Cit	y of Portland, Maine	- Building or Use	Permi	t Application	1 P	ermit No:	Issue Date	:	CBL:	_
389	Congress Street, 04101	Tel: (207) 874-8703	, Fax:	(207) 874-871	6 _	10-0192			267 A0	05001
Location of Construction: Owner Name:					Owner Address:		_	Phone:		
190 Riverside St (VOIT-53) Bounty Develo			opment Llc		One	e Canal Plaza 5	th Floor			
Business Name: Contractor Name:			4		Cont	tractor Address:			Phone	
Kid	ls Crooked House	Allen Sween &	d Digita	I	25	Washington Av	e. Scarbor	ough	2075106800	
Less	ee/Buyer's Name	Phone:			Pern	Permit Type:			•	Zone:
					Sig	gns - Permanent	t			15-4
Past	Use:	Proposed Use:		-	Peri	mit Fee:	Cost of Wor	k: CE	O District:	7
Cor	nmercial - vacant (was UPS		light maunufacturing				9	00.08	3	
store) & sales - Ere			et attached 8' x 2' sign - "Kids Crooked		FIR	E DEPT:	Approved Denied	Use Group.		Туре:
Prop	osed Project Description:	<u> </u>							D s	21.21
Ere	ct attached 8' x 2' building	wall sign "Kids Croo	Signature:		Signature:					
					Acti		ed App	proved w/Con		Denied
_	·	[n			Sign	nature:		Da	te:	
	nit Taken By:	Date Applied For: 03/01/2010		Zoning Approval						
gg			Special Zone or Reviews		ws	vs Zoning Appeal		<u> </u>	Historic Preservation	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Shoreland		,,,	☐ Variance			Not in District or Landmark	
Building permits do not include plumbing, septic or electrical work.			Wetland			☐ Miscellaneous [		760	Does Not Red	quire Review
3. Building permits are void if work is not started within six (6) months of the date of issuance.			Flood Zone		Conditional Use		A	Requires Rev	iew	
	False information may inv permit and stop all work	alidate a building	Subdivision		Interpretation			Approved		
			Si	te Plan		Approved	I		Approved w/	Conditions
			Maj [	Minor MM		Denied			Denied	
				is hou		Date:		Date:	ARM	
I hav juris shal	reby certify that I am the over the vertify that I am the over the condiction. In addition, if a pell have the authority to entern permit.	wner to make this applermit for work describe	med proication a	as his authorized application is is	ie pro d age	nt and I agree to I, I certify that t	o conform he code of	to all appli ficial's auth	cable laws orized repr	of this esentative

ADDRESS

DATE

PHONE

SIGNATURE OF APPLICANT

City of Portland, Main	ne - Building or Use Permi	it	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 041	01 Tel: (207) 874-8703, Fax:	(207) 874-8716	10-0192	03/01/2010	267 A005001		
Location of Construction:	Owner Name:	wner Address:	Phone:				
190 Riverside St (unit 5B)	Bounty Development	One Canal Plaza 5th Floor					
Business Name:	Contractor Name:	C	ontractor Address:	Phone			
Kids Crooked House	Allen Sween & Digita	al 2	25 Washington Av	e. Scarborough	(207) 510-6800		
Lessee/Buyer's Name	Phone:	P	ermit Type:				
			Signs - Permanent				
Proposed Use:		Proposed	Project Description:		-		
building wall sign - "Kids (	Crooked House"						
Dept: Zoning	Status: Approved	Reviewer:	Ann Machado	Approval D	ate: 03/15/2010		
Note: Change of use permit - #10-0239  Ok to Issue: ✓							
Dept: Building Note:  1) Signage Installation to 6	Status: Approved with Condition		Jeanine Bourke	Approval D	ate: 03/23/2010 Ok to Issue: ✓		

### Comments:

3/4/2010-amachado: Spoke to Amanda. Need to do change of use permit. Space was vacant for three years; it was UPS store before. "Kids Crooked House" is light manufacturing with sales office/showroom. Need tenant frontage.

