

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

**BUILDING INSPECTION
PERMIT**

Permit Number: 101302
PERMIT ISSUED

Please Read
Application And
Notes, If Any,
Attached

This is to certify that PROLIERIZED NEW ENGLAND CO. LLC/Barlo Signs
has permission to Install a free standing sign 8'3" x 4'1" sign
AT S60 RIVERSIDE ST GBL 321 A001001

OCT 28 2010

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 buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS
Fire Dept. _____
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____


Director - Building & Inspection Services

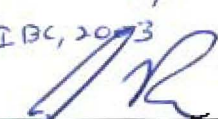
PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 10-1302	Issue Date:	CBL: 321 A001001
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Location of Construction: 560 RIVERSIDE ST	Owner Name: PROLIERIZED NEW ENGLAND C	Owner Address: 69 ROVER STREET	Phone: 781 873-1662
Business Name: Schnitzer Northeast	Contractor Name: Barlo Signs	Contractor Address: 158 Greeley Street Hudson	Phone: 6038808949
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: I-H

Past Use: Commercial "Schnitzer Northeast"	Proposed Use: Commercial "Schnitzer Northeast" - Install a free standing sign 8'3" x 4'1" sign	Permit Fee: \$100.00	Cost of Work: \$100.00	CEO District: 5
Proposed Project Description: Install a free standing sign 8'3" x 4'1" sign		FIRE DEPT: N/A <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <input checked="" type="checkbox"/> Type: S-91 IBC, 2003	
		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: Idobson	Date Applied For: 10/18/2010	Zoning Approval		
<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"/>	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	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: <i>OK 10/25/10 ASA</i>	Date:	Date: <i>ASA</i>

PERMIT ISSUED

OCT 28 2010

City of Portland

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 _____

City of Portland, Maine - Building or Use Permit

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

Permit No: 10-1302	Date Applied For: 10/18/2010	CBI: 321 A001001
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Location of Construction: 560 RIVERSIDE ST	Owner Name: PROLERIZED NEW ENGLAND C	Owner Address: 69 ROVER STREET	Phone: 781 873-1662
Business Name: Schnitzer Northeast	Contractor Name: Barlo Signs	Contractor Address: 158 Greeley Street Hudson	Phone: (603) 880-8949
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial "Schnitzer Northeast" - Install a free standing sign 8'3" x 4'1" sign	Proposed Project Description: Install a free standing sign 8'3" x 4'1" sign
---------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------

Dept: Zoning	Status: Approved	Reviewer: Ann Machado	Approval Date: 10/25/2010
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Jonathan Rioux	Approval Date: 10/28/2010
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Fastener schedule per the IBC 2003 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work. 3) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.			

Comments:
10/19/2010-amachado: Spoke to Jennifer at Barlo Signs. 35 sf is maximum allowed - 38.28 sf proposed. Jennifer will send revised plan.
10/25/2010-amachado: Received revised plan. Sign is now 33.69 sf.
10/28/2010-jrioux: Left msg. with installer, i.e. attachment detail.
10/28/2010-jrioux: Spoke with Contractor she forward attachment detail.

PERMIT ISSUED

OCT 28 2010



CITY OF PORTLAND, MAINE
Department of Building Inspections

Original Receipt

10-13 2010

Received from Carlo Signis

Location of Work 360 Riverside

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 100

Building (IL) _____ Plumbing (15) _____ Electrical (12) _____ Site Plan (U2) _____

Other Signis

CBL: 321-A-1

Check #: 2079 Total Collected \$ 100

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: S.P.

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

_____ 10-18 20 10 _____

Received from Paulo Siguas _____

Location of Work 560 Riverside _____

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 55 _____

Building (IL) _____ Plumbing (15) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

CBL: 321-11-1 _____

Check #: 2028 _____ Total Collected \$ 55 _____

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature] _____

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date _____
 Permit # 2010-4723
 CBL# 391 A 1

LOCATION: 568 Riverside METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Schnitzer NE
 TENANT _____ PHONE # 617-212-3106

