _J	pproved	l
		Site Plan		Appro	ved		A ₁	proved	l w/Conditions
		Maj Minor MM		Denie	d		De	enied (
		Date: 8/7/09	5 Da	ıte:		12	ate:		7
			L						$\overline{}$
		CERTIFICATI	ON						
I hereby certify that I am t	he owner of record of the na			ed work	is authorized	by the	owne	r of re	cord and that
I have been authorized by	the owner to make this appl	ication as his authorized	d agent ar	d I agre	e to conform	to all ap	oplica	ble lav	ws of this
	f a permit for work describe								
shall have the authority to such permit.	enter all areas covered by si	uch permit at any reason	nadie nou	r to ento	rce the provi	sion of t	ine co	iae(s)	applicable to
r ·									
SIGNATURE OF APPLICANT		ADDRES	S		DATE			P	HONE

•	Maine - Building or Use Permit 04101 Tel: (207) 874-8703, Fax: (207)	Permit No: 05-1024	Date Applied For: 07/27/2005	CBL: 137 C003001			
	Owner Name: Shahnaz Properties Llc	_	wner Address: 56 Bancroft St		Phone:		
Business Name:	Contractor Name: Burr Signs	1	ontractor Address:	e Yarmouth	Phone (207) 799-1183		
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent					
'roposed Use: Commercial/ install a	4x4 sign "Tag Wireless/Unicel	_	Project Description: a 4x4 sign "Tag W	'ireless/ Unicel			
Dept: Zoning Note:	Status: Approved	Reviewer:	Marge Schmucka		te: 08/04/2005 Ok to Issue: ✓		
Dept: Building Note:	Status: Approved with Conditions	Reviewer:	Tammy Munson	Approval Da	te: 08/09/2005 Okto Issue: ✓		

1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.



Signage/Awning Permit Application

ifyou or the property owner owes real estate or personal property taxes or user charges on any property within

	3		
Total Square Footage of Proposed Struct	ture Square F	ootage of Lot	
Tax Assessor's Chart, Block & Lot Chart# / 31) Block#Lot# 2	Owner: SHAHRA FACTORE		
Lessee/Buyer's Name (if Applicable) TAG WIRELESS	Applicant name, additelephone: BURE SIGNS 10 BUTTONNOOD 50. PORTLAND, 799-1183	2.00 \$1.00 p er s.f = Total Fee:	f. plus \$30.00
Current use: RETAIL		DEPT. OF BUILDING II CITY OF PORTLA	NSPECTION ND, ME
If the location is currently vacant, what w	•	JUL 2 2 2	1005
Proposed use: RETAIL		RECEIV	ED
Project description: INSTALL C	b) 4x4 DF F		
Contractor's name, address & telephone	BURR SIGNS,	- 2000 × 10 4	Se Down DA. YARMOU ME Permit and O
Who should we contact when the permit	k ready: **RANDY	- SMOR	Vac.
Mailing address:	SAME	769-118 . 846-7600	3 resi
We will contact you by phone when the paylew the requirements before starting a and a \$100.00 fee If any work starts before	ny work, with a manney	viewer, A stop work order will	,

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 APROVE THIS PERMIT.

I hereby certify that I om the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I hove 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 ihis application is issued. I certify that the CodeOfficial'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: 02/01/05

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

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 498 FOREST AVE ZONE: B-2
CBL:
SINGLETENANTLOT? YES NOK MULTI TENANT LOT? YESX NO MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES NO _X
INFORMATION ON PROPOSEDSIGN(S): FREESTANDING (e.g., pole) SIGN? YES NO DIMENSIONS PROPOSED: BLDG.WALL SIGN? (attached to bldg) YES NO DIMENSIONS PROPOSED:
INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):
FREESTANDING(e.g., pole) SIGN? YES NO DIMENSIONS:
BLDG. WALL SIGN(attached to bldg)? YES NO DIMENSIONS: AWNING? YES NO DIMENSIONS: 3' × 32'
LOT FRONTAGE (FEET): 60 TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET): 20 1.5 7.5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES NO
IF YES, TOTAL S.F. OF PANELS WITH COMMUNICATIONS/MESSAGE/TRADEMARK/SYMBOL?s.f.
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 ARE ALSO RECUIRED
SIGNATURE OF APPLICANT: MATE: 04/01/05
***** FOR OFFICE USE ONLY *****

