

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMITPermit Number: 101243
PERMIT ISSUEDPlease Read
Application And
Notes, If Any,
AttachedThis is to certify that BROWN L B & SONS / Welch Stencilhas permission to Install a 24 02 Freestanding Sign OCT 18AT 901 WASHINGTON AVE CBL 170 F001001

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 written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR 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



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

_____ 10-9 2010 _____

Received from _____ Martins Point _____

Location of Work _____ 701 Washington _____

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 78 _____

Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2)

Other _____

CBL: 701-1 _____

Check #: 176 939 _____ Total Collected \$ 78 _____

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature] _____

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 10-1243	Issue Date:	CBL: 170 F001001
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Location of Construction: 901 WASHINGTON AVE	Owner Name: BROWN J B & SONS	Owner Address: PO BOX 207	Phone:
Business Name:	Contractor Name: Welch Stencil	Contractor Address: 7 Glasgow Road Scarborough	Phone: 2078836200
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-2

Past Use: Commercial "Martins Point Healthcare"	Proposed Use: Commercial "Martins Point Healthcare" - Install a 24.02 Freestanding Sign - 6'1" x 3'8"	Permit Fee: \$78.00	Cost of Work: \$78.00	CEO District: 4
Proposed Project Description: Install a 24.02 Freestanding Sign - 6'1" x 3'8"		FIRE DEPT: N/A <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <input checked="" type="checkbox"/> Sign Type: IBC, 2003 <i>[Signature]</i>	
		Signature:	Signature:	
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: Idobson	Date Applied For: 10/07/2010	Zoning Approval		
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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.. 	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 checked="" type="checkbox"/> MM <input type="checkbox"/> <i>OK w/ condition</i> Date: 10/12/10	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 Date:	Historic Preservation <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 <i>ABU</i> Date:
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PERMIT ISSUED

OCT 18 2010

City of Portland

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

Permit No: 10-1242	Date Applied For: 10/07/2010	CBL: 170 F002001
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Location of Construction: 891 Washington Ave	Owner Name: BROWN J B & SONS	Owner Address: PO BOX 207	Phone:
Business Name:	Contractor Name: Welch Stencil	Contractor Address: 7 Glasgow Road Scarborough	Phone (207) 883-6200
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial "Martins Point Healthcare" - administrative offices - Replace existing freestanding sign w/ new sign 6'1" x 3'8".	Proposed Project Description: Replace existing freestanding sign w/ new sign 6'1" x 3'8".
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Dept: Zoning	Status: Approved	Reviewer: Ann Machado	Approval Date: 10/12/2010
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Jonathan Rioux	Approval Date: 10/18/2010
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Fastener schedule per the IBC 2003 2) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code. 3) Separate Permits shall be required for the electrical work.			

Comments: 10/8/2010-amachado: Left vcm for Carolyn Plummer. Need more information. Sign was permitted in 2004 - #04-1282. Is this going in the same exact place? What exactly is it going to look like? 10/12/2010-amachado: Spoke to Carolyn Plummer. This is a new sign replacing the existing one. She confirmed what it will look like. 10/18/2010-jrioux: Spoke with Contractor, Frost protection is provided.

PERMIT ISSUED

OCT 18 2010

City of Portland



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: <u>901 Washington Avenue Portland, ME</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: <u>Vin Veroneau</u> <u>38 Danforth Street</u> <u>Portland, ME 04112</u>	Telephone: <u>207-774-5908</u>
Lessee/Buyer's Name (If Applicable) <u>MARTIN'S POINT HealthCare</u>	Contractor name, address & telephone: <u>Welch Stencil</u> <u>7 Lincoln Ave</u> <u>Scarborough, ME 07078</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage = Total Fee: \$ <u>48.00 + 30 = 78.00</u> Awning Fee = cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>Carolynn Plummer</u> phone: <u>791-3797</u>		
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>Administrative Office</u> If vacant, what was prior use: _____ Proposed Use: _____		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: <u>6' 24" x 40" sign = 24.02 sq ft.</u> Height from grade: <u>1 ft.</u> Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions proposed: _____ of sign - <u>7' 1" from grade</u>		
Proposed awning? Yes _____ No <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> 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.		

by mail
RECEIVED

OCT - 7 2010

Dept. of Building Inspections
City of Portland Maine

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, 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: Carolynn Plummer Date: 9/28/10

