

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING DEPARTMENT

Please Read
Application And
Notes, If Any,
Attached

This is to certify that FOREST AVENUE BUILDINGS LLC Applicant

has permission to Install 2 signs - 1-21 sq ft and 1-8 sq ft

AT 849 FOREST AVE

City of Portland Permit Number 137 C010001

Permit Number: 050441

PERMIT ISSUED

MAY - 9 2005

CITY OF PORTLAND

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 work on permit in progress before this building or part thereof is occupied or closed-in. **48 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

[Handwritten Signature]
5/10/05

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: 05-0441	Issue Date: PERMIT ISSUED MAY - 9 2005	CBL: 1B7 CC10001
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Location of Construction: 849 FOREST AVE	Owner Name: FOREST AVENUE BUILDINGS L	Owner Address: 849 FOREST AVE	Phone:
Business Name:	Contractor Name: Applicant	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-2

Past Use: Restaurant	Proposed Use: Restaurant/ Install 2 signs - 1-21 sq ft and 1-18 sq ft	Permit Fee: \$102.00	Cost of Work: \$102.00	CEO District: 4
Proposed Project Description: <i>legally considered retail</i>		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: U Type: Sign <i>IBC 2003</i>	
		Signature:	Signature:	
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: 04/19/2005	Zoning Approval		
<ol style="list-style-type: none"> 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: <i>OK 4/27/05</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	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:

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: 05-0441	Date Applied For: 04/19/2005	CBL: 137 C010001
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Business Name:	Contractor Name: Applicant	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Restaurant/ Install 2 signs - 1-21 sq ft and 1-18 sq ft	Proposed Project Description: Install 2 signs - 1-21 sq ft and 1-18 sq ft
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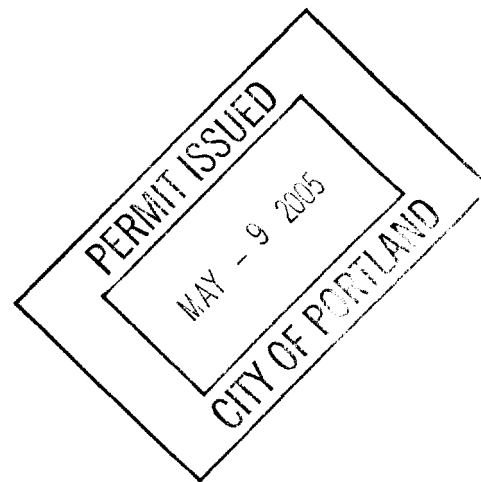
Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 04/27/2005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 05/10/2005
Note: **Ok to Issue:**

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

Comments:

' 5/10/05-tmm: rec'd additional info requested.



DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME
APR 19 2005
RECEIVED

DEPT. OF BUILDING
CITY OF PORTLAND, ME
APR 2005
RECEIVED

Sign Application

If you or the property owner owes estate or property taxes or user charges on any permits within the City, payment arrangements must be made before permits of any kind are issued.

Location/Address of Construction: <u>849 Forest Avenue, Portland, ME</u>		
Total Square Footage of Proposed Structure <u>Leased Property % 484 sq ft</u>	Square Footage of Lot <u>26,890</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>37</u> Block# <u>C</u> Lot# <u>10</u>	Owner: <u>David or Bill Coppersmith</u>	Telephone: <u>772-4585</u>
Lessee/Buyer's Name (If Applicable) <u>Karen; Scott McIlwain 664 Allen Ave. Portland, ME 04103</u>	Applicant name, address & telephone: <u>Karen; Scott McIlwain, 664 Allen Ave Portland, ME 04103</u>	Total s.f. of signage x \$2.00 per s.f. plus \$30.00/\$65.00 for H.D. signage = Total s.f. Fee: \$ <u>36</u> Awning Fee = Cost Of Work: \$ _____ Total Fee: \$ <u>102.00</u>

Current use: Take-out Restaurant Retail

If the location is currently vacant, what was prior use: North East Auto Dealership

Approximately how long has it been vacant: 3 days

Proposed use: Take-out Restaurant

Project description: 2 Signs to Replace existing signage
(1) 36' x 84' W (2) 36' H x 72' W

Contractor's name, address & telephone:

Whom should we contact when the permit is ready: Karen McIlwain 878-8446

Mailing address: 664 Allen Ave. 233-7166

We will contact you by phone to review the requirements before and a \$100.00 fee if any work is required. You must come in and pick up the permit and TOP WORK ORDER will be issued. IE: 878-8446

IF THE REQUIRED INFORMATION IS DENIED AT THE DISCRETION OF THE CITY ENGINEER, THE APPLICANT MUST PROVIDE ADDITIONAL INFORMATION IN ORDER TO APPROVE THE PERMIT.

