

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

Location of Construction: 583 Warren Ave		Owner: W H O M / W C S O B r d e s t g		Phone: 773-0200		Permit No: <b>960231</b>	
Owner Address: 583 Warren Ave - PT1d NE 030		Leasee/Buyer's Name: ATTN: Judy Ther		Phone:		Business Name:	
Contractor Name: AKX Scarborough 550g		Address:		Phone:		<div style="border: 2px solid black; padding: 5px;">                 Permit Issued  <b>PERMIT ISSUED</b>                  314-A-001                  APR - 5 1996                  CITY OF PORTLAND             </div>	
Past Use: office bldg		Proposed Use: office bldg w sign		COST OF WORK: \$ PERMIT FEE: \$ 335 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: <input checked="" type="checkbox"/> U Use Group: Type: Signature: BOCA 93 Signature: [Signature]			
Proposed Project Description: erect sign - 2x2x 5' x 10'				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		Zoning Approval: <i>Conditional</i> Shall be at least 5' from <b>Special Zone or Reviews:</b> <input type="checkbox"/> Shoreland <i>Front &amp; Side</i> <input type="checkbox"/> Wetland <i>W. Side</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: L Chase		Date Applied For: 4/1/96					

1. This permit application doesn't 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..

**PERMIT ISSUED  
WITH LETTER**

**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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: *[Signature]* ADDRESS: \_\_\_\_\_ DATE: *4/1/96* PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

Date: *4/1/96*

*[Signature]*

**CEO DISTRICT #7**  
*D. Jordan*

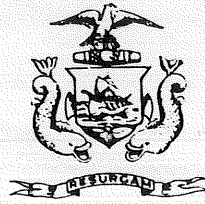
COMMENTS

4-22-96 - all completed no notations  
Close X

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: <i>Close</i>	<i>4-22-96</i>
Other: _____	_____

Inspection Services  
P. Samuel Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

## CITY OF PORTLAND

April 5, 1996

WHOM/WCSO Broadcasting  
Attn: Judy Sher  
583 Warren Avenue  
Portland, Maine 04103

RE: 583 Warren Avenue

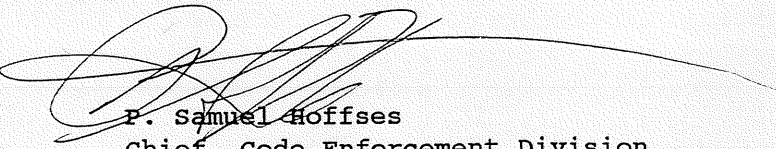
Dear Judy,

Your application to erect a 5' x 10' sign has been reviewed and a permit is herewith issued subject to the requirements listed below. This permit does not excuse the applicant from meeting applicable State and Federal laws.

This permit is being issued with the understanding that the proposed sign be at least five feet from the front and side lot lines.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,



P. Samuel Hoffses  
Chief, Code Enforcement Division

cc: M. Schmuckal, Asst. C, Code Enf Div

**SIGNAGE**

**PLEASE ANSWER ALL QUESTIONS**

B-4

ADDRESS: 583 Warren Avenue ZONE: Industrial

OWNER: WCOM / WCSO BROADCASTING L.P.

APPLICANT: Judy Sher, President / General Manager

ASSESSOR NO.: 314 lot A-1

SINGLE TENANT LOT? YES  NO

MULTI TENANT LOT? YES  NO

FREESTANDING SIGN? YES  NO  DIMENSIONS 5' x 10' = 50<sup>#</sup>

MORE THAN ONE SIGN? YES  NO  DIMENSIONS \_\_\_\_\_

BLDG. WALL SIGN? YES  NO  DIMENSIONS \_\_\_\_\_

MORE THAN ONE SIGN? YES  NO  DIMENSIONS \_\_\_\_\_

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

replacing existing sign 4' x 8'

LOT FRONTAGE (FEET) 150' of frontage per assessors application 35<sup>#</sup>  
City Allowed (65<sup>#</sup>)

AWNING YES  NO  IS AWNING BACKLIT? YES  NO

HEIGHT OF AWNING: \_\_\_\_\_

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? yes, see copy

**A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW**

**SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF THE**

**PROPOSED SIGNS ARE ALSO REQUIRED.**

SONO tubes 4' below grade

< 200' frontage  
65<sup>#</sup> MAX. AREA  
25' MAX height } Not given - per Judy Sher WCSO 10' high  
5' set back req. } - will be more than 5' setback



condition -  
shall be AT LEAST  
5' from front & side  
lot lines

# WELCOME TO

**94.9<sup>FM</sup>**  
**WHOM**  
*Soft & Easy Favorites*

*The Ocean*  
**WCBSO**  
**97.9<sup>FM</sup>**

**ALL SPORTS**  
WLPZ-AM **1440**

**MAILBOX**  
**BUSTER**

583 Warren Avenue, Portland, Maine 04103

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

PAGE 1 OF 1 DATE (MM/DD/YY) 29-MAR-1996

PRODUCER  
 Willis Corroon Corporation of Ohio, Cleveland 19644  
 1700 Bond Court Building  
 1300 East Ninth Street  
 Cleveland OH 44114-1503  
 (216) 861-9100

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.

Lara C. Bennett  
 INSURED  
 Barnstable Broadcasting, Inc.  
 WCSO Broadcasting L.P.  
 477 Congress Street  
 Portland ME 04101

COMPANIES AFFORDING COVERAGE

COMPANY	Vigilant Insurance Company
A	
COMPANY	
B	
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 <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT	35315252	01-JUL-1995	01-JUL-1996	GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS-COMP/OP AGG \$ 2,000,000
					PERSONAL & ADV INJURY \$ 1,000,000
					EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 300,000
					MED EXP (Any one person) \$ 10,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				BODILY INJURY (Per accident) \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				PROPERTY DAMAGE \$
A	OTHER PROPERTY (BUILDING)	35315252	01-JUL-1995	01-JUL-1996	AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$ EACH OCCURRENCE \$ AGGREGATE \$ WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> EL EACH ACCIDENT \$ EL DISEASE-POLICY LIMIT \$ EL DISEASE-EA EMPLOYEE \$
	\$500,000 limit \$ 5,000 deductible				

DESCRIPTION OF OPERATIONS, LOCATIONS, VEHICLES/SPECIAL ITEMS

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 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.  
 AUTHORIZED REPRESENTATIVE  
*Lara Bennett*