3/15/2010-amachado: Marge signed off on change of use permit.

8/2/2011-jmb: Spoke with Amanda Pike, they are not doing the sign permit, ok to void.



# **Original Receipt**

		Jack	5	20		
Received from	.ds (	100 de 2	X.	use.		
Location of Work	10 R	menio	lo (	t.		
				med Fil		
Cost of Construction	\$	Building	g Fee:			
Permit Fee	\$	Site	Fee:			
	Certifica	ate of Occupancy	Fee:			
		Te	otal:			
Building (IL) Plum	bing (I5)	Electrical (I2)	Site Pl	an (U2)		
Other	19-	_				
CBL:	A00-	5				
Check #: \\	,	Total Colle	cted \$	62,00		
No work is to be started until permit issued. Please keep original receipt for your records.						

Taken by:

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

# Signage/Awning Permit Application 100192

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: 190 Riversi Le St. Unit 513, Portland, WE	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#  267 A 005 Bowls Roputy Navay west 707-871-12	290
Lessee/Buyer's Name (If Applicable)  Contractor name, address & telephone:  Total s.f. of signage x \$2.00 lbs 8ft x  Allen Sween + D. Si tal  Per s.f. plus \$30.00/\$65.00  For H.D. signage = Total  Fee: \$32+30 = \$10.00	,
Portland, ME 04103    Southernormal Southernormal Awning Fee = cost of work _ Total Fee: \$ 62.50	
Who should we contact when the permit is ready: AMUMA Ple phone: 20.485-5454	
Tenant/allocated building space frontage (feet): Length: Height Height Height Single Tenant or Multi Tenant Lot	
Current Specific use: Business - Sals Off of Hantactyping - was VPS stee  If vacant, what was prior use: 3 years.  Proposed Use:	
Information on proposed sign(s):  Freestanding (e.g., pole) sign? Yes No Dimensions proposed: Height from grade: Bldg. wall sign? (attached to bldg) Yes No Dimensions proposed: Height from grade: Proposed awning? Yes No	
Is there any communication, message, trademark or symbol on it? Yes No MAR - 1 20 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:	Mai <b>ne</b>
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.	
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 requadditional information prior to the issuance of a permit. For further information visit us on-line at <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a> , stop 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 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 a a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to en areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.	iddition, it
Signature of applicant:  This is not a permit; you may not commence ANY work until the permit is issued.	
1.5 × 16 = 24 permit; you may not commence ANT work until the permit is issued.	

Kids Crooked House Page 1 of 1

#### Ann Machado - Kids Crooked House

Amanda Pike <amanda@kidscrookedhouse.com> From:

To: <amachado@portlandmaine.gov>

Date: 3/5/2010 3:56 PM Subject: Kids Crooked House

Attachments: Change of Use.pdf; KCH 190Riverside[1].pdf

Hi Ann,

Ok – here goes... I'm hoping this is all the information you need!

Floor plan and change of use permit attached.

And our frontage is 16'.

I also put a check in the mail for \$105 today (for the Change of Use)

Is this all you need???

Thank you!

Amanda

Amanda Pike VP of Sales and Operations Kids Crooked House, LLC 190 Riverside Street - Suite 5B Portland ME 04103

