Form # P 04

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY	UF	PU	RIL	AND

Please Read Application And

**MCDECTION** 

Notes, If Any, Attached		PER	VI		mit N	Vumber: 061523 PERMIT ISSUED	
This is to certify that	MINERVINO SAMUEL T	rthern Sign/ Mark	Atwood				
nas permission to	5'x 5' replacement sign usin	cisting h ware				NOV 2 2 2006	_
AT 1160 FOREST A	AVE			_ 152 A0080	01		
provided that	the person or persons	rm or	tion a	epting this	per	Mit sha I Pont ply With	ı all

ine and or the e of buildings and

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and this department.

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

ificatio f inspe on mus on proc n and v en perm rt there bre this lding or ed or osed-in EQUIRED. UR NO

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

11/03/0%

nances of the City of Portland regulating

uctures, and of the application on file in

OTHER REQUIRED APPROVALS

Fire Dept. Health Dept. Appeal Board Other

Department Name

PENALTY FOR REMOVING THIS CARD

ector Building & Inspect

City of Portland, Ma	ine - Building or Use	Permit Applicat	tion Per	rmit No:	Issue Date:		CBL:	
389 Congress Street, 04	101 Tel: (207) 874-870	3, Fax: (207) 874-8	3716	06-1523			152 AC	008001
Location of Construction:	Owner Name:		Owne	Owner Address:			Phone:	
1160 FOREST AVE	O SAMUEL T	31 R	OSEMONT	AVE				
Business Name: Contractor Name Northern Sign.		ne:	Contr	actor Address	::		Phone	
		n/ Mark Atwood	P.O.	P.O. Box 1475 Waterville			2074652399	
Lessee/Buyer's Name	Phone:		Permi	t Type:				Zone:
			Sign	ns - Permano	ent			B2
Past Use:	Proposed Use:		Perm	it Fee:	Cost of Work:	CE	O District:	<del>'</del>
Commercial	I -	5'x 5' replacement sign				.00	4	
using existing		•		A   Approved			ISPECTION: Ise Group: Type: 5/9  THE 2003	
<b>Proposed Project Description:</b>		At n	0				21	
5'x 5' replacement sign us	ing existing hardware "S	MYDIS					ignature:	
			PEDE	STRIAN ACT	TIVITIES DISTR	RICT (P.A.	D.) Y	
			Actio		oved Appro	oved w/Con		Denied
		·	Signa			Da	te:	
Permit Taken By:	Date Applied For:			Zoning Approval				
dmartin	10/17/2006	Special Zone or R	eviews	Zor	ning Appeal		Historic Pres	 servation
	on does not preclude the		cricus				1 .	
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Variance			Not in District or Landman	
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous			Does Not Require Review	
	void if work is not started of the date of issuance.	☐ Flood Zone ☐ Subdivision		Conditional Use			Requires Review	
False information ma permit and stop all w	y invalidate a building ork			☐ Interpretation			Approved	
		Site Plan		Appro	ved		Approved w	/Conditions
and the state of t	Company of the Compan	Maj Minor	мм	Denied	1		Denied	
PERMIT		JOK -					I Dom.	
And the state of t		Date: 10/3/101 ABN		BV Date:		Date:	Date:	
CITY OF PO	RAMO		TION			·		
I hereby certify that I am the I have been authorized by jurisdiction. In addition, it shall have the authority to such permit.	he owner to make this app a permit for work describe	lication as his author ed in the application	at the prop ized agen is issued,	t and I agree I certify tha	e to conform to t the code offic	all appli al's auth	cable laws orized rep	of this resentative
SIGNATURE OF APPLICANT		ADDF	RESS		DATE		РНС	ONE
RESPONSIBLE PERSON IN C	HARGE OF WORK TITLE				DATE	_		)NE

City of Portl	and, Maine - Bı	uilding or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716				06-1523	10/17/2006	152 A008001
Location of Consti	ruction:	Owner Name:	Owner Address: Phone:			
1160 FOREST	AVE	MINERVINO SAMUEI	T	31 ROSEMONT AVE		
Business Name:		Contractor Name:	-	Contractor Address:	Phone	
		Northern Sign/ Mark Atv	wood	P.O. Box 1475 W	(207) 465-2399	
Lessee/Buyer's Na	me	Phone:	1	Permit Type:		
				Signs - Permanen	t	
Proposed Use:	<del></del>		Propose	d Project Description	<u></u>	<del></del>
Dept: Zonin	g Status:	Approved	Reviewer:	Ann Machado	Approval I	Date: 10/31/2006 Ok to Issue: ✓
Dept: Buildi Note:  1) Separate pe		Approved with Conditions or any electrical, plumbing, o		Tammy Munson	Approval I	Oate: 11/03/2006 Ok to Issue: ✓
		submitted for approval as a p				
2) Signage Ins	tallation to comply	with Chapter 31 of the IBC 2	2003 building o	ode.		

## 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.

		<u> </u>			
Location/Address of Construction:	Forest Ave Portlan	nd ME	04163		
Tax Assessor's Chart, Block & Lot	Owner: SAM HINERU	100	Telephone:		
Chart# Block# Lot#	153 Rosement		797 6924 Bus		
152 A 8	Poitland ME		934-4873 0410		
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephor	ne: Total s.f.	of signage x \$2.00		
Katherna la Casse	Northern Signs		olus \$30.00/\$65.00 o. signage= Total		
39 W Organd Ave	PO BON 1475				
DOB INF CHOLY	Waterville ME cys	363 Awning	g Fee= cost of work		
00 15 16 (L 17/00)	465-5560	Total F	Fee: \$ 80		
Who should we contact when the permit is ready	Katherine la Casse phon				
Tenant/allocated building space frontage (fe Lot Frontage (feet) 27	Single Tenant or Multi Tenant Lot	Singl			
Current Specific use: Restaurant  If vacant, what was prior use:  Proposed Use: Restaurant			/ok		
Information on proposed sign(s):  Freestanding (e.g., pole) sign? Yes No Dimensions proposed:  Bldg. wall sign? (attached to bldg) Yes No Dimensions proposed:  Dimensions proposed: Height from grade: Dimensions proposed: To					
Proposed awning? Yes No Is awning backlit? Yes No Depth: 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.					
Please submit all of the information of	utlined in the Sign/Awning A	pplication C	Checklist.		
Failure to do so may result in the auto		• •			
In order to be sure the City fully understands the additional information prior to the issuance of a puilding Inspections office, room 315 City Hall o	permit. For further information visit us				
I hereby certify that I am the Owner of record of the nauthorized by the owner to make this application as his a permit for work described in this application is issued areas covered by this permit at any reasonable hour to experiment of the control of the nauthorized by the owner of the nauthorized product of the na	/her authorized agent. I agree to conform, I certify that the Code Official's authorize	to all applicable la ed representative s	aws of this jurisdiction. In addition, if shall have the authority to enter all		
			dolar		
Signature of applicant:	Cen	Date: /C	<i>ع</i> ٥/٤/١		

# SAMUEL'S Bar Crille

"Where you're a Stranger only Once"

Samuel Minervino 31 Rosemont Ave Portland ME 04103

September 12, 2006

KTDJL Inc., currently leases my building located at 1160 Forest Avenue in Portland. They operate under the business name of Samuel's Bar & Grille.

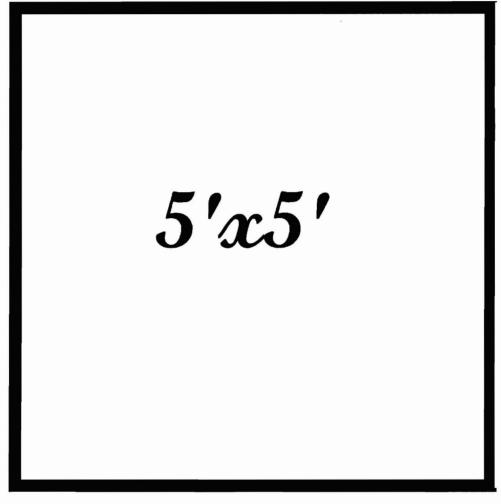
I grant permission for them to erect a sign on the building advertising their business.

Sincerely,

Samuel Minervino



P.O. BOX 1475 WATERVILLE, MAINE 04903



5'x5' DOUBLE FACE ILLUMINATED
11/2"x12/2" DOUBLE ALUMINUM ANGLE FRAME
.040 ALUMINUM CABINETS
LEXAN FACES
HIGH OUTPUT BALLAST AND LAMPS
UL LISTED(WILL PROVIDE UL # WHEN PERMIT IS ISSUED)
FINAL ELECTRICAL BY OTHERS
2"x2"x3/16" STEEL ANGLE BOLTED TO SIGN
BOLTED TO EXISTING 2"x2"x1/4" STEEL ANGLE ON BUILDING
2-TOP MOUNTED 1/4" GIUDE WIRES ATTACHED TO BUILDING

15KTDJL

	Clien	#: 136 <u>417</u>			15K	TDJL		
	ACORD. CERTIFI	CATE OF L	IABI	LITY	INSURA	NCE	DATE (MM/DD/YYY) 09/13/06	
Cro P. (	cuces bas Insurance -CL/Bnds-P D. Box 567 Itland, ME 04112			ONLY AN	ID CONFERS NO I	JED AS A MATTER OF INI RIGHTS UPON THE CERT TE DOES NOT AMEND, E FFORDED BY THE POLIC	IFICATE XTENU OR	
	286-5352		Ì	INSURERS	AFFORDING COV	/FRAGE	NAIC#	
NSU	RED				Hanover Insuran		22292	
	KTDJLInc.		ĺ	INSURER B: Maine Employers Mutual Insurance Co. 111				
	39 West Grand Avenue	04054		INSURER C				
	Old Orchard Beach, ME	04004	)	INSURER D:				
	VÉRAGES		·	INSURER E			<u></u>	
Th AM M	TO FOLICIES OF INSURANCE LISTED BELC MY REQUIREMENT, TERM OR CONDITION BY PERTAIN, THE INSURANCE AFFORDED DLIGIES, AGGREGATE LIMITS SHOWN MA	OF ANY CONTRACT OR OTHE BY THE POLICIES DESCRIBE	ER DOCUM ED HEREIN PAID CLAIM	ENT WITH RE IS SUBJECT S.	SPECT TO WHICH T TO ALL THE TERMS,	HIS CERTIFICATE MAY BE ISS EXCLUSIONS AND CONDITIO	VED OR	
NSR	NSRD TYPE OF INSURANCE	FOLICY NUMBER			F PRINCE BREAK	N WAT		
A	GÉNERAL LIABILITY	ZDP818701001	11	/21/05	11/21/06	DAMAGE TO PENTER	\$1,000,000	
	X COMMERCIAL GENERAL LIABILITY CLAINS MADE X OCCUR					PREMISES (Exercisions)	\$100,000	
	CLAINS MADE X OCCUR	1	1			MED EXP (Any one person) PERSONAL & ADV INJURY	\$5,000 \$1,000,000	
			1			CENERAL AGGREGATE	\$2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER		İ			PRODUCTS - COMP/OP AGG	\$2,000,000	
	POLICY JECT LOC							
	AUTOMOBLE LIABILITY					COMBINED SINGLE LIMIT (Ex secidant)	5	
	ALL OWNED AUTOS SCHEDULED AUTOS		Ì			DODILY INJURY (Per person)	\$	
	MRED AUTOS NON-OWNED AUTOS					BODILY INJURY (Per accident)	\$	
						PROPERTY DAMAGE (For accident)	\$	
	GARAGE LIABILITY		1			AUTO ONLY - EA ACCIDENT	s	
	ANY AUTO					OTHER THAN EA ACC	\$	
		<del> </del>			<del></del> -	AGG	3	
	OCCUR CLAIMS MADE					EACH DOCURRENCE	3	
	CECON CECONS MADE		1			NOONEGRIE	5	
	5€0U¢TI <b>8</b> LE		}				s	
	RETENTION 3						S	
В	WORKERS COMPENSATION AND	1810079477	11	/01/05	11/01/06	WOSTATU- CTH-		
	EMPLOYERS' LIABILITY  ANY PROPRIETOR-PARYNER/EXECUTIVE		1		1	E.L. EACH ACCIDENT	<b>\$100,000</b>	
i	OFFICER/MEMBER EXCLUDED?					E.L. DISEASE . SA EMPLOYEE		
$\dashv$	If yes, describe under SPECIAL PROVISIONS bolow OTHER	<del> </del>				E.L. DISEASE - POLICY CIMIT	s500,000	
ļ	- CINEA							
ESC	RPTION OF CHERATIONS / LOCATIONS / VEHIC	LES / EXCLUSIONS ADDED BY E	NDORSEMEN	T/SPECIAL PI	TOVISIONS			
					<del></del>			
ER	TIFICATE HOLDER			CANCELLA				
City of Portland 389 Congress Street		,	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED REFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL SIDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE CEFT, BUT FAILURE TO DO SO SHALL					
	Portland, ME 04103			IMPOSE NO OBLIGATION OR LIADILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR				
				REPRESENTATIVES, AUTHORIZED REPRESENTATIVE				
			[	V.	P.+.			

# STEVEN'S AVE

2-21'3" ->

7 5 0 v C-3'8'-)

Perfect

Fit

2'6"

T

Curb FOREST AVE

Building ht 161

Samuel's Part Grille 1160 Forest Ave Portland ME 0:1103 SX5

Sign to be mounted approx. 15 feet high, using existing Set up from old sign, Sign is above door facing Forest Are.

Samuel's Bara Grille 1160 Forest Are Portland 1-1E 04113

# BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 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.

below.	cedure is not followed as stated
A Pre-construction Meeting will take place upon	receipt of your building permit.
Footing/Building Location Inspection:	Prior to pouring concrete
Re-Bar Schedule Inspection:	Prior to pouring concrete
Foundation Inspection:	Prior to placing ANY backfill
Framing/Rough Plumbing/Electrical:	Prior to any insulating or drywalling
use. N	o any occupancy of the structure or There is a \$75.00 fee per tion at this point.
Certificate of Occupancy is not required for certain you if your project requires a Certificate of Occupant in spection  If any of the inspections do not occur, the phase, REGARDLESS OF THE NOTICE OR C	e project cannot go on to the next
CERIFICATE OF OCCUPANICES MU BEFORE THE SPACE MAY BE OCCUPIED	
Signature of Applicant/Designee  Sonna Narim Hamin  Signature of Inspections Official	Date
CBL: <u>152 A 008</u> Building Permit #: <u>06</u>	1523