

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

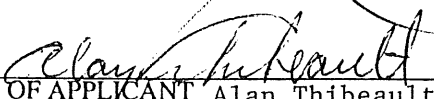
| | | | | | | |
|---|--|---|--|--|--|--|
| Location of Construction: 716 Stevens Ave | | Owner: Westbrook College | | Phone: 797-7261 | | Permit No: 941077 Mary Gresik |
| Owner Address: SAA Ptd, ME 04103 | | Leasee/Buyer's Name: | | Phone: | | |
| Contractor Name: Barlow Signs | | Address: | | Phone: | | Zone: CBL: 145-A-003 |
| Past Use: College | | Proposed Use: College w/signs | | COST OF WORK: \$ FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: | | |
| Proposed Project Description: Erect Signs (2) As per plans | | | | PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/> Signature: Date: | | Zoning Approval: 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"/> 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 Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date: _____ |

1. This permit application doesn't 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..

Send to: Alan Thibeault
Westbrook College
716 Stevens Ave
04103

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 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 provisions of the code(s) applicable to such permit


SIGNATURE OF APPLICANT Alan Thibeault ADDRESS: DATE: 29 Sept 94 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

CEO DISTRICT



Inspection Services
Samuel P. Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

October 5, 1994

RE: 716 Stevens Avenue

Westbrook College
Attn: Alan Thibeault
716 Stevens Ave.
Portland, ME 04103

Dear Sir:

Your application to erect a sign as per plan has been reviewed and a permit is herewith issued subject to the following requirements: This permit does not preclude the applicant from meeting applicable State and Federal laws.

1. Your proposed sign shows a height of 5 feet 7 inches. The City sign ordinance maximum height in the R-5 Zone is 5' 0".

