

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

<b>PERMIT ISSUED</b>		CBL:
Permit No: 02-0875	Issue Date: AUG 15 2002	137 C011001

<b>Location of Construction:</b> 865 Forest Ave	<b>Owner Name:</b> Heather Piece Inc	<b>Owner Address:</b> 1366 Westbrook St PORTLAND	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Applicant	<b>Contractor Address:</b> Portland	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	<b>Zone:</b> B-2

<b>Past Use:</b> Vacant	<b>Proposed Use:</b> Thai Restaurant	<b>Permit Fee:</b> \$95.00	<b>Cost of Work:</b> \$0.00	<b>CEO District:</b> 2
		<b>FIRE DEPT:</b> N/A <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: U Type: Sign BOCA 99 Signature: YMA	

**Proposed Project Description:**  
Erect 2 awnings, 1 sign and new lettering

**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**

Action:  Approved  Approved w/Conditions  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Permit Taken By:</b> jmy	<b>Date Applied For:</b> 08/05/2002	<b>Zoning Approval</b>
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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..	<b>Special Zone or Reviews</b> <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: OK 8/12/02	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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:
	non-backlit awnings		

**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

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING & INSPECTION

## PERMIT

Permit Number: 020875

Please Read Application And Notes, if Any, Attached

This is to certify that Heather Piece Inc /Applicant  
has permission to Erect 2 awnings, 1 sign and m letterin  
AT 865 Forest Ave 137 C011001

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.

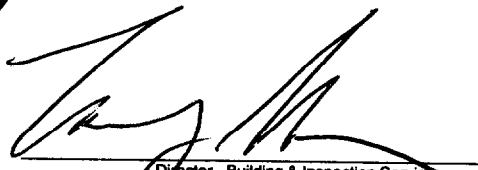
Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and work on permit in progress before this building or part thereof is closed or enclosed-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

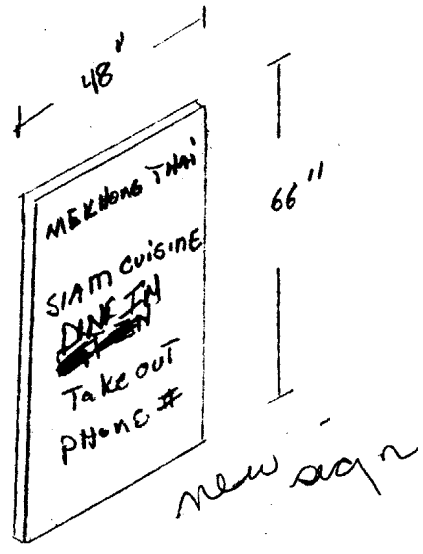
  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