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

B2 multi-tenant
- 140 sq ft - joint identification -
- 24' 1" max

proposed sign - 22.31 sq ft
- 7' 1" from grade



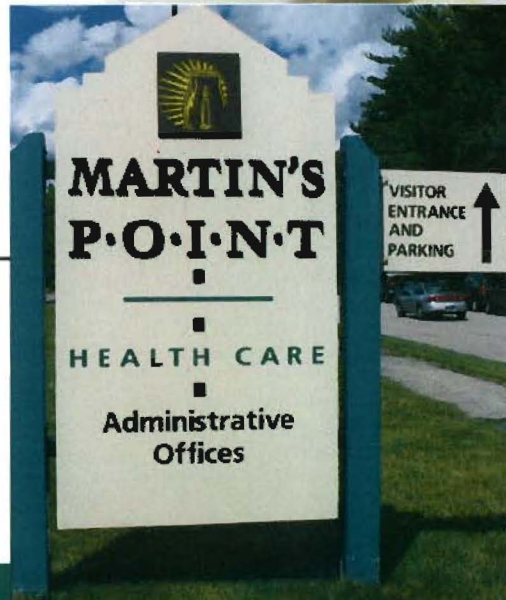


MARTIN'S POINT™

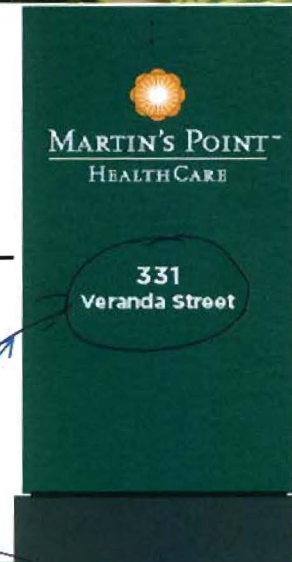
HEALTHCARE



Before



After



A New Look ...

901 Washington Avenue

Clinical Delivery Campus
September 2010



Entrance Marker



one sign front
same sign back



Illuminated
only @ night - see next page.

one sign front
same sign back



Non-Illuminated

$73" \times 44" = 22.3\phi$

Base of sign: 1 foot

Actual sign: 6'1"

Width: 3'8"

