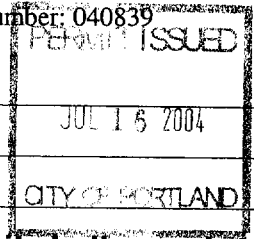


DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMIT

Permit Number: 040839



This is to certify that Pickus Owen B/Bailey Sign Company Inc
has permission to add two 2'9"x3'8" metal panels to top of existing teardrop pylon
AT 980 Forest Ave 04013 143 A065001

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 in permit in progress before this building or part thereof is occupied 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

[Signature]
7/14/04
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: 04-0839	Issue Date: JUN 18 2004	CBL: 143 A065001
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Location of Construction: 980 Forest Ave	Owner Name: Pickus Owen B	Owner Address: 2 Chabot St	Phone: 857-9311
Business Name:	Contractor Name: Bailey Sign Company Inc.	9 Thomas Drive Westbrook	Phone: 2077742843
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: R-P

Past Use: tenant sign pylon for office complex	Proposed Use: tenant sign pylon for office complex	Permit Fee: \$50.00	Cost of Work: \$0.00	CEO District: 4
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied N/A	INSPECTION: Use Group: V Type: Sig BOCA 1999	

Proposed Project Description:
 add two 2'9"x3'8" metal panels at top of existing tenant pylon
replacement sign

Signature:	Signature:
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied	
Signature	Date

Permit Taken By: jodinea	Date Applied For: 06/18/2004	Zoning Approval
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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..	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 checked="" type="checkbox"/> MM <input type="checkbox"/> Date: <i>7/1/04</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:
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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: 04-0839	Date Applied For: 06/18/2004	CBL: 143 A065001
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Location of Construction: 980 Forest Ave	Owner Name: Pickus Owen B	Owner Address: 2 Chabot St	Phone: () 857-9311
Business Name:	Contractor Name: Bailey Sign Company Inc.	Contractor Address: 9 Thomas Drive Westbrook	Phone: (207) 774-2843
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: tenant sign pylon for office complex	Proposed Project Description: add two 2'9"x3'8" metal panels at top of existing tenant pylon
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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 07/01/2004
Note:	Ok to Issue: <input type="checkbox"/>		

Dept: Building	Status: Approved	Reviewer: Tammy Munson	Approval Date: 07/14/2004
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Separate Permits shall be required for any new signage.			

JUN 8 2004

RECEIVE Signage/Awning Permit Application

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

Location/Address of Construction: <u>980 Forest Avenue</u>		
Total Square Footage of Proposed Structure <u>104</u>	Square Footage of Lot <u>1 Acre (+/-)</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>143</u> Block# <u>A</u> Lot# <u>65</u>	Owner: <u>Owen Pickus</u>	Telephone: <u>857-9311</u>
Lessee/Buyer's Name (If Applicable) <u>Owen Pickus</u> <u>Maine Centers For Healthcare</u> <u>Physical Therapy</u>	Applicant name, address & telephone: <u>Bailey Sign Co.</u> <u>9 Thomas Drive</u> <u>Westbrook, ME 04092</u> <u>774-2843</u>	Total sq. ft. of signage x \$1.00 <u>\$1.50</u> per s.f. plus \$30.00 = Total Fee: <u>\$ 50.00</u> Awning Fee = Cost Of Work: \$ _____ Total Fee: \$ _____

Current use: Office Complex

If the location is currently vacant, what was prior use: _____

Approximately how long has it been vacant: _____

Proposed use: 5 as current

Project description: Add 2 - 2'9" x 3'9" metal panels at top of existing
tenant eulon air print # 05296R1

Contractor's name, address & telephone: Bailey Sign Co. 9 Thomas Drive
Westbrook ME 04092 - 774-2843

Who should we contact when the permit is ready: Judy Trainor

Mailing address: Same as a at Above #

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 \$100.00 fee if any work starts before the permit is picked up. PHONE: 774 2843 ext 103

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 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: Judy Trainor / Bailey Sign Date: 6-17-04

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: 980 Forest Avenue ZONE: R 4

CBL: _____

SINGLE TENANT LOT? YES _____ NO MULTI TENANT LOT? YES NO _____
MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES _____ NO

INFORMATION ON **PROPOSED SIGN(S)**: *new panel for existing unit*
FREESTANDING (e.g., pole) SIGN? YES NO _____ DIMENSIONS PROPOSED: 2'9" X 3'8" metal panels
BLDG. WALL SIGN? (attached to bldg) YES _____ NO _____ DIMENSIONS PROPOSED: _____

INFORMATION ON **ALREADY EXISTING AND PERMITTED SIGN(S)**: *12' unit-height - overall dimension*
FREESTANDING (e.g., pole) SIGN? YES NO _____ DIMENSIONS: 89" X 44" - /overall
BLDG. WALL SIGN (attached to bldg)? YES _____ NO DIMENSIONS: 1 structure
AWNING? YES _____ NO DIMENSIONS: _____

LOT FRONTAGE (FEET): 220'
TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET): *Total Bldg frontage is 80' - there are no Bldg signs - freestanding. Tenant unit only - tenants spaces are being refurbished not known how many tenants there will be*

AWNING YES _____ 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: Judy Trainor / Bailey Signs DATE: 6-7-04

***** FOR OFFICE USE ONLY *****
R-P Zone
max area allowed = 300
max height = 8'
min setback = 5'

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN PROPOSED TO BE
ERECTED ON A BUILDING AT 980 Forest Avenue

