

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

PERMITS SECTION

PERMIT

Permit Number: 070867

This is to certify that MN PROPERTIES LLC / Ne Craft Sign

has permission to Install a 27.5 freestanding sign

AT 2063 CONGRESS ST

215 B004001

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 when permission is procured before this building or part thereof is altered or closed-in. FOUR 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

PERMIT ISSUED

JUL 30 2007

CITY OF PORTLAND

7/26/07

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 07-0867	Issue Date:	CBL: 215 B004001
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Location of Construction: 2063 CONGRESS ST	Owner Name: MN PROPERTIES LLC	Owner Address: 300 ROSEWOOD DR	Phone:
Business Name:	Contractor Name: NeoKraft Signs	Contractor Address: 686 Main St. Lewiston	Phone 2077829654
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: RP

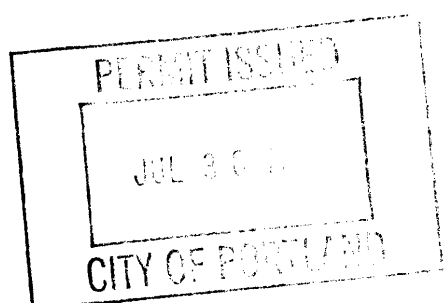
Past Use: Commercial - Mortgage Company	Proposed Use: Commercial install a 27.5 freestanding sign "Mortgage Network"	Permit Fee: \$85.00	Cost of Work: \$85.00	CEO District: 3
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Proposed Project Description: Install a 27.5 freestanding sign	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: U Type: Signs <i>IBC 2003</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: dmartin	Date Applied For: 07/18/2007	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 type="checkbox"/> MM <input type="checkbox"/> <i>ok w/ conditions</i> Date: 7/25/07 <i>AM</i>	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>AM</i> Date:
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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: 07-0867	Date Applied For: 07/18/2007	CBL: 215 B004001
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Location of Construction: 2063 CONGRESS ST	Owner Name: MN PROPERTIES LLC	Owner Address: 300 ROSEWOOD DR	Phone:
Business Name:	Contractor Name: NeoKraft Signs	Contractor Address: 686 Main St. Lewiston	Phone (207) 782-9654
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial - install a 27.5 freestanding sign - "Mortgage Network"	Proposed Project Description: Install a 27.5 freestanding sign
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 07/25/2007**Note:** **Ok to Issue:**

- 1) This permit is being issued with the understanding that the sign will be placed at least five feet from any property line.
- 2) Any LED display SHALL NOT continuously flash, nor contiuously blink, and SHALL NOT scroll. Electronic message board signs SHALL NOT change messages more often than once every 20 minutes. This City and State regulation SHALL BE strictly enforced.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 07/26/2007**Note:** **Ok to Issue:**

- 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.



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>2059 Congress Street</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: <u>M. N. Properties, LLC</u>	Telephone: <u>207-772-3100</u>
Lessee/Buyer's Name (If Applicable) <u>Mortgage Network</u>	Contractor name, address & telephone: <u>Neakraft Signs Inc.</u> <u>686 Main Street</u> <u>Lewiston, ME 04240</u> <u>207-482-9654</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 <u>27.5 sq. ft.</u> For H.D. signage= Total Fee: \$ <u>85.00</u> Awning Fee= cost of work Total Fee: \$ <u>85.00</u>
Who should we contact when the permit is ready: <u>Shane Moffett</u> phone: <u>782-9654</u>		
Tenant/allocated building space frontage (feet): Length: _____ Height: <u>7 - see plot plan</u> Lot Frontage (feet) <u>285</u> Single Tenant or Multi Tenant Lot <u>single tenant</u>		
Current Specific use: <u>Mortgage Company</u> If vacant, what was prior use: _____ Proposed Use: <u>same</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: <u>5' x 5'-6"</u> Height from grade: <u>8'</u> Bldg. wall sign? (attached to bldg) Yes _____ No <input checked="" type="checkbox"/> Dimensions proposed: _____		
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 <input checked="" type="checkbox"/> Dimensions: _____ Awning? Yes _____ No <input checked="" type="checkbox"/> 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. <u>see attached</u>		

