

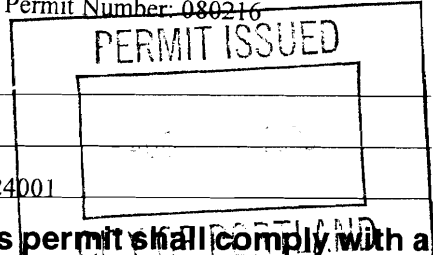
# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING INSPECTION

### PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number: 080216



This is to certify that EWT 17 LLC /Sign Design  
has permission to Install sign "Maine Staffing Group" using existing frame  
AT 1011 FOREST AVE L 147 A024001

provided that the person or persons who accept 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 when permission is procured before this building or part thereof is occupied or services closed-in. 4 HOUR NOTICE 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

*Thomas M. Manley* 3/13/08  
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: 08-0216	Issue Date:	CBL: 147 A024001
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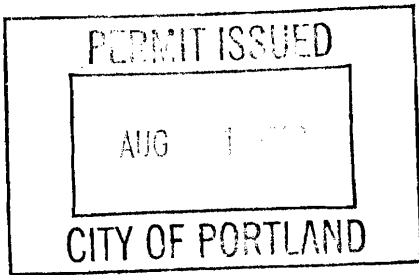
Location of Construction: 1011 FOREST AVE	Owner Name: EWT 17 LLC	Owner Address: 1011 FOREST AVE	Phone:
Business Name:	Contractor Name: Sign Design Inc	Contractor Address: PO Box 207 Westbrook	Phone 2078562600
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-2

Past Use: Commercial - <i>store</i>	Proposed Use: Commercial- Install sign	Permit Fee: \$70.00	Cost of Work: \$0.00	CEO District: 4
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>Commercial</i> Type: <i>SP</i>  <i>JBC 2003</i>	

Proposed Project Description: Install sign "Maine Staffing Group" using pre-existing frame	Signature:	Signature: <i>DM</i> 3/13/08
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: Imd	Date Applied For: 03/07/2008	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<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"/> <i>OK</i> Date: <i>3/12/08</i> <i>ABM</i>	<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: <i>ABM</i>
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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

<b>Permit No:</b> 08-0216	<b>Date Applied For:</b> 03/07/2008	<b>CBL:</b> 147 A024001
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<b>Location of Construction:</b> 1011 FOREST AVE	<b>Owner Name:</b> EWT 17 LLC	<b>Owner Address:</b> 1011 FOREST AVE	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Sign Design Inc	<b>Contractor Address:</b> PO Box 207 Westbrook	<b>Phone</b> (207) 856-2600
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	

<b>Proposed Use:</b> Commercial- Install sign	<b>Proposed Project Description:</b> Install sign "Maine Staffing Group" using pre-existing frame
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<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 03/12/2008
<b>Note:</b> Original permit for sign was for Lowry & Associates #96-0650 (UL # AX-987593) Total area of face is 6' x 10'. Refacing 120" x 223/4" (bottom third) of the existing sign. Permit 05-1776 was change of use to office. <b>Ok to Issue:</b> <input checked="" type="checkbox"/>			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tom Markley	<b>Approval Date:</b> 03/13/2008
<b>Note:</b> <b>Ok to Issue:</b> <input checked="" type="checkbox"/>			
1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.			
2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.			

<b>Comments:</b>
3/10/2008-amachado: Left message for Nate Burns. Need to know how long Maine Staffing Group has been ther. What was the previous use? Where are they located on the lot?
3/12/2008-amachado: Spoke to Nathan Burns. Maine Staffing Group is located in the single unit building to the right near the street.



# Signage/Awning Permit Application

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

Location/Address of Construction: 1011 Forest Ave. (1001)		
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# 147          A              24	Owner: Sweetser	Telephone:
Lessee/Buyer's Name (If Applicable) Maine Staffing Group 797-7705 (1001 Forest Ave) Nate Burns	Contractor name, address & telephone: Sign Design, Inc. P.O. Box 200 Westbrook, ME 04092 856-2600	Total s.f. of signage ≤ \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: Diana/Roger phone: 856-2600		
Tenant/allocated building space frontage (feet): Length: _____ Height: _____ Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot <u>multi-tenant</u>		
Current Specific use: <u>office</u> If vacant, what was prior use: <u>day care - #05-1076 change of use to office.</u> Proposed Use: _____		
Information on proposed sign(s): <u>face replacements</u> Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: _____ Height from grade: <u>189"</u> Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions proposed: _____		
Proposed 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 w/communications, message, trademark or symbol: _____ s.f.		
Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes _____ No _____ Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions: _____ Awning? Yes _____ No _____ Sq. ft. area of awning w/communication: _____		
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 and existing building are also required.		