I hereby certify that I am the Owner of the property and that I have authorized by the owner the representative shall have the authority to execute the codes applicable to this permit.

Signature of applicant: Karen

21^{sf}
18
36

MIT WILL BE AUTOMATICALLY ISSUED IF YOU REQUIRE ADDITIONAL INFORMATION.

The City Engineer authorizes the proposed work and I agree to conform to all applicable codes. I hereby certify that the Code Official's authorized representative is available during the business hours to enforce the provisions of the Code.

433-05

This is NOT a permit

permit is issued.

ANY work until the

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE COMPLETE ALL INFORMATION

ADDRESS: 849 Forest Avenue, Pkld ZONE: B-2

CBL: _____

SINGLE TENANT LOT? YES _____ NO _____ MULTI TENANT LOT? YES NO _____

MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES _____ NO _____

TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET):

Length: 20' per photo Height: 20 x 1.5 = 30' MAX *OK*

INFORMATION ON PROPOSED SIGN(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: 36' w x 72' #

BLDG. WALL SIGN (attached to bldg)? YES NO _____ DIMENSIONS: 36' w x 84' #

AWNING? YES (on roof) # NO _____ DIMENSIONS: 3 x 7 = 21'

LOT FRONTAGE (D): 35.40' approximately - please see plot my.

AWNING _____ NO _____ 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 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 REQUIRED.

SIGNATURE OF APPLICANT: _____

DATE: _____

***** FOR OFFICE USE ONLY *****

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME

APR 19 2005

RECEIVED

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
04/19/2005

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

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
Show Dogs
849 Forest Avenue
Portland ME 04103-

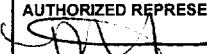
INSURERS AFFORDING COVERAGE	NAIC #
INSURER A HARTFORD	
INSURER B	
INSURER C	
INSURER D	
INSURER E	

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 <hr/> GENL AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	PENDING	04/19/2005	04/19/2006	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS-COMP/OP AGG \$ 2,000,000
		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 <hr/> <input checked="" type="checkbox"/>		/ /	/ /	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 AGG \$
		EXCESS UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <hr/> DEDUCTIBLE RETENTION \$		/ /	/ /	EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below		/ /	/ /	WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER	DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME	/ /	/ /	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 APR 19 2005

CERTIFICATE HOLDER () - CITY OF PORTLAND MONUMENT SQUARE PORTLAND ME 04101-	RECEIVED	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 
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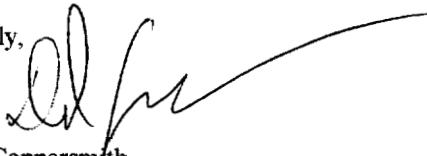
April 13, 2005