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: Shane Moffett

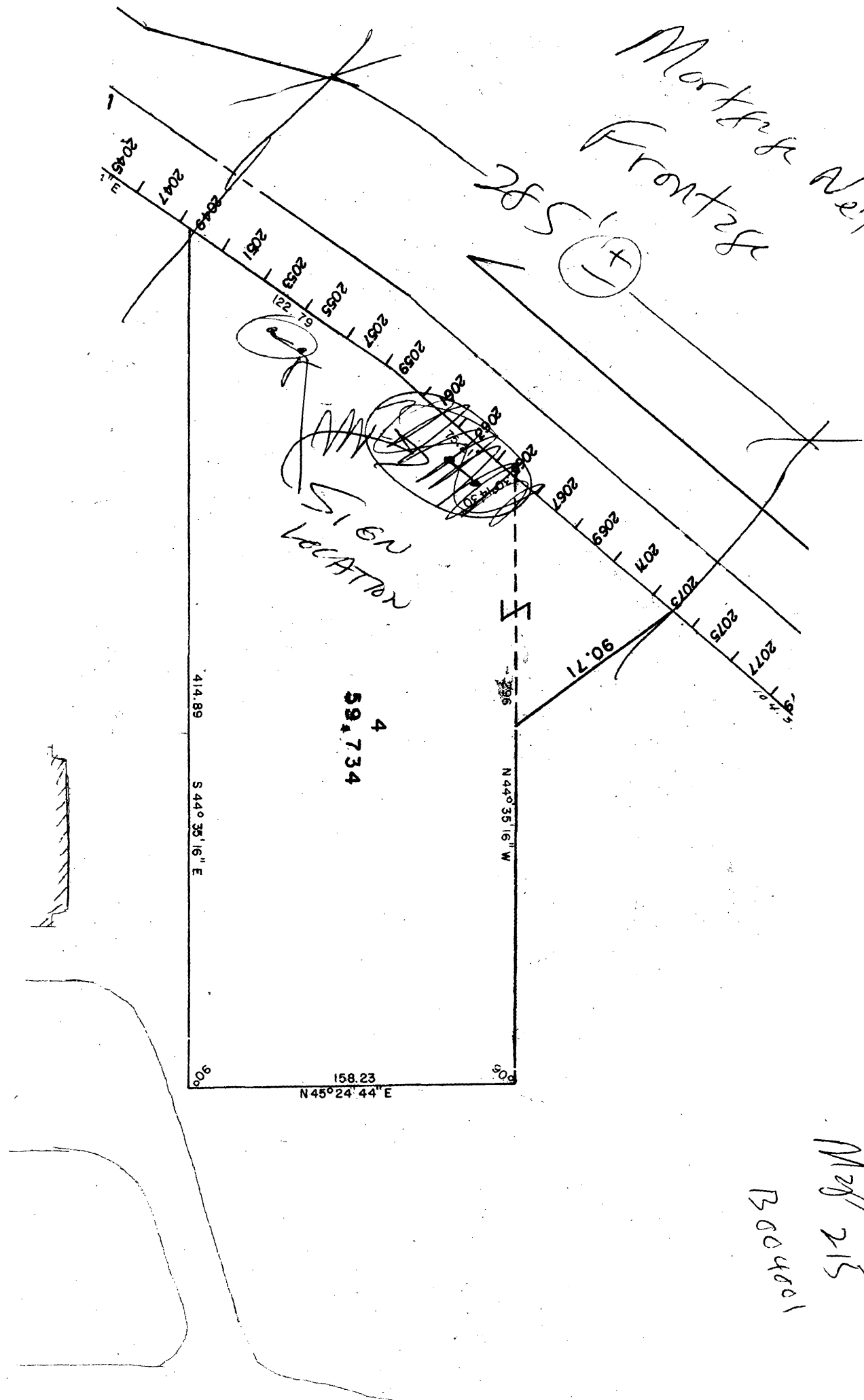
Date: 7-10-07

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

30' max
8' max high
setback 5'

5' x 5' = 27.5' sq. ft.