888 447 5446 amanda@kidscrookedhouse.com www.kidscrookedhouse.com

Facebook: http://www.facebook.com/kids.crooked.house

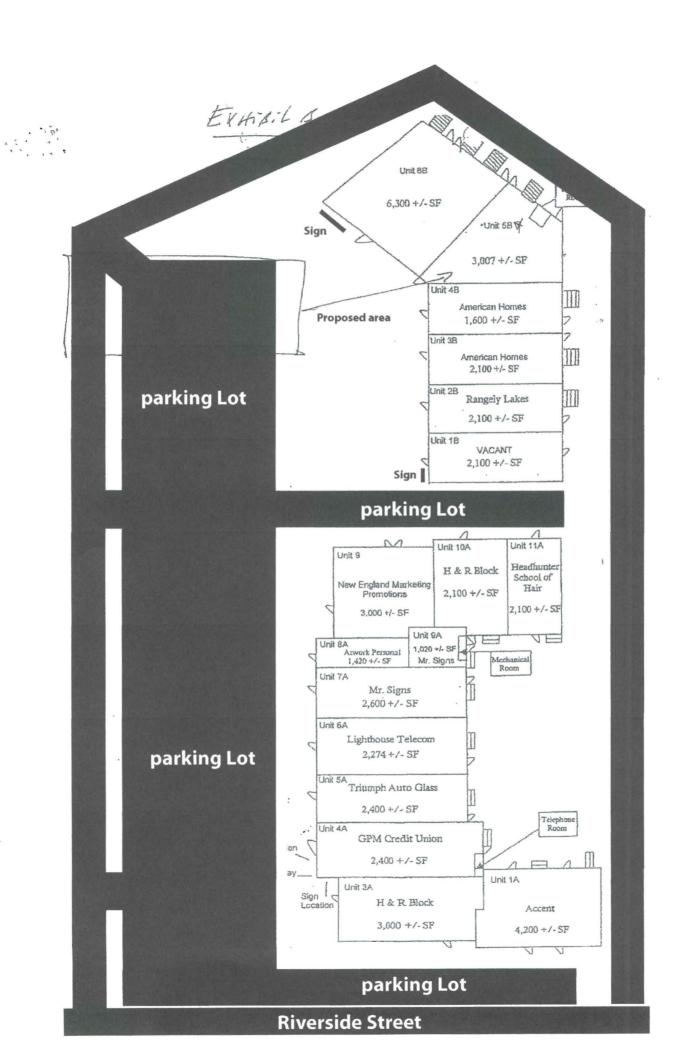
Twitter: http://twitter.com/crookedhouse

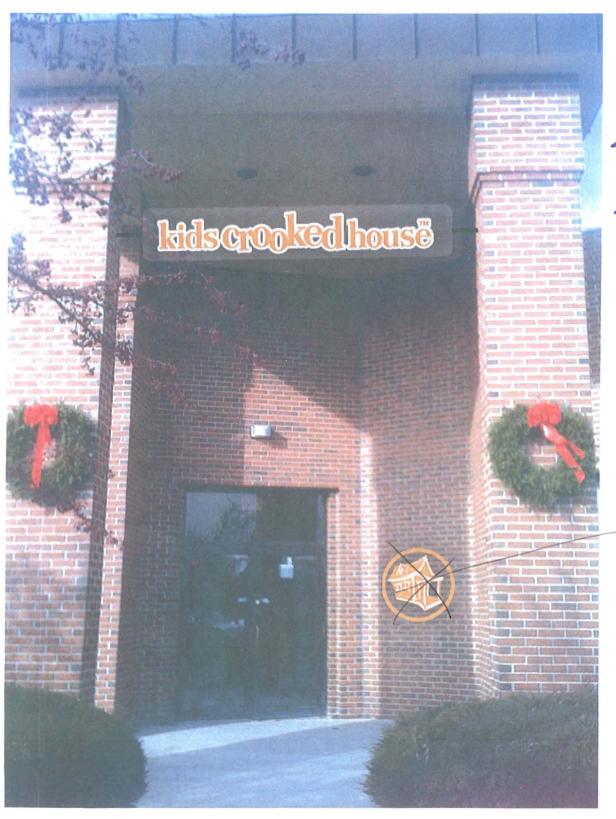
YouTube: http://www.youtube.com/kidscrookedhouse