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

S. P. Hoffses
Chief of Inspection Services

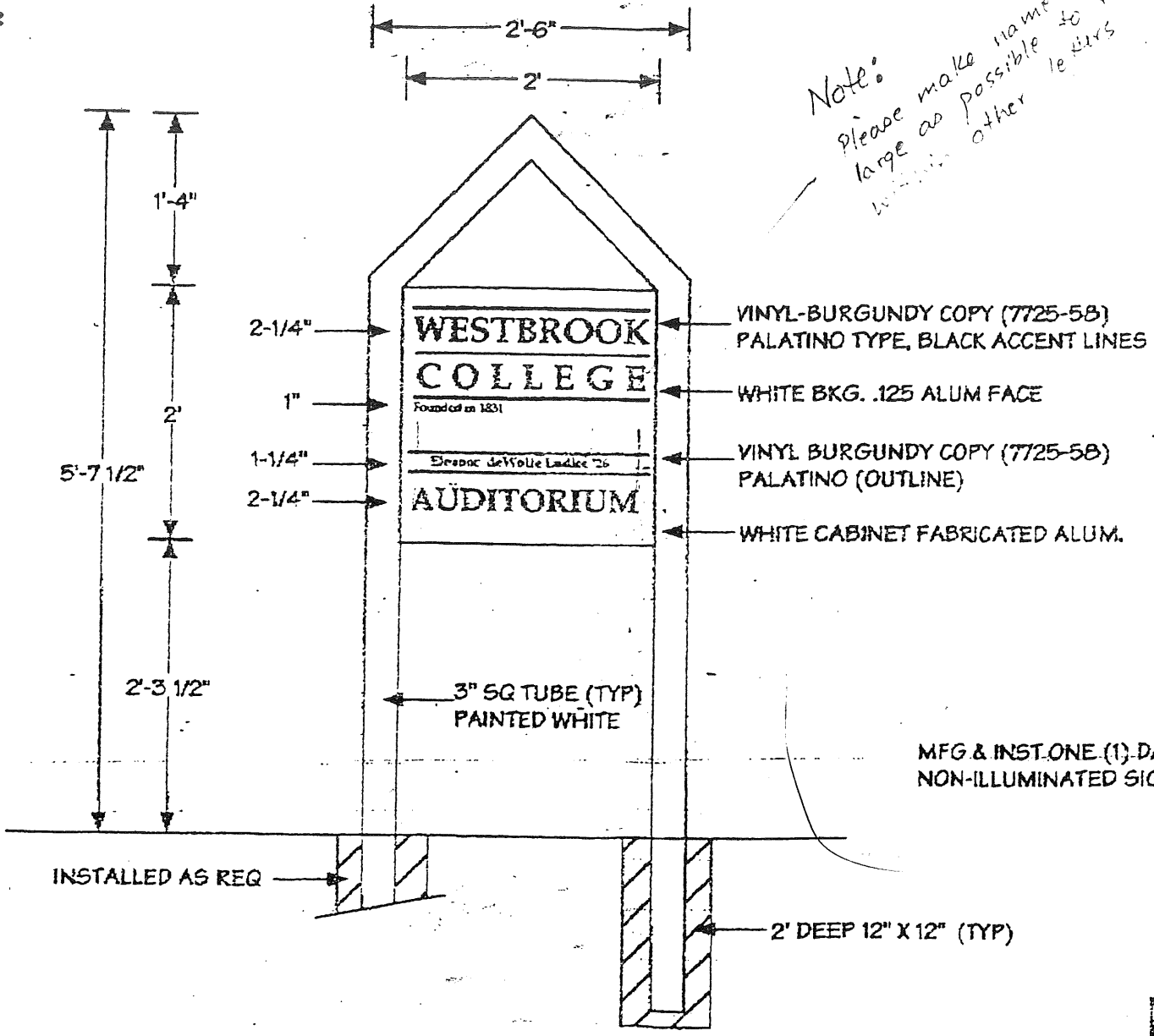
/el

9/26 Ed -
I'll get permits
for the sign. *Ed*

Ed -