I shakara Mahager owner of 795-799 forest Are has granted Tag wireless. for installation of Sign on the Building. with permits present at the of install. with all of the requirement of the city and code inforcement have been met. Tag wirdes. Portland, ME 04103 Juner Shahren nghagur profe: for any question Please Arland St Surn or Shahnaz

_									
PRODUCER				THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE					
O'Hearn Insurance Agency				HOLDER, THIS CERTIFICATE DOES NOT AMEND, EXTEND OR					
1087 Forest Ave				ALTER TH	ALTER THE COVERAGE AFFORDED BY THE POLICIES				
Portland, Me. 04103 207-797-9400			INSURERS A	INSURERS AFFORDING COVERAGE					
_	INSURED TAG Wireless				ationwide	Insurance			
				INSURER B:					
		498 Forest Avenu	е	INSURER C:					
		Portland, ME 041	03	INSURER D					
		l		INSURER E					
		GES							
A M	NY RI AY PI	XLICIES OF INSURANCE LISTED BELC EQUIREMENT, TÉRM OR CONDITION ERTAIN, THE INSURANCE AFFORDEI ES. AGGREGATE LIMITS SHOWN MAY	OF ANY CONTRACT OR OTHER I	DOCUMENT WITH F	RESPECT TO WHIC	H THIS CERTIFICATE MAY B	E ISSUED OR		
INSR	NSRD	T	POLICY NUMBER		POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS			
		GENERAL LIABILITY				EACH OCCURRENCE S			
		* COMMERCIAL GENERAL LIABILITY				PREMISES (Es courrence)			
_		CLAIM\$MADE & OCCUR				MED EXP (Any one person)			
A			TBD - New Policy	01/25/05	01/25/06	PERSONAL & ADVINURY \$			
		GEN'L AGGREGATE LIMIT APPLIES PER				PRODUCTS - COMP/OP AGG 5			
		X POLICY PRO- LOC				PRODUCTS-COMPOPAGG	2,000,000		
		AUYOMOBILE LIABILITY ANYAUTO				COMBINED SINGLE LIMIT (Es accident)			
		ALLOWNEDAUTOS SCHEDULED AUTOS				BODILYINJURY (Per person) \$			
		HIRED AUTOS NON-OWNED AUTOS				BODILYINJURY (Poraccident) \$			
						PROPERTY DAMAGE (Peraccident)			
		GARAGE LIABILITY				AUTO ONLY-EA ACCIDENT \$			
		ANYAUTO				OTHERTHAN EAACC S			
						AUTOONLY: AGG S			
		EXCESSIONERELLA LIABILITY				EACH OCCURRENCE \$			
		OCCUR CLAIMSMADE				AGGREGATE S			
		DEDUCTIBLE				\$			
		RETENTION S				\$			
	WOR	KERS COMPENSATION AND				WCSTATU- OTH-			
	SMP	OYERS' LIABILITY ***OPRIETORPARTNER/EXECUTIVE				E.L. EACH ACCIDENT S			
	OFFIC	ERMEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE \$			
	SPEC	describe under IAL PROVISIONS below				ELL DISEASE-POLICY LIMIT S			
	OTH	ER							
DESC	RIPTI	ON OF OPERATIONS/LOCATIONS/VEHICL	ES / EXCLUSIONS ADDED BY ENDORSEM	ENT/SPECIAL PROVISI	IONS				
79	7	Forest Avenue, Port	land. ME						
- `									
~==		NATE VIOLEN			····				
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City of Portland				BATE THEOROE	THE LOCALIST WAS IN	ES LEM L ENGLANDS WA LAND	UIA6 mousen		
		389 Congress St	1.01	I	Ē'	ier will endeavor to mail R named to the left, but fail			
		Portland, ME 04	101	1		Y OF ANY KIND UPON THE INSU	1		
				REPRESENTATIV					
				AUTHORIZED REP	RESERVATIVE /				
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Authorized Agent

