

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, if Any, Attached

BUILDING INSPECTION

PERMIT

Permit Number: 070433

PERMIT ISSUED

This is to certify that ROSS-MONROE LLC / LSI Dept Inc

has permission to Reface 2 9sf signs

AT 1911 FOREST AVE

327A A006001

MAY 17 2007

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State 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 when permission procured before this building or part thereof is lashed or enclosed in a closed-in. 4 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

[Signature] 5/17/07
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: 07-0433	Issue Date:	CBL: 327A A006001
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Location of Construction: 1911 FOREST AVE	Owner Name: ROSS-MONROE LLC	Owner Address: 200 STAR AVE STE 212	Phone:
Business Name:	Contractor Name: LSI Adapt Inc	Contractor Address: 9260 Pleasantwood Ave. Portland	Phone 3302441219
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B2

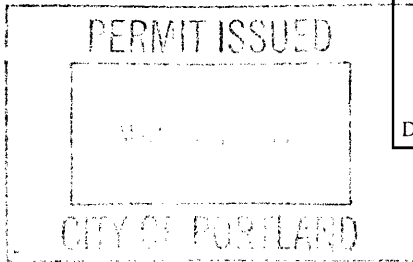
Past Use: Commercial / 7- Eleven	Proposed Use: Commercial / 7-Eleven Reface 2 9sf signs - canopy	Permit Fee: \$66.00	Cost of Work: \$66.00	CEO District: 5
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>U</i> Type: <i>Signs</i> <i>IBC 2003</i>	

Proposed Project Description: Reface 2 9sf signs canopy	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
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: dmartin	Date Applied For: 04/25/2007	Zoning Approval
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- 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	Zoning Appeal	Historic Preservation
<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>5/16/07</i> <i>APM</i>	<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:	<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 <i>APM</i> Date:



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: 07-0433	Date Applied For: 04/25/2007	CBL: 327A A006001
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Location of Construction: 1911 FOREST AVE	Owner Name: ROSS-MONROE LLC	Owner Address: 200 STAR AVE STE 212	Phone:
Business Name:	Contractor Name: LSI Adapt Inc	Contractor Address: 9260 Pleasantwood Ave. Portland	Phone (330) 244-1219
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial / 7-Eleven Reface 2 9sf signs on canopy	Proposed Project Description: Reface 2 9sf signs on canopy
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Dept: Zoning	Status: Approved	Reviewer: Ann Machado	Approval Date: 05/16/2007
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 05/17/2007
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.			



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>1917 Forrest Ave</u> # <u>32541</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: <u>F-ELVUN</u>	Telephone: <u>214-828-7011</u>
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone: <u>CSI ADAPT, Inc.</u> <u>4260 Pleasantwood Ave</u> <u>N. Canton, OH 44720</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage = Total Fee: \$ <u>66.00</u> Awning Fee = cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>Math Myers</u> phone: <u>330-244-1294</u>		
Tenant/allocated building space frontage (feet): Length: _____ Height: _____ Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot _____		
Current Specific use: <u>Gasoline station</u> If vacant, what was prior use: _____ Proposed Use: _____		
Information on proposed sign(s): <u>Replace Existing 36" x 36"</u> Freestanding (e.g., pole) sign? Yes _____ No _____ Dimensions proposed: _____ Height from grade: _____ 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): <u>2 - 36" x 36" Canopy Signs</u> 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: _____ <u>9 SF = \$18 + 2</u>		
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.