Design is OK
Sign is single faced *Ed*

* Replacing a 7.5 ft³
sign, in same
location.

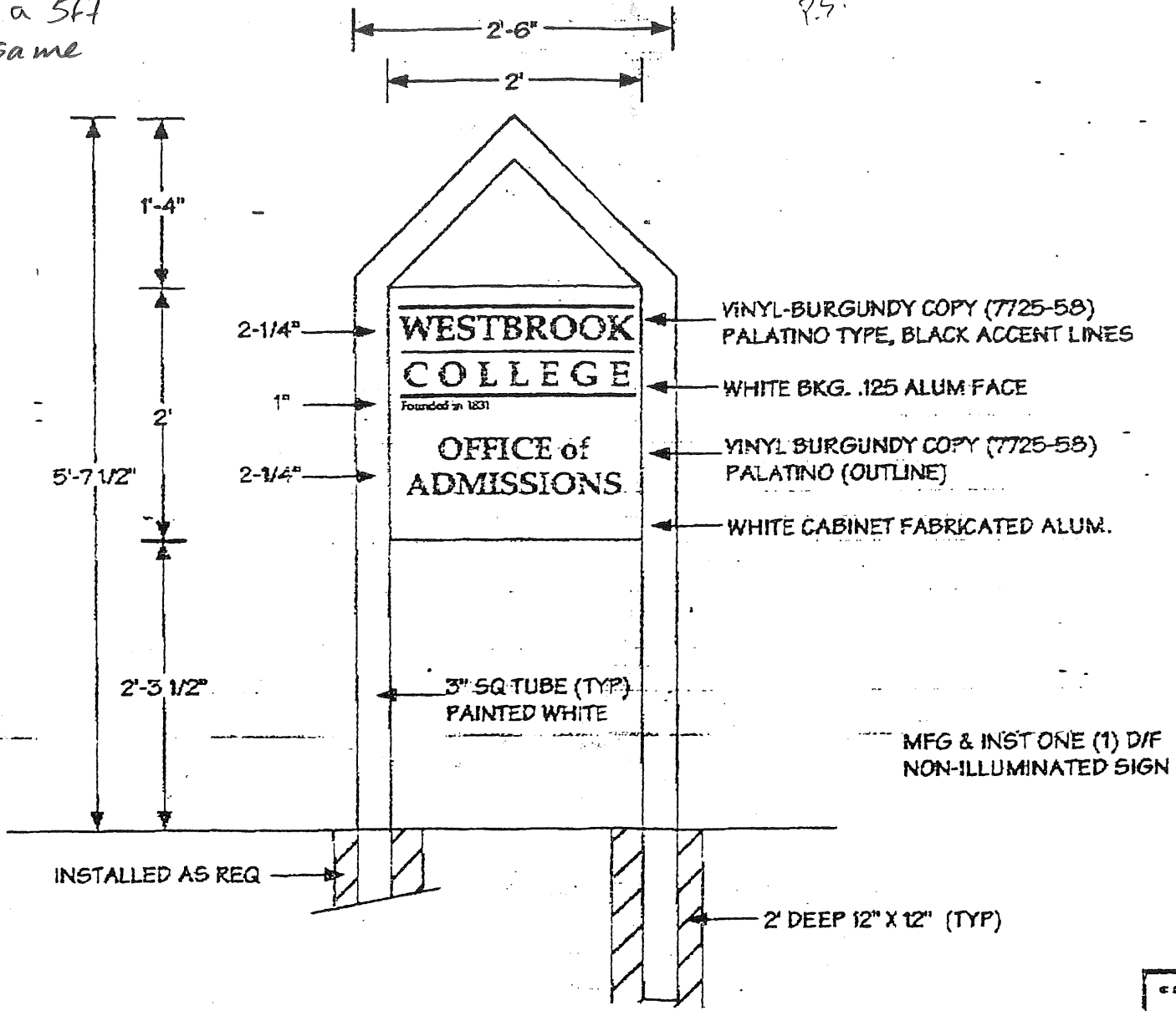
Note:
Please make name as
large as possible to fit
within other letters



