

950274

Location of Construction: 1001 Westbrook St. Jetport		Owner: City of Portland		Phone: 874-8300	
Owner Address: City of Portland		Leasee/Buyer's Name:		Phone:	
Contractor Name: Signs, etc, Inc.		Address: P. O. 2280 Plainville, MA 02762		Phone: 508-699-4919	
Past Use: Travel Agency		Proposed Use: travel agency		COST OF WORK: \$ PERMIT FEE: \$ 35.80 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: <u>U</u> Use Group: Type: Signature: <i>BoCA - [Signature]</i>	
Proposed Project Description: to change lettering on existing sign as per plan		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____			
Permit Taken By: LATINI		Date Applied For: 3/27/95			

PERMIT ISSUED
 Permit Issued:
 MAR 29 1995
CITY OF PORTLAND

Zone: AS CBL: 204-A-001
 Zoning Approval:
 Special Zone or Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied
 Date: _____

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

submitted diagram existing sign photo permission - insurance form

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 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 provisions of the code(s) applicable to such permit

3/27/95

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT 49
[Signature]

COMMENTS

Done

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

SIGNAGE APPLICATION

ADDRESS: 1001 WESTBROOK ST. (PORTLAND JETPORT) Zone: AB

OWNER: CITY OF PORTLAND

APPLICANT: SIGNS, ETC. INC. (Richard Steele, pres)

ASSESSORS NO.: _____

→ SINGLE TENANT LOT? YES: _____ NO: _____

→ MULTI-TENANT LOT? YES: _____ NO: _____

FREESTANDING SIGN? YES: _____ NO: X DIMENSIONS: _____

MORE THAN ONE SIGN? NO DIMENSIONS: _____

BLDG. WALL SIGN? YES: ✓ NO: _____ DIMENSIONS: 38" X 18"

MORE THAN ONE SIGN? NO DIMENSIONS: _____

LIST ALL EXISTING SIGNAGE, INCLUDING THEIR DIMENSIONS: _____

ONE SINGLE FREEDWALL SIGN OVER OFFICE DOORWAY

→ LOT FRONTAGE (IN FEET): _____

→ BLDG FRONTAGE (IN FEET): _____

AWNING? YES: _____ NO: X IS AWNING BACKLIT? YES: _____ NO: _____

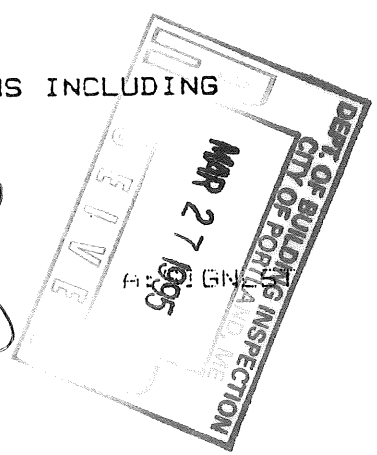
HEIGHT OF AWNING: _____

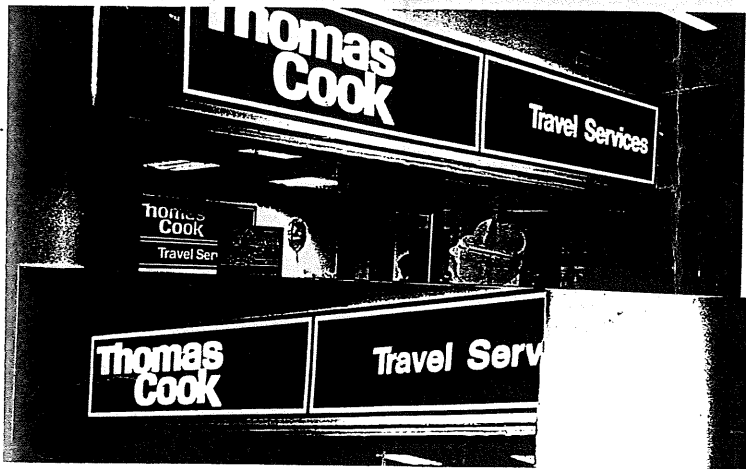
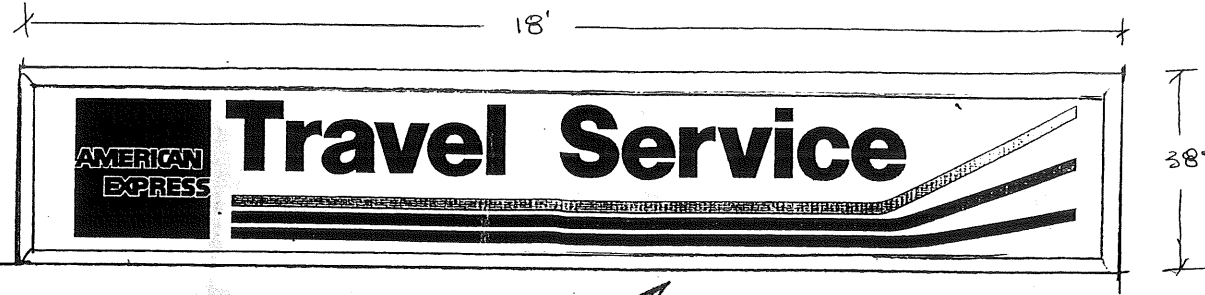
IS THERE ANY COMM. MESSAGE, TRADEMARK, OR SYMBOL ON IT? _____

PLEASE PROVIDE A SITE SKETCH AND A BUILDING SKETCH, SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED.

WE WILL NEED SKETCHES AND/OR PICTURES OF THE PROPOSED SIGNS INCLUDING STRUCTURAL COMPONENTS.


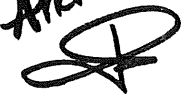
REPLACE PAGE ONLY IN EXISTING SIGN
INTERIOR SIGNAGE per info submitted

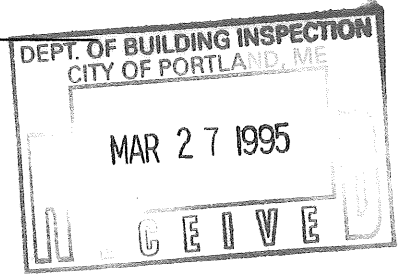




NEW FACE - (LETTAN) DECORATED WITH AMEX TRAVEL LOGO
 EXISTING SIGN ABOVE OFFICE

THOMAS COOK TRAVEL
PORTLAND JETPORT

 <p>© 1991 SIGNS ETC., INC. THIS DRAWING SHOWS ORIGINAL DESIGN CONCEPTS WHICH ARE THE PROPERTY OF signs etc. AND MAY NOT BE USED OR COPIED WITHOUT WRITTEN PERMISSION AND REMUNERATION TO signs etc. IN THE AMOUNT OF \$</p>	DATE: FEB 18 '95	SCALE: 1/2" = 1'	COMMENTS: <i>Approved</i> 
	DRAWN BY: DICK	DRAWING NUMBER:	



CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

03/23/95

PRODUCER

Duxbury & Ray Agency, Inc.
292 Waterman Ave.
P.O. Box 17088
Smithfield, R.I. 02917

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.

COMPANIES AFFORDING COVERAGE

COMPANY LETTER	A	AETNA CASUALTY & SURETY
COMPANY LETTER	B	
COMPANY LETTER	C	
COMPANY LETTER	D	
COMPANY LETTER	E	

INSURED

Signs Etc. Inc.
Route 1
P.O. Box 2280
Plainville, MA 02762

COVERAGES

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO. LTR	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 CLAIMS MADE <input checked="" type="checkbox"/> OCCUR OWNER'S & CONTRACTOR'S PROT.	GL 24612375TC1	12/30/94	12/30/95	GENERAL AGGREGATE \$ 600,000
					PRODUCER-COMP/OP AGGR. \$ 600,000
					PERSONAL & ADV. INJURY \$ 300,000
					EACH OCCURRENCE \$ 300,000
					FIRE DAMAGE (Any one fire) \$ 50,000
					MED. EXPENSE (Any one person) \$ 5,000
A	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS GARAGE LIABILITY	TO BE DETERMINE	12/30/94	12/30/95	COMBINED SINGLE LIMIT \$
					BODILY INJURY (Per person) \$ 100,000
					BODILY INJURY (Per accident) \$ 300,000
					PROPERTY DAMAGE \$ 100,000
A	EXCESS LIABILITY UMBRELLA FORM OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$
					AGGREGATE \$
A	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	C 24612375TCA	01/01/95	12/30/95	<input checked="" type="checkbox"/> STATUTORY LIMITS
					EACH ACCIDENT \$ 500,000
					DISEASE-POLICY LIMIT \$ 500,000
					DISEASE-EACH EMPLOYEE \$ 500,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

ALL COVERAGE SUBJECT TO ACTUAL POLICY TERMS, CONDITIONS AND EXCLUSIONS.

FAX 508-695-6969

CERTIFICATE HOLDER

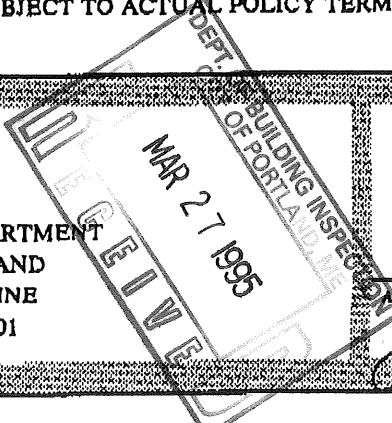
BUILDING DEPARTMENT
CITY OF PORTLAND
PORTLAND, MAINE
04101

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

J. Theodore



Portland International Jetport
Jeffrey Schultes, A.A.E.
Manager



Transportation and Waterfront Dept.
Thomas F. Valleau
Director

CITY OF PORTLAND

9 March 1995

Mr. Dick Steele
President
Signs, Etc.
P.O. Box 2280
Route One
Plainville, MA 02762

Dear Mr. Steele:

After reviewing your letter of February 20 concerning the signage at the Portland International Jetport for American Express Travel Service, I here by authorize the sign as indicated on the Feb. 19, 1995.

If you have any questions, please give me a call.

Sincerely,

Jeff Schultes, A.A.E.
Airport Manager