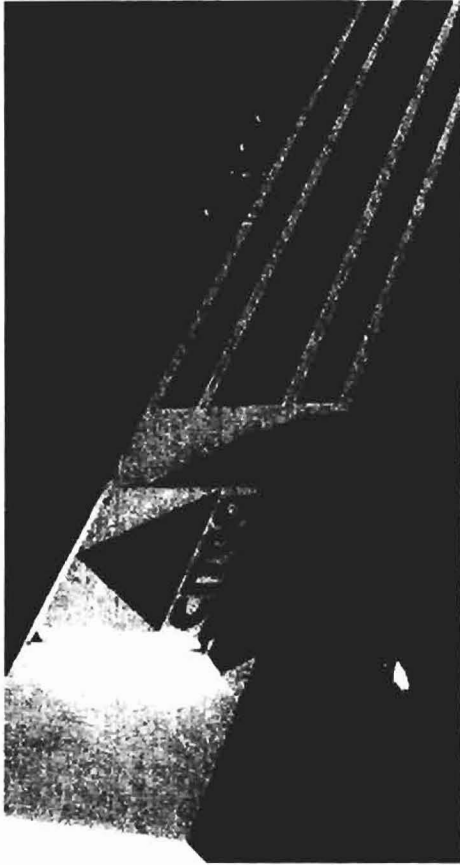
Signature of applicant:	Date: <u>4/6/07</u>
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This is not a permit, you may not commence ANY work until the permit is issued.

Canopy signs - 20 ft total
- 2 allowed on opposite facing planes

~~5 ft + 5 ft = 10 ft~~
9 ft + 9 ft = 18 ft OK

36" x 36"
 4 SF = \$18
 2 signs = \$36



7-Eleven Re-brand

Job No. :	Date:	Project	Client:
Tax map I.D. No.:	Designer:	Description	Address:
		File Name:	