Re: Permit for Signage, 849 Forest Avenue, Portland, Maine

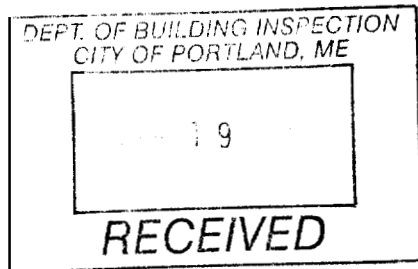
To: City of Portland

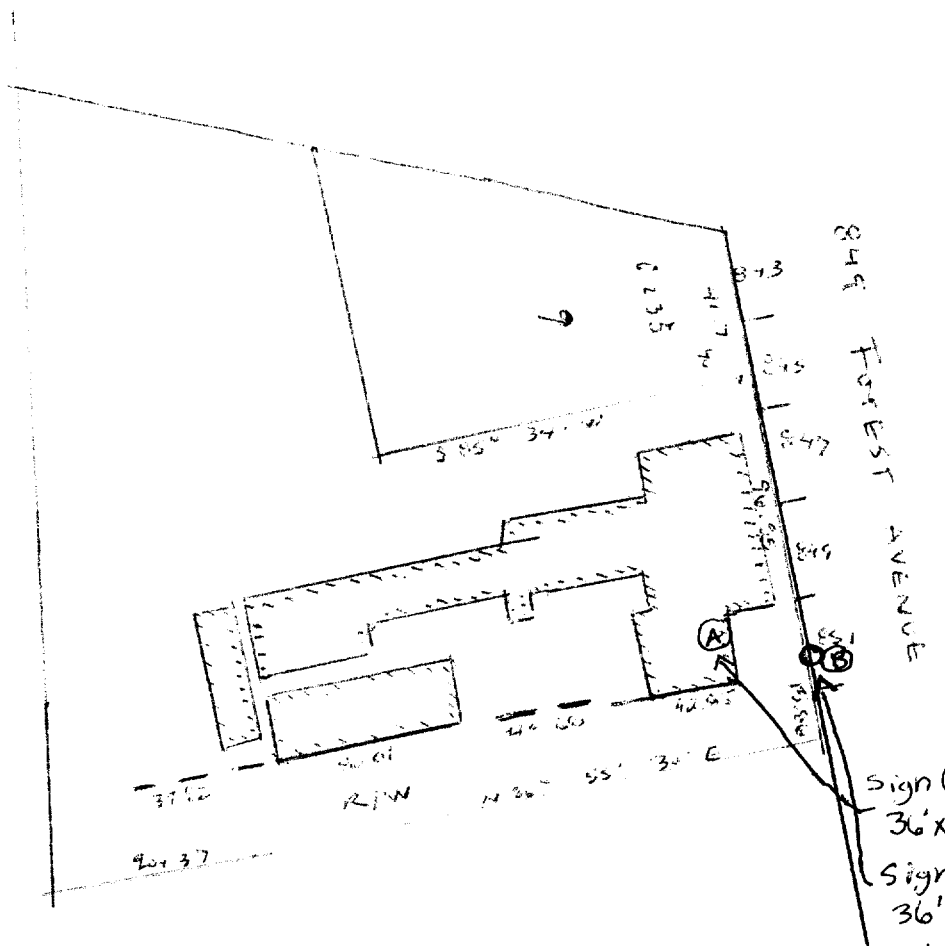
Karen McIlwain dba Show Dogs has my permission to install new signage at the property she is leasing at 849 Forest Avenue. Karen will be replacing the existing signage.