7/26/94
Ed -
I'll get permit
for sign.
CMT

Ed -
Design is
O.K.
P.S. Single faced

* Replacing a 5ft³
sign - in same
location



BY
REVISIONS
DATE
NO
DRAWN
CHECKED
NO. 11

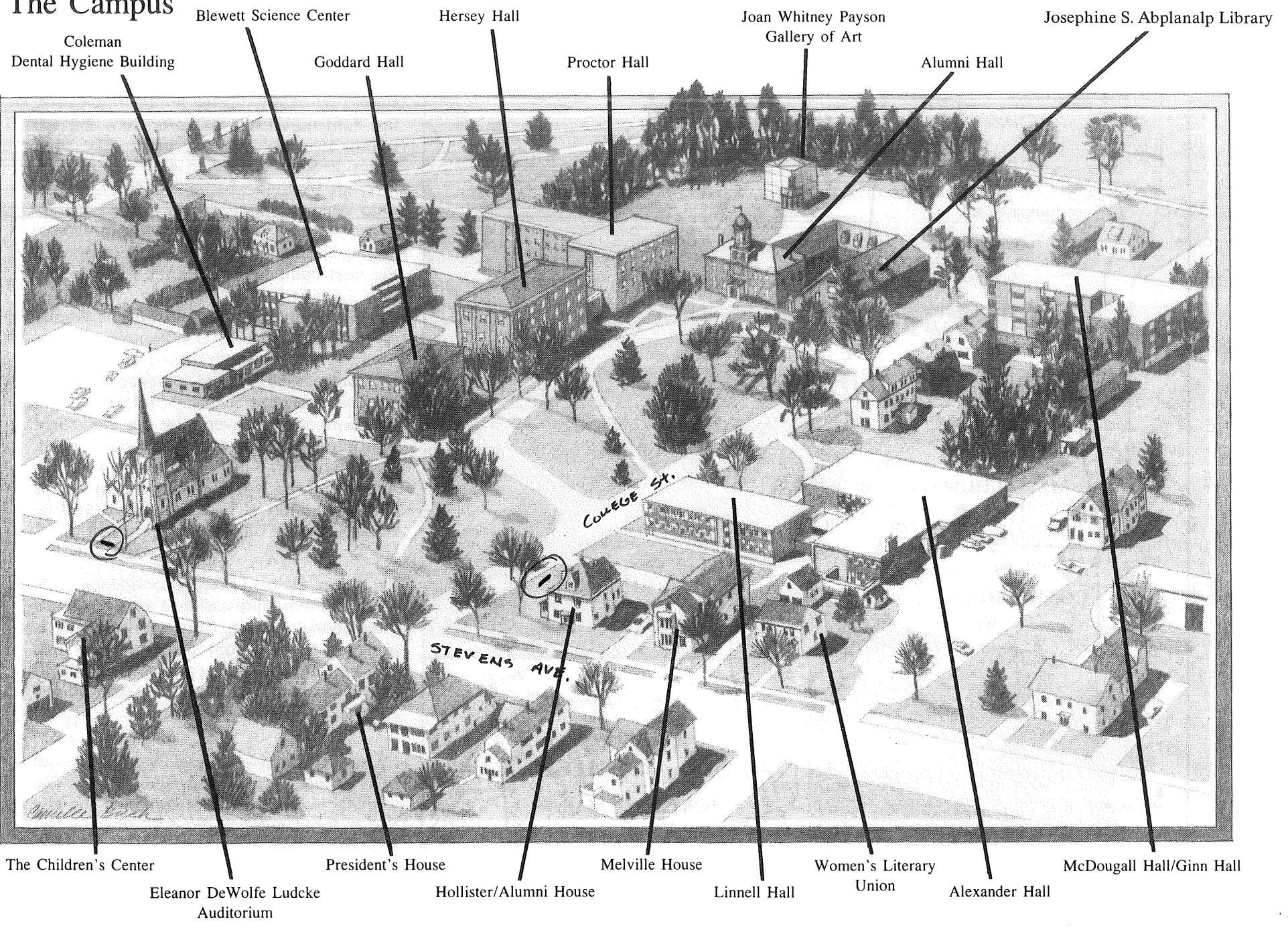
BARLO SIGNS

DATE
SCALE
DRAWN
CHECKED
NO. 11

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WESTBROOK COLLEGE

The Campus



The Children's Center

Eleanor DeWolfe Ludcke Auditorium

President's House

Hollister/Alumni House

Melville House

Linnell Hall

Women's Literary Union

Alexander Hall

McDougall Hall/Ginn Hall

Coleman Dental Hygiene Building

Blewett Science Center

Goddard Hall

Hersey Hall

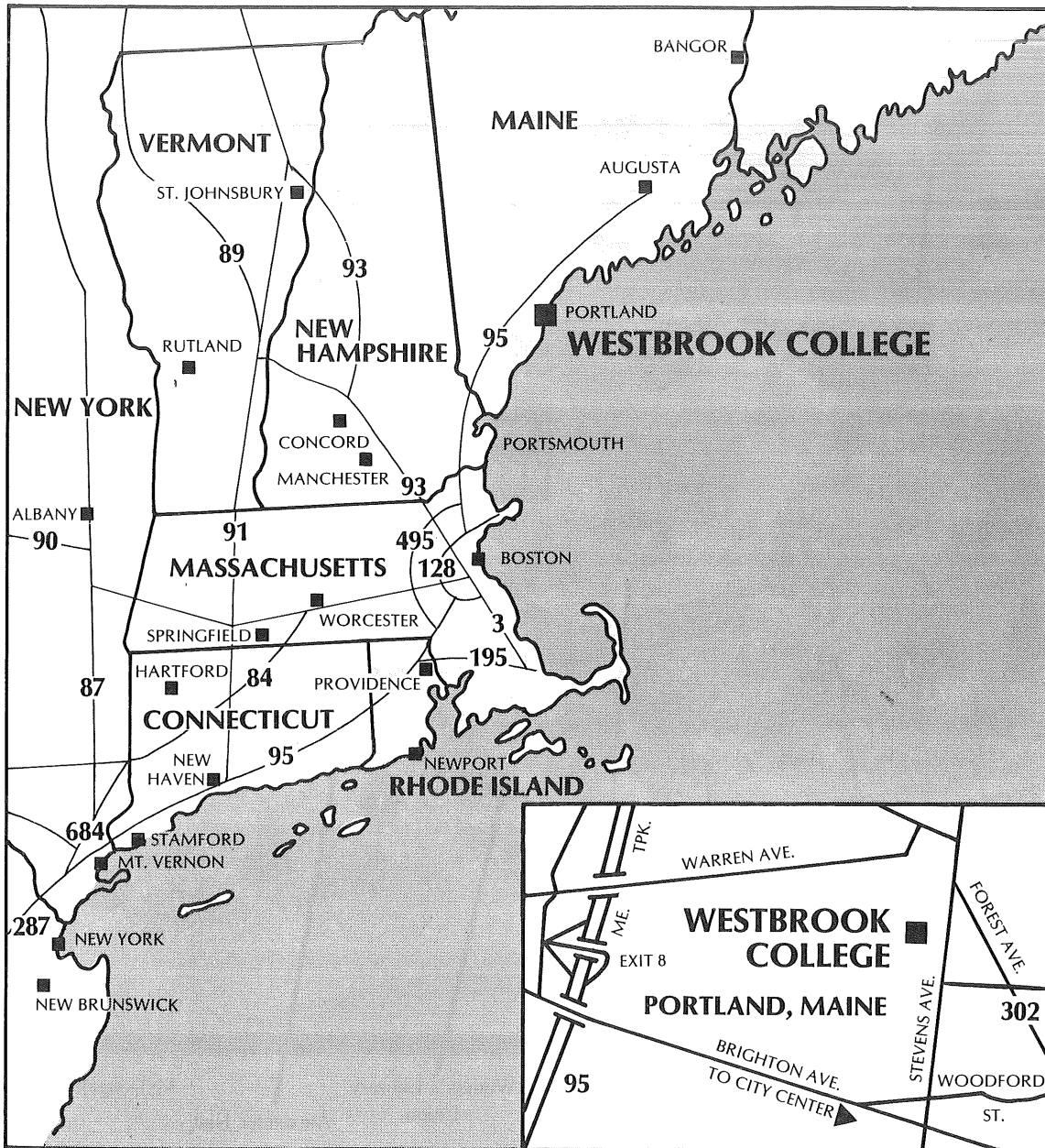
Proctor Hall

Joan Whitney Payson Gallery of Art

Alumni Hall

Josephine S. Abplanalp Library

How to Reach Westbrook College



By Car: Visitors arriving on the throughways should leave the Maine turnpike at Exit 8, the Portland-Westbrook exit. From the toll booth, bear right at the traffic light onto Riverside Street. Continue 4/10 of a mile on Riverside to the next stop light and turn right onto Warren Avenue. Follow Warren Avenue to its end, and turn right onto Forest Avenue. Staying in the righthand lane, proceed through the next traffic light at Morrell's Corner and take the right fork onto Stevens Avenue. The campus is a short distance up Stevens Avenue on the righthand side. U.S. Route 1 travelers from the north or south should leave Route 1 at Congress Street and proceed west for