

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-1512	Issue Date: NOV. 18 2001	CBL: 296 E001001
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Location of Construction: 306 Warren Ave	Owner Name: "33" Properties	Owner Address: 306 Warren Avenue	Phone: 207-856-2600
Business Name: n/a	Contractor Name: Sign Design	Contractor Address: 72 Bridge St Westbrook	Phone: 2078562600
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Signs - Permanent	Zone: B-4

Past Use: Auto Store	Proposed Use: Sign Design <i>already has chgase</i>	Permit Fee:	Cost of Work: \$42.80	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>Sign</i> Type: <i>BOCA 1999</i> Signature: <i>T. Monson</i>	

Proposed Project Description: Reface existing signage	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>N/A</i> Signature: _____ Date: _____
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Permit Taken By: gad	Date Applied For: 12/10/2001	Zoning Approval		
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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: <i>12/12/01</i>	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: _____
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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

01-1512

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

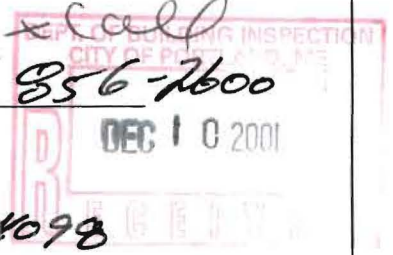
SIGNAGE APPLICATION

THIS IS NOT A PERMIT
CONSTRUCTION CANNOT NOT COMMENCE UNTIL THE PERMIT IS ISSUED

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

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>306 WARREN AVE</u>		
Total Square Footage of Proposed Structure <u>64 sq. ft</u>	Square Footage of Lot <u>40,000 sq. ft (?) Approx</u>	
Tax Assessor's Chart, Block & Lot Number Chart# <u>296</u> Block# <u>E</u> Lot# <u>001</u>	Owner: <u>"33" Properties</u> <u>306 WARREN AVE</u> <u>PORTLAND ME (Landlord)</u>	Telephone #: <u>856-2600</u>
Lessee/Buyer's Name (If Applicable)	Owner's/Purchaser/Lessee Address: <u>Sign Design</u> <u>306 WARREN AVE</u> <u>PORTLAND ME</u>	Total s.f. of signs <u>64</u> x .20 \$ <u>12.80</u> plus \$30.00 TOTAL \$ <u>42.80</u>
Current use: <u>Sign for Serel Auto Parts</u> Proposed use: <u>Sign for Sign Design</u>		
Project description: <u>Replacement faces on existing int. illum. Free standing sign cabinet</u>		
Applicants Name, Address & Telephone: <u>Sign Design Inc.</u> <u>P.O. Box 207</u> <u>Westbrook ME 04098</u>		
Contractor's Name, Address & Telephone: <u>SAMC</u>		
Who shall we contact when the permit is ready: <u>Doug sign Des.</u> Telephone: <u>856-2600</u>		
If you would like it mailed, what mailing address should we use: <u>Sign Des. P.O. Box 207 Westbrook ME 04098</u>		
		Rec'd By: <u>Gayb</u>

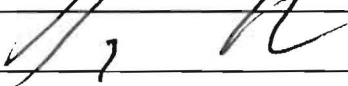


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If the property is located in a HISTORIC DISTRICT, a separate sketch is required indicating the design, dimensions, construction materials and source of illumination if any. A photograph of the building façade should be submitted, showing where each sign is to be installed.

Certification

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: 	Date: <i>12/7/01</i>
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Sign Permit Fee: \$30.00 plus \$0.20 per square foot.

A building permit is also required for any awning based on cost of work-\$30.00 for the first \$1,000.00 and \$6.00 for each additional \$1,000.00

BY FILLING OUT THIS APPLICATION IS DOES NOT MEET THAT YOU WILL BE APPROVED FOR THE AMOUNT OF SIGNAGE YOU ARE APPLYING FOR

IT IS SUGGESTED THAT YOU DO NOT ORDER ANY SIGNAGE UNTIL YOU HAVE RECEIVED YOUR SIGN PERMIT THAT HAS BEEN SIGNED BY THE BUILDING, ZONING AND POSSIBLE HISTORICAL OFFICIALS OF THIS OFFICE

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 306 Warren Ave ZONE: B4

OWNER: Sign Design Inc. P.O. Box 207 Westbrook ME

APPLICANT: Same

ASSESSOR NO. _____

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES NO MULTI-TENANT LOT? YES NO