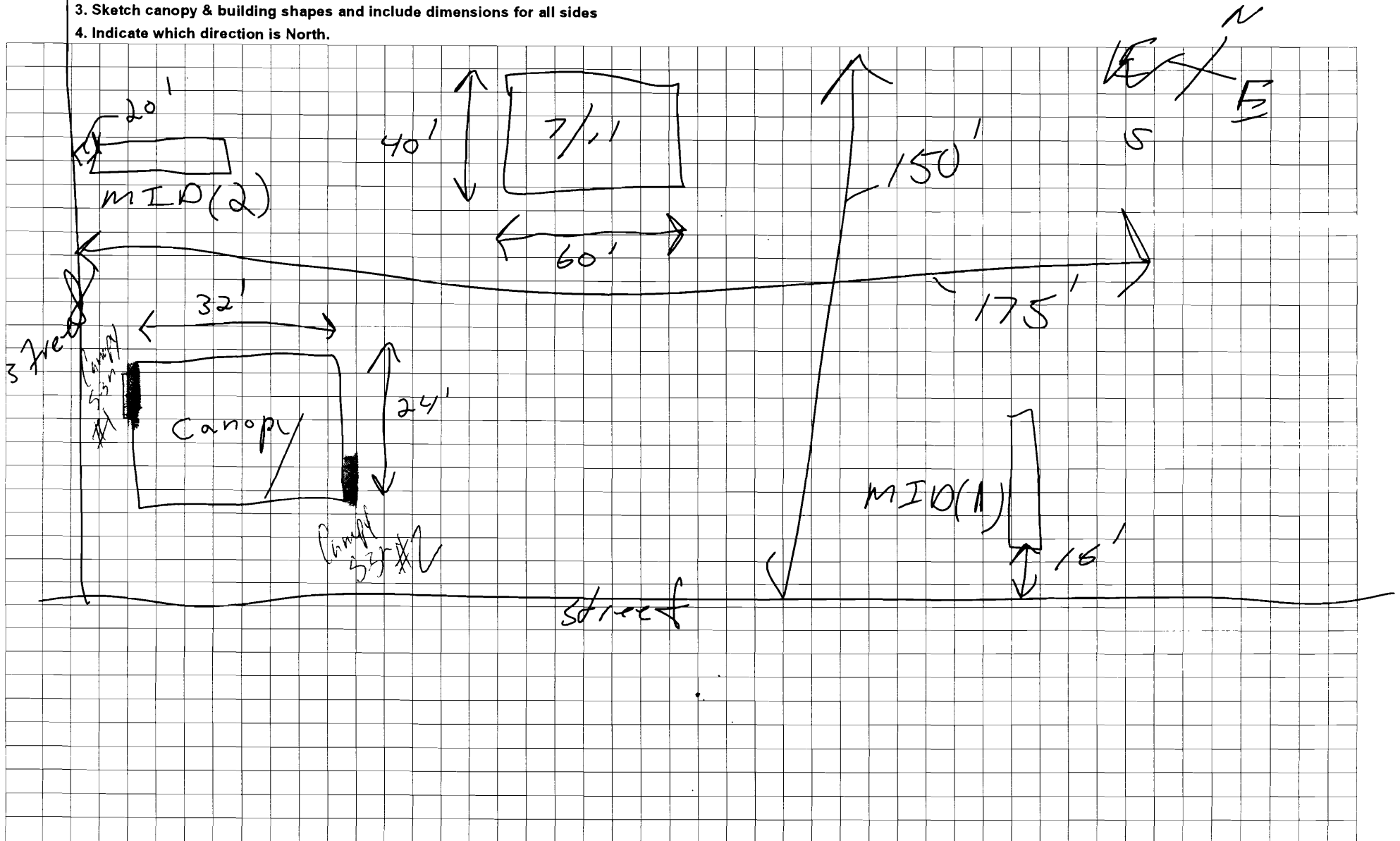
7-Eleven Gasoline Branding Survey

Site Sketch

Store Number: 32541

Site Sketch (Include cross roads and site layout with drive entrances, sign location, canopy, buildings, etc.). Use back of sheet if needed.

1. Show dimensions of property lines on all street frontage sides of property
2. Identify all Main ID Signs and distance from the road.
3. Sketch canopy & building shapes and include dimensions for all sides
4. Indicate which direction is North.



Certificate of Insurance

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 LISTED BELOW.

NAME AND ADDRESS OF AGENCY Aon Risk Services of Texas, Inc. 2711 North Haskell Avenue 8th Floor, Lock Box No.8 Dallas, Texas 75204	COMPANIES AFFORDING COVERAGES COMPANY LETTER A ACE American Insurance Company <hr/> COMPANY LETTER B <hr/> COMPANY LETTER C LOCATION SEE ATTACHED PAGE
NAME AND ADDRESS OF INSURED 7-ELEVEN, INC. 1722 Routh Street, Suite 1000 Dallas, Texas 75201	

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 of 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.

COMPANY LETTER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EXPIRATION DATE	Limits of Liability in Thousands (000)		
				EACH OCCURRENCE	AGGREGATE	
A	GENERAL LIABILITY	XSL G2 171438 0	10/1/2007	BODILY INJURY	\$	\$
	<input checked="" type="checkbox"/> COMPREHENSIVE FORM <input checked="" type="checkbox"/> PREMISES - OPERATIONS <input type="checkbox"/> DRAM SHOP LIABILITY <input type="checkbox"/> PRODUCTS / COMPLETED <input type="checkbox"/> CONTRACTUAL INSURANCE <input type="checkbox"/> MOTOR CARGO <input type="checkbox"/> VENDOR'S BROAD FORM <input type="checkbox"/> OTHER			PROPERTY DAMAGE	\$	\$
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$ 1500	\$ 1500
				RETENTION	\$ 500	
	AUTOMOBILE LIABILITY			BODILY INJURY (EACH PERSON)	\$	
	<input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON-OWNED			BODILY INJURY (EACH ACCIDENT)	\$	
				PROPERTY DAMAGE	\$	
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	
	EXCESS LIABILITY			BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
	COMPREHENSIVE CATASTROPHE LIABILITY					
	WORKERS' COMPENSATION and EMPLOYERS LIABILITY			STATUTORY		

ADDITIONAL INSURED: City Of Portland ME	NOTE TO ADDITIONAL INSURED: APPLICABLE ONLY TO LOCATION(S) SHOWN & ONLY TO THE EXTENT AGREED UPON & CONTAINED IN THE LEASE &/OR OTHER WRITTEN AGREEMENT WITH 7-ELEVEN, INC.
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REMARKS: Coverage with respect to the sign only

Cancellation: Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will mail 30 days written notice to the below named certificate holder.

NAME AND ADDRESS OF CERTIFICATE HOLDER: City Of Portland ME 369 Congress Street Room 315 Portland, ME 04101

DATE ISSUED: 4/16/2007

[Signature]

AUTHORIZED REPRESENTATIVE