Sincerely,



**David Coppersmith
Owner**



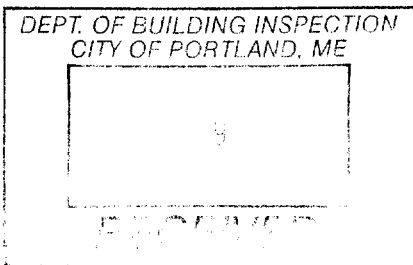


137-E-010-001

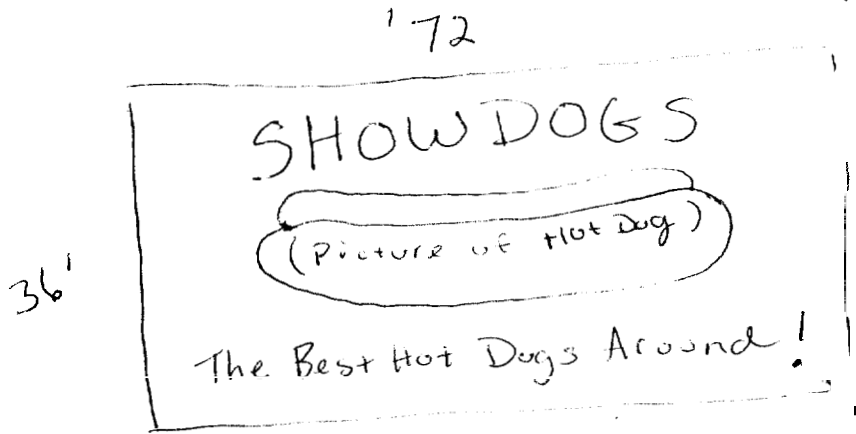
137-C-10

See photo

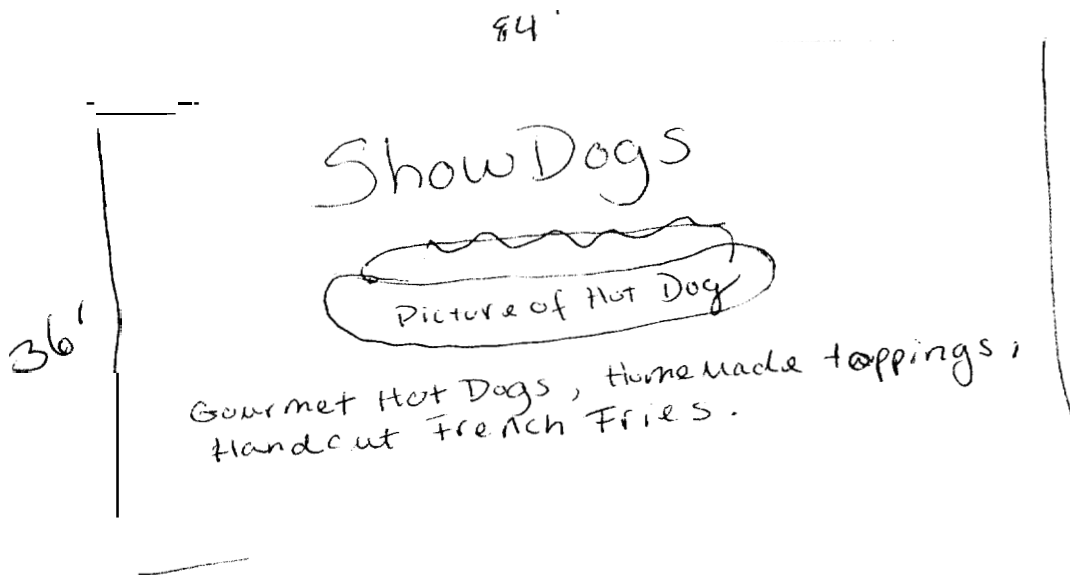
↑
measurements
are in inches
not feet