1.5 SQ FT per  
Running Feet of Frontage

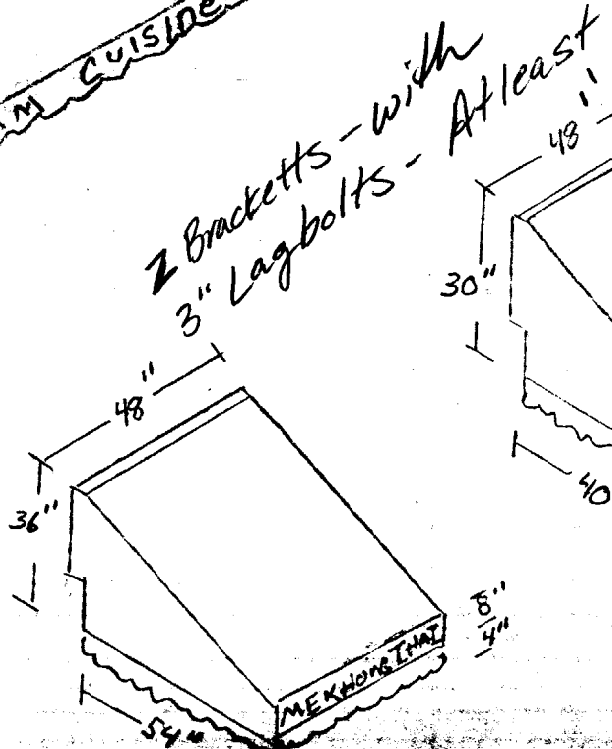
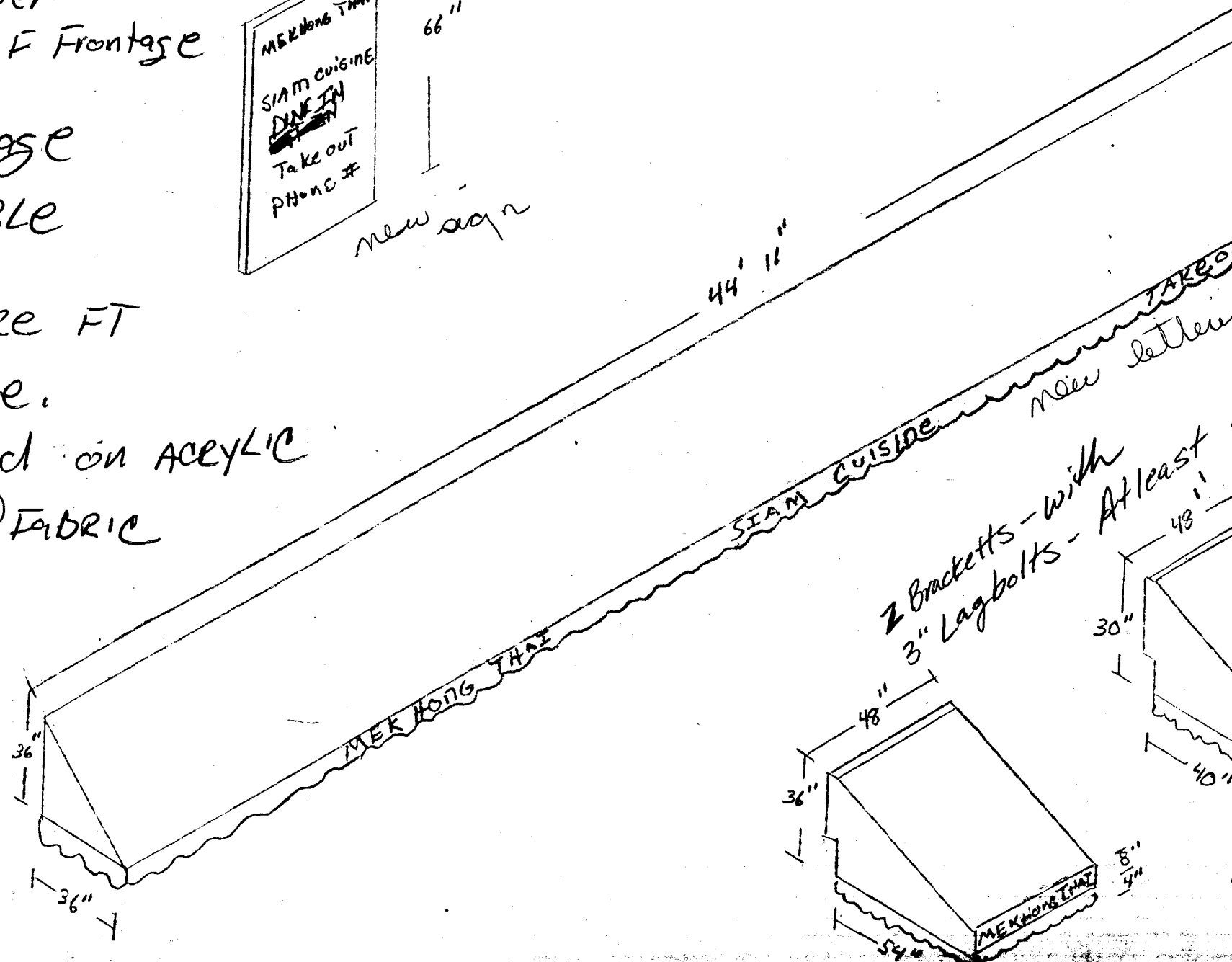
43' Frontage

