

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 05-0745	Issued Date: <b>PERMIT ISSUED</b> JUN 27 2005	CD: 263A A004001
Owner Address: 131 Dartmouth St 6th Fl	Phone: 207 878 8067	
Contractor Address: 177 Gray Rd Falmouth	Phone: 207 878 8067	
Permit Type: Signs - Permanent	Zone: B-2	

Location of Construction: 1030 Brighton Ave	Owner Name: Heritage Realty Limited Partnership
Business Name:	Contractor Name: South Paw Design
Lessee/Buyer's Name	Phone:

Past Use: Commercial	Proposed Use: Commercial Insert 4' x 12' vinyl sign into an existing sign
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Permit Fee: \$126.00	Cost of Work: \$126.00	CEO District: 3
FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group B Type Sgr IBL-2003 Signature: JMB 6/23/05	

**Proposed Project Description:**  
Insert 4' x 12' vinyl sign into an existing sign

**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**  
Action:  Approved  Approved w/Conditions  Denied  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: dmartin	Date Applied For: 06/09/2005	<b>Zoning Approval</b>
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<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: 6/23/05	<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 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

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

## PERMIT

**PERMIT ISSUED**  
 Permit Number: 050746  
 JUN 27 2005  
 CITY OF PORTLAND

This is to certify that Heritage Realty Limited Partnership/South Park Design

has permission to Insert 4' x 12' vinyl sign into existing sign

AT 1030 Brighton Ave 263A A004001

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 progress must be reported before this building or part thereof is closed or 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 \_\_\_\_\_  
DepartmentName

*Jeanne Bourke* 6/23/05  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

# 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: 1030 - BRIGHTON AVE. PORTLAND  
PINE TREE SHOPPING PLAZA

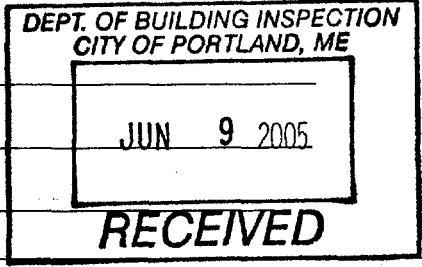
Total Square Footage of Proposed Structure: 48 sq. ft. Square Footage of Lot: ?

Tax Assessor's Chart, Block & Lot Chart# 263 Block# AA Lot# 004 Owner: LOWES Telephone: \_\_\_\_\_

617-  
695-1166

Lessee/Buyer's Name (If Applicable): RACKFORD DEV. HOWARD MINTZ 1 Vells Ave. NENTON, MA 02459  
Applicant name, address & telephone: PROJECT MANAGER LOWE'S Patrick Burris 20 Cumberland Ln. Granby, CT 06035 860-653-6510  
Total s.f. of signage x \$2.00 per s.f. plus \$30.00/\$65.00 for H.D. signage = Total Fee: \$ \_\_\_\_\_  
Awning Fee = Cost Of Work: \$ \_\_\_\_\_  
Total Fee: \$ \_\_\_\_\_

Current use: AMES-STANIS  
If the location is currently vacant, what was prior use: \_\_\_\_\_  
Approximately how long has it been vacant: 2  
Proposed use: LOWE'S  
Project description: Retail



Contractor's name, address & telephone: \_\_\_\_\_ 878-0678  
Whom should we contact when the permit is ready: SOUTHPAW DESIGN  
Mailing address: JENNY BECK 177 GRAY RD. FALMOUTH, ME 04105  
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: 878-0678

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 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: Jenny Beck Date: 6-8-05

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

# SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE COMPLETE ALL INFORMATION

ADDRESS: PINE TREE PLAZA BRIGHTON AVE ZONE: B-2  
PORTLAND

CBL: \_\_\_\_\_

SINGLE TENANT LOT? YES  NO \_\_\_\_\_ MULTI TENANT LOT? YES  NO \_\_\_\_\_

MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES \_\_\_\_\_ NO

## TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET):

Length: 12' Height: 4'

### INFORMATION ON PROPOSED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES  NO \_\_\_\_\_ DIMENSIONS PROPOSED: 4' x 12'

BLDG. WALL SIGN? (attached to bldg) YES \_\_\_\_\_ NO  DIMENSIONS PROPOSED: \_\_\_\_\_

### INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES  NO \_\_\_\_\_ DIMENSIONS: \_\_\_\_\_

BLDG. WALL SIGN (attached to bldg)? YES \_\_\_\_\_ NO  DIMENSIONS: \_\_\_\_\_

AWNING? YES \_\_\_\_\_ NO \_\_\_\_\_ DIMENSIONS: \_\_\_\_\_

LOT FRONTAGE (FEET): \_\_\_\_\_

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 WITH COMMUNICATIONS/MESSAGE/TRADEMARK/SYMBOL? \_\_\_\_\_ s.f.

