Form # P 04	DISPLAY	THIS	CARD	ON	PRINCIPA	L FRON	TAGE OF	WORK	
Please Rea Application A Notes, If An Attached	nd						D Perimit Numb	eri 0804170	
This is to certi	ify that <u>JPRO</u>	PERTIES /	Sign Desig	nc					\
has permissio	n to <u>new 4(</u>)" x 80" dig	ital sign						<u> </u>
AT	ERSIDE ST					267	N006001		<u> </u>
of the pro	that the pers ovisions of th ruction, main rtment.	ne Statu	tes of I		nd of the	ances of	f the City of	Shall comply w Portland regul application on	ating
	Public Works for if nature of wor mation.			fication h and w re this ed or (JR NOT	n permi: ding or t t	must procu herec ed-in. ED.	procured by	of occupancy must owner before this le ereof is occupied.	
	ER REQUIRED APP						1	is /13/08	
•						\sim	241	67 13 00	
Other						\sim	(THA	1	
	Department Name		PENALI	TY FOR	R REMOVING	THIS CAR		Stospection Services	

City of Portland, Main	e - Building or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, 0410)1 Tel: (207) 874-8703, Fax: (20)7) 874-8716	08-0417	04/25/2008	267 A006001
Location of Construction:	Owner Name:		Owner Address:		Phone:
150 RIVERSIDE ST	17 BOWDOIN D				
Business Name: Contractor Name:			Contractor Address:	Phone	
	Sign Design Inc		PO Box 207 West	tbrook	(207) 856-2600
Lessee/Buyer's Name	Phone:	i	Permit Type:		
			Signs - Permaner	nt	
Proposed Use:		Proposed	Project Description	:	
Commercial - replace 40" x 80" panel with electronic message board in the freestanding sign. replace 40" x 80" panel with electronic message board in the freestanding sign					
	Status: Approved with Conditions ng panel in a sign with an electronia		Ann Machado rd.	Approval I	Date: 05/08/2008 Ok to Issue: ♥
	LL NOT continuously flash, nor con nge messages more often than once	•			-
Dept: Building S Note:	Status: Approved with Conditions	Reviewer:	Tammy Munson	Approval I	Date: 05/13/2008 Ok to Issue:
1) Signage Installation to c	comply with Chapter 31 of the IBC 2	2003 building	code.		

City of Portland, Maine - B	uilding or Use	Permit Applicatio	on Permit	t No:	Issue Date:	CI	BL:
389 Congress Street, 04101 Tel				08-0417		2	267 A006001
Location of Construction:	Owner Name:		Owner Ad	ldress:		Pho	o ne:
150 RIVERSIDE ST	J PROPERTIE	ES	17 BOV	VDOIN DF	t l		
Business Name:	Contractor Name	:	Contracto	or Address:	·	Pho	one
	Sign Design Ir	nc	PO Box	207 Westl	orook	20	78562600
Lessee/Buyer's Name	Phone:		Permit Ty	/pe:			Zone:
			Signs -	Permanent			B-4
Past Use: Commercial - "Jpsch Government Furniher"-ith Proposed Project Description: new 40" x 80" digital sign parel itplace	I sign "Up s. Funid	replan porel new 40" x 80" digital ach Coni sonnat we	FIRE DE	\$86.00	Denied Use Sig	PECTION: e Group:	3 Type: 5,2 C. 7,203 - - - - - - - - - - - - -
			Signature			Date:	
Permit Taken By: Date	e Applied For:			Zoning	Approval		
ldobson 04	/25/2008			8			
I. This permit application does n	not preclude the	Special Zone or Rev	iews	Zoning	g Appeal	Hist	oric Preservation
Applicant(s) from meeting app Federal Rules.	-	Shoreland		Variance		Not	in District or Landmar
2. Building permits do not includ septic or electrical work.	de plumbing,	Wetland		Miscellar	eous	Doe	es Not Require Review
3. Building permits are void if w within six (6) months of the da		Flood Zone		Condition	nal Use	Req	uires Review
False information may invalid permit and stop all work.	ate a building	Subdivision		Interpreta	tion	App	proved
		Site Plan		Approved	l	App	proved w/Conditions
		1	M	Denied			ied

