Form # P 04	DISPLAY	THIS C	ARD ON	PRINCIPAL	FRONT	AGE OF	WORK
Please Read	-	C	ITY O	F PORT	LAN		
Application A	nd		BUILD	NG INSPEC	TION		
Notes, If Any Attached	/.		F	PERMIT		Permit Numl	ber: 100261
This is to certi	fy thatMonro	Muffler Brake	; Inc./NeoKraft	Signs	Com		
has permission	n to Replac	e 2 sign faces	on an existing fr	eestanding sign - each	face is 13'4 1/	2" x 5'1 1/2"10	
AT -195-Rive	erside St		1		CBL 268	A007002	
and the second provide a second			and the second se		Contraction of the local data and the local data an		shall comply with all
							Portland regulating
the const this depa		itenance a	ind use of b	uildings and st	ructures,	and of the a	pplication on file in
	Public Works for s if nature of work mation.		give n a nd befo re this lath ed or	on of inspection m written permission pr building or part the otherwise closed DTICE IS REQUIRED	ocured ereof is in. 24	procured by	of occupancy must be owner before this build- ereof is occupied.
	ER REQUIRED APPR	OVALS	20		4		
Fire Dept.	. 8	JR.	100	Cold Street, St		-	
Health Dept.			1		$\sim $	N'I	
	DITY OF PORT	TLAND				M	\leq
	Un 1 Declariment Name	Р	ENALTY FO	R REMOVING T	HISCARD	Director - Building 8	s Inspector Services

City of Portland, N	Maine - Buildin	g or Use I	Permi	t Applicati	on P	ermit No:	Issue Date:		CBL:	
389 Congress Street,		100000 (Control 1000)				10-0261			268 A0	07002
Location of Construction: Owner Name:			 Ow		Own	er Address:			Phone:	
195 Riverside St Monro Muffler			r Brake, Inc. 2		200	Holleder Park	way		585-784-	3327
Business Name: Contractor Name:			:		Cont	ractor Address:			Phone	
Tire Warehouse	Ne	oKraft Sign	S		686	Main St. Lewis	ston		20778296	54
Lessee/Buyer's Name	Pho	ne:				nit Type: gns - Permanent				Zone:
Past Use:	Pro	posed Use:	-		Peri	nit Fee:	Cost of Work:	CE	O District:	
Commercial - Tire Warehouse Commercial / Replace 2 sign			faces o	ire Warehouse - \$308.00 \$0.00 faces on an existing FIRE DEPT: Approved INSE			PECTION:			
Proposed Project Descripti	on:				-	11	1	C	-1.1	
Replace 2 sign faces on an existing freestanding sign 1/2" x 5'1 1/2"10				each faee is 13'4 Signature PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action Action Approved Approved Approved Approved		/	Denied			
					Sign	alure:		Da	te [.]	
Permit Taken By: gg	Date Applied 03/17/201					Zoning	Approval			
	ation does not prec	lude the	Spe	cial Zone or Re	views	Zoning	Appeal		Historic Pres	ervation
	meeting applicable		Shoreland		Variance		Ø	Not in Distri	ct or Landmark	
2. Building permits of septic or electrical		bing,	Wetland Legelly		Miscellaneous			Does Not Re	quire Review	
	are void if work is n ths of the date of is		Flood Zone Corners		Conditional Use			Requires Review		
False information may invalidate a building permit and stop all work.			Subdivision					Approved		
			Si	te Plan		Approved			Approved w/	Conditions
5	PERMIT IS	SUED	Maj QK	and a supervised of the second	[M 📋	Denied			Denied	
	1999 1 8	2575		18/10	ten	Date		Date	ton	
	CITY OF PO	RTLAND								

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

	ne - Building or Use Permit)1 Tel: (207) 874-8703, Fax: (Permit No: 10-0261	Date Applied For: 03/17/2010	CBL: 268 A007002	
ocation of Construction:	Owner Name:	Owner Address: Phone:			
195 Riverside St	Monro Muffler Brake,	, Inc.	200 Holleder Park	585-784-3327	
Business Name:	Contractor Name:		Contractor Address:	Phone	
Fire Warehouse	NeoKraft Signs		686 Main St. Lewi	ston	(207) 782-9654
Lessee/Buyer's Name Phone:			Pernut Type:		
			Signs - Permanen	L	
roposed Use:		Propose	d Project Description:		
Dept: Zoning	Status: Approved	Reviewer:	Ann Machado	Approval I	
					Date: 03/18/2010
Note: Original sign permi	t was #93-0689. Two panels toget cause not more nonconforming.	ther were 13'5" a	10'4" (139.2 sf).	Proposed panels are	
Note: Original sign permi 137.65 sf so OK be			10'4" (139.2 sf). Tammy Munson	Proposed panels are Approval I	e Ok to Issue: 🗹
Note: Original sign permi 137.65 sf so OK be	cause not more nonconforming.				• Ok to Issue: 🗹



BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

<u>X</u> Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee

Signature of Inspections Official



CBL: 268 A007002

Building Permit #: 10-0261

Date

Date

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: 195 Riverside Street	
Tax Assessor's Chart, Block & LotOwner: Monro Muffler Brake \$5Chart#Block#Lot#268A 007Rochester, NY 14615	Rervice Telephone: 585-784-3327
Lessee/Buyer's Name (If Applicable) Tire Warchouse Contractor name, address & telephone: NeoKraft Signs Juc- (Sele Main St. Lewiston, ME 04240 * 207-782-9654	Total s.f. of signage x $$2.00$ Per s.f. plus $$30.00/65.00 $39'59'$ For H.D. signage = Total Fee: $$_{308'5}$ Awning Fee = cost of work Total Feer $308'5'$
Who should we contact when the permit is ready: <u>Shane Moffett</u> phone: 7	
Tenant/allocated building space frontage (feet): Length:	see plat plan
Current Specific use: <u>BUSINESS</u> If vacant, what was prior use: <u>Proposed Use</u> :	N. N. N.
Proposed Use:	Height from grade: VED
Proposed 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 w/communications, message, trademark or symbol: s.f.	- MAN 7 2010 Y
Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes <u>Ves</u> Dimensions(<u>A) face</u> 5 Bldg. wall sign? (attached to bldg) Yes <u>No</u> Dimensions: <u>Awning</u> ? Yes <u>No</u> Sq. ft area of awning w/communication: <u>Ves</u>	Dept. of Building Inspections
A site sketch and building sketch showing exactly where existing and new signage is loc. Sketches and/or pictures of proposed signage and existing building are also required.	
Please submit all of the information outlined in the Sign/Awning Applica	tion 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 Dev additional information prior to the issuance of a permit. For further information visit us on-line : Building Inspections office, room 315 City Hall or call 874-8703.	elopment Department may request at <u>www.portlandmaine.gov</u> , stop by the
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorized authorized by the owner to make this application as his/her authorized agent. I agree to conform to all app a permit for work described in this application is issued, I certify that the Code Official's authorized represe	licable laws of this jurisdiction. In addition, if

areas covered by this permit at any reasonable bour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: Shanc Moffet + Date: 3-11-10
B-4 - sightheat This is not a permit; you may not commence ANY work until the permit is issued. - thury shout heating <2 is (100) brok max - epictry sign is. 13-4's X S'134" = 25 how 160.5X 61.7F= 61.5B\$ X 2 [157]
25 hym 160.5x 61.75= 66.834 x 3 = 157



Signage/Awning Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

- 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.
- 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. Please 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 façade dimensions for any signage attached to the building.
- A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.

Certificate of flammability required for awning or canopy.

 \square A UL# is required for lighted signs at the time of final inspection.

Pre-application questionnaire completed and attached.

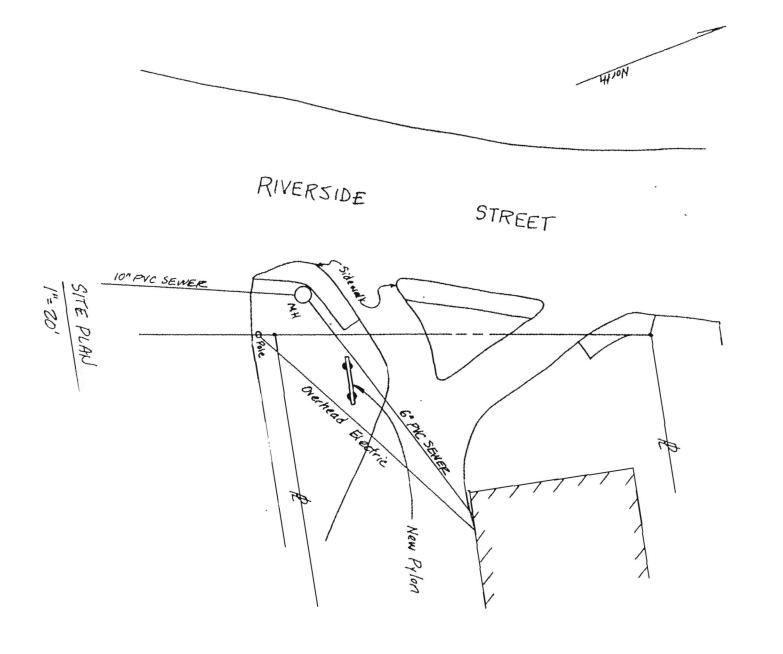
Photos of existing signage

Details for sign fastening, attachment or mounting in the ground.

Permit fee for signage or awning-with-signage: \$30.00 plus \$2.00 per square foot of sign.

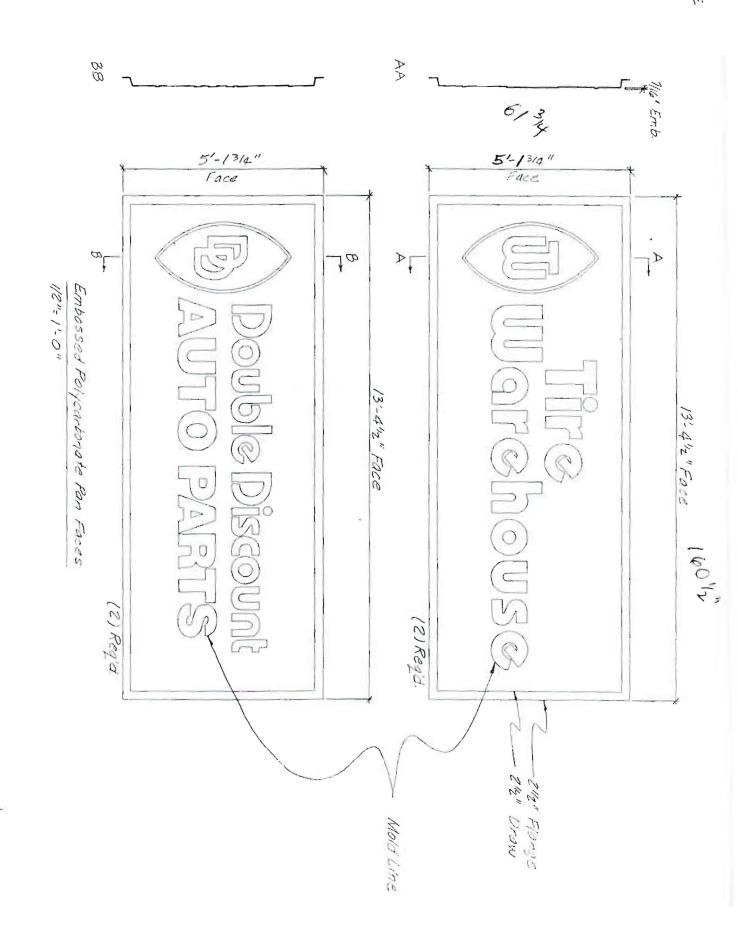
Permit fee for awning-without-signage is based on cost of work: \$30.00 for the first \$1,000.00, \$9.00 per additional \$1,000.00 of cost.

Base application fee for any Historic District signage is \$65.00.





Partiand, ME 0110/93







 Spirit Finance
 14631 N Scottsdale Road, Suite 200 Scottsdale, AZ 85254-2711
 480.606.0820 phone 480.606.0826 fax

LETTER OF AUTHORIZATION

To Whom It May Concern:

Property Owner Name:	Spirit Master Funding III, LLC
Property Location:	Tire Warehouse #25 195 Riverside St. Portland, ME 04102

Hereby authorizes Neokraft Sign & their agents to secure all necessary permits and install a sign at our location referenced above.

Ву:	
Name:	Gregg Seibert
Title:	Senior Vice President
Date:	March 8, 2010

State of Arizona)
) SS;
County of Maricopa)

The foregoing instrument was acknowledged before me this March 8, 2010 by Gregg Seibert, of Spirit Master Funding III, LLC on behalf of the corporation.

Witness my hand and seal the day and year aforesaid.