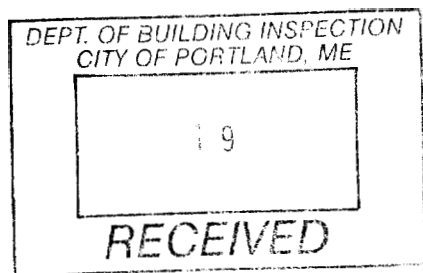
Proposed Signage 849 Forest Ave
measurements are
in inches NOT feet!



Sign on
Forest Ave.



Sign on
Building



849 Forest Avenue, Portland



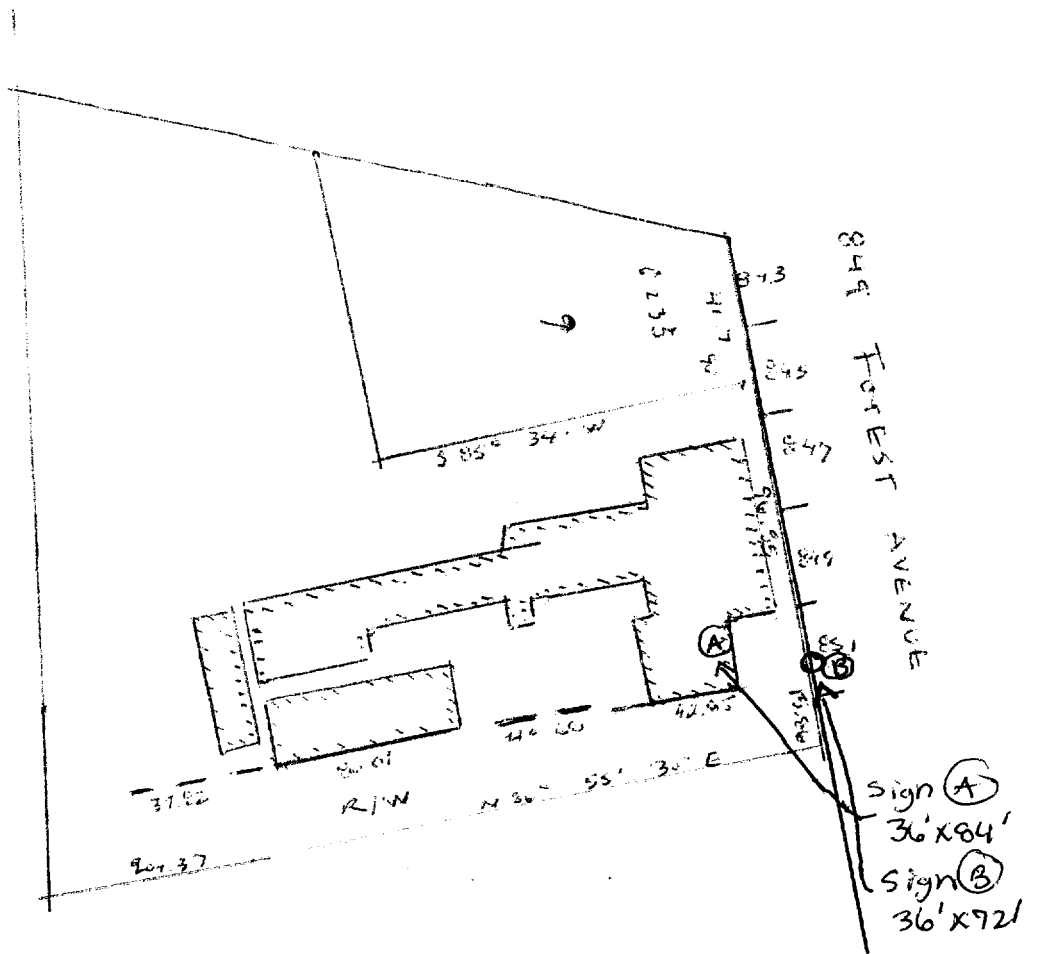
(A)
36' x 84'
↑ inches
Not feet
3' x 7'



