

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that

424 WARREN AVENUE LLC /Aero H & V

Located at

429 WARREN AVE

PERMIT ID: 2013-00193

CBL: 304 B032001

has permission to **To legalize existing signs for the free-standing sign and a sign attached to their business**

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes 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 procured prior to occupancy.

N/A
Fire Prevention Officer

Marge Schmuckel 2/7/13
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**

PERMIT ID: 2013-00193

Located at: 429 WARREN AVE

CBL: 304 B032001

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.

City of Portland, Maine - Building or Use Permit Application

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

Permit No:


2013-00193

Issue Date:

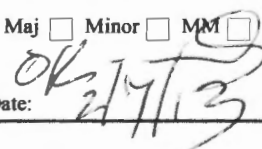

2/7/13

CBL:

304 B032001

Location of Construction: 429 WARREN AVE	Owner Name: 424 WARREN AVENUE LLC	Owner Address: 401 WARREN AVE PORTLAND, ME 04103		Phone:
Business Name: Cross Fit MF	Contractor Name: Aero H & V	Contractor Address: 378 Presumpscot St Portland ME		Phone (207) 761-2092
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent		Zone: B4
Past Use: Health Club/ Gymnasium (use permit #2013-00026)	Proposed Use: Same: Health Club/Gymnasium	Permit Fee: \$124.00	Cost of Work: \$124.00	CEO District: 8
Proposed Project Description: To legalize existing signs for the free-standing sign and a sign attached to their business		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input checked="" type="checkbox"/> N/A INSPECTION: Use Group: Type: Signature:  Signature: 		
		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: LDOBSON	Date Applied For: 01/29/2013	Zoning Approval		

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: 	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



Signage / Awning Permit Application

If you or the property owner owes real estate or personal property taxes or any other charges on any property within the City, payment arrangement **MUST** be made before permits are accepted.

Location/Address:			OWNER Name/Address:		Telephone:
Tax Assessor's Chart/Block/Lot (CBL)			Peter Holmes		846-3113
Chart:	Block:	Lot:	401 Warren Ave. Portland		
304	B302				
LEASEE/BUYER Name (if Applicable)		CONTRACTOR name, address/phone		Total S.F. signage \$ 78	
MisFit LLC		Aero HeV		SF= 39 x \$2.00	
DBA		378 Presumpscot St.		SF + \$30 Fee: \$ 30	
Cross Fit MF		Portland		Historic (\$75): \$	
		761-2092		Awning Fee: \$	
Awning Fee = Cost of Work: \$ (30/first \$1000; \$10 every other \$1000)				TOTAL FEE: \$ 108	

Who should we contact when the permit is ready: Name: Drew Crandall Phone: 899-7770
Address: 429 Warren Avenue

Tenant/allocated building space frontage (in feet): Length: 100 x 1.5 = 150 ft Height: 19'3"

Lot frontage (in feet): Single Tenant or Multi-Tenant Lot:

Current Specific Use: Cross Fit MF

If vacant, what was prior use:

Proposed Use:

Information on proposed sign(s)

Freestanding (e.g. pole) sign?

YES ☒ NO ☐

Dimensions proposed: 8'5" (sf); Height from grade: sf

BLDG Wall Sign (attached to bldg.)?

YES ☒ NO ☐

Dimensions proposed: 39' sf

Proposed Awning:

YES ☐ NO ☐ If yes, is awning backlit? YES ☐ NO ☐

Height of awning Length of awning Depth of awning

Is there any communication, message, trademark or symbol on it? YES ☐ NO ☐

If yes, total square footage of panels with communication, message, trademark or symbol on it:

Information on existing and previously permitted signage:

Freestanding (e.g. pole) sign?

YES ☐ NO ☐

Dimensions proposed: ft X ft; Height from grade: sf

BLDG Wall Sign (attached to bldg.)?