RECEIVED

MAR -8 2010

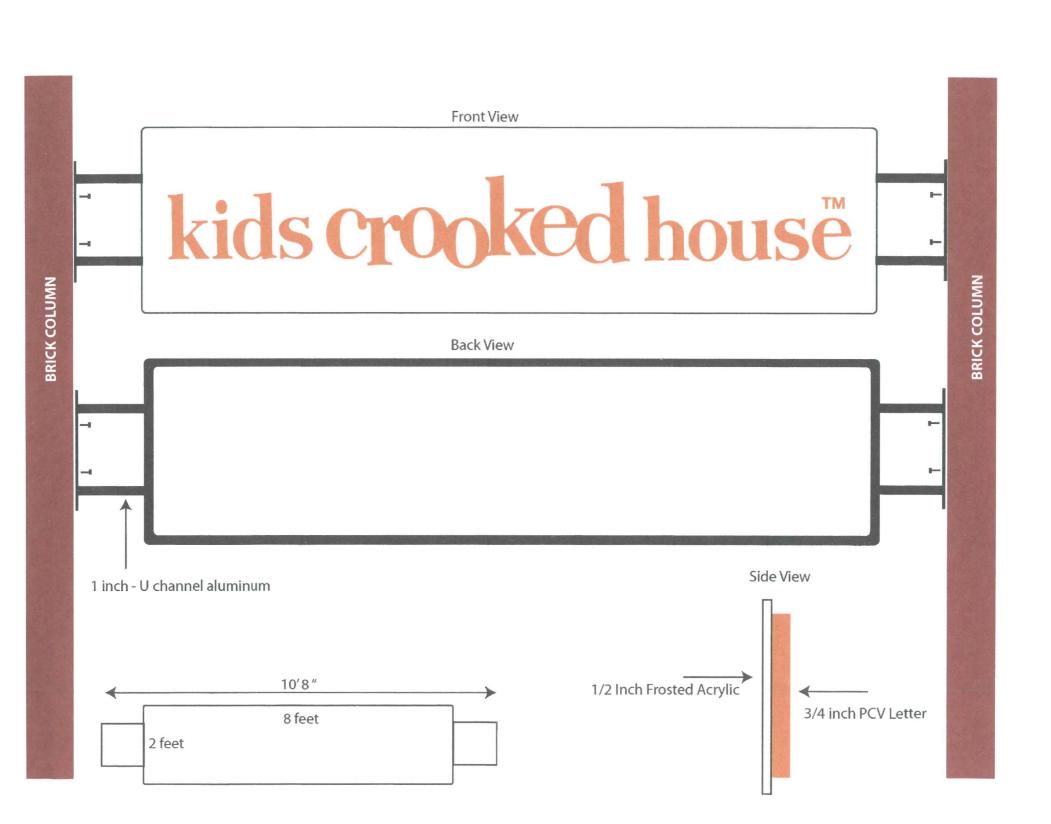
Dept. of Building Inspections City of Portland Maine





Attroposed No existing Signass

of penel.





One Canal Plaza, Suite 500 Portland, ME 04101

> T 207.871.1290 F 207.772.2647

> > www.boulos.com

January 25, 2010

Marge Schmuckal Code Enforcement Department City of Portland 389 Congress Street Portland, ME 04101

RE: Signage Consent

**Kids Crooked House** 

190 Riverside Street, Portland, Maine

Dear Marge:

This letter serves as the Landlord's approval to install signage as shown on the enclosed photo at the above referenced property.

Please do not hesitate to contact me at 871-1290 with any questions related to this or any other matter.