					TOTAL	EACH FEE
OUTLETS	Receptacles	Switches	Smoke Detector			.20
FIXTURES	Incandescent	Fluorescent	Strips			.20
SERVICES	Overhead	Underground	TTL AMPS <800			15.00
	Overhead	Underground	>800			25.00
Temporary Service	Overhead	Underground	TTL AMPS			25.00
						25.00
METERS	(number of)					1.00
MOTORS	(number of)					2.00
RESID/COM	Electric units					1.00
HEATING	oil/gas units	Interior	Exterior			5.00
	APPLIANCES	Ranges	Cook Tops	Wall Ovens		2.00
	Insta-Hot	Water heaters	Fans			2.00
	Dryers	Disposals	Dishwasher			2.00
	Compactors	Spa	Washing Machine			2.00
	Others (denote)					2.00
MISC. (number of)	Air Cond/win					3.00
	Air Cond/cent			Pools		10.00
	HVAC	EMS	Thermostat			5.00
	Signs					10.00
	Alarms/res					5.00
	Alarms/com					15.00
	Heavy Duty(CRKT)					2.00
	Circus/Carnv					25.00
	Alterations					5.00
	Fire Repairs					15.00
	E Lights					1.00
	E Generators					20.00
PANELS	Service	Remote	Main			4.00
TRANSFORMER	0-25 Kva					5.00
	25-200 Kva					8.00
	Over 200 Kva					10.00
TOTAL AMOUNT DUE						
MINIMUM FEE/COMMERCIAL 45.00					MINIMUM FEE	35.00
						45.00

CONTRACTORS NAME Barco - Larry Libber MASTER LIC. # MC60018535
 ADDRESS 158 Broadway St Portland ME 04103 LIMITED LIC. # _____
 TELEPHONE 800-227-5674 (395)

SIGNATURE OF CONTRACTOR [Signature]



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: <u>568 Riverside St (560 Riverside St.)</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>321</u> Block# <u>A</u> Lot# <u>1</u>	Owner: <u>Sch. Witzer Northeast</u> <u>69 Riverst</u> <u>Everett MA 02149</u>	Telephone: <u>617-212-3106</u>
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone: <u>Barlo Signs</u> <u>158 Greeley St</u> <u>Hudson NH 03051</u>	Total s.f. of signage x \$2.00 <u>35 = 70.00</u> Per s.f. plus <u>\$30.00</u> \$65.00 For H.D. signage = Total Fee: \$ <u>100.00</u> Awning Fee = cost of work <u>0</u> Total Fee: \$ <u>100.00</u>

Who should we contact when the permit is ready: Barlo - Jenn phone: 800-227-5674(333)

Tenant/allocated building space frontage (feet): Length: _____ Height: _____
Lot Frontage (feet) 200' Single Tenant or Multi Tenant Lot

Current Specific use: Recycle Plant
If vacant, what was prior use: _____
Proposed Use: New sign

Information on proposed sign(s):
Freestanding (e.g., pole) sign? Yes No Dimensions proposed: 4'4" x 8'9" Height from grade: 10'
Bldg. wall sign? (attached to bldg) Yes No Dimensions proposed: _____

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.

Information on existing and previously permitted sign(s):
Freestanding (e.g., pole) sign? Yes No Dimensions: _____
Bldg. wall sign? (attached to bldg) Yes No Dimensions: _____
Awning? Yes No Sq. ft. area of awning w/communication: _____

A site sketch and building sketch showing exactly where existing and new signage is located must be provided. Sketches and/or pictures of proposed signage and existing building are also required.

Please submit all of the information outlined in the Sign/Awning Application 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 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 874-8703.

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: [Signature] Date: 10-15-10

This is not a permit; you may not commence ANY work until the permit is issued.
Single tenant - IT -
max - 35 ft
height 10' max
4'4" x 8'9" = 38.7 sq ft revised 33.6875 ft²
10' sham @
setback 1' - sham @

99" x 49" = 4851 sq ft = 33.6875 sq ft

JOB#: 84846

SCOPE OF WORK - BARLOMEX

(1) D/F ILLUM PYLON
SITE PHOTOS

SCOPE OF WORK - BARLO

PROVIDE 5" SQ. TUBES

GENERAL NOTES

COLORS

SIGN
Cabinet: BLACK
Retainer: BLACK
Face B/G3/16" WHITE LEXAN
3630-51 SILVER GREY
3630-61 SLATE GREY
3630-76 HOLLY GREEN
Copy/REVERSE WHITE
BLACK
3630-76 HOLLY GREEN