15.71

MAR 7 2008

Please submit all of the information outlined in the Sign/Awning Application Checklist. Failure to do so may result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), stop by the Building Inspections office, room 315 City Hall or call 874-8703.

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: Diana Olnstead Date: 2/27/08

This is not a permit; you may not commence ANY work until the permit is issued.

3146  
 frontage 120'  
 120' max  
 18' high max  
 5' w.  
 -- whole panel 60'  
 -- height 15.75'  
 replacement 18.96'

This Design Is The Property Of

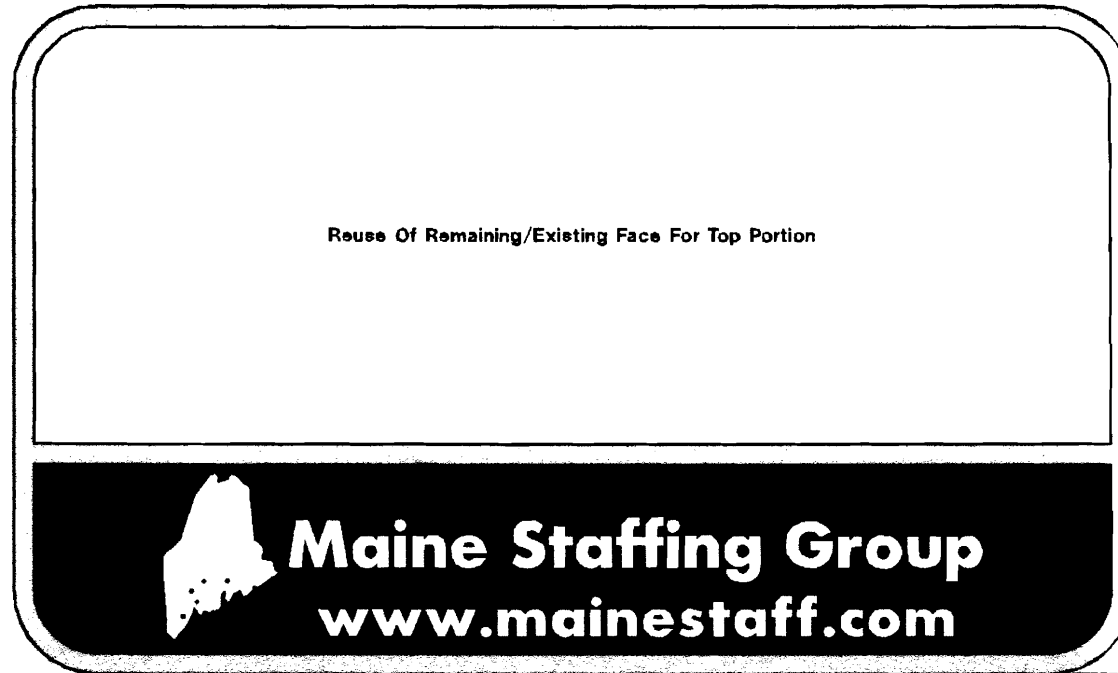
**Sign Design Inc.**

**306 Warren Ave. Portland, ME**

**Phone: 207-856-2600 Fax: 207-856-7600**

Existing Cabinet Appx. 72" X 120"  
4' x 10'

Addition Of 2" H Divider & New Lexan Faces (Bottom Portion Only) To Existing Double Sided Sign  
(All Dimensions & Sign/H Divider Colors To Be Determined)



22.75 x 120 = 2730 \$  
= 18,91 \$

18" X 88" Overall Graphic Area, Appx. 5 1/2" Text W/ 18" x 12" State  
230 Green Vinyl Background W/ White Text & 220 Black Vinyl Accents

This proof may reflect color shifts due to the color conversion from ink to paint and or vinyl. Also, PMS colors will be approximated to the best of our ability.

Customer supplied artwork files (300 dpi required) will be used as is, and Sign Design Inc. is not responsible for any faults in the design.

