DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND **BUILDING PERMIT**



This is to certify that LCH PROPERTIES INC

Located At 1139 FOREST AVE

Job ID: 2012-09-4953-SIGN

CBL: 146- H-012-001

has permission to to install 6' x 12' face replacement panel in existing sign

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

N/A

9/14/12

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this
 office if you have any questions.
- Permits expire in 6 months. If the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.

Final Inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Director of Planning and Urban Development Jeff Levine

Job ID: 2012-09-4953-SIGN

Located At: 1139 FOREST AVE

CBL: 146- H-012-001

Conditions of Approval:

Zoning

1. The existing sign is legally nonconforming. A pole sign 20'8'' high was approved in 1971 with a 3' x 8' sign under the main sign. A 7' x 12' sign was approved in 1982.

Building

 Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, FAX: (207) 8716

Job No: 2012-09-4953-SIGN	Date Applied: 9/13/2012		CBL: 146- H-012-001				
Location of Construction: 1139 FOREST AVE	Owner Name: LCH PROPERTIES INC		Owner Address: 11 LIGHTHOUSE SACO, ME 04072	Phone: 207-797-7283			
Business Name:	Contractor Name: Sign Design Inc.		Contractor Addr P.O. Box 207 We	Phone: (207) -856-2600			
Lessee/Buyer's Name:	Phone:		Permit Type: SIGN - PERM - Sig	Zone: B-2			
Past Use: Car Wash	Proposed Use: Same – Car Wash – "c	Classy	Cost of Work:			CEO District:	
Cui Wusii	Chassie" - replace 6' in freestanding sign					Inspection: Use Group: Type: Signature:	
Proposed Project Description Install Face replacements for Ca		Pedestrian Activities District (P.A.D.)				9/14/12	
Permit Taken By: Lannie		Zoning Approval					
 This permit application Applicant(s) from meeti Federal Rules. Building Permits do not septic or electrial work. Building permits are voi within six (6) months of False informatin may in permit and stop all work 	Shorelands Wetlands Flood Zo Subdivis Site Plan	one ion _Min _MM wlcood Job IMI JAM	Zoning Appeal Variance Miscellaneous Conditional Use Interpretation Approved Denied Date:	Does not I	t or Landmark Require Review		
nereby certify that I am the owner of e owner to make this application as he e application is issued, I certify that the enforce the provision of the code(s)	is authorized agent and I agree ne code official's authorized re	to conform to	all applicable laws of t	his jurisdiction. In additi	on, if a permit for wor	k described in	

ADDRESS

SIGNATURE OF APPLICANT

DATE

PHONE

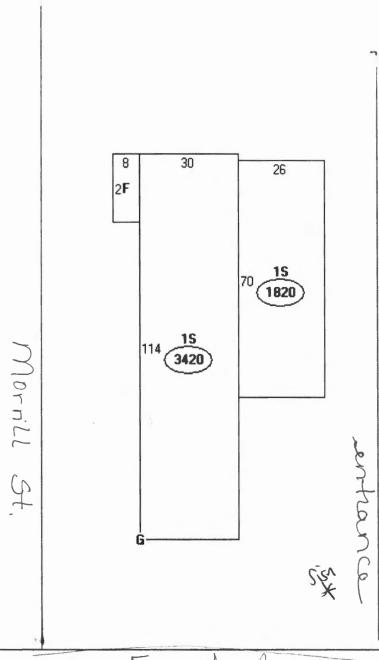
B-2-

181434

3012 - 9-4955 Signage/Awning Permit 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.

1	7.1.7	
Location	Address of Construction:	139 Forest Ave.
Tax Asses Chart# 146	ssor's Chart, Block & Lot Block# Lot# 12 \ Yer's Name (If Applicable)	Owner: CCH Properties Pnc. Telephone: Telephone: Total f. of signage x \$2.00 725cft Per six plus \$30.00/\$65.00 For the plus \$30.00/\$65.00 For the plus \$30.00/\$65.00
ι		P.D. Box 2017 Westbrook, ME 04098 856-2600 Fee: \$ Awning Fee = cost of work Total Fee: \$ 174
Cenant/allo	ocated building space frontag	ready: Roger / Diana phone: 856-2600 ge (feet): Length: 30 Height 14 ' Single Tenant for Multi Tenant Lot
aformation Freestand Bldg. wall	wning? Yes No A Is	No Dimensions proposed: (a X 12 Height from grade:) 1 Sawning backlit? Yes No of awning: Depth:
Is there an If yes, tota formation Freestandir Bldg. wall s Awning?	y communication, message, trad l s.f. of panels w/communicatio on existing and previously pe ng (e.g., pole) sign? Yes	of awning: Depth: Depth: Semark or symbol on it? Yes No Sins, message, trademark or symbol: No Dimensions: No Dimensions: Depth: Dimensions: Dimension
ite sketch etches and	and building sketch showing /or pictures of proposed sign	exactly where existing and new signage is located must be provided. City on age and existing building are also required.
ase subi	mit all of the information lo so may result in the au	outlined in the Sign/Awning Application Checklist. atomatic denial of your permit.
itional info		a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the
orized by the mit for worl	e owner to make this application as a described in this application is issu	his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if ued, I certify that the Code Official's authorized representative shall have the authority to enter all to enforce the provisions of the codes applicable to this pennit.
gnature of	This is not a permi	it; you may not commence ANY work until the permit is issued.
Sm	sletown - strut	



Descriptor/Area

A: 075 3420 sqft

B: ENCLOSED ENTRY 160 sqft

C: CANOPY ROOF/SLAB 1820 sqft

D:1S 3420 sqft

E:1S 1820 sqft

F: ENTRY 160 sqft

G:PA1 15000 sqft

Forest Ave

Assessor's Office | 389 Congress Street | Portland, Maine 04101 | Room 115 | (207) 874-8486

City

Departments

City Council E-Services Calendar

This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

Current Owner Information:

Services **Applications**

Land Use Type

146 H012001

Property Location

RETAIL & PERSONAL SERVICE 1139 FOREST AVE

Owner Information

LCH PROPERTIES INC 11 LIGHTHOUSE LN

Doing Business Book and Page

SACO ME 04072 25522/180

Legal Description Maps

146-H-12-17

FOREST AVE 1135-1143 MORRILL ST 1-15 32483 SF

Tax Relief

Acres Tax Roll

0.7457

Q&A

Current Assessed Valuation:

browse city

browse facts and

TAX ACCT NO.