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



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: 150 Riverside St.						
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 267 A 6 Owner: John Locke Telephone: 774-2900						
Lessee/Buyer's Name (If Applicable) Lessee/Buyer's Name (If Applicable) Sign Design, Onc Per s.f. plus \$30.00/\$65.00 For H.D. signage = Total Fee: \$ We.5tbrock, ME 04078 Awning Fee= cost of work Total Fee: \$						
Who should we contact when the permit is ready: Diana Roger phone: 856-2600						
Tenant/allocated building space frontage (feet): Length: Height Lot Frontage (feet) Image: Single Tenant on Multi Tenant Lot						
Current Specific use:						
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 Dimensions proposed: Height from grade: Image: Composed: Proposed awning? Yes No Dimensions proposed: Image: Composed: Image: Composed: Height of awning: Length of awning: Depth: Image: Composed: Image: Composed: Image: Composed: Is there any communication, message, trademark or symbol on it? Yes No Image: Composed: Image: Composed: If yes, total s.f. of panels w/communications, message, trademark or symbol: S.f. Image: Composed: Image: Composed: Image: Composed:						
Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes No Dimensions: <u>Noc attached</u> Bldg. wall sign? (attached to bldg) Yes No Dimensions: Awning? Yes No 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.						
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.						

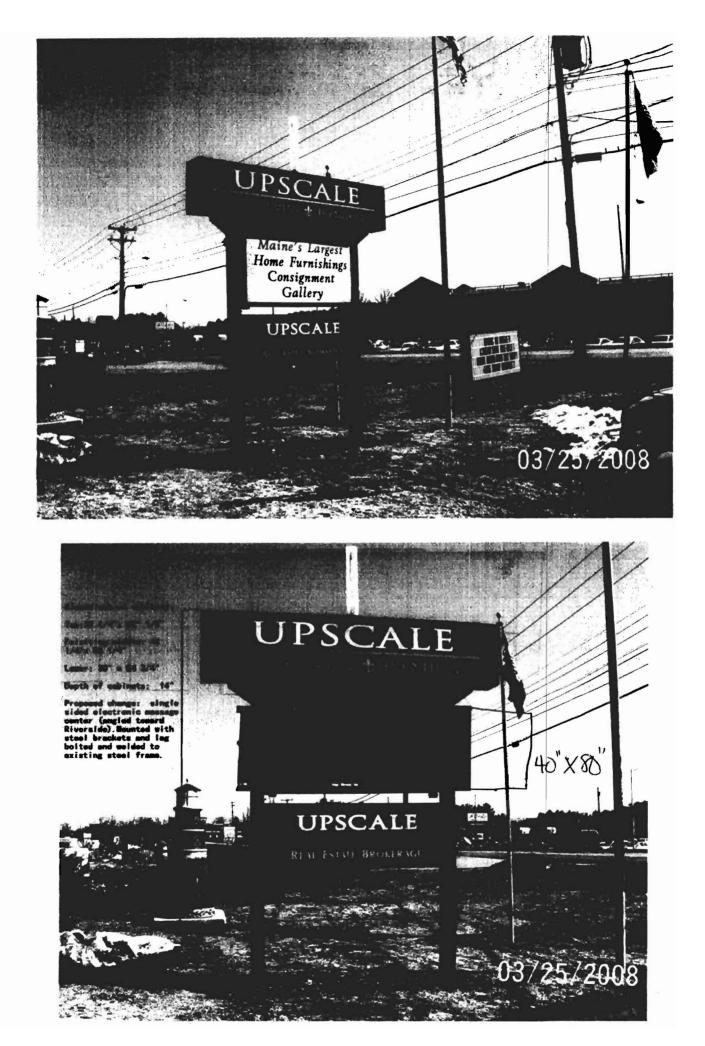
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at <u>www.portlandmaine.gov</u>, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

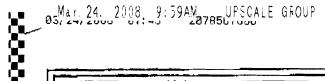
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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.

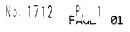
			,	
Signature of applicant: Diana	Olmste	2ach	Date:	
	$-\infty$			
Single knowt This is not a permit;	you may not com	mence ANY work u	intil the permit is issued.	
Singh knowt. This is not a permit; 65 \$ max - Singer dready permit	ted .			
25 him - \$114 sira				
Setback 11				

photas	Sign Desi	gn. Inc	
Existing sign 1			
Type: X_pylonmonument	building mountdoor Depth grade to t	glasswindow glass top // FT ALL dimension H X W X D (whe	ng must.
X Illuminatednon-illuminated	tedSingle faceDoubl	e face *Face material	· · ·
V/0	O/S	Radius Corners	
Retainers	H dividers		
Mounting devices			
Building structure:wood	_Concretemetalother	r	
Electrical:120V240V	Other		
SITE INFO			
Building measurements: Grade to r	oof: Total	widthElevation	
Sign Band Other	Tenants (include photos)		
CONSIGNA	CALE NENT FURNITURE CM CREN - NECH	30,3\$ TOP (ADINET 30,3\$ TOP (ADINET 14"D MIDDLE CANNET 2487\$ 4214" H X 8514"	
-louie Miorle	FURNISHINGS CADINET	LOWER CADINET -M. 630" HX 84 3/4" L X	(1334" D
Date: Lower Customer: D	SCA LO	85 1/2" SPACE BETW	een pylons (polos)
Location: 150	Riverside		
Surveyed By:	/		

