

Please Read Application And Notes, If Any, Attached

**BUILDING INSPECTION PERMIT**

Permit Number: 040545

**PERMIT DENIED**

This is to certify that Sturbridge Yankee Workshop/Sign Service, Inc.  
has permission to Johnstone Supply insall 2 sign -one 15' x 6" -one 24" x 12"  
AT 80 Blueberry Rd 238 A027001

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 in permit in progress before this building or part thereof is occupied or closed-in. **NO NOTIFICATION 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 - Building or Use Permit Application**  
**389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716**

Permit No: 04-0545	Issue Date:	CBL: 238 A027001
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Location of Construction: 80 Blueberry Rd	Owner Name: Sturbridge Yankee Workshop Inc	Owner Address: 90 Blueberry Rd	Phone: 
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Business Name:	Contractor Name: Sign Service, Inc.	Contractor Address: 5 12 Wolfboro Road Stetson	Phone: 2072962400
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Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: IM
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Past Use: Commercial	Proposed Use: Commercial/ Johnstone Supply insall 2 signs /-one 15'x 36" and one 24"x15'	Permit Fee: \$200.00	Cost of Work: \$200.00	CEO District: 3
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<input type="checkbox"/> Denied	Use Group:	Type:
Signature:	Signature:	

**Proposed Project Description:**  
 Johnstone Supply insall 2 signs /-one 15'x 36" and one 24"x15'  
*Needs A change of  
 use permit first*

Action:  Approved  Approved w/Conditions  Denied  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: Idobson	Date Applied For: 05/06/2004	<b>Zoning Approval</b>	
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1. This permit application does not 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..	<b>Special Zone or Reviews</b> <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"/> Date:	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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 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 ail 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

Table 2.12

*IL, ILb, Im, Ima, Imb, IH, IHb*  
~~I-1, I-2, I-2b, I-3, I-3b, I-4, and~~

*2/5/97*

**Freestanding Signs**

	Single Tenant Buildings	Multi-Tenant Buildings
Maximum Permitted Area	35 sq. ft.	70 sq. ft.
Height	10 ft.	15 ft.
Setback	5 ft.	5 ft.
# Freestanding signs per lot	1 (a)	1 (a)

(a) If lot fronts on more than one street, one freestanding sign of equivalent permitted sign area is allowed for each additional frontage, provided such signs are not readily concurrently visible.

**Building Signs**

*Attached to Bldgs*

	Single Tenant Buildings	Multi-Tenant Buildings	
Maximum permitted sign area	na	na	
Max % of wall area on which sign(s) is(are) to be placed	6%	Principal Facade(s) 8%	All Other Facade(s) 2%
# bldg. signs permitted per lot	2/building face	1/tenant plus 1 additional per building face (a)	