Sincerely,

Paul Ureneck

Vice President of Project Management

Enclosure

Cc: Glen Halliday

-	100	OR	D. CERTIFIC	ATE OF LIABILIT	Y INSUE	RANCE			DATE (MW/DD/YYYY) 1/25/2010
	PRODUCER (207)774-6257 FAX: (207)774-2994				THIS CERTIFICATE IS ISSUED AS A MATTER OF				
Cla	ark		surance	(207)772 2332	ONLY AND	CONFERS N	O RIGHTS UPON	TH	E CERTIFICATE
			gress Street				TE DOES NOT A		
		-	3543						
	tla			104	INSURERS AF	FORDING COVE	RAGE	NAI	C #
INSU	RED					rless Insu		241	
Ki	ls C	roc	oked House		INSURER B:				.50
190	Ri	vei	rside Street		INSURER C:	W			
	t E				INSURER D:				
Poi	tla	ınd	ME 04	103	INSURER E:				
	ERAC				INCORLICE.				
THE AG	UIRE INSU	MEN JRAN ATE L	T, TERM OR CONDITION OF AN		WITH RESPECT ECT TO ALL TH	TO WHICH THIS C E TERMS, EXCLU	ERTIFICATE MAY BE SIONS AND CONDITI	ISSUE	D OR MAY PERTAIN,
INSR LTR	ADD'L INSRD		TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)		LIMITS	3
			ERAL LIABILITY				EACH OCCURRENCE		1,000,000
		X	COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrent	ce)	50,000
A			CLAIMS MADE X OCCUR	CBP8738542	12/11/2009	12/11/2010	MED EXP (Any one perso		10,000
							PERSONAL & ADV INJUI	RY	1,000,000
							GENERAL AGGREGATE		2,000,000
		GEN	"L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP	AGG	2,000,000
		X	POLICY PRO- JECT LOC						
		AUT	OMOBILE LIABILITY				COMBINED SINGLE LIMI (Ea accident)	IT	8
		-	ANY AUTO					-	
		$\vdash$	ALL OWNED AUTOS				BODILY INJURY (Per person)		3
		$\vdash$	SCHEDULED AUTOS						
		-	HIRED AUTOS				BODILY INJURY (Per accident)		s
			NON-OWNED AUTOS				PROPERTY DAMAGE		
							(Per accident)		•
		GAR	AGE LIABILITY				AUTO ONLY - EA ACCID	ENT	\$
			ANY AUTO					ACC	3
							AUTO ONLY:	AGG	1
		EXC	ESS/UMBRELLA LIABILITY				EACH OCCURRENCE		1,000,000
		X	OCCUR CLAIMS MADE				AGGREGATE		1,000,000
			1						8
A			DEDUCTIBLE	CU8739042	12/11/2009	12/11/2010			8
		X	RETENTION \$ 10,000				LANC CTATU	OTU	8
			COMPENSATION AND RS' LIABILITY				WC STATU- TORY LIMITS	OTH- ER	
	ANY F	PROPE	RIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT		8
			EMBER EXCLUDED? ibe under				E.L. DISEASE - EA EMPL		
	SPEC	IAL PE	ROVISIONS below				E.L. DISEASE - POLICY I	IMIT	8
	OTHE	H							
DESC	RIPTI	ON OF	OPERATIONS/LOCATIONS/VEHICLE	ES/EXCLUSIONS ADDED BY ENDORSEMENT	SPECIAL PROVISIO	NS	L		
,				l insured with respect to					
CEL	TIEI	ATE	HOLDER		CANCELLATI	ON			\
					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE				
City of Portland				EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL					
389 Congress Street				10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT					
Portland, ME 04101				FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE					
					INSURER, ITS AGENTS OR REPRESENTATIVES.				
					AUTHORIZED REF			-	7 2
					Robin Carl	son/BRSC	Kobun	_(	Carlon

Form # P 04

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

This is to certify that

## **BUILDING INSPECTION**

## PERMIT

Bounty Development Llc/Allen Sween & Digital

Permit Number: 100192

has permission to Frect attached 8' x 2' building	wall sign "Kids Crooked	House"	
AT _190 Riverside St		CBL 267 A005001	
provided that the person or persons, fi	irm or corporation	accepting this perm	it shall comply with all
of the provisions of the Statutes of Ma	a <mark>in</mark> e and of the Ord	dinances 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 written permission procured before this building or part thereof is lathed or otherwise 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

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD