

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that DMH REALTY – KARMA FAIR TRADE

Located At 570 BRIGHTON AVE

Job ID: 2012-01-3056-SIGN

CBL: 185- C-013-001

has permission to Install 3'x7' wall 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

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 when installed

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
Penny St. Louis

Job ID: 2012-01-3056-SIGN

Located At: 570 BRIGHTON AVE CBL: 185- C-013-001

Conditions of Approval:

Building

1. Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.
2. A separate permit is required for electrical installations.



Signage/Awning Permit Application

60

Submitted 1/4/12

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.

2012 013056

Location/Address of Construction: 50 Brighton Ave (570-574) # 572

Tax Assessor's Chart, Block & Lot Chart# <u>125</u> Block# <u>C</u> Lot# <u>013-14</u>	Owner: <u>Scott Howland</u> <u>DMH Realty</u>	Telephone: <u>807-1004</u>
Lessee/Buyer's Name (If Applicable) <u>Karmatain Trade LLC</u> <u>Karen Burnell</u>	Contractor name, address & telephone: <u>2 Whispering Pines Dr</u> <u>Windham, Me</u> <u>Westbrook 04092</u> <u>8576</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00 For I.D. signage \$75.00 Fee: \$ Awning Fee= cost of work Total Fee: \$ <u>-1992</u>
Who should we contact when the permit is ready: <u>John Porteus sign</u> <u>Karen Burnell</u> phone: <u>831-4531</u>		

Tenant/allocated building space frontage (feet): Length: 14' ^{ap. chn.} Height: _____
Lot Frontage (feet) _____ Single Tenant Multi-Tenant Lot

Current Specific use: vacant RECEIVED
If vacant, what was prior use: seamstress JAN 6 2012
Proposed Use: retail gift shop Dept. of Building Inspections
City of Portland Maine

Information on proposed sign(s):
Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions proposed: 4x8 Height from grade: _____
Bldg. wall sign? (attached to bldg) Yes No ___ Dimensions proposed: 4x8 3-1x7

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.

4x8 = 32 x 2 = 64
30
Total 94.00

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: Karen Burnell Date: 1-5-12

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

B-1 multi-tenant
1.5 x 14 = 210

4x8 = 32 sq



Signage/Awning Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

- 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.
- 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. Please indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building façade dimensions for any signage attached to the building.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.
- Certificate of flammability required for awning, canopy or banner.
- A UL# is required for lighted ~~signs~~ at the time of final inspection.
- Photos of existing signage
- Details for sign fastening, attachment or mounting in the ground.

Permit fee for signage or awning-with-signage: \$30.00 plus \$2.00 per square foot of sign.

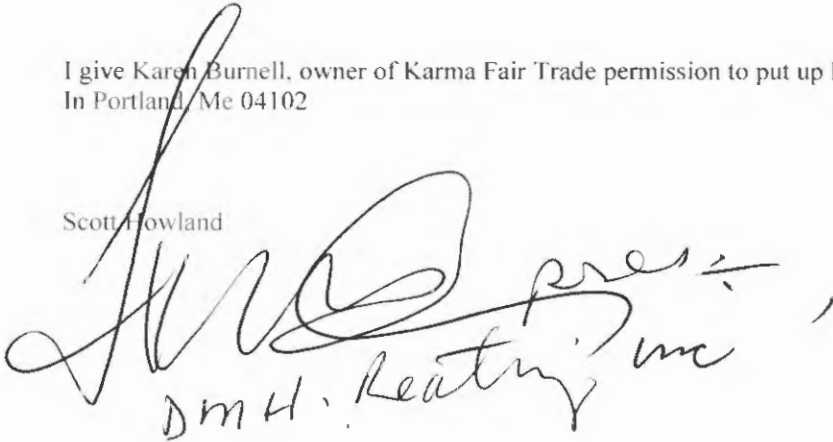
Permit fee for awning-without-signage is based on cost of work:
\$30.00 for the first \$1,000.00, \$10.00 per additional \$1,000.00 of cost.