Day-to-Night Transformation



*Address says
901
Washington Avenue.*



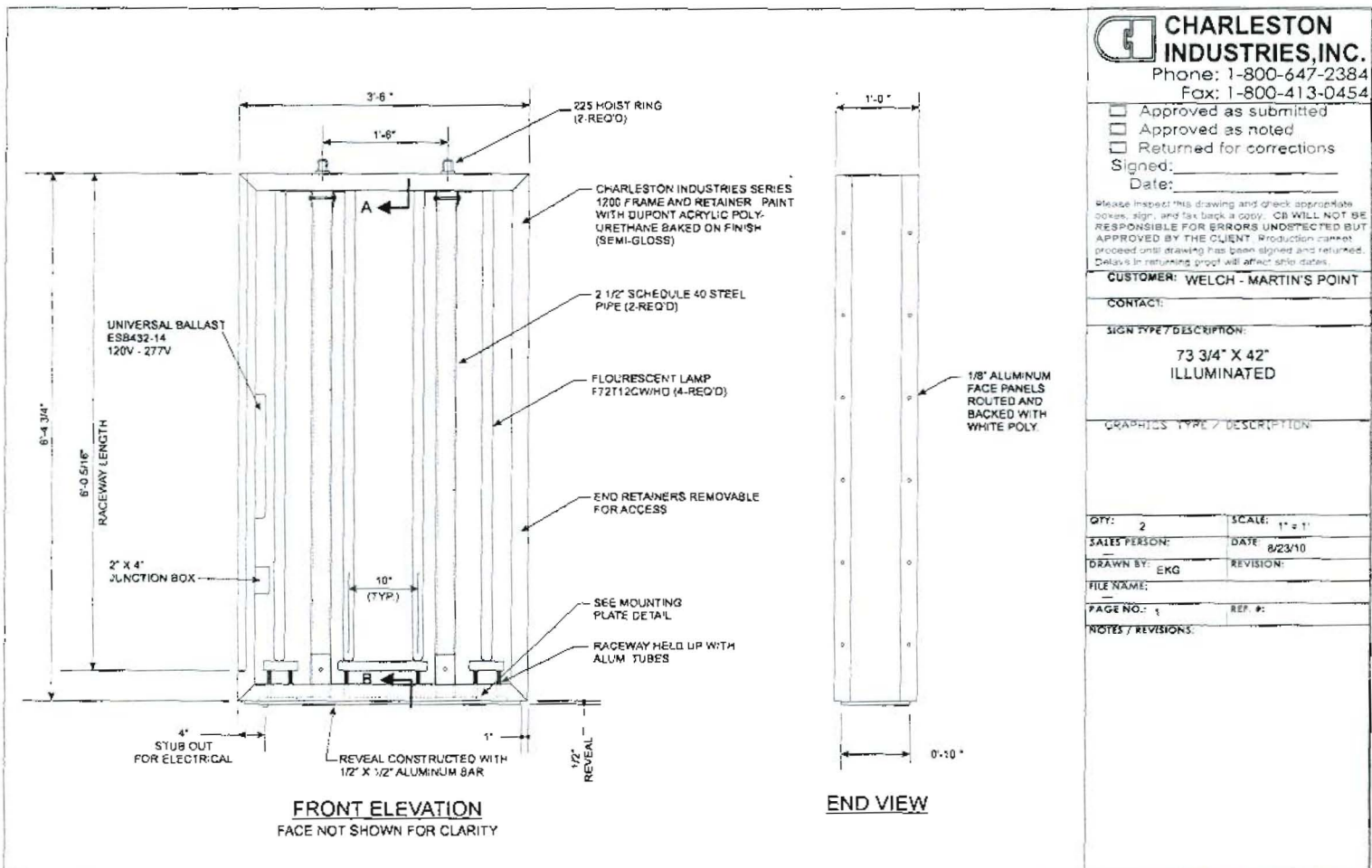
Vendor Information



7 Lincoln Ave. - Scarborough, ME 04074
Phone: 207.883.6200 - 800.635.3506
Fax: 207.883.8588 - 800.225.6859
www.welchusa.com

Michael L. Head
Design and Development





CHARLESTON INDUSTRIES, INC.
 Phone: 1-800-647-2384
 Fax: 1-800-413-0454

Approved as submitted
 Approved as noted
 Returned for corrections
 Signed: _____
 Date: _____

Please inspect this drawing and check appropriate covers, sign, and fax back a copy. CB WILL NOT BE RESPONSIBLE FOR ERRORS UNDETECTED BUT APPROVED BY THE CLIENT. Production cannot proceed until drawing has been signed and returned. Delays in returning proof will affect ship dates.

CUSTOMER: WELCH - MARTIN'S POINT

CONTACT: _____

SIGN TYPE / DESCRIPTION:
 73 3/4" X 42"
 ILLUMINATED

GRAPHICS TYPE / DESCRIPTION:

QTY: 2	SCALE: 1" = 1'
SALES PERSON:	DATE: 8/23/10
DRAWN BY: EKG	REVISION:
FILE NAME:	
PAGE NO.: 1	REP. #:

NOTES / REVISIONS:

September 30, 2010

Carolynn Plummer
Project Specialist
Martin's Point Health Care
331 Veranda Street
Portland, ME 04013

Re: 891-901 Washington Avenue location

Dear Carolyn:

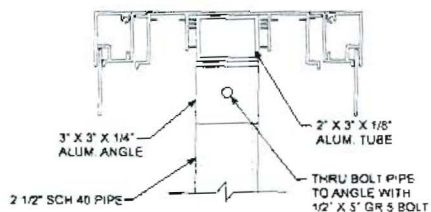
Thank you for the copy of the proposed signage and site plan.

J. B. Brown & Sons grants Martin's Point permission to install the two signs as noted on the plan that was emailed to me today. One sign to be located at the 891 entry on Rainbow Mall Road, and another closer to the complex entrance on Pheasant Hill Road.

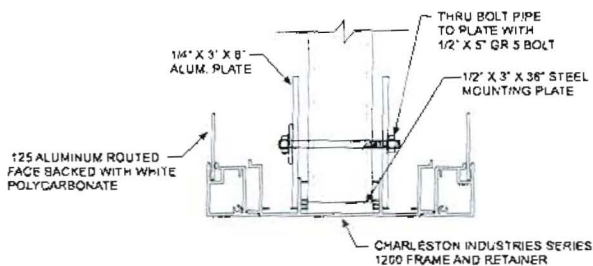
Please let me know if I can be of further assistance.

Sincerely,

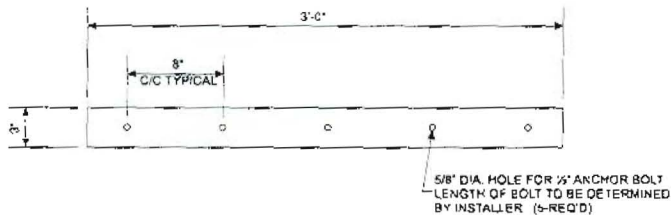
Willow D. Williams
Property Manager



SECTION A
SCALE: N.T.S.
(NOTE ELECTRICAL NOT SHOWN)



SECTION B
SCALE: N.T.S.
(NOTE ELECTRICAL NOT SHOWN)



MOUNTING PLATE DETAIL
SCALE: N.T.S.

CHARLESTON INDUSTRIES, INC.

Phone: 1-800-647-2384
Fax: 1-800-413-0454

- Approved as submitted
 Approved as noted
 Returned for corrections

Signed: _____
Date: _____

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CUSTOMER: WELCH - MARTIN'S POINT

CONTACT:

SIGN TYPE / DESCRIPTION:

73 3/4" X 42"
ILLUMINATED
(SECTIONS AND DETAILS)

GRAPHICS TYPE / DESCRIPTION

QTY: 2 SCALE: N.T.S.

SALES PERSON: DATE: 8/23/10

DRAWN BY: EKG REVISION:

FILE NAME:

PAGE NO.: 2 REF. #:

NOTES / REVISIONS: