

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that

H J ASSOCIATES LTD /Sign Concepts

Located at

155 RIVERSIDE ST

PERMIT ID: 2013-00377

CBL: 267 B001001

has permission to **Install panels in existing sign box (12' x 6.5') in freestanding sign and -install two wall signs 16 sf (side) and 27 sf (front)**

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise cloed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be procured prior to occupancy.

N/A

Fire Prevention Officer

[Signature] 2/26/13

Code Enforcement Officer / Plan Reviewer

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
THERE IS A PENALTY FOR REMOVING THIS CARD**

SCANNED

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 2013-00377	Issue Date:	CBL: 267 B001001
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Location of Construction: 155 RIVERSIDE ST	Owner Name: H J ASSOCIATES LTD	Owner Address: 155 RIVERSIDE ST PORTLAND, ME 04103		Phone:
Business Name: The Egg and I Restaurant	Contractor Name: Sign Concepts	Contractor Address: 75 Bishop Street Portland ME 04103		Phone (207) 699-2920
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent		Zone: B4
Past Use: The Egg & I Restaurant (tenant fit up 2012-11-5367)	Proposed Use: The Egg and I Restaurant	Permit Fee: \$272.00	Cost of Work: \$0.00	CEO District: 7
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input checked="" type="checkbox"/> N/A		INSPECTION: Use Group: Type: Sign
Proposed Project Description: Install panels in existing sign box (12' x 6.5') in freestanding sign and - install two wall signs 16 sf (side) and 27 sf (front)		Signature:		Signature: ABM 2/26/13
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: gg	Date Applied For: 02/25/2013	Zoning Approval		
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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..	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"/> Date: 2/26/13 ABM	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 Date: ABM
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SCANNED

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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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City of Portland, Maine - Building or Use Permit

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

Permit No: 2013-00377	Date Applied For: 02/25/2013	CBL: 267 B001001
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Location of Construction: 155 RIVERSIDE ST	Owner Name: H J ASSOCIATES LTD	Owner Address: 155 RIVERSIDE ST	Phone:
Business Name: The Egg and I Restaurant	Contractor Name: Sign Concepts	Contractor Address: 75 Bishop Street Portland	Phone (207) 699-2920
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: The Egg and I Restaurant	Proposed Project Description: Install panels in existing sign box (12' x 6.5') in freestanding sign and -install two wall signs 16 sf (side) and 27 sf (front)
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Dept: Zoning **Status:** Approved **Reviewer:** Ann Machado **Approval Date:** 02/26/2013
Note: **Ok to Issue:**

Dept: Building **Status:** Approved w/Conditions **Reviewer:** Ann Machado **Approval Date:** 02/26/2013
Note: **Ok to Issue:**

1) Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.

BUILDING PERMIT INSPECTION PROCEDURES
Please call 874-8703 (ONLY)
or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