65' Allowable



45 SQUARE FT  
OF Signage.

Hand painted on ACRYLIC  
NON BACKLIT FABRIC



02-0875

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

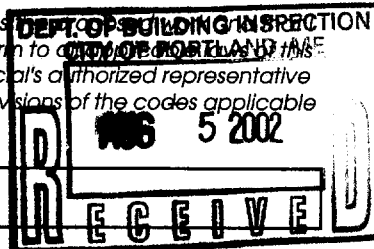
# Signage Application

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>865 Forest Avenue</u>		
Total Square Footage of Proposed Structure	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>137</u> Block# <u>C</u> Lot# <u>011</u>	Owner: <u>Mr. Grant Wilson</u>	Telephone: <u>65</u>
Lessee/Buyer's Name (If Applicable) <u>THI &amp; C, Inc.</u> <u>DBA / Mekhong Thai - Portland</u>	Applicant name, address & telephone: <u>Suphab Thakorn</u> <u>1751 Branch Rd / PO Box 1884</u> <u>Wells, ME 04090 (800) 985-4413</u>	Total s.f. of signage <u>65</u> x 1.00 per s.f. \$ _____, plus \$30.00 base fee Fee: \$ <u>95.00</u>
Current use: <u>Vacant</u>		
If the location is currently vacant, what was prior use: <u>Coffee House</u>		
Approximately how long has it been vacant: _____		
Proposed use: <u>Thai Restaurant</u>		
Project description: <u>2 new awnings, 1 new sign, new lettering</u>		
Contractor's name, address & telephone: <u>TONY</u> <u>878 7926 x4</u>		
Who should we contact when the permit is ready: _____		
Mailing address: _____		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$50.00 fee if any work starts before the permit is picked up. Phone: <u>318 237</u>		

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 APPROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes \_\_\_\_\_ have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to \_\_\_\_\_ 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: [Signature] Date: \_\_\_\_\_

This is NOT a permit, you may not commence ANY work until the permit is issued.  
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

**SIGNAGE PRE-APPLICATION**

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 865 Forest Avenue ZONE: B-2  
OWNER: Mr. Grant Wilson  
APPLICANT: Mr. Suphab Thakomy  
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 \_\_\_\_\_  
MORE THAN ONE SIGN? YES  NO  DIMENSIONS \_\_\_\_\_  
AWNING: YES  NO  IS AWNING BACKLIT? YES  NO  HEIGHT OFF SIDEWALK yes.  
IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? yes.

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

*not back lot*

*Awning 8" x 44" = 29.04 sq ft*  
*44" x 66" = 2904 / 114 = 20.166*  
*43 x 1.5 = 64.5 sq ft*

\*\*\* TENANT BLDG. FRONTAGE (IN FEET): \_\_\_\_\_

\*\*\* REQUIRED INFORMATION

AREA FOR COMPUTATION

*2 (8" x 4) = 5.28 sq ft*  
*total = 54.486 sq ft*

**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: *J. Suphab* DATE: \_\_\_\_\_

**THI & C, Inc.**

dba Mekhong Thai Restaurant Portland  
865 Forest Avenue  
Portland, Maine 04102

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July 23, 2002

Mr. Grant Wilson  
President  
Heater Piece, Inc  
PO Box 4152  
Portland, Maine 04101

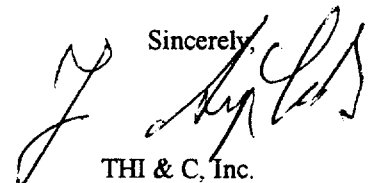
Dear Mr. Grant Wilson,

Re : Alterations and Improvements the Lease Premises upon the Lease Agreement at 865 Forest Avenue

We, THI & C, Inc (d/b/a Mekhong Thai Restaurant Portland) ("Tenant") would like to ask HEATER PIECE, INC. ("Landlord") for the permit to give us the approval for doing all the interior alterations, improvements additions or installations made by us to the Leased premises so we can alter the Leased premises to be completely used for operating a Thai food restaurant and also the approval to place signs in the exterior windows, doors, roof and signage pole of the Leased Premises, so long as the new window which will be affix to the building as of requested to open the dining section to the public.