21578 OWNER OF RECORD AS OF APRIL 2012

LCH PROPERTIES INC

LAND VALUE **BUILDING VALUE** \$414,200,00 \$155,640.00

11 LIGHTHOUSE LN SACO ME 04072

TAX AMOUNT

NET TAXABLE - REAL ESTATE \$569,840.00

Any information concerning tax payments should be directed to the Treasury office at 874-8490 or e-mailed



Best viewed at 800x600, with Internet Explorer

Building Information:

Building 1

Year Built 1961

Style/Structure Type CAR WAHS AUTOMATIC

Units

1 - CLASSIC CHASSIE

Building Num/Name

Square Feet View Sketch

3420

View Map

View Picture



3'X8'
readr board

Exterior/Interior Information:

Building 1

Levels Size

01/01 3420

NONE

Use

CAR WASH - AUTOMATIC

Height Walls

10 CONC. BLOCK

Heating

NONE

Other Features:

Building 1

Structure

ENCLOSED ENTRY

160X1 Size

Building 1

Structure

CANOPY - ROOF/SLAB

1X1820

Outbuildings/Yard Improvements:

Building 1

Year Built Structure

1980

ASPHALT PARKING 15000

Size

Units 1 This design is the property of

Sign Design Inc.

306 Warren Ave. Portland, Maine

Tel. 207.856.2600 Fax 207.856.7600 email: signdesi@maine.rr.com

Revision: 5 Date: 9.12.12 **Client: Classy Chassie** File: classy chassie Per Survey, Lexan Face Replacements With Vinyl Graphics CLASSY CHASSIE 726 72 in Portland's finest full service car wash since 1960

This job proof may reflect color shifts due to the conversion from ink to paint and/or vinyl. PMS colors will be approximated to the best of our ability. Client provided artwork will be used as is and Sign Design Inc. is not responsible for any artwork design faults nor for errors occurring due to improper review of this submitted job proof.

Design By: E.F.C. Comp. 2

I Have Checked The Above Drawing For Layout And Spelling. I Find No Mistakes Or Errors. I Approve This Drawing For Final Completion.

Do Not Proceed - Changes Requested

APPROVAL SIGNATURE

net

Sign Design Inc.

Sign Contractors

P.O. Box 207 Westbrook, ME 04098 (207) 856-2600 * FAX: (207) 856-7600 1-800-949-9037 signdesi@maine.rr.com

A Full Service Sign Company

To Whom It May Concern:

As the owner (or owner representative) of the property located at:

//39 FovesT Ave.

PorT/and, ME 04(03)

I authorize Sign Design Inc. to install signs/sign face replacements as detailed on attached paperwork.

Signature

9/12/12

Date

Leonard C. Hurrell



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/13/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED BEDESENTATIVE OR PRODUCED AND THE CERTIFICATE HOLDER.

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the

PRODUCER Phone: 207-856-5500 Fax: 207-856-0004	CONTACT Joanne Desjardins					
ANDERSON WATKINS ASSOCIATES, INC	PHONE (A/C, No, Ext): 207-856-5500 FAX (A/C, No): 20	7-856-0004				
31 CENTRAL STREET WESTBROOK ME 04092	E-MAIL ADDRESS: jdesjardins@andersonwatkinsinsurance.com					
	INSURER(S) AFFORDING COVERAGE	NAIC#				
	INSURER A : Patriot Insurance Co	32069				
INSURED LCH PROPERTIES	INSURER B :					
DBA CLASSY CHASSIE 1139 FOREST AV	INSURER C :					
	INSURER D:					
PORTLAND ME 04103	INSURER E :					
	INSURER F ;					

COVERAGES

CERTIFICATE NUMBER: 31744

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

R	TYPE OF INSURANCE	ADD'L INSR	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S	
1	GENERAL LIABILITY	X	1115	CCP6058332	09/28/11	09/28/12	EACH OCCURRENCE	\$	1,000,000
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurence)	\$	500,000
	CLAIMS-MADE X OCCUR						MED. EXP (Any one person)	\$	5,000
1							PERSONAL & ADV INJURY	\$	1,000,000
							GENERAL AGGREGATE	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$	1,000,000
	POLICY PRO- JECT LOC							\$	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO						BODILY INJURY (Per person)	\$	
ALL OWNED SCHEDULED AUTOS		ļ	, ,				BODILY INJURY (Per accident)	\$	
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (per accident)	\$	***************************************
	70.00							\$	
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
-	DED RETENTION \$							\$	
-	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU- OTH TORY LIMITS ER	\$	
ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$	
		N/A					E.L. DISEASE-EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE-POLICY LIMIT	\$		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
CERTIFICATE HOLDER ADDED AS ADDITIONAL INSURED ONLY AS THEIR INTERESTS MAY APPEAR.

SIGN IN FRONT OF PREMISES

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
AUTHORIZED REPRESENTATIVE				
Joanne R. Desjardins				