YES ☐ NO ☐

Dimensions proposed: ft X ft

Awning? YES ☐ NO ☐ total sq ft of panels with communication on it: sf

A site sketch and building sketch showing exactly where existing and proposed signage is located MUST be provided.

Sketches and/or pictures of proposed signage and existing building are also required.

Please submit all information outlined in the Sign/Awning Application Checklist. Failure to do so may result in the 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 207-874-8703.

I hereby certify 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: 1/23/13

RECEIVED

JAN 29 2013

Dept. of Building Inspections
City of Portland Maine

47' 12' + 30' = 121'

*Property
Masters*

Dennison's Autocare

 **KeyBank ATM**

 **LEXCONNECTION**
INDEPENDENT
LEXUS SALES & SERVICE

96"

CROSSFITMF

12"



AAMCO TRANSMISSIONS

7E

MAN

MAN

429 Warren Ave.

FOR SALE

297-773-7100

CROSSFIT ME

230"

19.17 = 38,340

24"



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 K&K Insurance Group, Inc. 1712 Magnavox Way Fort Wayne IN 46804		CONTACT NAME: Mass Merchandising PHONE (A/C, No. Ext): 1-800-506-4856 FAX (A/C, No): 1-260-459-5590 E-MAIL ADDRESS: info@fitnessinsurance-kk.com	
INSURED MisFit LLC DBA: CrossFit MF 429 Warren Avenue. Unit 3 Portland, ME 04103 A Member of the Sports, Leisure & Entertainment RPG	2000035040	CP# 80	INSURER(S) AFFORDING COVERAGE INSURER A: Nationwide Mutual Insurance Company INSURER B: INSURER C: INSURER D:
			NAIC # 23787

COVERAGES

CERTIFICATE NUMBER: 2000082498

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.

INS R LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YY)	POLICY EXP (MM/DD/YY)	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 type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC			6BMAS000005164300	06/22/12 12:01 AM	06/22/13 12:01 AM	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$5,000,000 PRODUCTS-COMP/OP AGG \$1,000,000 PROFESSIONAL LIABILITY \$1,000,000 LEGAL LIAB TO PARTICIPANTS \$1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> Not provided while in Hawaii			6BMAS000005164300	06/22/12 12:01 A.M.	06/22/13 12:01 A.M.	COMBINED SINGLE LIMIT (Ea Accident) \$1,000,000 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 <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATU- TORY LIMITS E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
	MEDICAL PAYMENTS FOR PARTICIPANTS						PRIMARY MEDICAL EXCESS MEDICAL

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Facility #1: 429 Warren Avenue Unit 3, Portland, ME 04103

On-Site & Off-Site coverage

Professional liability is included for 1 independent instructor(s) at listed facility.

The Certificate Holder is added as an Additional Insured, but only with respect to the liability arising out of the operations of the Insured named above.

This Certificate Effective 01/25/13-06/22/13

CERTIFICATE HOLDER

CANCELLATION

City Of Portland
389 Congress Street
Portland, ME 04101
Owner/Manager/Lessor of Premises

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

Scott Finkbeiner

Coverage is only extended to U.S. events and activities.

** NOTICE TO TEXAS INSURED: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas.

ACORD 25 (2010/05)

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To whom it may concern,

I have approved the installation of MisFit LLC's 12"x96" sign as an addition to our free standing sign at 429 Warren Avenue. I have also approved the installation of the 24"x230" sign on the front of their leased space at Unit 3 of 429 Warren Avenue.

Regards,

A handwritten signature in black ink, appearing to be 'P. Holmes', written over a horizontal line.

Peter Holmes



AERO

HEATING & VENTILATING, INC.

Construction and Fastening Details of Store Front Sign Fabricated for MisFit LLC:

- Lettering: 1/4" thick wood, treated and painted with weatherproofing. Attached with construction adhesive to welded steel angle iron frame.
- Fastening: Bolted through structure via welded steel frame with standoff brackets installed in any siding pockets.