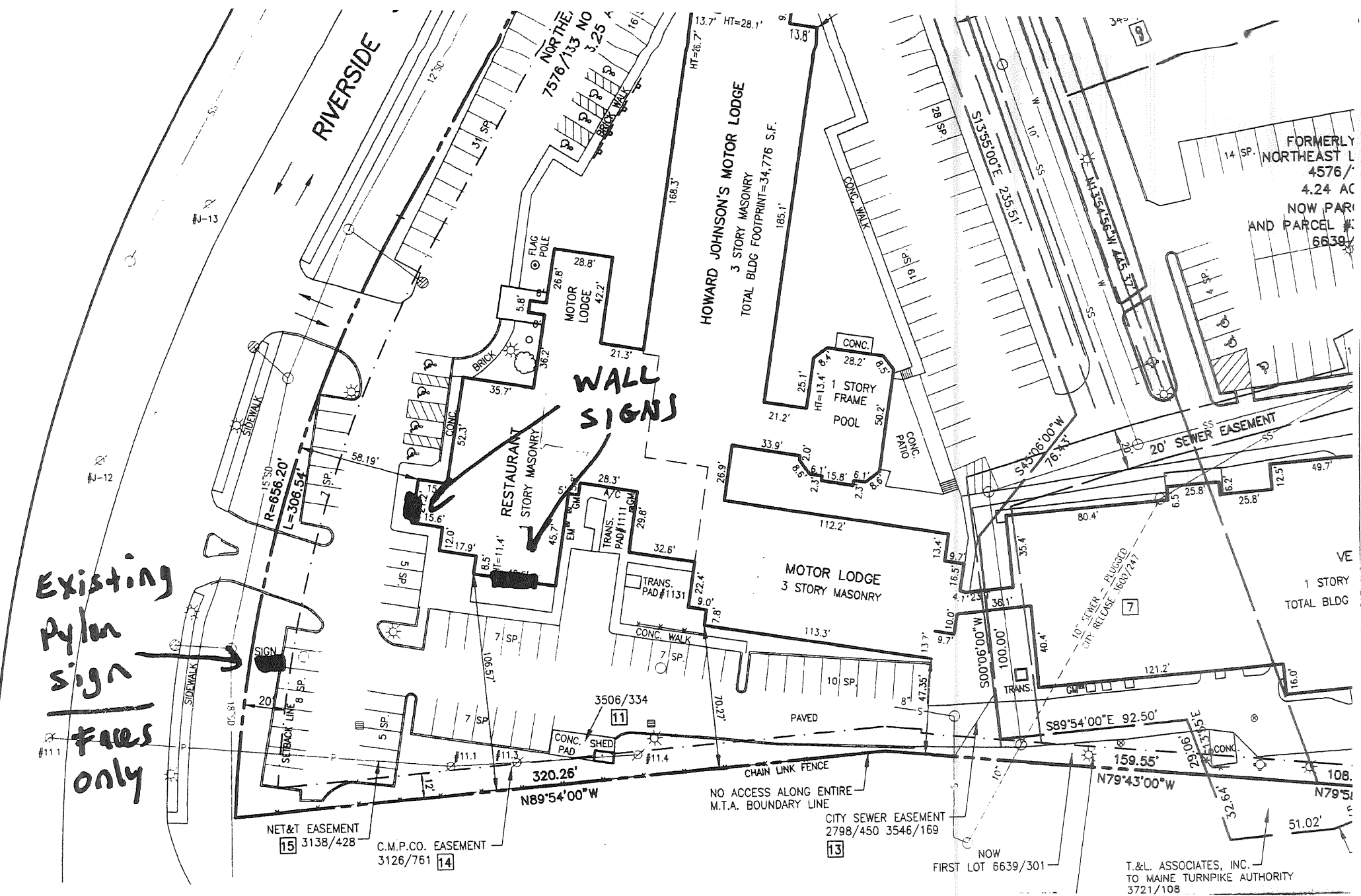
REQUIRED INSPECTIONS:

Final Inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

Existing
Pylon
sign
Fees
only



RIVERSIDE

WALL
SIGNS

HOWARD JOHNSON'S MOTOR LODGE
3 STORY MASONRY
TOTAL BLDG FOOTPRINT=34,776 S.F.

RESTAURANT
1 STORY MASONRY

MOTOR LODGE
3 STORY MASONRY

FORMERLY
NORTHEAST L
4576/
4.24 AC
NOW PART
AND PARCEL #
6639/

VE
1 STORY
TOTAL BLDG

T.&L. ASSOCIATES, INC.
TO MAINE TURNPIKE AUTHORITY
3721/108



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>155 Riverside St. Portland</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: <u>HJ Associates, LTD</u>	Telephone: <u>774-5861</u>
Lessee/Buyer's Name (If Applicable) <u>The Egg & I Restaurant</u> <u>155 Riverside St.</u> <u>Portland ME 04103</u>	Contractor name, address & telephone: <u>Sign Concepts LLC</u> <u>75 Bishop St.</u> <u>Portland, ME 04103</u>	Total s.f. of signage x \$2.00 <u>124</u> = <u>\$242.00</u> Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ <u>272.00</u>
Who should we contact when the permit is ready: <u>Bon Nevors</u> phone: <u>699-2920</u>		
Tenant/allocated building space frontage (feet): Length: <u>94'</u> Height: <u>14'</u> Lot Frontage (feet) <u>Several hundred</u> Single Tenant or Multi Tenant Lot <u>multi tenant</u>		
Current Specific use: <u>Restaurant</u> If vacant, what was prior use: <u>Restaurant</u> Proposed Use: <u>same</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: <u>6'6" x 12'</u> Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: _____		
Proposed awning? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Is awning backlit? Yes <input type="checkbox"/> No <input type="checkbox"/> Height of awning: _____ Length of awning: _____ Depth: _____ Is there any communication, message, trademark or symbol on it? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions: <u>6'6" x 12'</u> replacing <u>facel</u> Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions: <u>approx. same size</u> replacing <u>signage</u> Awning? Yes <input type="checkbox"/> 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.		