Michael

# 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.

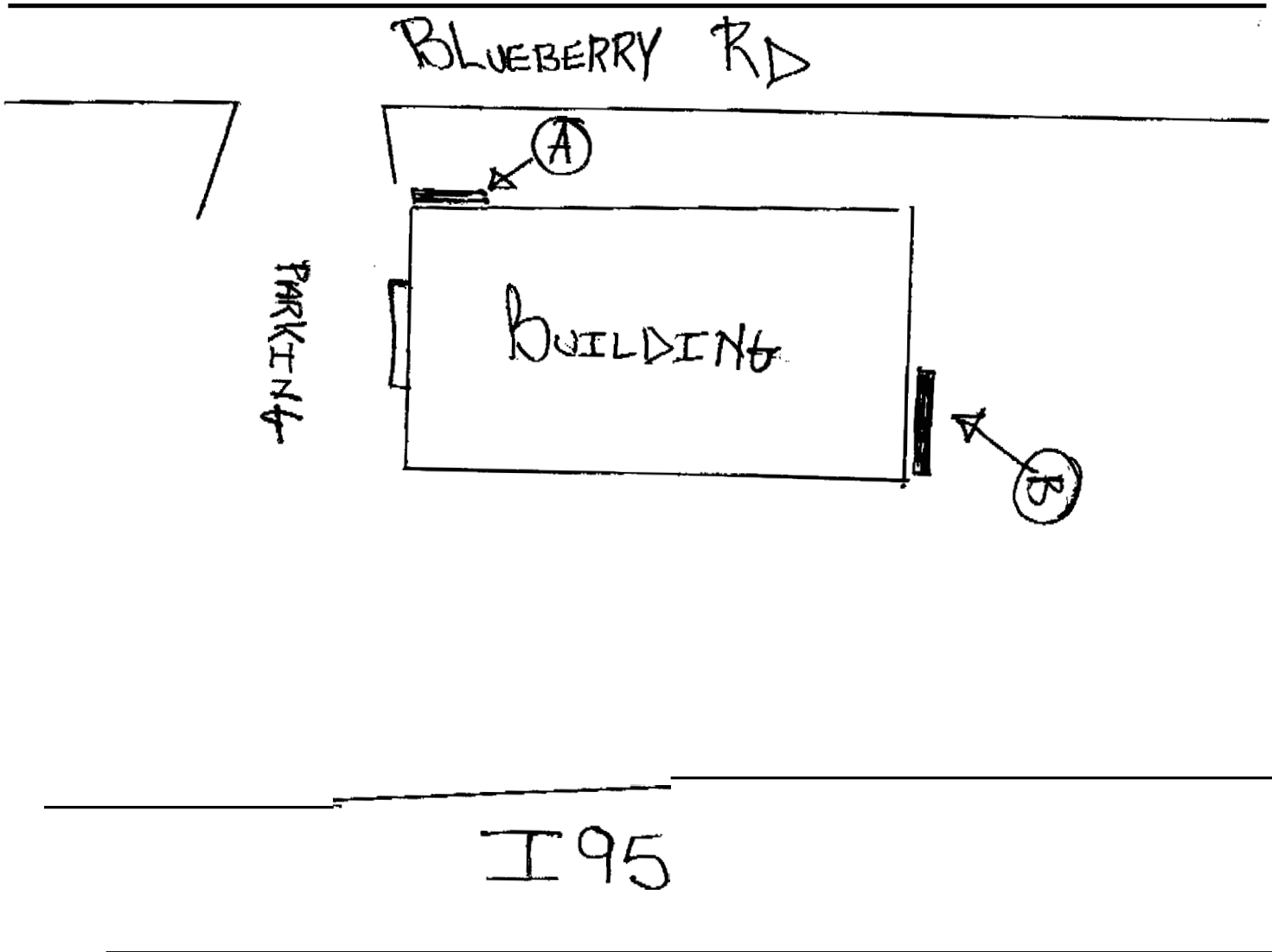
Location/Address of Construction: <u>90 BLUEBERRY RD, PORTLAND ME</u>		
Total Square Footage of Proposed Structure <u>238 A 27 85 sq ft</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#	Owner: <u>JOHNSTONE SUPPLY</u>	Telephone: <u>207-942-0293</u>
Lessee/Buyer's Name (if Applicable) <u>Johnstone Supply</u>	Applicant name, address & telephone: <u>Michael Hands SIGN SERVICES INC. 207-296-2400</u>	Total s.f. of signage x \$2.00 per s.f. plus \$30.00/\$46.00 for H.D. signage = Total Fee: \$ <u>See Sketch</u> Awning Fee = Cost Of Work: \$ Total Fee: \$ <u>220.00</u>
Current use: <u>NA</u>		
If the location is currently vacant, what was prior use: <u>NA</u>		
Approximately how long has it been vacant: _____		
Proposed use: <u>WHOLESALE / DISTRIBUTION</u>		
Project description: <u>IDENTIFICATION SIGNAGE</u> <u>Sign Services, Inc.</u> <u>NON-ILLUMINATED</u> <u>512 Wolfboro Rd.</u>		
Contractor's name, address & telephone: <u>Stetson, ME 04488</u> <u>207-296-2400</u>		
Whom should we contact when the permit is ready: <u>MICHAEL</u>		
Mailing address: <u>SAME</u>		
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 Officer'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: Michael Hands Date: 4/14/04