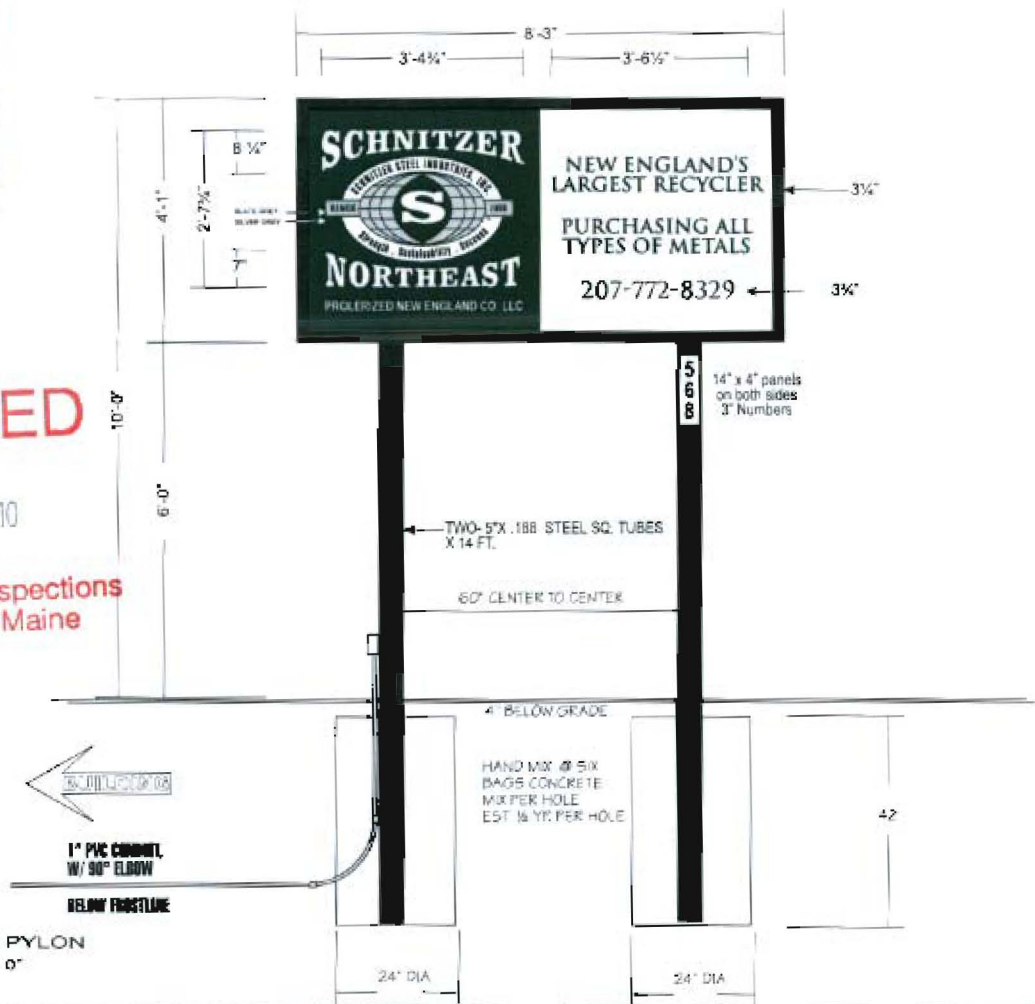
POLES

Pole: BLACK



EXISTING TEMP SIGN
SCALE: NTS

RECEIVED
OCT 25 2010
Dept. of Building Inspections
City of Portland Maine



ALL COLORS ARE FOR REPRESENTATION ONLY.
SEE ACTUAL SAMPLES FOR COLOR MATCH.

SIGN DISPOSITION

Store for Barlo Leave @ Site Dispose
 Store for Customer Chargeable N/A

GENERAL INFO.

Qty: 1 Sq. Ft: 33.6 SF
S/F D/F ILL Non-ILL

Sign Type	S/F	D/F	ILL	Non-ILL	Interior	Exterior
LARGE A EXTRUSION	Box Depth: 13.5	Framing: (Steel) (Alum.)	Ret. Size: 10	Face Mat: W/LEXAN	Thickness: 1/8"	Copy: VINYL5
ILLUMINATION: (Fluorescent) Neon LED HID Other	Ballast: (Standard) Electronic (8) 48" LAMPS	Pole Cover: Standard Custom	Hgt:	Depth:	Material:	Non-illuminated illuminated

ELECTRONIC MESSAGE CENTER PRESALE RELEASE			
Red	Amber	RGB	Design: Date:
Matrix:	Cabinet Size:	Pixel Size: MM	SALES: Date:
T & T	Weather Station	Comm: Fiber DC RF PM Cell	Estimating: Date:
Master/Slave	Master/Slave	Computer Provided: Y N	Engineering: (GN) Date: 10-5
			Production: Date:
			Installation: Date:

Job Name: SCHNITZER	Location: 568 RIVERSIDE STREET PORTLAND, ME 04103
Client:	Drawn By: MV
Landlord:	Sales Rep: DM
	Date: 6/17/10 DM
© COPYRIGHT 2010 THE BARLO GROUP THIS DESIGN IS THE PROPERTY OF THE BARLO GROUP. ALL RIGHTS ARE RESERVED. NO PART OF THIS DESIGN OR COPY IS TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM.	
Barlo Signs International Inc.	