RECEIVED
FEB 25 2013
Dept. of Building Inspections
City of Portland Maine

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.

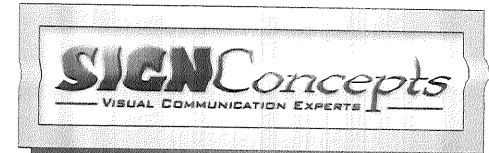
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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: <u>Ron Nevors</u>	Date: <u>2/7/13</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

B-4 multi - front x fronts on two streets - riverside - strip sign out
 wall sign - 150 sf total - 27¢
 (front) 1.5 x .85 = 12.75¢
 half 1 = 64.13¢ - 16¢ proposed (OK)
 freestanding. permitted 99-0791
 originally - the replacement

Perm. # 99-0791 (Friendly 13)



Date: 1/9/13 Scale: 1/2" = 1'

Drawing #: 3b Sales Rep: RN

Rev #: xx Rev Date: 00/00/13

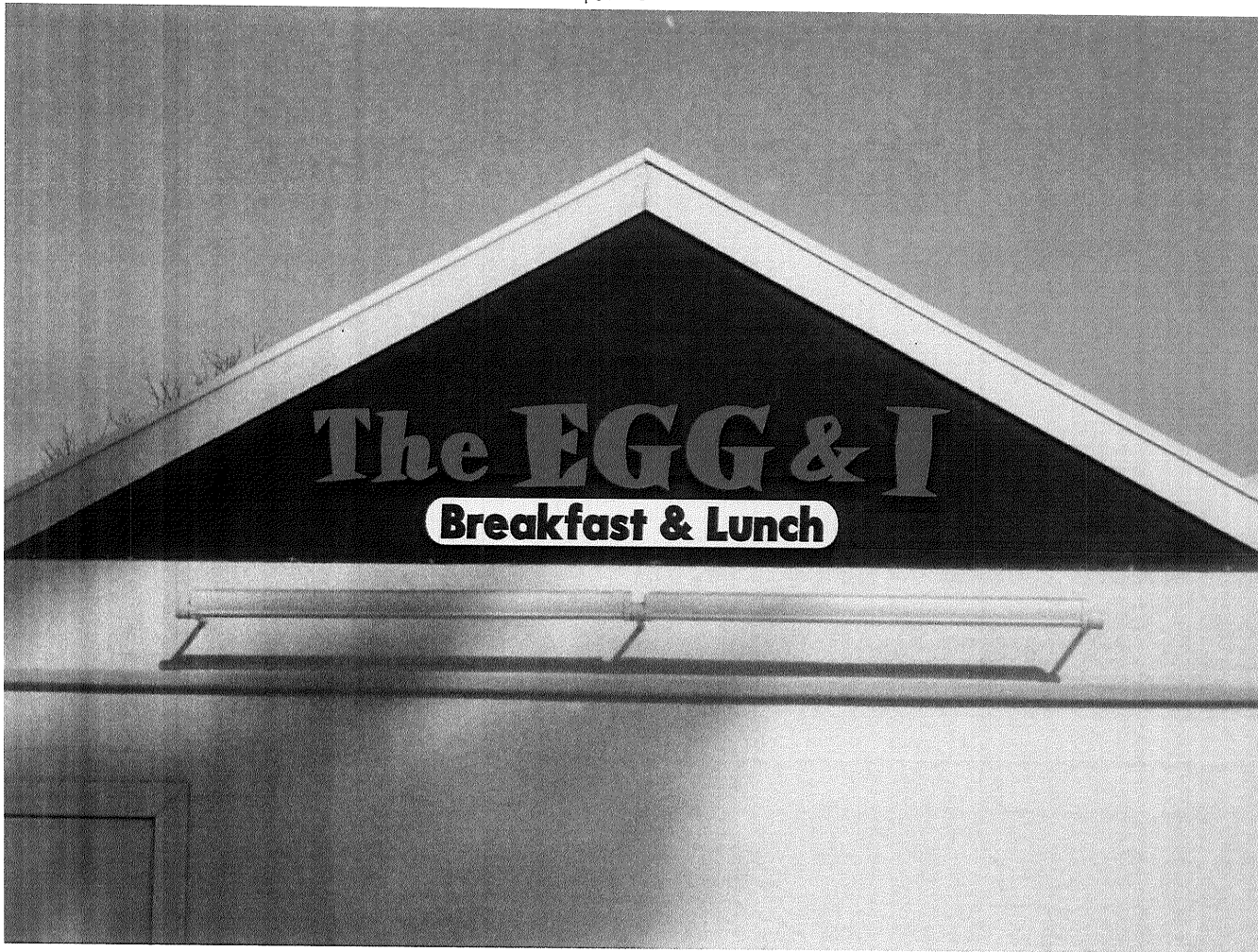
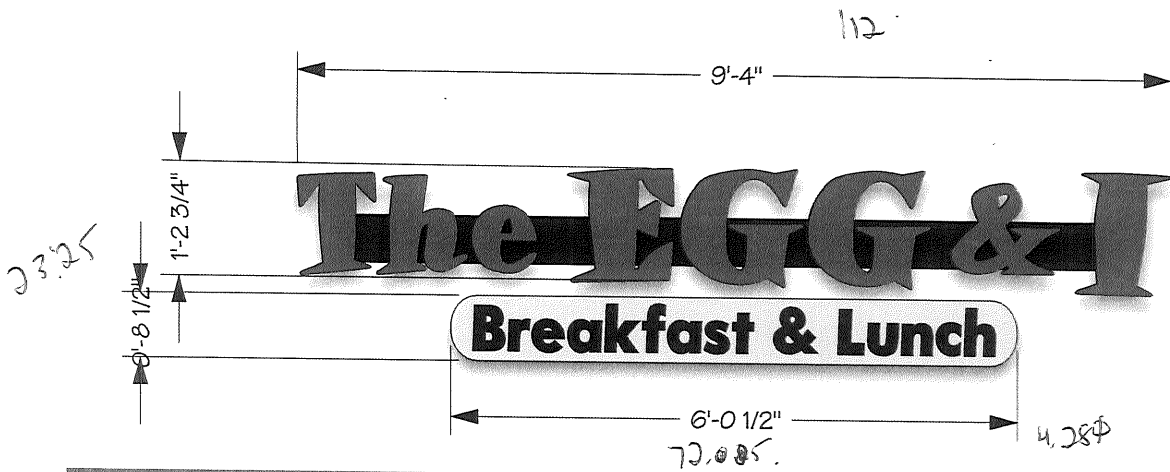
Apprv'd by:

The Egg & I

- 1 - d/f 6'-6" x 12' face replacement
 - white polycarbonate substrate
 - translucent vinyl graphics



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Date: 1/9/13	Scale: 1/2" = 1'
Drawing #: 2	Sales Rep: RN
Rev #: xx	Rev Date: 00/00/13

Apprv'd by:

The Egg & I

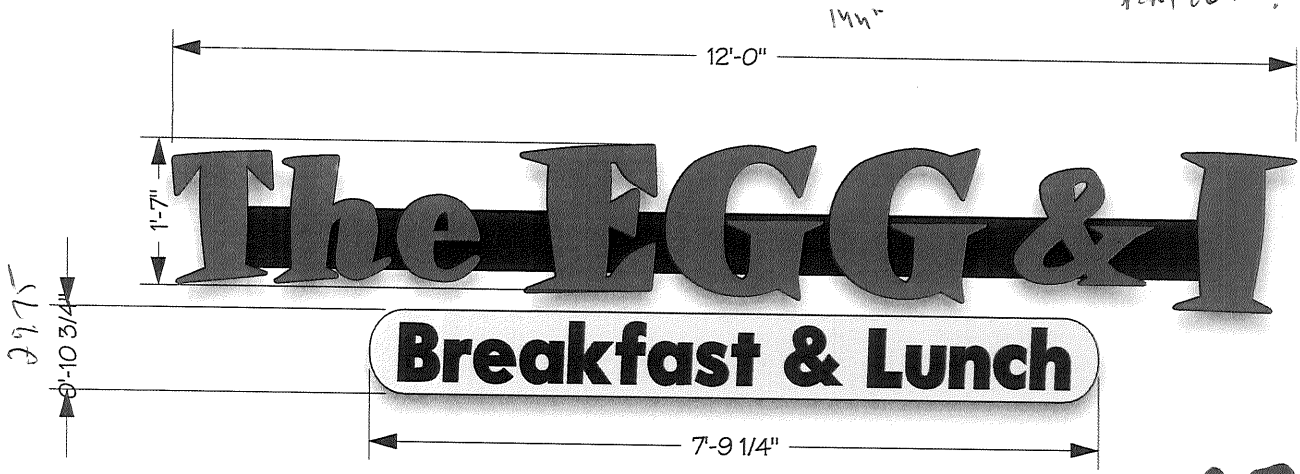
- 1 - set of LED channel letters
 - red & yellow acrylic faces
 - black aluminum returns w/ black trim
 - black vinyl subtext
 - aluminum raceway painted to match building color

10' to Ground



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front door! facing Riverside St.



SIGNConcepts
VISUAL COMMUNICATION EXPERTS

Date: 1/9/13 Scale: 1/2" = 1'

Drawing #: 1 Sales Rep: RN

Rev #: 2 Rev Date: 1/24/13

Appr'd by:

The Egg & I

- 1 - set of LED channel letters
 - red & yellow acrylic faces
 - black aluminum returns w/ black trim
 - black vinyl subtext
 - aluminum raceway painted to match building color