C	S	÷
Notary Public	- State-of Arizona	
目的的局	on FEAH LANSING Otary Public - Arizo Maricopa County Comm. Expires Apr 13,	•

-	1CC	ORD CERTIFIC	ATE OF LIABILIT	Y INSU	RANCE	·		ATE (MM/DD/YYYY)
	DUCER	(585)546-3747 x7727	7, Fax(585)424-2798	THIS CERT ONLY AND HOLDER, T	IFICATE IS ISS CONFERS N HIS CERTIFICA	UED AS A MATTE O RIGHTS UPON ATE DOES NOT A FORDED BY THE I	THE	NFORMATION CERTIFICATE EXTEND OR
		Niagara Risk Managem		ALTER INC	COVERAGE AN	TORDED BI THE	OLICIE	S BELOW.
[nal View Boulevard,		Courses and			l.	
		ter NY 14	623-2825		FORDING COVE		NAIC #	
INSU				and the sector is a compare	velers PC			
MOI	iro	Muffler Brake, Inc.		- I Contraction		surance Co.		
				and the second s		ire Ins. Co.		
		lleder Parkway		INSURER D Tra	velers Ind	emnity Co.		
			615-0945	INSURER E				
THE REC THE AGC	UIRE INSU BREG	CIES OF INSURANCE LISTED BELO MENT, TERM OR CONDITION OF AN	W HAVE BEEN ISSUED TO THE INSU IN CONTRACT OR OTHER DOCUMEN ICIES DESCRIBED HEREIN IS SUB. N REDUCED BY PAID CLAIMS.	IT WITH RESPECT	TO WHICH THIS	CERTIFICATE MAY BE	ISSUED	OR MAY PERTAIN.
LTR	INSRD		10	04/01/2010	Laboration of the second second	The last of the second		1 000 000
	1	X COMMERCIAL GENERAL LIABILITY	TC2JGLSA177D8217-09	04/01/2010	04/01/2011	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence	5 (8) \$	1,000,000
A		CLAIMS MADE X OCCUR		·		MED EXP (Any one perso	m) \$	5,000
			1			PERSONAL & ADV INJUR	RY \$	1,000,000
						GENERAL AGGREGATE	\$	5,000,000
}		GENL AGGREGATE LIMIT APPLIES PER				PRODUCTS - COMPIOP	AGG \$	1,000,000
-		X POLICY PRO- LOC	TC2JCAP281D1136-09	04/01/2010	04/01/2011	COMBINED SINGLE LIM	T .	1 000 000
A		X ANY AUTO				(Ea acodent)	\$	1,000,000
î		ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$	
		X HIRED AUTOS	Bired Comp. & Collision ACTUAL CASH VALUE BASIS:	\$30,000 Limit:	ACV Limit	BODILY INJURY (Per accident)	5	
		X Garagekeepers Coverage	COMPRÉSENSIVE	\$2,000,000 \$2,000,000		PROPERTY DAMAGE (Per accident)	\$	
	-	GARAGE LIABILITY		+=/000/000		AUTO ONLY - EA ACCID	ENT S	
							Selfer 1	
		ANY AUTO				ALCO ONLY	ACC \$	
	Malee			04/01/2010	04/01/2011		AGG \$	5,000,000
		EXCESS/UMBRELLA LIABILITY	CCC1154790	04/01/2010	04/01/2011	EACH OCCURRENCE	\$	5,000,000
		X OCCUR CLAIMS MADE				AGGREGATE	5	5,000,000
							\$	
в		DEDUCTIBLE					\$	
_	_	X RETENTION \$ 10,000				- WO STATU	S	
С		CERS COMPENSATION AND OYERS' LIABILITY	TC20UB177D8150-09	04/01/2010	04/01/2011	Y WC STATU- TORY LIMITS	OTH- ER	
		ROPRIETOR/PARTNER/EXECUTIVE	(ALL STATES EXCEPT MA)			EL EACH ACCIDENT	\$	1,000,000
No		ER/MEMBER EXCLUDED? describe under	(ONLY STOP GAP EMPLOYER'S			EL DISEASE - EA EMPL	OYEE \$	1,000,000
-	SPEC	IAL PROVISIONS below	LIABILITY-ND, WA, WY)			EL DISEASE - POLICY (1,000,000
D	OTHE	R Workers'	TRKUB177D8186-09 (MA)	04/01/2010	04/01/2011	WC Statutory.		-
Compensation &		Compensation & Employer's Liability				\$1,000,000 Ea.Acc./Disease Ea.		
	1					Employee/Dise	ase Po	licy Limit
Job the	site	: Tire Warehouse #982-Por eral Liabılıty policy onl	EXEXCLUSIONS ADDED BY ENDORSEMEN tland, MERiverside St. (y in regard to work perfor	PERMIT) The (City of Portl			

CERTIFICATE HOLDER	CANCELLATION
City of Portland City Hall 389 Congress St. Portland, ME 04101	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE 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 Joseph Teresi/LCOOK

30689 \$59.00 City of Portland BUILDING PERMIT PPLICATION Fee \$59.00 Permit #____ Map # Lot# Please fill out any part which app' es to job. Proper plans must accompany fo.