ELECTRIC		Existing	Required
Circuits			
Amp			
Voltage			120
U.L.			

STEEL		Existing	Required
Size			
Length			
W. Thickness			
Stub Size			
Stub Length			
W. Thickness			

PLATE	W	L	Th
GUSSETS	W	L	Th
ANCHOR BOLTS	L	HOOK	QU

MATERIAL OPTIONS & ESTIM.

REVISIONS	
Date	Comment
8-13	CHANGED SIGN/OT 35 SQUARE FEET
8-17	CHANGED COPY

TIME SUMMARY	
0-Art/Eng	5-Neon
Art/Engineering	Neon
1-Pat/Vin	6-Finish
Patrons/Vinyl	Acabado
2-Let. Fab.	7-Paint
Letter/Fabrication	Paints
3-Screen	8-Install
Partials	Installation
4-Met. Fab.	9-Misc.
Fabrication	Maintenance



File Name:
SCHNITZER PORTLAND 10086299 (CD 10-16)(U)
B- 10-08-6299 SHEET 1 OF 1
Rev # 3

PROPERTY OWNER AUTHORIZATION • MUST BE SIGNED BY REAL ESTATE OWNER

Sign location address: 568 Riverside Street, Portland, ME 04103

I hereby authorize Jenn Robichaud or Authorized Representative of Barlo Signs of Hudson, N.H., to APPLY FOR SIGN PERMITS for this site.

I hereby authorize Jenn Robichaud or Authorized Representative of Barlo Signs of Hudson, N.H., to APPEAR BEFORE THE PLANNING BOARD and/or SIGN REVIEW BOARD and/or the ZBA for this site.

Property Owner's Signature*: 

Printed Name: Carol Kelly

Address: 69 Bow St



ACORDTM CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/13/2010

PRODUCER
Woodruff-Sawyer Oregon, Inc.
1001 SW 5th Avenue, Suite 500
Portland, OR 97204
(503) 416-7180

INSURED
Procterized New England Company, LLC dba: Advanced Recycling
Schnitzer Steel Industries, Inc.
PO Box 10047
Portland, OR 97296-0047

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.

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A:	Illinois Union Insurance Company	27960
INSURER B:		
INSURER C:		
INSURER D:		
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.

INSR	ADD'L TR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	X		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$250,000 Self-Insured Retention GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	PMIG23860661003	03/15/2010	03/15/2011	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000
			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 (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
			GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
			EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
			WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
			OTHER				\$ \$ \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Sign Permit: 568 Riverside Street, Portland, ME.
 City of Portland Maine is included as additional insured per form NF13833a attached.
 Operations of the Named Insured subject to the terms, conditions and exclusions of the policy issued by the Insurance Company.

CERTIFICATE HOLDER
 City of Portland Maine
 389 Congress Street
 Portland, ME 04101

LOAN #:

CANCELLATION 10 Day Notice for Non-Payment of Premium

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 *Mary K. A. Reed*

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

Named Insured Schnitzer Steel Industries, Inc., Prolerized New England Company, LLC dba: Advanced Recyc			Endorsement Number
Policy Symbol	Policy Number PMIG23860661003	Policy Period 03/15/2010 TO 03/15/2011	Effective Date of Endorsement
Issued By (Name of Insurance Company) Illinois Union Insurance Company			

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY POLICY
CASUALTY PREMISES POLLUTION POLICY**

SCHEDULE

Name of Additional Insured Person(s) or Organization(s): City of Portland Maine
389 Congress Street
Portland, ME 04101

(Information required to complete this Schedule, if not shown above, will be shown in the Declarations.)

- A. Section II - WHO IS AN INSURED is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
1. In the performance of your ongoing operations; or
 2. In connection with your premises owned or rented to you.
- B. Where this endorsement applies, Condition 4. Other Insurance of Section IV - CONDITIONS, is amended to include the following:
1. This insurance applies excess of the "Self Insured Retention", and if:
 - a. Any additional insured under this policy has other liability which applies to a loss covered by this policy; and
 - b. You have specifically agreed in a written contract executed prior to the loss that this insurance must be primary to and non-contributory with such other insurance issued directly to such additional insured; thenthis insurance is primary to and non-contributory with such other insurance.
 2. We will only pay the amount of the loss, if any, that exceeds the "Self Insured Retention".

All other terms, conditions and exclusions remain unchanged.

Sign Permit: 568 Riverside Street, Portland, ME.

City of Portland Maine is included as additional insured per form NF13833a attached.

Operations of the Named Insured subject to the terms, conditions and exclusions of the policy issued by the Insurance Company

Authorized Representative