27 ~~7~~

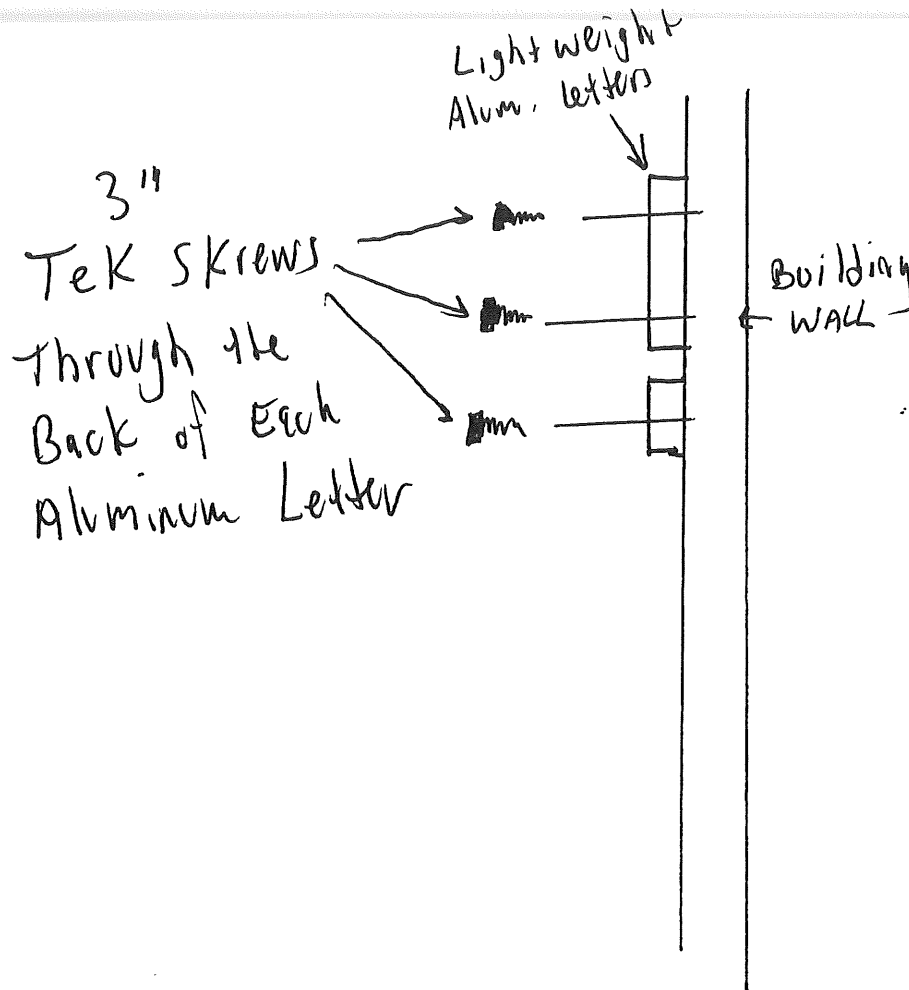


6' to Ground

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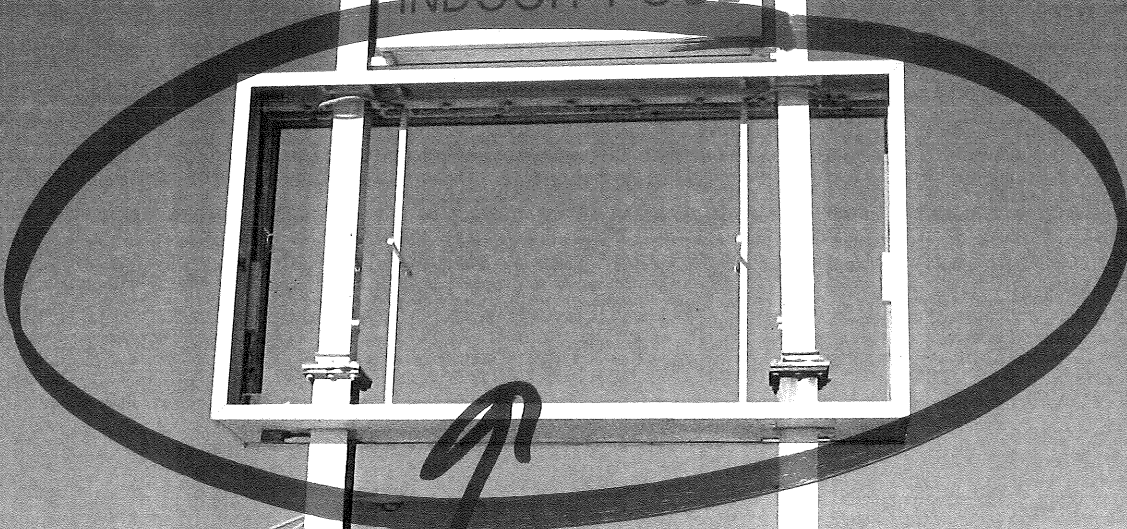
SIGN Concepts