Owner: Tire Harehouse Phone #	P OF LOVE OF PERMITISS
Address: 492 Main St. Keene, NH 03431-	For Official Use Only PERMIT 155
LOCATION OF CONSTRUCTION 195 Riversides	Loside Pire Limits
Single Heokraft Signs Subject of	Bidg Code Ownership Public
Addres: 686 Main St. Lewiston 04240 Phone 782-9654	Tens Linst Estimated Cost
Est Construction Cost; Proposed Use:	Zoning
	Street Frontage Provided:
	Provided Setbacks: Front Back Side Si
# of Existing Res. Units # of New Res. Units	Review Required:
Building Dimensions L W Total Sq. FL	Zoning Board Approval: Yes No Date:
# Starler: # Bedrooms Lot Size:	Planning Board Approval: Yes No Date:
	Conditional Use: Variance Site Plan Subdiv Shoreland Zoning Yes No Floodplain Yes No
Is Preposed Use: Seasonal Condominium Conversion	Special Exception
Explain Conversion to erect sign 1017 13 lighted plus 8 3 4	(ibm C (Fulde)
	Why Hand HISTORIC PRIST
Tot Then	- Colling:
Foundation	1. Ceiling Jointa Sizar
1. Type of Soil:	2. Celling Strapping Size Spacing Hee not require
2. Set Backs - Front Rear Side(s)	3. Type Callings:Requires Review
1. Footings Size:	4. Insulation Type Size
4. Poundation Sine:	5. Ceiling Height: Roof:
6. Other	Root: 00.022 Townshing Approved
Plant	1. Trues or Rafter SizeSpanApproved 1 2. Sheathing TypeSizeSizeSize 3. Roof Covering Type
1. Sills Size: Sills must be anchored.	3. Roof Covering Type
1. Grder Size:	Chimneys
8. Lally Column Spacing:Size:	Type:Number of Fire Places
4. Joints Bine: Spacing 16 0.C.	Heating
6. Bridging Type: Size:	Type of Heat:
6. Floor Sheathing Type: Size:	Electrical: Service Entrance Size Smoke Detector Required Yes
7. Other Material:	Plambing:
Exterior Waller	1. Approval of soil test if required Yes No
1. Studding Size Spacing	2. No. of Tube or Showers
2. No. windows	3. No. of Flushes
3. No. Doors	4. No. of Lavatories
4. Header Sizes Span(s)	5. No. of Other Fixtures
5 Bracing Vos No	Swimming Pools:
6. Corner Posts Size	1. Type:
6. Corner Posts Size 7. Insulation Type 8. Sharthing Type 9. Size 9. Size 9. Sharthing Type 9. Size 9.	2. Pool Size : x Square Footage 3. Must conform to National Electrical Code and State Law.
a Shearning AypeShe	
9. Siding Type Weather Exposure	Permit Received By Latin 1
10. Masonry Materials	
11. Metal Materials	Signature of Applicant HILL A HAVAN Date 8/4/9
11. Matel Materials [aterior Walls: I. Studding Size Spacing	Signature of Applicant Hill Analy Date 8/4/9
11. Matel Materials [aterior Walls: I. Studding Size Spacing	Paul Lessard
11. Motel Materials Laterior Walls: 1. Studing Size Spacing 2. Header Sizes Span(s) 3. Wall Covering Type	Signature of Applicant <u>Hill High Hank</u> Date <u>8/4/9</u> Signature of CEO Date
11. Mctal Materials Laterior Walls: 1. Studing Size Spacing 2. Header Sizes Span(s)	Paul Lessard

or Official Use Only Subdivision AUG - 9 1993 Lat Public Owner CITY OF PORTA Back Side Side No Date: it Yes No____ Date: Site Plan Subdivision Variance _ No___ Floodplain Yes___No - HISTORIS PRISERVATIO Not in district nor Landmark a not require retient. Soaci and Reality \$59.00. Approved. Approved with Co Number of Fire Places Smoke Detector Required Yes___No__ f required Yes No x Square Footage tional Electrical Code and State Law. Date_8/4/93 Lessard Date

FRAMESSUE