approximately one mile before taking a right turn onto Stevens Avenue at the traffic light opposite the Westgate Shopping Center. The campus is 1.8 miles further down Stevens Avenue on the left. A parking lot for visitors and commuters is located next to Ludcke Auditorium, just off Stevens Avenue.

By plane: Delta, United, Continental, U.S. Air and Eastern Express airlines serve Portland's International Jetport. Convenient service is available to and from Boston, New York, Chicago, and connecting points. The Portland Jetport is about four miles by taxi from the campus.

By bus: Portland is serviced by one interstate bus system, Greyhound Bus Lines. The terminal is located in the center of the city and is about two-and-one-half miles by taxi from the College.

ACORD. INSURANCE BINDER

DATE (MM/DD/YY)
08/15/94

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

| | | | |
|---|---|---|--------------------------|
| PRODUCER BILL JOHNSON INS AGCY INC BOX 3028 217 MAIN ST LEWISTON ME 04240 | PHONE (A/C, No, Ext): 783-8591 | COMPANY ACADIA INSURANCE CO | BINDER # |
| CODE: 1030 | SUB-CODE: | DATE EFFECTIVE 09/01/94 | TIME 12:01 |
| AGENCY CUSTOMER ID: AWESC50-2 | INSURED WESTBROOK COLLEGE STEVENS AVENUE PORTLAND ME 04103 | EXPIRATION DATE 09/01/95 | TIME 12:01 AM NOON |
| | | THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY #: BINDER | |
| | | DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (Including Location) PER STATEMENT OF VALUES | |

| COVERAGES | | LIMITS | | | |
|--|--|--------------------------------------|---|-------------|---------|
| TYPE OF INSURANCE | CAUSES OF LOSS | COVERAGE/FORMS | AMOUNT | DEDUCTIBLE | COINS % |
| <input type="checkbox"/> PROPERTY | <input type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input checked="" type="checkbox"/> SPEC | BLNKT BLDG & CNTS; RC; AGREED AMOUNT | 212,929,046 | 1000 | 90% |
| | | BLANKET EXTRA EXPENSE; 40/80/100 | 300,000 | | |
| | | LOSS OF TUITION FEES | | | 50% |
| | | ORDINANCE OF LAW | 300,000 | | |
| GENERAL LIABILITY | | | GENERAL AGGREGATE | \$2,000,000 | |
| <input checked="" type="checkbox"/> | COMMERCIAL GENERAL LIABILITY | | PRODUCTS - COMP/OP AGG | \$2,000,000 | |
| <input type="checkbox"/> | CLAIMS MADE <input checked="" type="checkbox"/> OCCUR | | PERSONAL & ADV INJURY | \$1,000,000 | |
| <input type="checkbox"/> | OWNER'S & CONTRACTOR'S PROT | | EACH OCCURRENCE | \$1,000,000 | |
| <input checked="" type="checkbox"/> | Employee Benefits Liab. | | FIRE DAMAGE (Any one fire) | \$ 125,000 | |
| | | RETRO DATE FOR CLAIMS MADE: | MED EXP (Any one person) | \$ 5,000 | |
| AUTOMOBILE LIABILITY | | HIRED AUTO PHYSICAL DAMAGE | COMBINED SINGLE LIMIT | \$1,000,000 | |
| <input type="checkbox"/> | ANY AUTO | ACV COMPREHENSIVE DED. | BODILY INJURY (Per person) | \$ | |
| <input type="checkbox"/> | ALL OWNED AUTOS | 250 COLLISION DED. | BODILY INJURY (Per accident) | \$ | |
| <input checked="" type="checkbox"/> | SCHEDULED AUTOS | | PROPERTY DAMAGE | \$ | |
| <input checked="" type="checkbox"/> | HIRED AUTOS | | MEDICAL PAYMENTS | \$ 5,000 | |
| <input checked="" type="checkbox"/> | NON-OWNED AUTOS | | PERSONAL INJURY PROT | \$ | |
| | | | UNINSURED MOTORIST | \$1,000,000 | |
| | | | | \$ | |
| AUTO PHYSICAL DAMAGE DEDUCTIBLE | <input type="checkbox"/> ALL VEHICLES <input checked="" type="checkbox"/> SCHEDULED VEHICLES | | <input checked="" type="checkbox"/> ACTUAL CASH VALUE | \$ | |
| <input checked="" type="checkbox"/> COLLISION: 250 | | | STATED AMOUNT | \$ | |
| <input checked="" type="checkbox"/> OTHER THAN COLL: 100 | | | OTHER | \$ | |
| GARAGE LIABILITY | | | AUTO ONLY - EA ACCIDENT | \$ | |
| <input type="checkbox"/> | ANY AUTO | | OTHER THAN AUTO ONLY: | | |
| | | | EACH ACCIDENT | \$ | |
| | | | AGGREGATE | \$ | |
| EXCESS LIABILITY | | | EACH OCCURRENCE | \$2,000,000 | |
| <input checked="" type="checkbox"/> | UMBRELLA FORM | | AGGREGATE | \$2,000,000 | |
| <input type="checkbox"/> | OTHER THAN UMBRELLA FORM | RETRO DATE FOR CLAIMS MADE: | SELF-INSURED RETENTION | \$ 0 | |
| WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY | | | <input checked="" type="checkbox"/> STATUTORY LIMITS | | |
| | | | EACH ACCIDENT | \$ 500,000 | |
| | | | DISEASE - POLICY LIMIT | \$ 500,000 | |
| | | | DISEASE - EACH EMPLOYEE | \$ 500,000 | |

SPECIAL CONDITIONS/OTHER COVERAGES
 PROFESSIONAL LIAB - \$1,000,000 / \$3,000,000 LIMITS; \$10,000 DED.
 GLASS; SPECIAL FORM; \$NO DED / \$10,550 SIGNS; SPECIAL FORM; \$250 DED / \$21,000 CONT. EQUIP; SPECIAL FORM; \$250 DED. / \$295,509 FINE ARTS; Special Form; \$500 Ded.; ACV; No Coins.; \$10,000 Dish; Special Form; \$1000 Ded.; ACV; 80% Coins./ Computer; Special Form; \$250 Ded.; RC \$400,000 Hardware-\$100,000 Software-\$80,000 Extra Expense / \$100,000 Employee Dishonesty; No Ded / \$12,500 Forgery or Alteration; No Ded / Theft, Disappearance & Destruction; No Ded - \$2,000 In/\$40,000 Outside Premises

NAME & ADDRESS: Form; \$500 Ded.; ACV; No Coins.; \$10,000 Dish; Special Form; \$1000 Ded.; ACV; 80% Coins./ Computer; Special Form; \$250 Ded.; RC \$400,000 Hardware-\$100,000 Software-\$80,000 Extra Expense / \$100,000 Employee Dishonesty; No Ded / \$12,500 Forgery or Alteration; No Ded / Theft, Disappearance & Destruction; No Ded - \$2,000 In/\$40,000 Outside Premises

MORTGAGEE
LOSS PAYEE

ADDITIONAL INSURED

LOAN #

AUTHORIZED REPRESENTATIVE
 SUSAN STULTE
 Susan M. Stulte SS(A)

Professional Liab coverage provided by United Educators