VISUAL COMMUNICATION EXPERTS



Howard Johnson
PLAZA HOTEL

INDOOR POOL



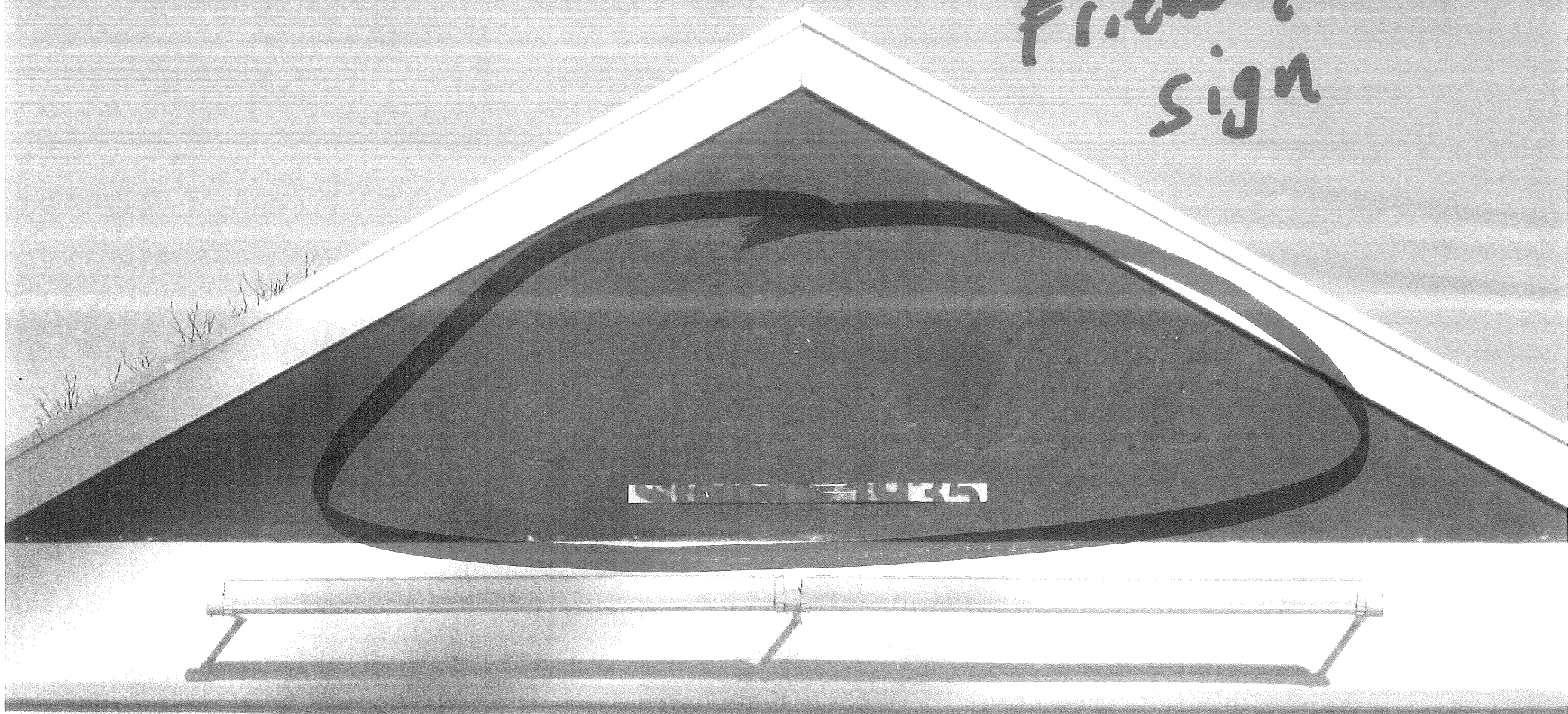
*old
friendly
fair*



old friendly's Signs



Old
Friendly's
sign



OLD FRIENDLY'S



Go anywhere. Stay here.

February 6, 2013

City of Portland
389 Congress Street
Portland, ME 04101

Dear Sir / Madam:

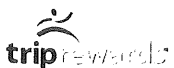
Please accept this letter as authorization for the Egg & I restaurant to install their signage on the building and sign structure for our property.

Please feel free to contact me if you should have any questions about this information.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mark Heisler'.

Mark Heisler
General Manager
HJ Associates, LTD, D/B/A Howard Johnson Plaza Hotel





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/26/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER THE ROWLEY AGENCY INC. 139 Loudon Road P.O. Box 511 Concord NH 03302-0511		CONTACT NAME: Karen Stapley PHONE (A/C. No. Ext): (603) 224-2562 E-MAIL ADDRESS: kstapley@rowleyagency.com FAX (A/C. No.): (603) 224-8012	
INSURED H J Associates, Ltd Seasons Event & Conference Center Royal Am. Mgt., 340 W Passaic Rochelle Pk NJ 07862		INSURER(S) AFFORDING COVERAGE INSURER A: Citizens Insurance Co. INSURER B: Maine Employers Mutual Ins Co INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES CERTIFICATE NUMBER: 2012 Seasons Event REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			ZBP625225011	5/10/2012	5/10/2013	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
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			1810064836	6/29/2012	6/29/2013	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Covering operations of the insured during the policy period.

RECEIVED

CERTIFICATE HOLDER FEB 26 2013 CANCELLATION

City of Portland Dept. of Building Inspections City of Portland Maine	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Hellen Hill/HSH <i>Hellen Hill</i>
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