**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 ARE ALSO REQUIRED.**

SIGNATURE OF APPLICANT: Amey Bech DATE: 6-5-09

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

C/C #1174

## 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**

**City of Portland, Maine - Building or Use Permit**

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<b>Business Name:</b>	<b>Contractor Name:</b> South Paw Design	<b>Contractor Address:</b> 177 Gray Rd Falmouth	<b>Phone</b> (207) 878-0678
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	

<b>Proposed Use:</b> Commercial Insert 4' x 12' vinyl sign into an existing sign	<b>Proposed Project Description:</b> Insert 4' x 12' vinyl sign into an existing sign
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**Dept:** Zoning      **Status:** Approved      **Reviewer:** Marge Schmuckal      **Approval Date:** 06/23/2005  
**Note:**      **Ok to Issue:**

**Dept:** Building      **Status:** Approved      **Reviewer:** Jeanine Bourke      **Approval Date:** 06/23/2005  
**Note:**      **Ok to Issue:**

# ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID BA  
SOUTH01

DATE (MM/DD/YYYY)  
06/06/05

**PRODUCER**

TD Banknorth Ins Agency Inc (SP)  
P.O. Box 406  
Portland ME 04112-0406  
Phone: 207-775-6000 Fax: 207-775-0339

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**

Southpaw Design Sign Studio  
Jenny Winslow  
177 Gray Rd  
Falmouth ME 04105

**INSURERS AFFORDING COVERAGE**

**NAIC #**

INSURER A:	MNG INSURANCE COMPANY	15997
INSURER B:		
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.

NEW ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b>	SC0106489	04/01/05	04/01/06	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5,000
					PERSONAL & ADV INJURY \$ 1,000,000
					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMP/OP AGG \$ 1,000,000
					GEN L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO.JECT <input type="checkbox"/> LOC
	<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS				
	<input checked="" type="checkbox"/> NON-OWNED AUTOS				
	<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	<b>EXCESS/UMBRELLA LIABILITY</b>				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
					\$
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				WC STATUTORY LIMITS OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$
	<input type="checkbox"/> OTHER				E.L. DISEASE - POLICY LIMIT \$

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

As required.

**CERTIFICATE HOLDER**

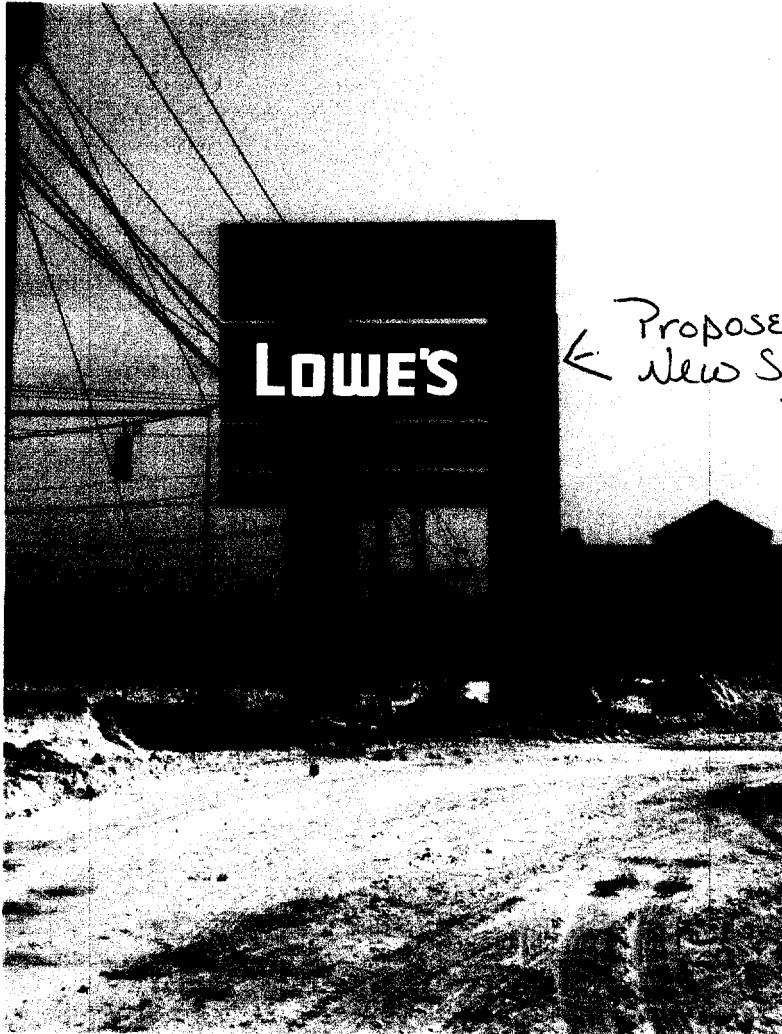
City of Portland  
399 Congress St Rm 313  
Portland ME 04101

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 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

Signature: *J. A. Albrant*  
Date: 6/6/05



← Proposed  
New Sign