To cut off any more delay that already been occurred, please sign and return the copy to us so we can use this letter as an original approval to apply for all permission from city of Portland or state of Maine.

Sincerely,



THI & C, Inc.  
By : Suphab Thakong  
President

**LANDLORD:**  
**HEATER PIECE, INC.**

BY :

Name :

Its :

Has acknowledges and agree to give the approval as of the above request.

# Certificate of Flame Resistance



REGISTERED  
APPLICATION  
CONCERN No.

FA-36801

ISSUED BY

Glen Raven Custom Fabrics, LLC  
1831 N. Park Avenue  
Glen Raven, NC 27217

Date treated or  
manufactured

(Phone) 336/227-6211 (Fax) 336/229-4039

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).

FOR Maine Bay Canvas ADDRESS 53 industrial Way  
CITY Portland, Maine STATE \_\_\_\_\_

Certification is hereby made that: (Check "a" or "b")



(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used \_\_\_\_\_ Chem. Reg. No. \_\_\_\_\_

Method of application \_\_\_\_\_



(b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

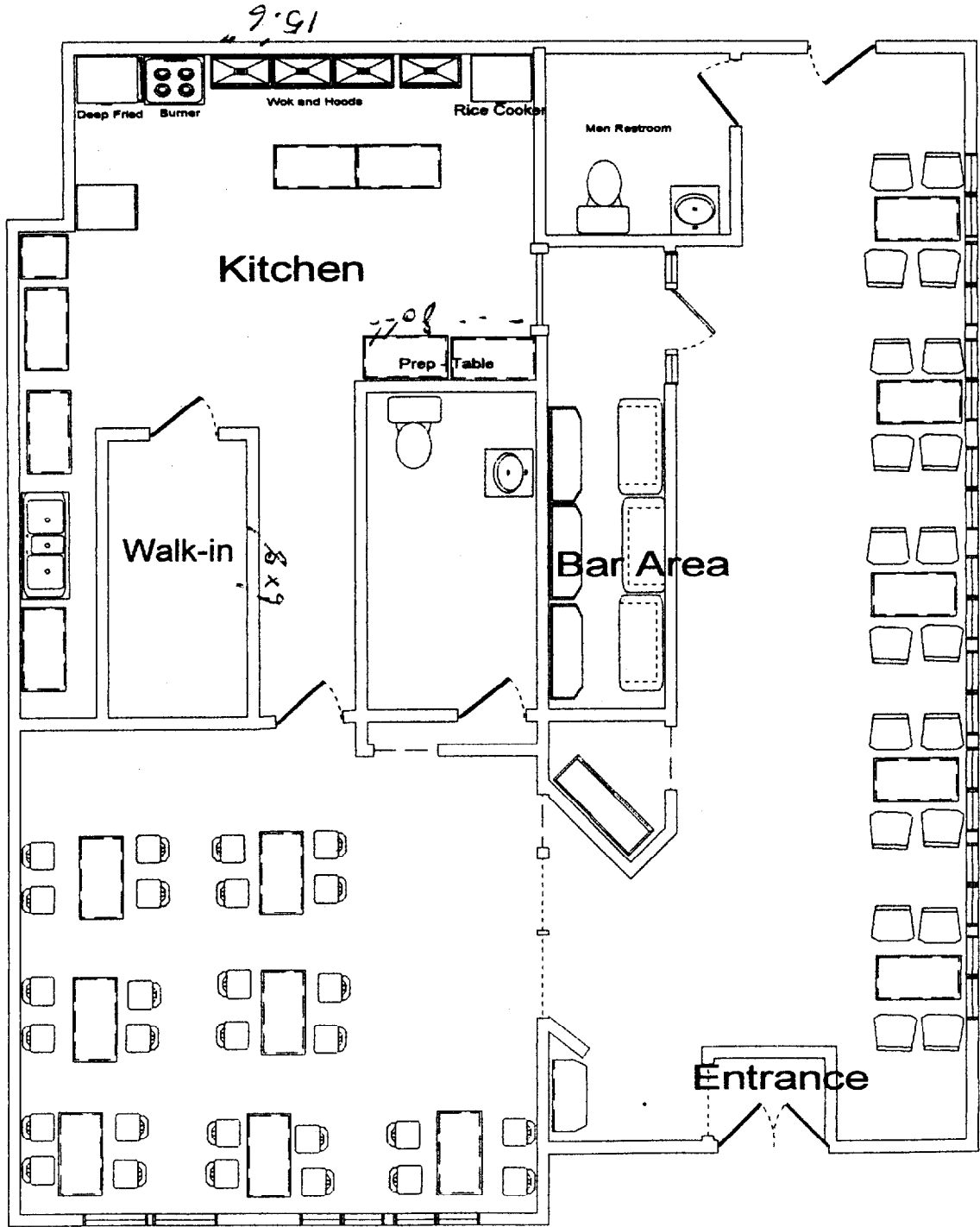
Trade name of flame-resistant fabric or material used FR Sunbrella® Reg. No. FA-36801