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



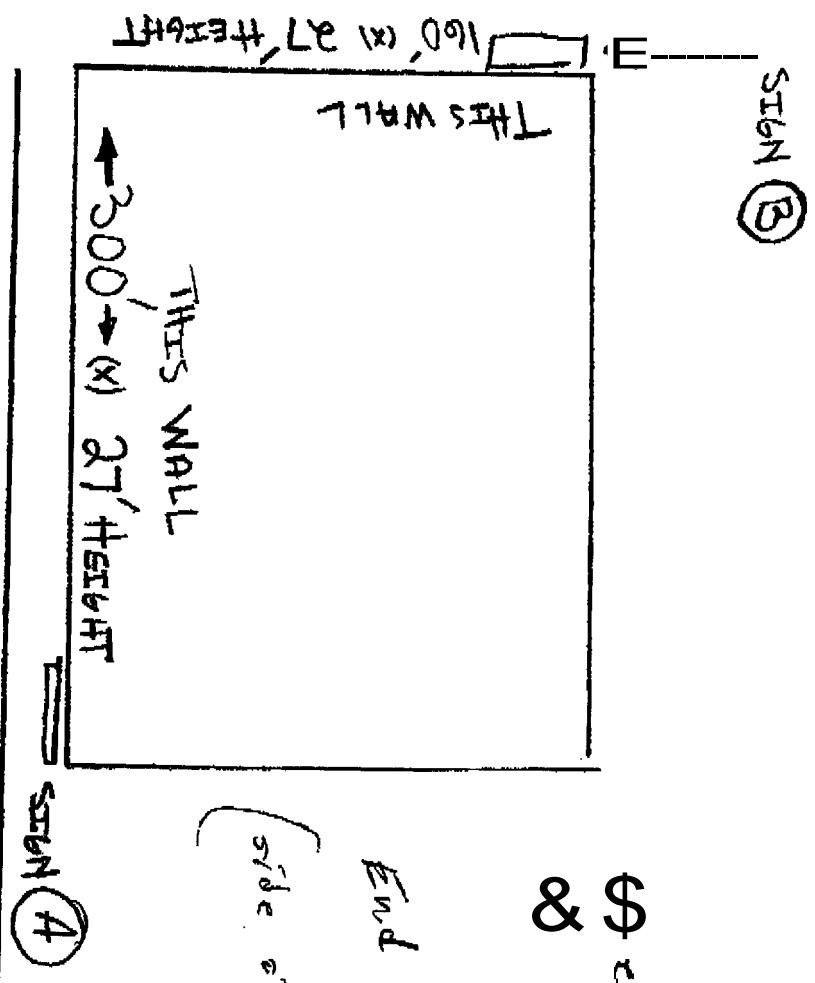
296-2400  
296-2401 - Fax  
written permission

long measurements

\$ = written permission is  
to be forwarded later today

End of Building is 160' X 27'

(side of Building is 300' X 27'  
facing Blueberry Rd.)



**JOHNSTONE SUPPLY**  
 196 Thatcher St.  
 Bangor, ME 04401  
 207-842-0293 • 207-942-0478



512 Wolfboro Rd.  
Stetson, Maine 04488

Phone: (207) 296-2400

Fax: (207) 296-2401

# Fax

To: Code Enforcement From: Michael

Fax: 874-8716 Pages: #

Phone: Date: 4/20/04

Re: Sign Ap. CC: NA

Urgent  For Review  Please Comment  Please Reply  Please Recycle

• Comments:

if all looks ok - I will drop a check in  
the mail to you for \$230.00.  
But will just need your mailing address.

Thank you  
Michael Hards

**CONFIDENTIALITY NOTICE**

The information in this transmission may contain CONFIDENTIAL information intended for use only by the above named recipient. If you have received this transmission by error, please notify us immediately by calling the person noted above. Any disclosure, dissemination, distribution, or copying of this information or its contents is strictly prohibited under the law.

# 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. Be sure to include distance from the ground and building facade dimensions for any signage attached to a building.**
- 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 \$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, plus \$9.00 for each additional \$1,000.00.**

**Base Application Fee for any Historic District signage is \$65.00 instead of \$30.00**



Client#: 10146

SIGNER

<b>ACORD. CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) 04/20/2004
PRODUCER <b>CROSS INSURANCE - BANGOR</b> 74 Gilman Road P.O. Box 1388 Bangor, ME 04401		THIS CERTIFICATE IS ISSUED AS A <b>SEALED</b> OR <b>UNSEALED</b> 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.
AGENT Sign Services Inc 512 Wolfboro Road Watson, ME 04488		INSURERS AFFORDING COVERAGE INSURER A: Hanover Insurance Company NAIC # 22292 INSURER B: Maine Employers Mutual Insurance Co 11149 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.

DESCRIPTION / LTR. ISSUED	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	ZDP522924707	12/24/03	12/24/04	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>				
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	ABP522924807	12/24/03	12/24/04	COMBINED SINGLE LIMIT (E= accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - F&B ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	GARAGE LIABILITY ANY AUTO				EACH OCCURRENCE \$ AGGREGATE \$ DEDUCTIBLE \$ RETENTION \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETARY/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	1810061644	12/24/03	12/24/04	<input checked="" type="checkbox"/> WC STATUTORY LIMITS E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$100,000 E.L. DISEASE - POLICY LIMIT \$500,000
	OTHER				

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

CERTIFICATE HOLDER City of Portland 388 Congress Street Portland, ME 04101	CANCELLATION IF SHOULD ANY OF THE ABOVE DESCRIBED BY THIS RP CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 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 <i>Kellynn Buefle</i>
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PROFESSIONAL  
HVAC/R SUPPLIER -  
WIKI/SALE ONLY

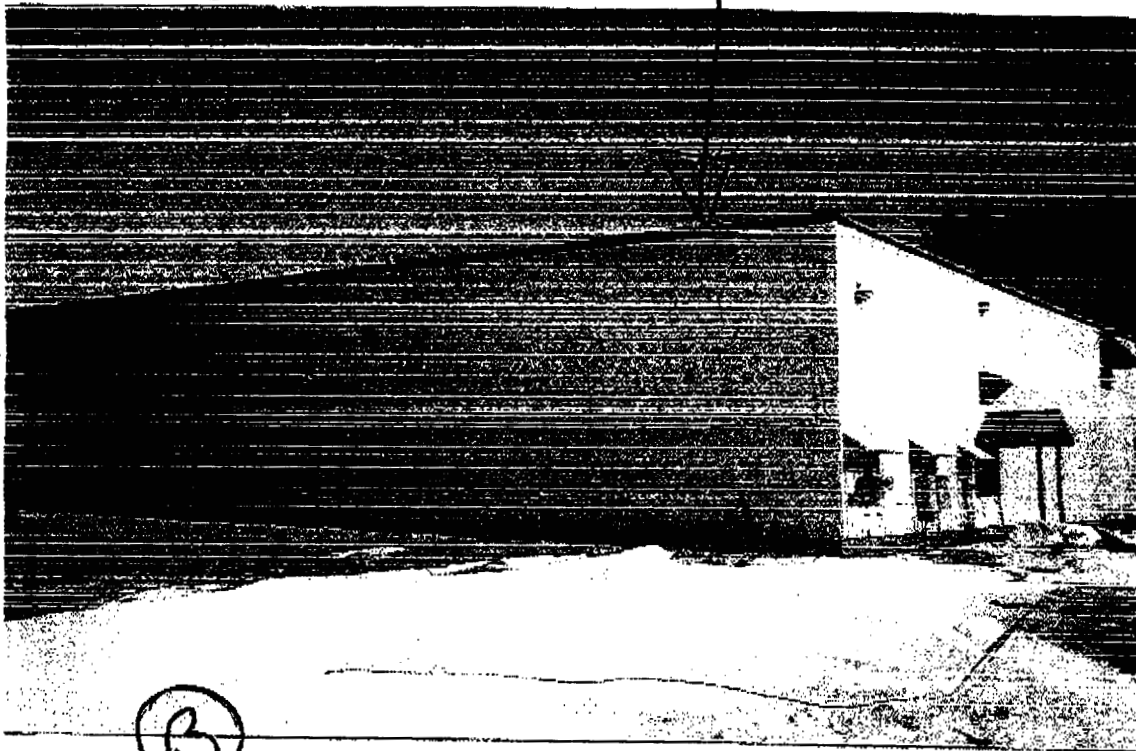
MARK GRANT  
VICE PRESIDENT

195 THATCHER STREET  
RANGOR, ME 04401-6849

TELEPHONE: (207)942-0293  
FAX: (207)942-0479  
TOLL FREE: (800)942-0293  
EMAIL: [mgrant@johnstonesupply.com](mailto:mgrant@johnstonesupply.com)

[www.johnstonesupply.com](http://www.johnstonesupply.com)

(A)



(B)



Non-Illuminated - Aluminum (1") FRAME  
ALUMINUM FACE (.010)

APR 22 '04 (FRI) 10:09

COMMUNICATION No: 50 PAGE 4

(A)

36"

15'



45 FT<sup>2</sup>  
(x) 2.00 = 90  
+ 30.00 = 120.00

20'

**JOHNSTONE SUPPLY**

BOTH SIGNS 1" DEPTH

SCREWED TO METAL WALL

40 FT<sup>2</sup>  
(x) 2.00 = 80.00  
+ 30.00 = 110.00



**SIGN SERVICES**

512 Wolfboro Rd.  
Sietson, ME 04488  
Phone: (207) 296-2400  
Fax: (207) 296-2401

Customer:

Date: / / Revision Date: / /

Customer Signature:

*Mark [Signature]*

(Upon Approval Only)

I warrant the printed herein is the product of Sign Services Inc. It is designed specifically for your company and is not to be used, reproduced or utilized in any fashion for the purpose of obtaining a bid or quote.