FREESTANDING SIGN? (ex. Pole Sign) YES NO DIMENSIONS 8x8 HEIGHT 20

MORE THAN ONE SIGN? YES NO DIMENSIONS _____ HEIGHT _____

SIGN ATTACHED TO BLDG.? YES NO DIMENSIONS _____

MORE THAN ONE SIGN? YES NO DIMENSIONS _____

AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK _____

IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? _____

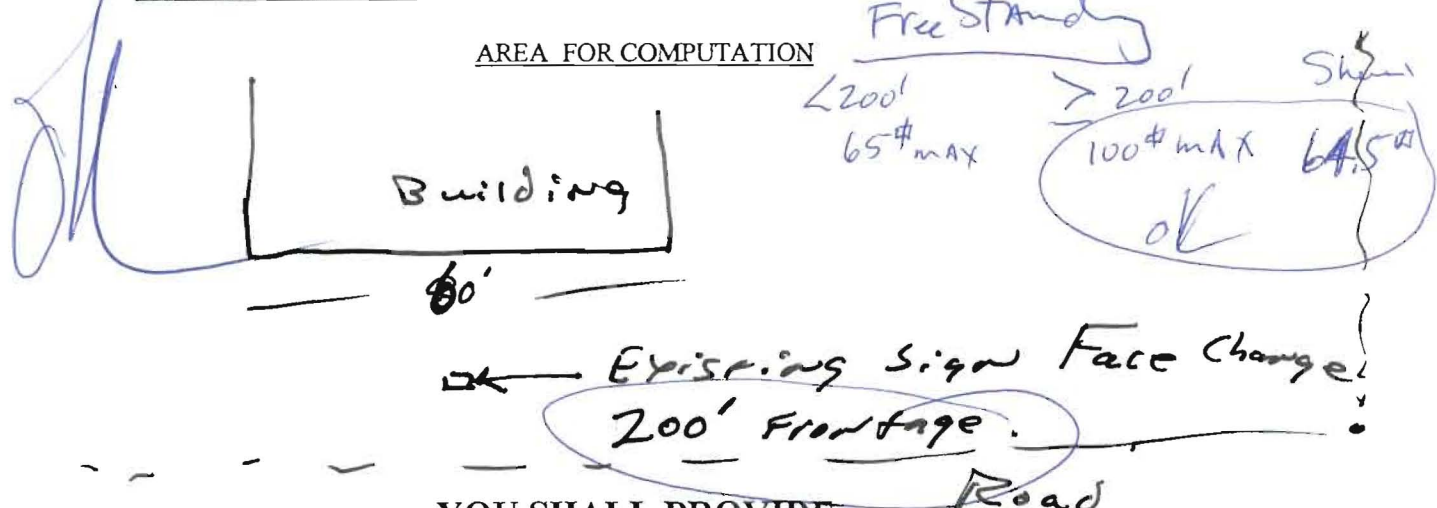
96.5" x 96.25" = 9288, 125 = 194
64.5"

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

N/A

*** TENANT BLDG. FRONTAGE (IN FEET): 60'

*** REQUIRED INFORMATION



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: _____ DATE: _____

Sign Design Inc.

A Full Service Sign Company

- Lighted Signs
- Neon
- Wood
- Plastic
- UL. Listed
- Awnings
- Service
- Message Centers
- Vinyl
- Architectural

Crane Truck Capabilities

96 1/2 x 96 1/4
ω
2" Ret.

✓ 92 1/2 x 92 1/4

+ 12
+ 8

20' high?

144 x 36 →

B-A Allows
25 1/2, 35' high

12/07/01

I Roger Flannery Jr. "owner" of
"33" Properties LLC (306 Warren Ave)
give permission for Sign Design Inc.
to change graphics on existing
Freestanding Sign.



ACORD		CERTIFICATE OF LIABILITY INSURANCE				DATE (MM/DD/YY) 12/05/01		
PRODUCER LAKE REGION AGENCY 726 R JOSEVELT TRAIL WINTHAM ME 04062 1804		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.						
INSURED SIGI DESIGN INC P O BOX 207 WETBROOK ME 04098		COMPANIES AFFORDING COVERAGE						
		COMPANY A CONCORD GENERAL MUTUAL						
		COMPANY B MAINE EMPLOYERS MUTUAL						
		COMPANY C						
		COMPANY D						
COVERAGES 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.								
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS			
A	GENERAL LIABILITY	3525800-4	06/15/01	06/15/02	GENERAL AGGREGATE	\$ 2,000,000		
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG.	\$ 2,000,000		
	<input type="checkbox"/> CLAIM MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV. INJURY	\$ 1,000,000		
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PRGT				EACH OCCURRENCE	\$ 1,000,000		
					FIRE DAMAGE (STRUCTURE)	\$ 50,000		
					MED. EXPENSE (PERSONAL)	\$ 5,000		
A	AUTOMOBILE LIABILITY	T72-135	06/15/01	06/15/02	COMBINED SINGLE LIMIT	\$ 500,000		
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$		
	<input checked="" type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$		
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$		
	<input type="checkbox"/> HIRED AUTOS							
	<input type="checkbox"/> NON-OWNED AUTOS							
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT			
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY			
					EACH ACCIDENT			
					AGGREGATE			
A	EXCESS LIABILITY	TBA	06/15/01	06/15/02	EACH OCCURRENCE	\$ 1,000,000		
	<input checked="" type="checkbox"/> UMBRELLA FORM				AGGREGATE	\$ 1,000,000		
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM							
B	WORKER'S COMPENSATION AND EMPLOYERS LIABILITY	1610057488	12/27/00	12/27/01	<input type="checkbox"/> WORKERS COMPENSATION LIMITS <input checked="" type="checkbox"/> OTHER			
	<input type="checkbox"/> THE PROPRIETOR; PARTNER/EXECUTIVE OFFICERS ARE				EL EACH ACCIDENT	\$ 500,000		
	<input checked="" type="checkbox"/> INCL <input checked="" type="checkbox"/> EXCL				EL DISEASE-POLICY LIMIT	\$ 500,000		
	<input type="checkbox"/> OTHER				EL DISEASE-EA EMPLOYEE	\$ 500,000		
DESCRIPTION OF OPERATIONS, ACTIVITIES, VEHICLES/SPECIAL PERMITS								
CERTIFICATE HOLDER CITY OF PORTLAND 389 CONGRESS STREET PORTLAND ME 04101				CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE				

DUPLICATE

GENERAL RECEIPT

CITY OF PORTLAND, MAINE

DEPARTMENT Secretary DATE 12/10/01
RECEIVED FROM Walter D. ...
ADDRESS 30 All ...

UNIT	ITEM	REVENUE CODE	DOLLAR AMOUNT
	<u>Digital 64 SF</u>		<u>42.70</u>
	<u>Check # 13053</u>		
	<u>CBA 096 F 010</u>		

CASH CHECK OTHER

TOTAL 42.70

RECEIVED BY [Signature]