Base application fee for any Historic District signage is \$75.00.

Jan 2, 2012

I give Karen Burnell, owner of Karma Fair Trade permission to put up her business sign at 570 Brighton Ave
In Portland, Me 04102

Scott Howland



DMH. Reating me

Customer Copy

NEW BUSINESS		Is any applicant an existing State Farm customer:		No	
Base Policy Contract (BPC): Retail Sales Policy					
Effective Date:	01-10-2012	App Date:	01-02-2012	App Time:	09:55 AM
Agent:	Tricia P Zwirner	Agent Code:	19-1129	AFO Code:	28F874
Zwirner Ins and Fin Svcs Inc					
CUSTOMERS:		SSN/SIN	Home Phone	Business Phone	
Applicant:	KARMA FAIR TRADE, LLC,		(207) 892-1663	(207) 892-1663	
Customer name(s):	KARMA FAIR TRADE, LLC				
Mailing Address:	2 WHISPERING PINES RD WINDHAM, ME 04062-4772				
For the purpose of this application, the type of organization is: Limited Liability Company					
LOCATION DETAILS:					
Location 1:					
Property Location:	Location description: portland store				
	Street:	570 Brighton Ave			
	City:	Portland			
	State / Prov:	ME			
	ZIP / Postal:	04102-2357			
	County:	Cumberland			
	Territory Zone:	01			
	Subzone:	01			
Occupancy / Ownership:	Tenant				
Type of business:	Gift, Card, & Stationery Stores				
Location Details:	Is this address inside the city limits: Yes				
	Is the risk located within 1000 feet of high tide of the ocean, gulf, bay, harbor, open water or located on an island: No				
	Are alcoholic beverages sold and / or consumed on the premises: No				
Adjustments:	Dwelling or Apartment Credit: No				
	Automatic sprinkler protection: No				
	Fire or smoke alarm: Local Pull Station Fire Alarm				
	Burglar alarm: None				
	Security guard employed exclusively by the insured and on duty after hours: No				
Enclosed Building:	Is the entrance through a common enclosed area, not subject to outside weather conditions required to access business: No				
PRE-ELIGIBILITY:					
Does this applicant / locations meet all Commercial Lines Manual (CLM) Underwriting Guide requirements: Yes					
Did an underwriter authorize this submission: No					
Has any insurer or agency cancelled or refused to renew similar insurance to the business within the past three years: No					
Number of years the applicant has owned and operated the same type of insured business: 4					
Number of years business has been insured: 0					
Has applicant had losses, insured or not, in the past three years: No					
Prior Commercial Multi-Peril policy with State Farm: No					
Prior carrier name: was covered on allstate HO policy					
Does the applicant want to replace an existing State Farm policy with this transaction: No					
Description of applicant's business activities on and off premises: FT gift shop and a craft show 1xmo maximum					
Are there other operations and other owned / leased locations: No					
Does the applicant have a website: Yes					
Website address: www.karmafairtrade.com					
Sells, rebottles, repackages, or manufactures products under their own label: No					
Do employees use their personal vehicles in the course of business: No					
COVERAGES - ALL LOCATIONS:					
Desired coverage effective date: 01-10-2012					
Deductible: 500					
Loss of Income and Extra Expense: Actual Loss Sustained - 12 Months					

Customer Copy

Amount needed: 2,500
 Seasonal Increase - Business Personal Property: Yes
 Amount included: 25%
 Loc 1: portland store
 Seasonal Increase percentage limit: 25%
 Signs: Yes
 Amount included: \$10,000
 Loc 1: portland store
 Amount needed: 10,000
 Utility Interruption - Loss of Income: Yes
 Amount included: \$10,000
 Amount needed: 10,000
 Valuable Papers and Records (On Premises): Yes
 Amount included (On Premises): \$10,000
 Loc 1: portland store
 Amount needed (On Premises): 10,000