Mortgage Network
Frontage



Map 215
B004001



Neokraft

Neokraft Signs Inc.
686 Main Street
Lewiston, Maine 04240
Telephone: 207.782.9654
Facsimile: 207.782.0009
1.800.339.2258
<http://www.neokraft.com>

Transmittal to	CITY OF PORTLAND INSPECTIONS 389 CONGRESS STREET PORTLAND, ME 04101	Date	07.13.2007
		Job No.	7418
		Re.	MORTGAGE NETWORK PERMITS MAIL

Item	<input checked="" type="checkbox"/> Attached	<input type="checkbox"/> Hand Delivered	<input type="checkbox"/> Under separate cover	
	<input checked="" type="checkbox"/> Shop Drawings	<input type="checkbox"/> Prints	<input type="checkbox"/> Samples	<input checked="" type="checkbox"/> Specifications
	<input checked="" type="checkbox"/> Copy of letter	<input type="checkbox"/> Change Order	<input type="checkbox"/> Other	
	Copies	Date	No.	Description
	1 set	07.13.2007	7418	(1) SIGN PERMIT APPLICATION, (1) ELECTRICAL PERMIT APPLICATION, (1) LANDLORD AUTHORIZATION FORM, (1) LIABILITY INSURANCE CERTIFICATE, DRAWING, AND (1) CHECK NUMBER #8683 FOR \$140.00 TO OBTAIN PERMITS FOR MORTGAGE NETWORK LOCATED ON 2059 CONGRESS STREET.

Purpose	<input checked="" type="checkbox"/> For approval	<input type="checkbox"/> No exception taken	<input type="checkbox"/> Rejected
	<input type="checkbox"/> For your use	<input type="checkbox"/> Make corrections noted	<input type="checkbox"/> Review and comment
	<input type="checkbox"/> As requested	<input type="checkbox"/> Revise and resubmit	<input type="checkbox"/> Other

Remarks Please go ahead and mail permits to my attention upon approval.

Copy to

From SHANE MOFFETT

If enclosures are not as noted kindly notify us at once.

OFFICE:\CLERICAL\TEMPLATES\TRANSMITTAL FORM.DOT



Neokraft

Neokraft Signs Inc.
686 Main Street
Lewiston, Maine 04240
Telephone: 207.782.9654
Facsimile: 207.782.0009
1.800.339.2258
<http://www.neokraft.com>

LANDLORD CONSENT AGREEMENT

Written consent and agreement relating to a certain sign proposed to be erected on the

premises at: 2059 Congress Street
in Portland, Maine.

M.N. Properties, LLC being the owner of the premises at
2059 Congress Street in Portland, Maine

hereby gives consent to the erection of (a) certain sign(s):

Single-Sided, Internally Illuminated Pylon Sign with (1) Electronic Message Center

owned by: Mortgage Network (the tenant) as described in the

attached application for a permit submitted to the inspection division of the building

department of Code Enforcement, Portland Me. to cover

the erection of said signs.

Signed by the owner of said premises, or his authorized agent, on this

5th day of July 2007.

[Signature] (SIGNED)
Office Manager (TITLE)

ACORD CERTIFICATE OF LIABILITY INSURANCE		OP ID SR MORTG-1	DATE (MM/DD/YYYY) 07/03/07
PRODUCER Michaud, Rowe And Ruscak Ins. 198 Massachusetts Ave North Andover MA 01845 Phone: 978 688 8829 Fax: 978 557 2130	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.		
INSURED Mortgage Network, Inc. MN Properties, LLC 300 Rosewood Drive Danvers MA 01923	INSURERS AFFORDING COVERAGE INSURER A: Hanover Insurance Company INSURER B: INSURER C: INSURER D: INSURER E:	NAIC # 22292	