**The Flame Retardant Process Used** will not **Be Removed By Washing**  
(will or will not)

Glen Raven Custom Fabrics, LLC  
Name of Applicator or Production Superintendent

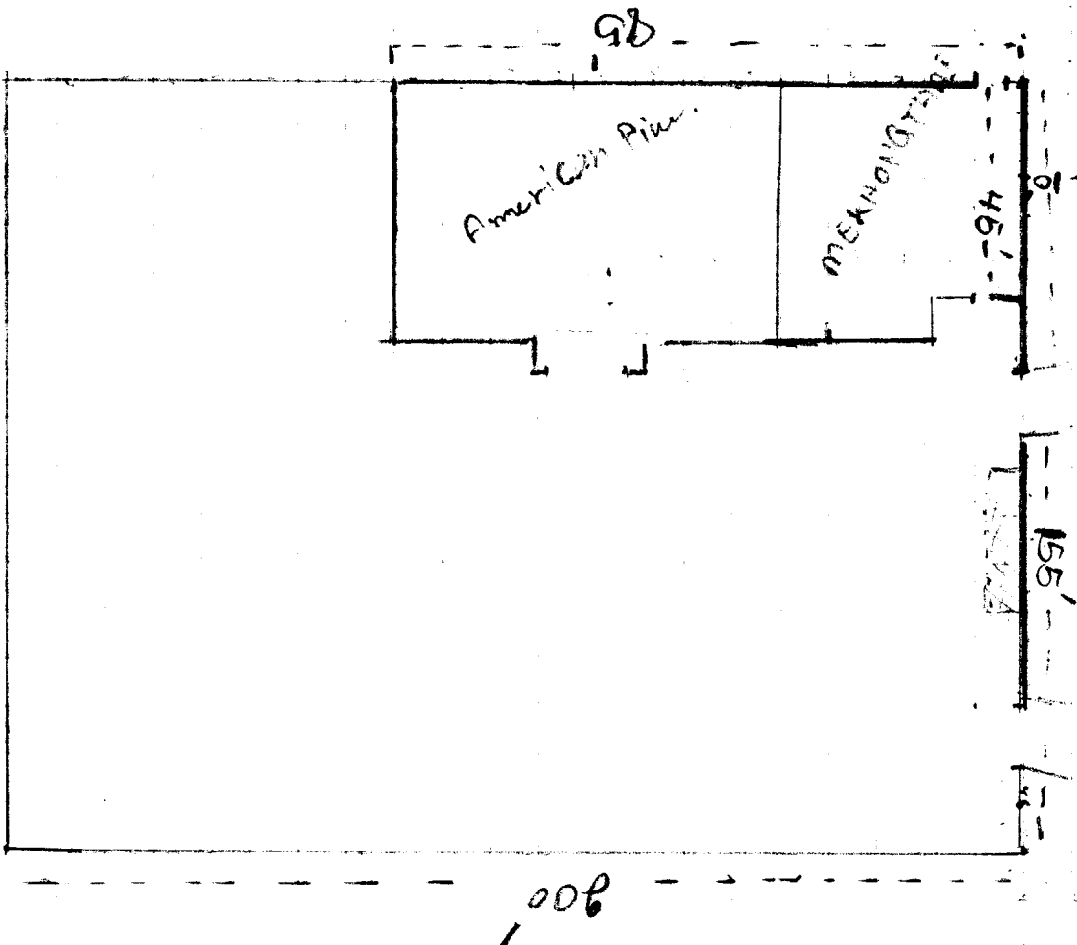
GLEN RAVEN CUSTOM FABRICS, LLC  
By *Gwen S. Cline*  
Title

AFTER





Forrest Ave



# ACORD INSURANCE BINDER

OP ID RR

DATE  
08/02/02

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM.

PRODUCER Turner Barker Insurance One India Street Portland ME 04101 Bradford Kirkpatrick		PHONE (A/C, No, Ext): 207-773-8156 207-773-6647 <i>865 Forest</i>	COMPANY St Paul Surplus Lines Ins	BINDER # 2795
CODE: AGENCY CUSTOMER ID: MEKHO-3 INSURED Mekhong Thai Portland 37 Western Avenue #2 Kennebunk ME 04043		SUB CODE:	EXPIRATION DATE 08/02/02	
		EFFECTIVE DATE 10/01/02		TIME 12:01 AM NOON
		THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY #:		
		DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (Including Location) Location: 1 Building: 1 855 Forest Avenue Restaurant		

COVERAGES		LIMITS		
TYPE OF INSURANCE	COVERAGE/FORMS	DEDUCTIBLE	COINS %	AMOUNT
PROPERTY CAUSES OF LOSS <input type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input checked="" type="checkbox"/> SPEC	CONTENTS BUS INC Sign	1000  1000	90 70	75000 100000 4000
GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	RETRO DATE FOR CLAIMS MADE:	EACH OCCURRENCE FIRE DAMAGE (Any one fire) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG		\$1000000 \$50000 \$1000 \$1000000 \$2000000 \$2000000
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 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE MEDICAL PAYMENTS PERSONAL INJURY PROT UNINSURED MOTORIST		\$ \$ \$ \$ \$ \$ \$
AUTO PHYSICAL DAMAGE DEDUCTIBLE <input type="checkbox"/> COLLISION: _____ <input type="checkbox"/> OTHER THAN COL: _____	<input type="checkbox"/> ALL VEHICLES <input type="checkbox"/> SCHEDULED VEHICLES	ACTUAL CASH VALUE STATED AMOUNT OTHER		\$ \$ \$
GARAGE LIABILITY <input type="checkbox"/> ANY AUTO		AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY: EACH ACCIDENT AGGREGATE		\$ \$ \$ \$
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	RETRO DATE FOR CLAIMS MADE:	EACH OCCURRENCE AGGREGATE SELF-INSURED RETENTION		\$ \$ \$
WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY		WC STATUTORY LIMITS E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT		\$ \$ \$ \$
SPECIAL CONDITIONS/ OTHER COVERAGES		FEES TAXES ESTIMATED TOTAL PREMIUM		\$ \$ \$

NAME & ADDRESS HEATER1 Heater Piece, Inc. PO Box 4152 Portland ME 04102		MORTGAGEE LOSS PAYEE <input checked="" type="checkbox"/> Landlord	ADDITIONAL INSURED LOAN # _____ AUTHORIZED REPRESENTATIVE <i>Roberta Rump</i>
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