IN PORTLAND, MAINE (X) Owen Pichus being the owner of the premises
at 980 Forest Avenue in Portland, Maine hereby gives consent to the

erection of a certain sign owned by (X) Owen Pichus over the
public sidewalk or on the building from said premises as described in
application to the Division of Inspection Services of Portland, Maine for a
permit to cover erection of said sign:

And in consideration of the issuance of said permit (X) Owen Pichus
owner of said premises, in event said sign shall cease to serve the purpose
for which it was erected or shall become dangerous and in event the owner of
said sign shall fail to remove said sign or make it permanently safe in case
the sign still serves the purpose for which it was erected, hereby agrees
for himself or itself, for his heirs, its successors, and his or its
assigns, to completely remove said sign within ten days of notice from said
Inspector of Buildings that said sign is in such condition and of order from
him to remove it.

In Witness whereof, the owner of said premises has signed this consent and
agreement this 16th day of June 2004

(X)

Owen Pichus

03/12/04

143 A 065

JUN 18 2004



proposed projects

remove "Otis Atwell" panel - on existing
 freestanding tenant pylon - add new
 panels "Physical Therapy" at top of
 unit 143 A 065

JUN 18

PRODUCER (207)781-3519 FAX (207)781-3907
 Gradish-Young Insurance
 202 U.S. Route One, Box 360

Falmouth, ME 04105
 Insured Owen Pickus

ONLY AND CONFERS NO RIGHTS UPON THE
 HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR
 ALTER THE COVERAGE AFFORDED BY THE

06/17/2004
 OF INFORMATION
 CERTIFICATE
 NAIC #
 24198
 24198

INSURERS AFFORDING COVERAGE

INSURER A: Peerless Insurance

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.

INSURER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	EOP9845319 (FOREST AVE)	04/01/2004	04/01/2005	EACH OCCURRENCE \$ 1,000,000
					DAMAGE TO RENTED PREMISES (Per occurrence) \$ 50,000
					MED EXP (Any one person) \$ 5,000
					PERSONAL & ADV INJURY \$ 1,000,000
	GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMP/OP \$ 1,000,000
	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"/> NONOWNED AUTOS				COMBINED SINGLE LIMIT (Per 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 AUTO ONLY: EA ACCIDENT \$
					AGGREGATE \$
	EXCESSUMERCKA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMSMADE				EACH OCCURRENCE \$
					AGGREGATE \$
					\$
					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WE STATUTORY LIMITS OTHER \$
					E.L. EACH ACCIDENT \$
					E.L. DISEASE - EA EMPLOYEE \$
					E.L. DISEASE - POLICY LIMIT \$
	OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 City of Portland is named Additional Insured regarding 980 Forest Avenue, Portland, Me property

CERTIFICATE HOLDER
 City of Portland
 389 Forest Ave
 Portland, ME 04101

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL INDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE
 Susan J. Simmons

980 FOREST AVE.

**Maine
Centers For Healthcare
Physical
Therapy**

2 7/8" NUMERALS

2 7/8" U.C.

4 5/8" U.C.

(2) S.F. 2'-9" X 3'-8" X 1" ALUMINUM PANEL SIGNS 9.90¢

B/G: WHITE
GRAPHICS: GERBER H.P. BURGUNDY VINYL

980 Forest Ave.
Existing sign with existing 6' setback

Tremaine Street

*New panels to be
screwed to existing
metal poles*



*Replacing
existing
signage*

NOTES:

APPROVED MANUFACTURING DATE

VOLTAGE:

6/9/04 OPTION A - SURVEY DIMENSIONS

REVISIONS:

Bailey Sign
www.baileysign.com
9 Thomas Drive
Col. Westbrook Executive Park
Westbrook, ME 04092
207-774-2843 / 1-800-539-SIGN
Fax: 774-1193
E-Mail: newsign@baileysign.com
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THIS DESIGN IS THE EXCLUSIVE PROPERTY OF BAILEY SIGN INCORPORATED AND ALL RIGHTS TO ITS USE OR REPRODUCTION ARE RESERVED.
THE ACCURACY OF THIS COLOR RENDERING IS LIMITED BY MEDIA AND OUTPUT DEVICES AND IS INTENDED FOR REPRESENTATIONAL USE ONLY. ACTUAL MANUFACTURING GRAPHIC COLORS ALSO VARY DEPENDING ON PROCESSES & MATERIALS USED. 100% COLOR MATCHES OF SUBMITTED SPECIFICATIONS CAN NOT BE GUARANTEED.
IF AN ELECTRIC SIGN, THEN INSTALLATION MUST BE ACCOMPLISHED IN TOTAL COMPLIANCE WITH ARTICLE 600 OF THE NATIONAL ELECTRIC CODE THE REQUIREMENTS OF UNDERWRITERS LABORATORY, CANADIAN STANDARDS ASSOCIATION AND/OR ANY APPLICABLE LOCAL CODES. THIS INCLUDES PROPER GROUNDING AND BONDING OF THE SIGN.
ALL ELECTRICAL SIGNS REQUIRE ROUTINE MAINTENANCE.

CLIENT

ACCEPTANCE SIGNATURE DATE

CUSTOMER
ME CTR. FOR HEALTHCARE
LOCATION
980 FOREST AVE.
PORTLAND, MAINE

SALESPERSON J.T. DRAWN BY L.W.M.

PS # W.O. # 3521

SCALE 1 1/2" = 1' DATE 5/21/04

DRAWING NO: 05296 R1
SHEET : _