(B)
36' x 72'



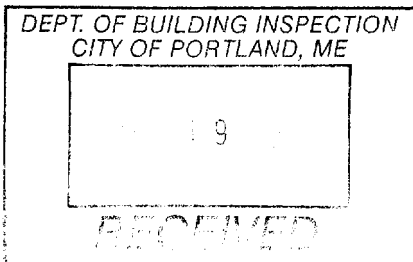
We will be replacing existing signage shown.

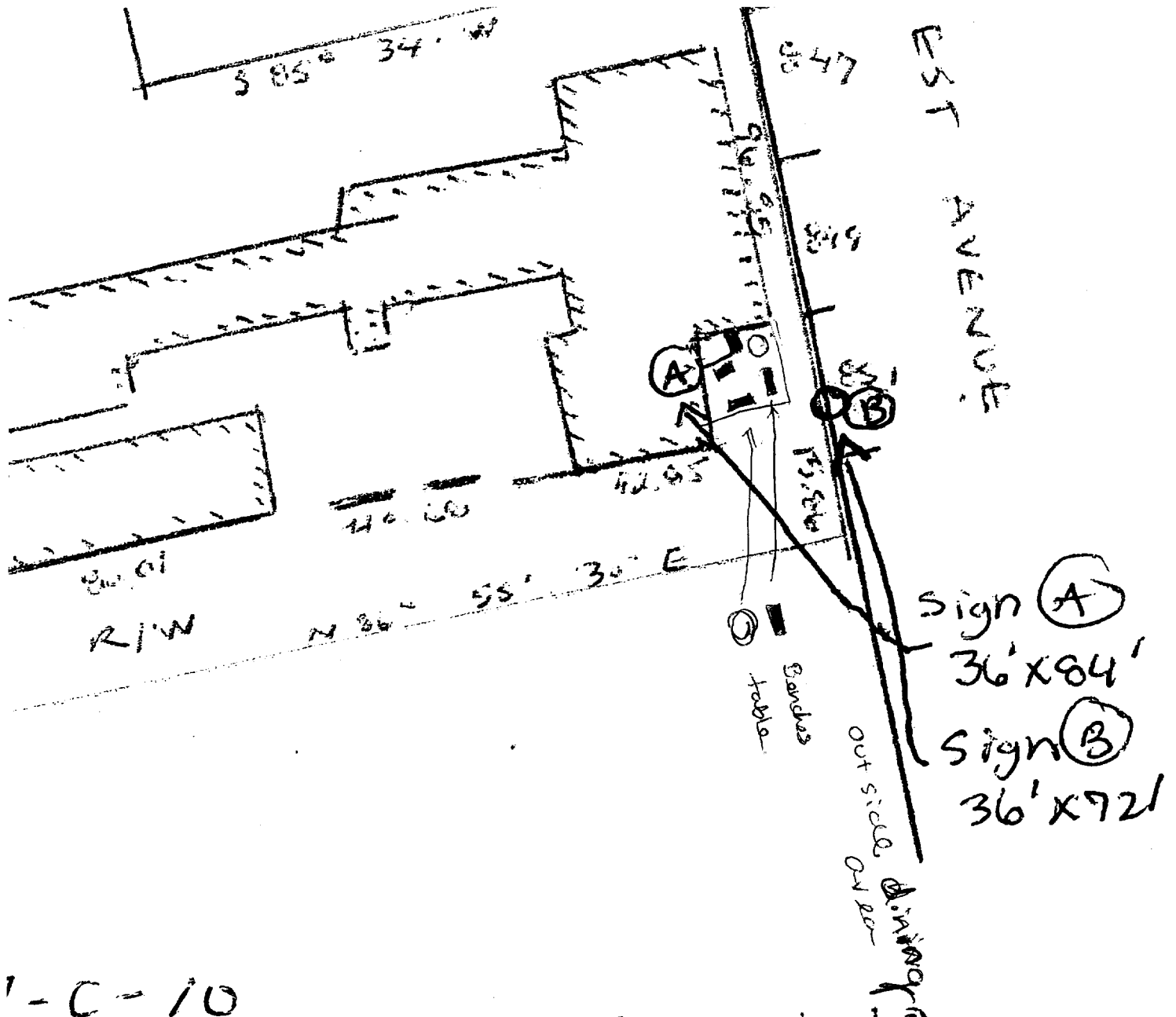


137-E-010-001

137-C-10

See photo

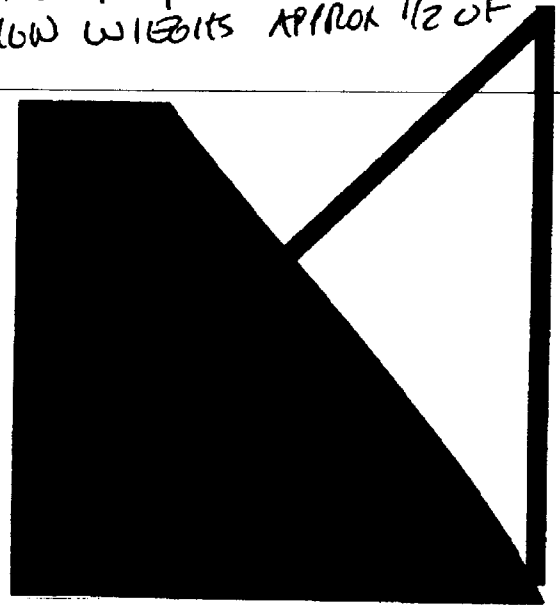




1-C-10

See photo

NEW ALUMINUM TUBE
SIGN MOUNT TO EXISTING
BRACKETS WITH 1/4" BOLTS
IN (4) PLACES, REPLACING
3/4" PLYWOOD SIGN, NEW
SIGN WEIGHTS APPROX 1/2 OF EXISTING.



APPROX.
MOUNTING HOLES
(4) TOP + Bottom

7'

Show Dogs



Chili Dogs-Hand Cut Fries
Best Chili Dog Around!



3'

5'

Show Dogs



Chili Dogs-Hand Cut Fries
Best Chili Dog Around!



3'

1 1/2" x 1 1/2" x 3/16" ANGLE IRON
WELDED TO EXISTING 4" POLE
SIGN BOLTED TO DROWS IN (4)
1 1/2" BOLTS

NORTHERN SIGNS

Design • Fabrication • Installation and Service

P.O. Box 1475 • Waterville, Maine 04903

Phone (207) 465-2399

Fax (207) 465-8284

FAX TRANSMITTAL COVER SHEET

TO: TAMMY MILSON

COMPANY: CITY OF PORTLAND

FROM: MARK ARWOOD

DATE: 5/5/05

NUMBER OF PAGES (INCLUDING COVER SHEET): 2

RESPONSE REQUIRED: YES NO

IF YOU DO NOT RECEIVE ALL PAGES, PLEASE TELEPHONE NORTHERN SIGNS.
THANK YOU!

NOTES: IF YOU NEED ANY MORE INFO PLEASE FAX QUESTIONS BACK. I WILL BE ON THE ROAD MOST OF TOMORROW. BUT WILL GET BACK TO YOU ASAP.

Thanks,
Mark