Any black outlines appearing on this proof are for representation only. They are to distinguish sign components such as borders, retainers, faces and reveals. Unless otherwise specified, they are not considered as part of the sign graphics.

**Client: Maine Staffing rev. 1**  
**File: maine staffing comp. 2**  
**Date: 1-29-08**

**Approval:**

Customer approval is a signed confirmation that dimensions, colors, spelling, graphics and all other job specifics are correct.

Protea bldg - Forest Ave # 1011

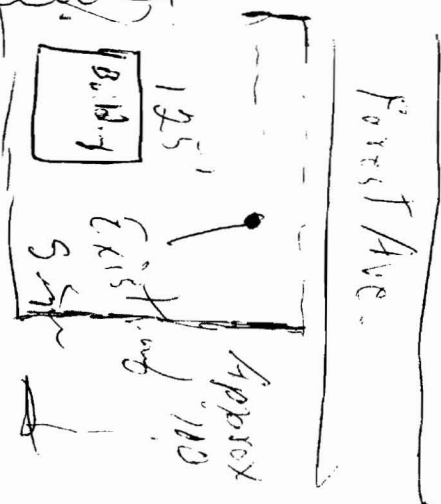


\* need set back 2 160"

133'

grade to top 189"

\* Inserts into existing retainer system  
it is screwed in \*





Sign Contractors

P.O. Box 207  
Westbrook, ME 04096  
(207) 850-8800 • FAX: (207) 850-7800  
1-800-949-9037  
signdes@maine.ny.com  
A Full Service Sign Company

RE:

To Whom It May Concern:

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

1001 FOREST AVENUE  
PORTLAND, ME

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

*Myles Tarbell*  
Signature

2/12/08  
Date

Myles Tarbell  
Print Name Keystone Management

Feb. 12. 2008 12:07PM Ho'den Agency Insurance

No. 8450 P. 1/2


<b>ACORD</b> <small>TM</small> <b>CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) 02/12/2008
PRODUCER Phone (207) 775-3700 Fax (207) 775-3381 <b>HOLDEN AGENCY INSURANCE</b> PO BOX 10610 1085 BRIGHTON AVE PORTLAND ME 04104		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.
Agency Lic# AGR 1995 INSURED <b>PROJECT STAFFING INC</b> PO BOX 490 BRUNSWICK ME 04011		INSURERS AFFORDING COVERAGE NAIC #
		INSURER A: <b>HANOVER INSURANCE COMPANY</b> INSURER B: <b>MAINE EMPLOYERS MUTUAL INS. CO</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/ LTR) (B) (A) (D)	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 GENL AGGREGATE LIMIT APPLIES PER POLICY <input type="checkbox"/> PRO <input type="checkbox"/> SEC <input type="checkbox"/> LOC	ODP6993824	04/08/07	04/08/08	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS-COMP/DP ASS \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	ODP6993824	04/08/07	04/08/08	COMBINED SINGLE LIMIT (EA accident) \$ 1,000,000 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 ACC \$ AUTO ONLY AGG \$
	EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	1810068191	04/08/07	04/08/08	<input checked="" type="checkbox"/> WC RTA/TU <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE-EA EMPLOYEE \$ 100,000 E.L. DISEASE-POLICY LIMIT \$ 500,000
	OTHER:				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS**  
 RE: SIGN AT 1011 FOREST AVE., PORTLAND, ME. THE CITY OF PORTLAND IS NAMED AS ADDITIONAL INSURES AS RESPECTS TO LIABILITY FOR INSURED'S SIGN, AS REQUIRED FOR OPERATIONS

<b>CERTIFICATE HOLDER</b>	<b>CANCELLATION</b>
CITY OF PORTLAND 389 CONGRESS ST PORTLAND ME 04104  Attention:	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  THOMAS W. HOLDEN



**BUILDING PERMIT INSPECTION PROCEDURES**

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

**to schedule your inspections as agreed upon**

**Permits expire in 6 months, if the project is not started or ceases for 6 months.**

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

**By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.**

**A Pre-construction Meeting will take place upon receipt of your building permit.**

  X   **Final inspection required at completion of work.**

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

**If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

\_\_\_\_\_  
Signature of Applicant/Designee

*Thomas M. Marley*  
\_\_\_\_\_  
Signature of Inspections Official

\_\_\_\_\_  
Date

*3/13/08*  
\_\_\_\_\_  
Date