CUSTOMIZE QUOTE:

QUOTE RESULTS:

Application taken date: 01-02-2012
 Base Policy Contract (BPC): Retail Sales Policy
 Location 1: portland store
 Territory Zone: 01 Subzone: 01

Quote Results

Coverages

	<u>Limit</u>	<u>Premium</u>
Coverage B - Business Personal Property	35,000 - Replacement Cost	186.00
Loss Of Income And Extra Expense	Actual Loss Sustained - 12 Months	
Coverage L - Business Liability - Per Occurrence	1,000,000	178.00
Coverage L - Business Liability - Annual Aggregate Limit	2,000,000	
Products / Completed Operations Liability - Annual Aggregate	2,000,000	
Damage to Premises Rented to You	300,000	
Coverage M - Medical Expenses	5,000	

Policy Deductibles

Basic Deductible	500	21.00
Employee Dishonesty	250	
Equipment Breakdown	500	
Inland Marine Computer Property Form	500	
Money and Securities	250	

Discounts and Charges

Protective Devices Discount		(10.00)
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Extensions of Coverage

Accounts Receivable (Off Premises)	5,000	
Accounts Receivable (On Premises)	10,000	
Arson Reward	5,000	
Back-Up of Sewer or Drain	15,000	
Brands And Labels	25,000	
Collapse	Included	
Damage To Non-Owned Buildings From Theft, Burglary Or Robbery	Coverage B Limit	
Debris Removal	25% of covered loss	
Dependent Property - Loss of Income	10,000	
Employee Dishonesty	10,000	
Equipment Breakdown	Included	
Fire Department Service Charge	5,000	

Customer Copy

Payment Options - Billing Information:

Put application on SFPP: Yes

If yes, is the insured replacing an existing policy that should remain on the same SFPP account: No

Total annual premium: 375.00

Amount paid: 0.00

Balance due: 0.00

DISCLOSURES:**Underwriting Confirmation Statement.....**

Coverage is not provided until this application is approved by State Farm's Underwriting Department.

Regarding Your Coverage Amount.....

It is up to you to choose the coverages and limits that meet your needs. We recommend that you purchase a coverage limit equal to the estimated replacement cost of your building. Replacement cost estimates are available from building contractors and replacement cost appraisers, or, your agent can provide an estimate from Xactware, Inc.® using information you provide about your building. We can accept the type of estimate you choose as long as it provides reasonable level of detail about your building. State Farm does not guarantee that any estimate will be the actual future cost to rebuild your building. Higher limits are available at higher premiums. Lower limits are also available, which if selected may make certain coverages unavailable to you. We encourage you to periodically review your coverages and limits with your agent and to notify us of any changes or additions to your building.

Application Acknowledgement Statement.....

By submission of this application, you agree that: (1) You have read this application, (2) your statements on this application are correct, (3) the coverages, including options and endorsements, and the amounts of coverage on this application are those chosen by you, and (4) the premium charged must comply with State Farm's rules and rates and may be revised.

Fraud Statement.....

NOTE: For your protection, the law of your state requires the following to appear on this form: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

Customer Copy

Business Liability (per occurrence): 1,000,000
 Damages to Premises Rented to You: 300,000
 Medical Expenses: 5,000
 Number of active owners or partners: 1
 Number of employees (including part-time, temporary, seasonal, and leased employees; excluding owners, partners, corporate officers, and directors): 1

COVERAGE DETAILS:**Location 1, portland store**

Year built: 1907
 Heating (yrs): 12
 Wiring (yrs): 26
 Plumbing (yrs): 18
 Construction: Frame
 Business Personal Property: 35,000
 Does Business Personal Property include Tenant Improvements and Betterments: No
 List all other types of occupancies / exposures within 60 feet of the location of risk: photographer, florist, office spaces
 Annual receipts for this location: 150000
 Liability rating base: Personal Property
 Liability rating base amount: 35000

OPTIONAL COVERAGES:**Additional Coverages**

Accounts Receivable (On Premises): Yes
 Amount included (On Premises): \$10,000
 Loc 1: portland store
 Amount needed (On Premises): 10,000
 Back-up of Sewer or Drain: Yes
 Amount included: \$15,000
 Loc 1: portland store
 Personal property limit: 15,000
 Computer Property: Yes
 Amount included for Computer Hardware / Software: \$25,000
 Amount included for Loss of Income and Extra Expense: \$25,000
 Deductible: 500
 Amount needed for Computer Hardware / Software: 25,000
 Amount needed for Loss of Income and Extra Expense: 25,000
 Dependent Property - Loss of Income: Yes
 Amount included: \$10,000
 Amount needed: 10,000
 Employee Dishonesty: Yes
 Amount included: \$10,000
 Deductible: 250
 Amount needed: 10,000
 Money and Securities: Yes
 Amount included (On Premises): \$10,000
 Amount included (Off Premises): \$5,000
 Deductible: 250
 Loc 1: portland store
 Amount needed (On Premises): 10,000
 Amount needed (Off Premises): 5,000
 Outdoor Property: Yes
 Amount included: \$5,000
 Loc 1: portland store
 Amount needed: 5,000
 Personal Property Off Premises: Yes
 Amount included: \$15,000
 Amount needed: 15,000
 Property Of Others (applies only to those premises provided Coverage B - Business Personal Property): Yes
 Amount included: \$2,500
 Loc 1: portland store

Customer Copy

Fire Extinguisher Systems Recharge Expense	5,000	
Forgery Or Alteration	10,000	
Glass Expenses	Included	
Increased Cost Of Construction And Demolition Costs (applies only when buildings are insured on a replacement cost basis)	10%	
Inland Marine Computer Property Form	25,000	
Inland Marine Computer Property Loss of Income / Extra Expense	25,000	
Money And Securities (Off Premises)	5,000	
Money And Securities (On Premises)	10,000	
Money Orders And Counterfeit Money	1,000	
Newly Acquired Business Personal Property (applies only if this policy provides Coverage B - Business Personal Property)	100,000	
Newly Acquired Or Constructed Buildings (applies only if this policy provides Coverage A - Buildings)	250,000	
Ordinance Or Law - Equipment Coverage	Included	
Outdoor Property	5,000	
Personal Effects (applies only to those premises provided Coverage B - Business Personal Property)	2,500	
Personal Property Off Premises	15,000	
Pollutant Clean Up And Removal	10,000	
Preservation Of Property	30 Days	
Property Of Others (applies only to those premises provided Coverage B - Business Personal Property)	2,500	
Seasonal Increase - Business Personal Property	25%	
Signs	10,000	
Utility Interruption - Loss of Income	10,000	
Valuable Papers and Records (Off Premises)	5,000	
Valuable Papers and Records (On Premises)	10,000	
Water Damage, Other Liquids, Powder Or Molten Material Damage	Included	
Total Annual Premium (Minimum premium applies)		375.00
Monthly Premium (Service charge not included)		31.25

This is a sample quote that contains only a general description of some available coverages and limits with an approximate premium, subject to eligibility. It is not a contract, binder of coverage or coverage recommendation. All coverages are subject to the terms, provisions, exclusions, and conditions in the policy and its endorsements. If information used for rating changes or different rates are effective at the time of policy issuance, this rate quote may be revised. If you have any questions, please contact my office.

ADDITIONAL INTERESTS:

DOCUMENTS/PHOTOS:

Location 1: portland store

Attached	Unattached - required	Explanation
Front Photo		
Back Photo		

BIND:

Bind application: Yes
 Desired coverage effective date: 01-10-2012
 Application taken date: 01-02-2012
 Application taken time: 09:55 AM
 Premises inspected on: 01-08-2012
 Premises inspected by: zwirner

BILLING PAYMENT:

Minimum amount due: 375.00
 Total annual premium: 375.00