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	ADD'L	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 <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	OHN5689028	01/01/07	01/01/08	EACH OCCURRENCE \$ 2000000		
		DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300000						
		MED EXP (Any one person) \$ 5000						
		PERSONAL & ADV INJURY \$ 2000000						
		GENERAL AGGREGATE \$ 4000000						
		PRODUCTS - COMP/OP AGG \$ 4000000						
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$			
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$			
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$			
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WHN6288598	01/31/07	01/31/08	WC STATU-TORY LIMITS	OTH-ER	
		E.L. EACH ACCIDENT \$ 1000000						
		E.L. DISEASE - EA EMPLOYEE \$ 1000000						
	OTHER					PROPERTY 25000 EDP* 35000		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Office location: 2059 Congress St., Portland, ME 04102
 City of Portland is named as an additional insured with respect to liability arising out of the use of the described premises, including the exterior sign.

CERTIFICATE HOLDER

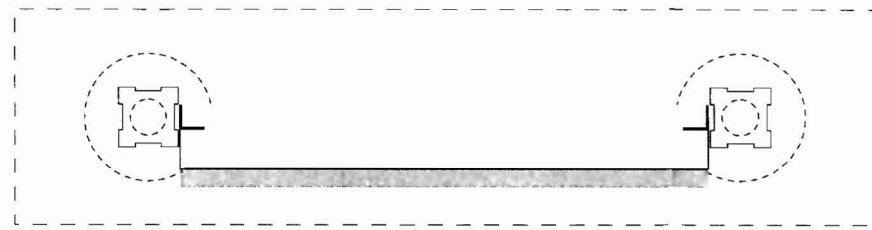
PORTLA2 City of Portland Code Enforcement 239 Park Ave. Portland ME 04102
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CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ 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.

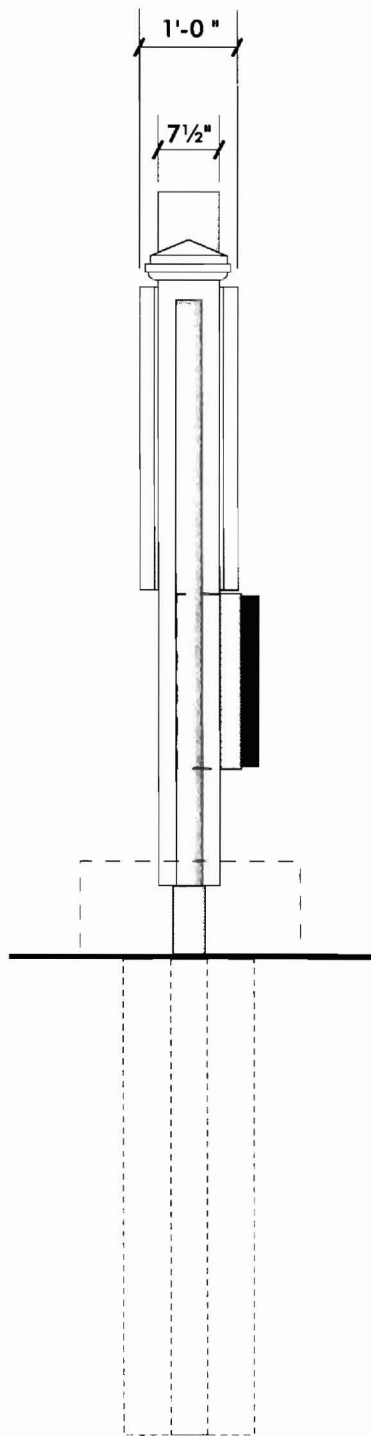
AUTHORIZED REPRESENTATIVE





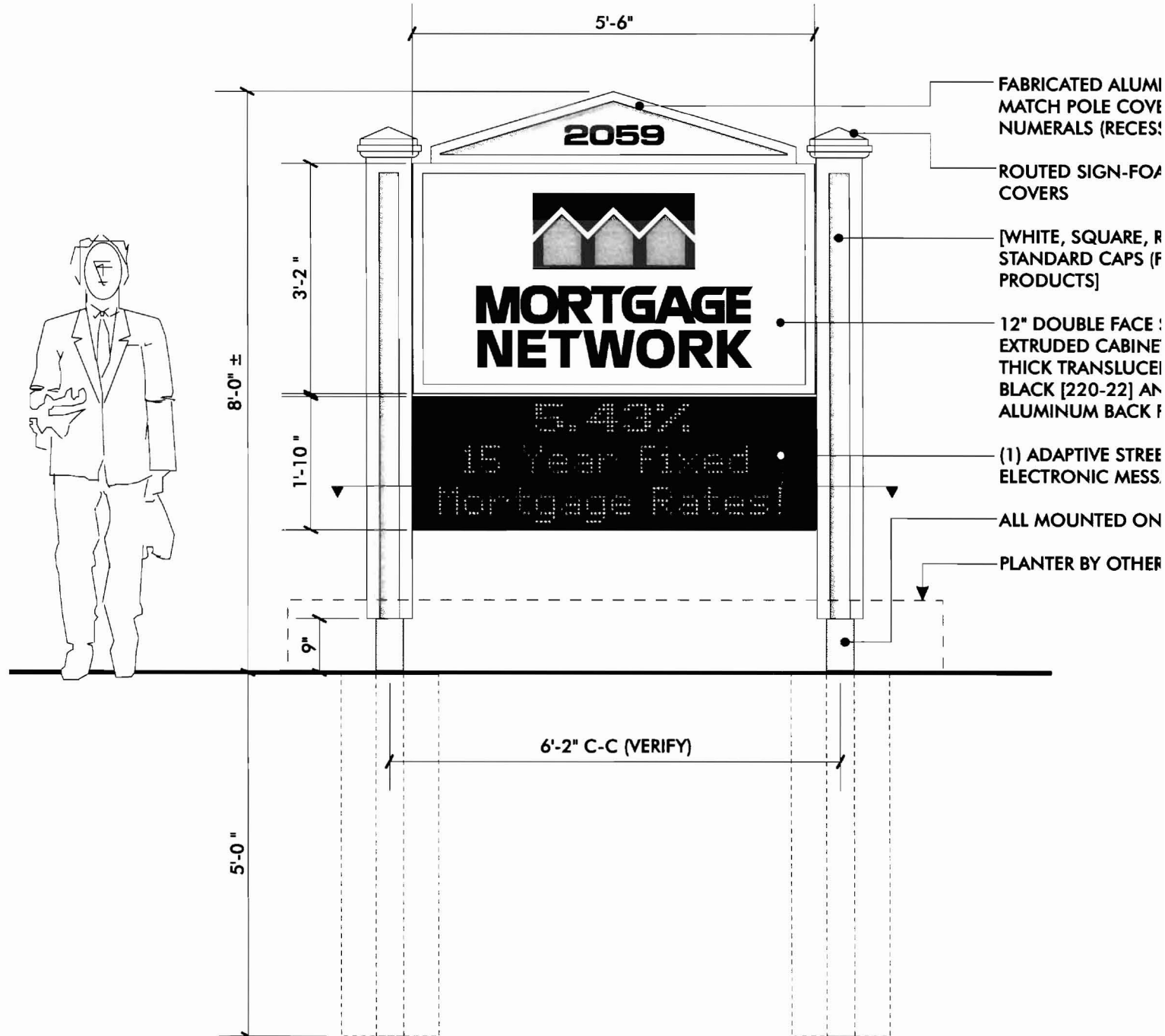
PLAN

SCALE: 1/2" = 1'-0"



SIDE VIEW

SCALE: 1/2" = 1'-0"



SINGLE FACE INTERNALLY ILLUMINATED PYLON

SCALE: 1/2" = 1'-0"

(1) REQUIRED