DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that HUTCHINS REAL ESTATE LLC

Located At 299 WARREN AVE

Job ID: 2011-03-659-SIGN

CBL: 296 - - A - 001 - 001 - - - - -

has permission to install new panels in existing cabinet on existing pole

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 closed-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

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY 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: 27	9 Warren Ave-, for	Hund, Marke 04/03
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: Occomor EMC VD Trak Dealership.	Telephone: 207-699-2920 Sin Co
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone: Sign Concepts 75 Bishup Street Patland Maine 04103	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage = Total Fee: \$
Who should we contact when the permit is rea	dy: John Milier - Sign Concepts	207-699-2920
Tenant/allocated building space frontage (Lot Frontage (feet)	Single Tenant or Multi Tenant Lot	
Current Specific use: UD Trucks If vacant, what was prior use: Proposed Use:	Sign Replacement o	& Current Sign already 1
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes	No Dimensions proposed: No Dimensions proposed:	Height from grade: 19 10 11
Is there any communication, message, trade	wning backlit? Yes No f awning: Depth: mark or symbol on it? Yes No s, message, trademark or symbol: s.	
Information on existing and previously per Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes Awning? Yes No Sq. ft. and	No Dimensions: _ No Dimensions:	
A site sketch and building sketch showing Sketches and/or pictures of proposed sign		
Please submit all of the information Failure to do so may result in the au		cation Checklist.
In order to be sure the City fully understands to additional information prior to the issuance of Building Inspections office, room 315 City Hall	a permit. For further information visit us on-li	
I hereby certify that I am the Owner of record of the authorized by the owner to make this application as a permit for work described in this application is issuareas covered by this permit at any reasonable hour	his/her authorized agent. I agree to conform to all ued, I certify that the Code Official's authorized rep	applicable laws of this jurisdiction. In addition, if resentative shall have the authority to enter all
Signature of applicant:	line Sign Concepts Dat	e: 3/8/d Building Main
This is not a perm	it; you may not commence ANY work until th	e permit is issued.

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: 29		land Maine
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: Occumner GMC UD Trucks Dealership	Telephone: 699-2920 Signlo
Lessee/Buyer's Name (If Applicable) Who should we contact when the permit is read	Contractor name address & telephone	Total s.f. of signage x \$2.00
Who should we contact when the permit is read	y: John Mine Gigalonces	15 699-2920
Tenant/allocated building space frontage (for Lot Frontage (feet)	Single Tenant or Multi Tenant Lot	sigh.
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes	No Dimensions proposed:	
Proposed awning? Yes No Is aw Height of awning: Length of Is there any communication, message, tradem If yes, total s.f. of panels w/communications,	awning: Depth: aark or symbol on it? Yes No	
Information on existing and previously perm. Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes Awning? Yes No Sq. ft. are	No Dimensions: No Dimensions:	
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In order to be sure the City fully understands the additional information prior to the issuance of a Building Inspections office, room 315 City Hall	permit. For further information visit us on-li	
I hereby certify that I am the Owner of record of the authorized by the owner to make this application as he a permit for work described in this application is issue areas covered by this permit at any reasonable hour to	is/her authorized agent. I agree to conform to all ed, I certify that the Code Official's authorized rep	applicable laws of this jurisdiction. In addition, if resentative shall have the authority to enter all
Signature of applicant:	Dat Dat	e: 5/2/1/
This is not a permit	, you may not commence ANY work until th	e permit is issued.



LETTER OF AUTHORIZATION

Property Owner's Consent

DATE (MM/DD/YYYY) CERTIFICATE OF LIABILITY INSURANCE 03/09/2011 FAX 603.224.8012 PRODUCER 603.224.2562 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE The Rowley Agency, Inc. HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR 139 Loudon Road ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW P.O. Box 511 Concord, NH 03302-0511 INSURERS AFFORDING COVERAGE NAIC # INSURED Hutchins Motor, Inc. INSURER A: Charter Oak Fire Ins Co 001109 DBA O'CONNOR GMC INSURER B: Maine Employers Mutual Ins Co 0008 Clyde Billing Inc. INSURER C 187 Riverside Dr. INSURER D Augusta, ME 04330-0000 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. TYPE OF INSURANCE POLICY NUMBER GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) COMMERCIAL GENERAL LIABILITY S CLAIMS MADE OCCUR MED EXP (Any one person) S PERSONAL & ADV INJURY GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER PRODUCTS - COMP/OP AGG PRO-JECT POLICY AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) S ANY AUTO ALL OWNED AUTOS BODILY INJURY (Per person) SCHEDULED AUTOS HIRED ALITOS BODILY INJURY (Per accident) NON-OWNED AUTOS PROPERTY DAMAGE GA-0465P034 10/01/2010 10/01/2011 1,000,000 GARAGE LIABILITY AUTO ONLY - EA ACCIDENT A X ANY AUTO 1,000,000 EA ACC S 3,000,000 AGG CUP2087P315 10/01/2010 10/01/2011 EXCESS / UMBRELLA LIABILITY EACH OCCURRENCE \$ 15,000,000 X OCCUR 15,000,000 CLAIMS MADE 5 AGGREGATE A DEDUCTIBLE X RETENTION WORKERS COMPENSATION 1810050899 06/01/2010 06/01/2011 3A: ME AND EMPLOYERS' LIABILITY Y/N 500,000 ANY PROPRIETOR/PARTNER/EXECUTIVE E L EACH ACCIDENT В R EXCLUDED? (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$ 500,000 lf yes, describe under SPECIAL PROVISIONS below E.L. DISEASE - POLICY LIMIT 500,000 OTHER DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS City of Portland is additional insured with respects the garage liability coverage as required by written contract. except 10 days for nonpayment of premium CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION

ACORD 25 (2009/01)

| Karen Stapley/KS |
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City of Portland

Portland, ME 04101

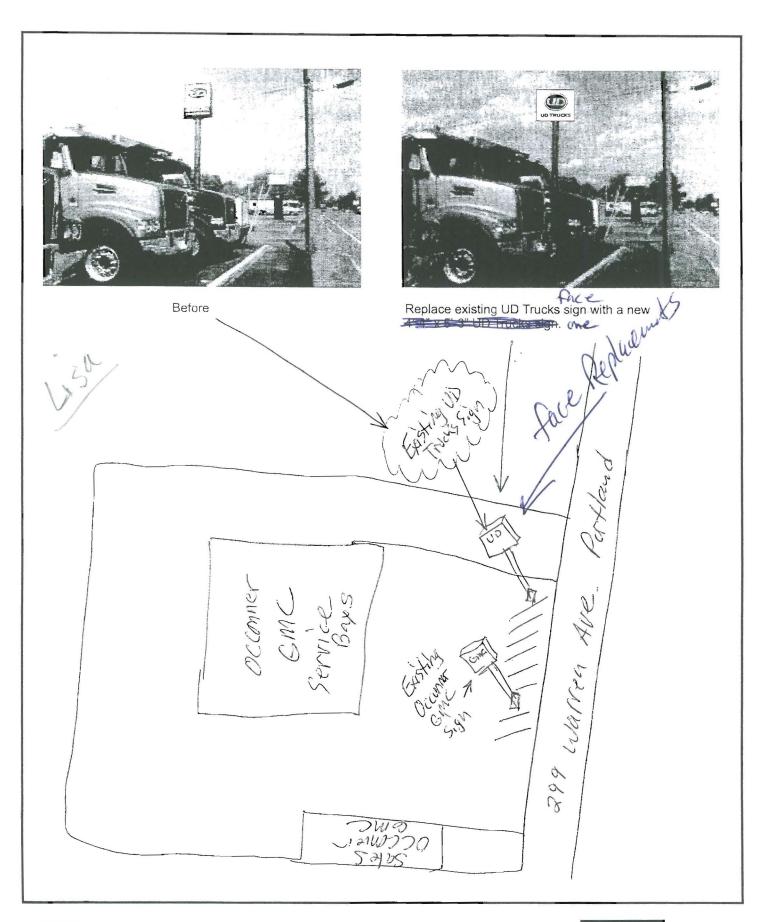
Congress St.

REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

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

Kaur Holly





Sheet: 1 of 1

Site: 0133 UD Trucks 299 Warren Ave. Portland, ME 24103



Before



Replace existing UD Trucks faces with new UD Trucks faces. Existing cabinet size 49 1/2" x 36" with an 1 1/2" retainer. Visible opening is 46 3/8" x 32 7/8".





Before



Replace existing UD Trucks faces with new UD Trucks faces. Existing cabinet size 49 1/2" x 36" with an 1 1/2" retainer Visible opening is 46 3/8" x 32 7/8"



ACORD CERTIFICATE OF LIABILITY INSURANCE

FAX 603.224.8012

PRODUCER 603.224.2562

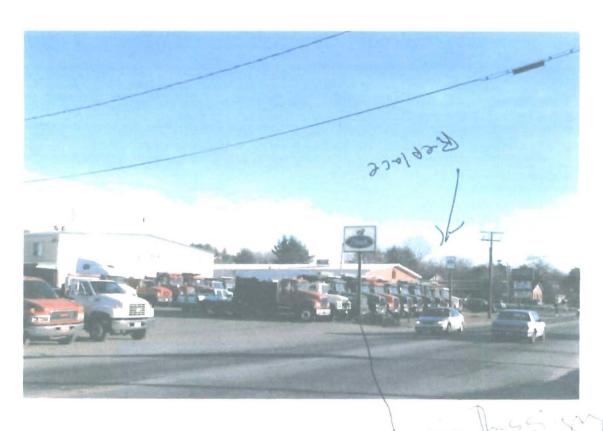
ACORD 25 (2009/01)