(All Dimensions To Be, Height x Width x Depth/When Applicable)









P.O. Box 207 Westbrook, ME 04096 (207) 856-2600 * FAX: (207) 856-7600 1-800-948-9097 elgndesl@maine.rr.com **A Full Service Sign Company**

RE:

To Whom It May Concern:

As the owner (or owner representative) of the property located at:

<u>Kivenside</u> S 50 Vont

I authorize Sign Design Inc. to install signs/sign face replacements as detailed on attached paperwork.

owner Signature

3/24/08

Date

E. Locke

Print Name

Post-itº Fax Note 7671	Deta 3 24 08 pages
To John Locke	From Brcku
Co/Dept	Co Sign Design
Phone #	Phone #
Fox # 174-2980	Fax #

Date:	3/21/2008	
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ACORD CERTIFICAT			03/21/2008	
Coastal Insurance Group LLC 558 Brighton Avenue	207)874-4069	THIS CERTIFICATE IS ISSUED AS A MATTER OF IN ONLY AND CONFERS NO RIGHTS UPON THE CER HOLDER. THIS CERTIFICATE DOES NOT AMEND, E ALTER THE COVERAGE AFFORDED BY THE POLI	TIFICATE EXTEND OR	
Portland, ME 04102		INSURERS AFFORDING COVERAGE	NAIC #	
INSURED UPSCALE FURNITURE & CONSIGNMENTS INC 150 RIVERSIDE STREET		INSURER A Peerless	24198	
		INSUFER B Maine Employers Mutual Ins Co	11149	
PORTLAND, NE 04103		NSUFER C		
		INSURER D		
		INSUMER E		
OVERAGES				
ANY REQUIREMENT. TERM OR CONDITION OF AN	Y CONTRACT OR OTHER E POLICIES DESCRIBED	INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED NO DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDI JO CLAIMS.	ISSUED OR	

, 	GENERAL LIABILITY	BOP9641582	11/06/2007	11/06/2008	EACH DOCURRENCE	\$	1,000,000
	COMMERCIAL GENERAL CHABILITY				DAMAGE TO PENTED PRENISES (Ealoccurance)	\$	50,000
ļ	CLA MS MADE COOP			5	MEC/EXP (Aby one person)	\$	5,000
A					PERSONAL & 40V INJURY	\$	1,000,000
					GENERAL AGGREGATE	٤	2,000,000
i	GEN'S AGGREGATE LIMIT APPOLES PER				PRODUCTS COMPOR AGG	\$	2,000,000
1	POLICY PRO- JECT JUCC						
		BA9652008	11/12/2007	11/12/2008	COMBINED SINGLE LIME	;	
	X ANY ALTO				'Ealachdadt)	1	1,000,000
1	ALL OWNED ALTOS				BODILY INJURY	\$	
	JOHED LLED AUTOS				(Per person)	\$	
`A ¦	HIREO AUTOS				BIOK / IRUURN		
1	NON-OWNED AUTOS				(Fier ac-ident)	5	
i I					FROFERT: FLAMAGE (Ferrodident)	\$	
	GARAGE LIABILITY			+	A, TO OHLY - EA ACCIDENT	1	
i.	HEY A. TO				OTHER THAN EARCE	\$	
		1			ALTO ONLY AGG	5	
}	EXCESS/UMBRELLA LIABIL TY				EACH COLURRENCE	\$	
1					AGINE	\$	
						\$	
1	LEDUCTIBLE					\$	
	RETENTION :					\$	
	WORKERS COMPENSATION AND	1810067202	01/09/2008	01/09/2009	WC STATUL CTH. TOPY LIMITS I EP		
	EMPLOYERS' LIABILITY				EL EACH ACCIDENT	ę	100,000
В	ANY PROPRIETOR/FARTNER/EXECUTIVE			1	EIL DISEASE - EA EMPLOYEE	. 5	100,000
	i if yes i describe under SFECIAL PROVISIONS below				EL DISEASE - POLICY LIMIT	£	500,000
	OTHER					b	**************************************
DES	CRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLU e Insured - City of Portland - f	SIONS ADDED BY ENDORSEME	NT / SPECIAL PROVISI	ONS			
	e insured - City of Fortland - f	or application					
//	r						

CERTIFICATE HOLDER

CANCELLATION

Ali Gant

City of Portland Sign Design

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 MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE

ACORD 25 (2001/08)

®ACORD CORPORATION 1988

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such encorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon

ACORD 25 (2001/08)

