

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 031368

PERMIT DENIED

This is to certify that Center For Community Dentistry Dayview Way Way

has permission to Erect 3 signs, total of 34 sq. ft.

AT 813 Washington Ave

163 B002001

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 on permit must be completed before this building or part thereof is occupied or enclosed-in. **HEAVY 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

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

12/19/03

Talked to Jon A

he will get me
plans/picture of the
sign on the Bulding

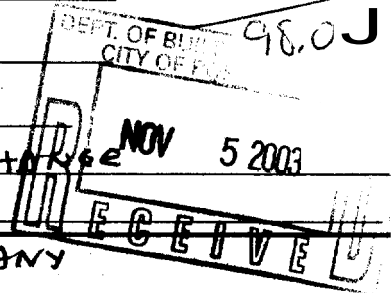
NO MORE INFO
RECEIVED

08 1368

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.

Location/Address of Construction ^{SIGNS} : 813 WASHINGTON AVENUE	
Total Square Footage of Proposed ^{EXISTING} Structure 3,000	Square Footage of Lot 8,250 \$ (estimate)
Block & Lot # 3	Telephone: 874-1025
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: COMMUNITY DENTAL 813 WASHINGTON AVE PORTLAND, ME 04103
	Total s.f. of signage x \$1.00 per s.f. plus \$30.00 = Total Fee: \$98.00 Awning Fee = Cost Of Work: \$ Total Fee: \$98.00
Current use: NON-PROFIT DENTAL	
If the location is currently vacant, what was prior use: _____	
Approximately how long has it been vacant: _____	
Proposed use: _____	
Project description: NEW SIGNS TO REFLECT NAME CHANGE	
Contractor's name, address & telephone: BAVVIEW SIGN COMPANY	
Who should we contact when the permit is ready: JOHN EPPICH, EXEC. DIRECTOR	
Mailing address: 813 WASHINGTON AVE PORTLAND, ME 04103	
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: _____	



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: 	Date: 11-5-03
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This is NOT a permit, you may not commence ANY work until the permit is issued.

CHECKLIST FOR SIGN/AWNING APPLICATION

Applicants for a sign or awning permit are required to submit the following information to the Code Enforcement Office at the time of application:

- Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way. Amount must equal \$400,000.00.
- Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
- A sketch plan of lot, indicating location of buildings, driveways, and any abutting streets or rights of way, lengths of building frontages, street frontages, and all existing setbacks. Indicate on the plan all existing and proposed signs with their dimensions and specific locations.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, and construction method, as well as specifics of installation/attachment.
- Certificate of Flammability required for awning or canopy at time of application.
- UL# required for lighted signs at the time of Final Inspection. Failure to provide this information will invalidate the Sign Permit.
- Pre-Application Questionnaire completed and attached. ~~Photos~~ of existing signage attached.

**Permit Fee for signage or awning-with-signage:
\$30.00 plus \$1.00 per square foot of sign.**

**Permit Fee for awning-without-signage is based on cost of work:
\$30.00 for the first \$1,000.00, plus \$7.00 for each additional \$1,000.000.**

PRODUCER
Morse, Payson & Noyes
 P.O. Box 406
 Portland ME 04112-0406
 Phone: 207-775-6000 Fax: 207-775-0339

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.

INSURERS AFFORDING COVERAGE

INSURED
Community Dental
 813 Washington Avenue
 Portland, ME 04103

INSURER A: **ZURICH**
 INSURER 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	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	041326308	10/01/03	10/01/04	EACH OCCURRENCE	\$ 1,000,000
					FIRE DAMAGE (Any one fire)	\$ 1,000,000
					MED EXP (Any one person)	\$ 10,000.
					PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 2,000,000
					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO				BODILY INJURY (Per person)	\$
	ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	HIRED AUTOS					
	NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	ANY AUTO				ACC	
					AUTO ONLY: AGG	\$
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input type="checkbox"/> RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY				WC STATUTORY LIMITS	OTHER
					E.L. EACH ACCIDENT	\$
					E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
	OTHER					

813 Washington Avenue, Portland, ME 04103 for liability arising out of insured's sign at that location.

CERTIFICATE HOLDER **ADDITIONAL INSURED: INSURER LETTER:** _____
City of Portland
Attn: Elizabeth Boynton
389 Congress Street
Portland, ME 04101

CANCELLATION
 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
Morse Payson & Noyes Insurance

with definitions

No sign with a commercial message legible from
a position off the lot on which the sign is located
shall be considered incidental
Hi Marge,

I spoke with you a couple of weeks

ago about my pending sign permit,

(813 Washington Ave

went by the site
12/31/03

and a sign in question directing patients

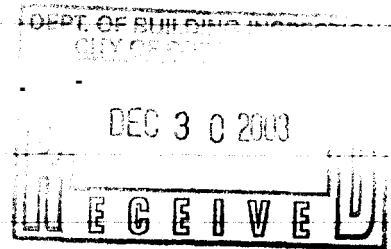
to our new facilities on Brighton Ave.

I measured it (22" x 25") and would like

to be able to continue to use it.

I can be reached at 874-1025 x3010

Thank you. Joe Eppich



163 B 002

Sidewalk Signs

Design, Location, and Construction Standards

Quantity

One sign per establishment for each street frontage having a public entrance, provided that all dimension and location standards are met. When standards would not otherwise permit a sign, a sign may consist of multiple listings.

Sign Dimensions

Single Listing: Maximum width is 24 inches or such lesser width sufficient to retain 4½ feet of unobstructed sidewalk width perpendicular to major flows. Maximum height is 40 inches to top of sign in place. Minimum height is 30 inches to top of sign in place.

Multiple: Maximum width is 30 inches or such lesser width sufficient to retain 4½ feet of unobstructed sidewalk width perpendicular to major flows. Maximum height is 40 inches to top of sign in place. Minimum height is 30 inches to top of sign in place.

Location

Minimum distance between signs is 20 feet. Maximum distance of sign from public entrance of advertiser is 20 feet. The City may vary these distances for exceptional physical circumstances where public safety and streetscape aesthetics will be maintained. However, under no circumstances shall signs obstruct vehicular stops, benches, fire hydrants, or other street visual amenities. Signs shall be located near the curb rather than the building face.

Materials and Graphics

All signs shall be of an A-Frame type design, shall be constructed of durable, weather-resistant materials and finish, shall have no moving parts, and shall be non-electrified. All signs shall be maintained in a clean and original appearance. Sign materials, graphics, and finish shall be of a unified design and shall be compatible with the local streetscape. All signs shall have horizontal braces spanning each side of the sign to assure rigid support. Lettering shall be legible and consistent.

Sign Removal

All signs shall be removed when the business is closed or while any snow or ice exists on the walk within eight feet of the sign in any direction.

Insurance

No permit shall be issued unless the applicant has posted in advance with the City a Certificate of Liability listing the City as additional insured in the amount of \$400,000.00.

Enforcement

A sign may be removed after notice to the owner and the permit, if issued, may be revoked if the sign does not conform to the standards herein.

For a sidewalk sign permit, come to City Hall, 389 Congress Street, Room 315, with:

- Certificate of Liability Insurance
- Drawing of sign showing dimensions and design work
- Payment of \$30.00 plus \$2.00 per s.f. of signage.
- Complete application with pre-application questionnaire and checklist completed.

Table 2.3

Residence-Professional (R-P) Zone

Freestanding Signs

30 sq. ft.

Height	
Setback	5'
# Permitted Per Lot	1 (a)

15' 4" show
- 10, 0 3' high show
- 20" show

- (a) Lots fronting on two or more streets **are** allowed one freestanding sign or equivalent size for each street frontage with vehicular entry, provided such signs are not readily concurrently visible.

Building Signs

None allowed, other than incidental and/or directory signs.

Table 2.3

Residence-Professional (R-P) Zone

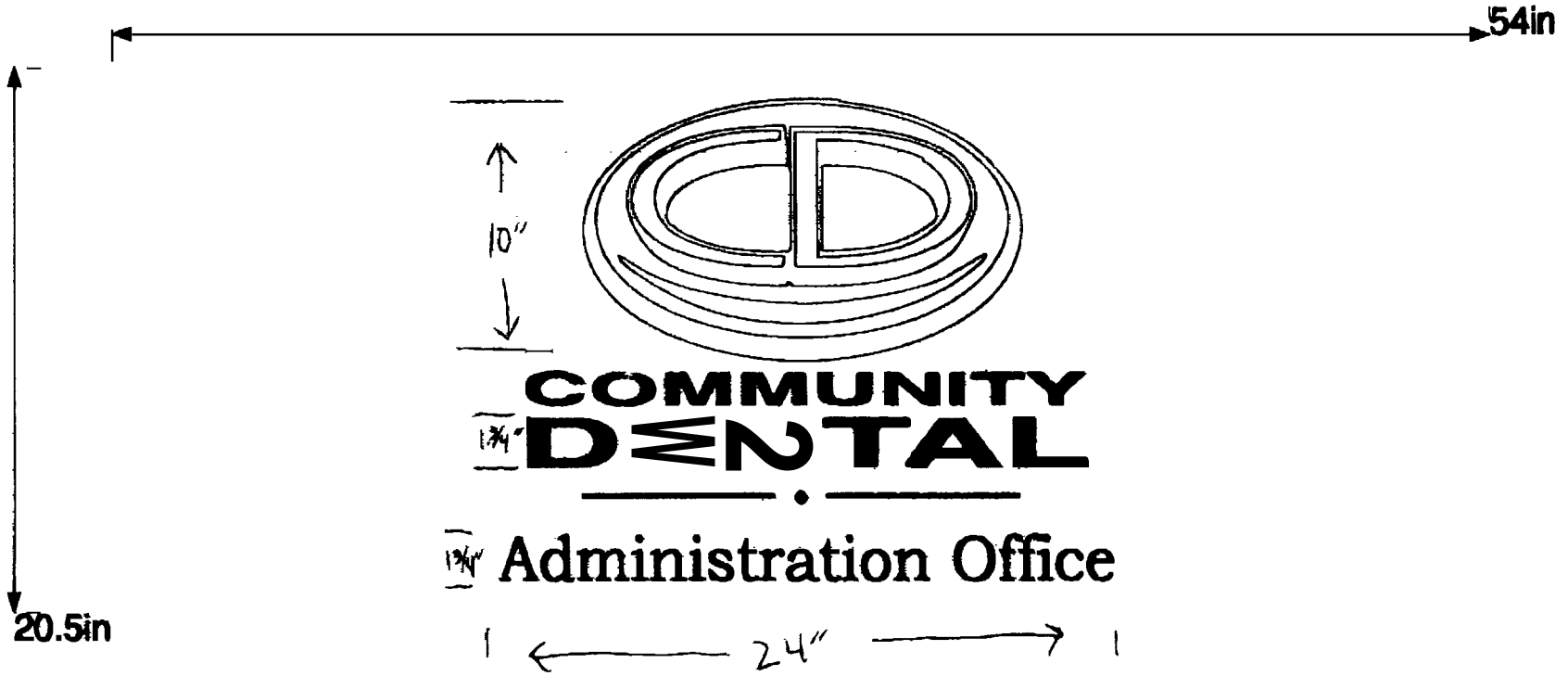
Freestanding Signs

Area	30 sq. ft.
Height	8'
Setback	5'
# Permitted Per Lot	1 (a)

- (a) Lots fronting on two or more streets **are** allowed one freestanding sign of equivalent size for each street frontage with vehicular entry, provided such signs are not readily concurrently visible,

Building Signs

None allowed, other than incidental and/or directory signs.



SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 813 WASHINGTON AVE ZONE: _____

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):

FREESTANDING (e.g., pole) SIGN? YES NO _____ DIMENSIONS ^{EXISTING} PROPOSED: 36" x 60"

BLDG. WALL SIGN? (attached to bldg) YES NO _____ DIMENSIONS PROPOSED: 22" x 25"

INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES NO _____ DIMENSIONS: 36" x 60"

BLDG. WALL SIGN(attached to bldg) ? YES NO _____ DIMENSIONS: 22" x 25"

AWNING? YES _____ NO DIMENSIONS: _____

LOT FRONTAGE (FEET): 75'
TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET): _____

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:  DATE: 11-5-03

****FOR OFFICE USE ONLY****



COMMUNITY
DENTAL

JOHN E. EPPICH
EXECUTIVE DIRECTOR

jeccdh@maine.rr.com

813 WASHINGTON AVE.
PORTLAND, ME 04103

PHONE: (207) 874-1025
EXT. 3010

FAX: (207) 874-1191

249 0130 20039 H
File And 12/19/03

22" x 25"

163 B002





**COMMUNITY
DENTAL**

Administration Office

The Dental Center is now relocated at
640 Brighton Ave. 874-1028






COMBES & DENTAL
A Family Practice
Dental Office
1000 Main Street
New York, NY 10001





CITY OF PORTLAND, MAINE

Department of Building Inspections

Nov. 5 2003

Received from Community Dental

Location of Work 213 Washington Ave

Cost of Construction \$ _____

Permit Fee \$ 98.00

Building (IL) ___ Plumbing (IS) ___ Electrical (I2) ___ Site Plan (U2) ___

Other aga

CBL: _____

Check #: 19849

Total Collected \$ 98.00

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy

YELLOW - Office Copy

PINK - Permit Copy

[Handwritten signature]