DATE (MM/DD/YYYY) 03/09/2011

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION

The Rowley Agency, Inc. 139 Loudon Road P.O. Box 511 Concord, NH 03302-0511						HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.						
						INSURERS AFFORDING COVERAGE				NAIC#		
INSURED Hutchins Motor, Inc. DBA O'CONNOR GMC Clyde Billing Inc. 187 Riverside Dr. Augusta, ME 04330-0000							INSURER A: Ch	INSURER A: Charter Oak Fire Ins Co INSURER B: Maine Employers Mutual Ins Co INSURER C: INSURER D:				
							INSURER E					
CO		AGES					WOOKEN E.			_		
T A M P	HE PC NY RE IAY PE OLICIE	OLICIES OF EQUIREME ERTAIN, TH ES. AGGRE	NT, TERM OR COI IE INSURANCE AF	NDITION FORDE	OF ANY CONT BY THE POLICE	RACT OR OTHER D	OCUMENT WITH R EREIN IS SUBJECT CLAIMS.	ESPECT TO WHICH TO ALL THE TERM	LICY PERIOD INDICATED. N H THIS CERTIFICATE MAY B IS, EXCLUSIONS AND CON	BE IS	SUED OR	
NSR LTR	ADD'L INSRD	DD'L TYPE OF INSURANCE POLICY NUMBER					POLICY EFFECTIVE DATE [MM/DD/YYYY)	POLICY EFFECTIVE POLICY EXPIRATION PATE (MM/DD/YYYY) DATE (MM/DD/YYYY) LIMITS				
		GENERAL	LIABILITY						EACH OCCURRENCE	\$		
	COMMERCIAL GENERAL LIABILITY							DAMAGE TO RENTED PREMISES (Ea occurrence)	S			
			CLAIMS MADE	OCCUR					MED EXP (Any one person)	\$		
									PERSONAL & ADV INJURY	\$		
									GENERAL AGGREGATE	5		
		GEN'L AGG	REGATE LIMIT APPLI	ES PER					PRODUCTS - COMP/OP AGG	\$		
			LE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	s		
			WNED AUTOS DULED AUTOS						BODILY INJURY (Per person)	s		
			OWNED AUTOS						BODILY INJURY (Per accident)	S		
									PROPERTY DAMAGE (Per accident)	s		
		GARAGE L	IABILITY			GA-0465P034	10/01/2010	10/01/2011	AUTO ONLY - EA ACCIDENT	5	1,000,000	
Α		X ANY A	UTO						ALITO ONLY:	s s	1,000,000	
		EXCESS / I	JMBRELLA LIABILITY			CUP2087P315	10/01/2010	10/01/2011	EACH OCCURRENCE	\$	15,000,000	
Α		X occu	R CLAIMS	MADE					AGGREGATE	s s	15,000,000	
-		DEDUCTIBLE							_	\$		
		W		0								
-	WOR	KERS COMP			3A: ME	1810050899	06/01/2010	06/01/2011	WC STATU- X OTH- TORY LIMITS X ER	S		
		ID EMPLOYERS' LIABILITY Y PROPRIETOR/PARTNER/EXECUTIVE FFICER/MEMBER EXCLUDED? andatory in NH) less, describe under			JA. HL	1010030033	00/01/2010	00/01/2011	The second secon		500,000	
В	OFFIC				VE			E.L. EACH ACCIDENT	S	500,000		
	If yes,								E.L. DISEASE - EA EMPLOYEE			
	OTHE	ER PROVIS	ONS below						E.L. DISEASE - POLICY LIMIT	\$	500,000	
DES	CRIPTI	ION OF OPER	RATIONS / LOCATION	S / VEHIC	LES / EXCLUSION	S ADDED BY ENDORS	EMENT / SPECIAL PRO	VISIONS		_		
	-	f Portl n contr		tiona	1 insured	with respec	ts the garag	e liability	coverage as requ	ire	d by	
		t 10 da	ys for nonp DLDER	aymen	t of prem	ium	CANCELLAT	ION				
City of Portland 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 WARRY STANTON (KS						
		1					Karen Sta	pley/KS	have of the	7		

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2002

DATE: 11/05/02

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS ADDRESS: 299 Warren Ave ZONE: OWNER: O'CONNOT & MOTOR CO APPLICANT: Sign Design ASSESSOR NO. PLEASE CIRCLE APPROPRIATE ANSWER SINGLE TENANT LOT? YES **MULTI-TENANT LOT?** YES (NO FREESTANDING SIGN? (ex. Pole Sign) YES NO **DIMENSIONS** HEIGHT MORE THAN ONE SIGN? YES DIMENSIONS HEIGHT SIGN ATTACHED TO BLDG.? (YES) DIMENSIONS Proposed NO MORE THAN ONE SIGN? YES (NO) DIMENSIONS YES NO HEIGHT OFF SIDEWALK AWNING: YES NO Y/A-IS AWNING BACKLIT? IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? 1,67 813,5= LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: Freestanding ('XC' Int. Illum *** TENANT BLDG. FRONTAGE (IN FEET): *** REQUIRED INFORMATION AREA FOR COMPUTATION 一点 -/+,054 YOU SHALL PROVIDE: A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES

AND/OR PICTURES OF PROPOSED ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: