

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

# CITY OF PORTLAND

BUILDING DEPARTMENT

## PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED  
Permit Number: 050878  
JUL 27 2005  
CITY OF PORTLAND

This is to certify that GOVERNMENT EMPLOYEES CREDIT UNION OF MAINE Inc.

has permission to replace existing signage w/ new 68 sq ft signage

AT 26 RIVERSIDE IND PKWY

328 B008901

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 inspection must be given and work in progress must be reported before this building or part thereof is altered or 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

*[Handwritten Signature]*  
7/22/05  
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: 05-0878	Issue Date: <b>PERMIT ISSUED</b> JUL 27 2005	SBL: 328 B008001
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<b>Location of Construction:</b> 26 RIVERSIDE IND PKWY	<b>Owner Name:</b> GOVERNMENT EMPLOYEES CR	<b>Owner Address:</b> 50 RIVERSIDE IND PKWY	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> NeoKraft Signs	<b>Contractor Address:</b> 686 Main St. Lewiston	<b>Phone:</b> 2077829654
<b>Lessee/Buyer's Name:</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	<b>Zone:</b> IM

<b>Past Use:</b> Commercial/ Credit Union	<b>Proposed Use:</b> Credit Union/ Name Change/ replace existing signage w/ new 58 sq ft of signage	<b>Permit Fee:</b> \$146.00	<b>Cost of Work:</b> \$146.00	<b>CEO District:</b> 5
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<b>Proposed Project Description:</b> replace existing signage w/ new 58 sq ft of signage	<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>W/A</i>	<b>INSPECTION:</b> Use Group: U Type: Sign IBC 2003 Signature: <i>[Signature]</i>
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<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions
Signature _____ Date _____

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 07/01/2005	<b>Zoning Approval</b>	
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<p>1.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p align="center"><b>Special Zone or Reviews</b></p> <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>9/7/05</i>	<p align="center"><b>Zoning Appeal</b></p> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Date: _____	<p align="center"><b>Historic Preservation</b></p> <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

	<b>Date Applied For:</b> 07/01/2005	<b>CBL:</b> 328 B008001
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<b>Location of Construction:</b> 26 RIVERSIDE IND PKWY	<b>Owner Name:</b> GOVERNMENT EMPLOYEES CR	<b>Owner Address:</b> 50 RIVERSIDE IND PKWY	<b>Phone:</b> 
<b>Business Name:</b>	<b>Contractor Name:</b> NeoKraft Signs	<b>Contractor Address:</b> 686 Main St. Lewiston	<b>Phone:</b> (207) 782-9654
<b>Tenant/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	

<b>Proposed Use:</b> Credit Union/ Name Change 1 replace existing signage w/ new 58 sq ft of signage	<b>Proposed Project Description:</b> replace existing signage w/ new 58 sq ft of signage
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# Sign 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>50 RIVERSIDE INDUSTRIAL PARKWAY</u>		Zone: <u>IM</u>
Total square footage of proposed structure: <u>47.14 TOTAL OF ALL SIGNS</u>		Square footage of lot: _____ Lot frontage: _____ Tenant frontage: _____
Tax Assessor's Chart, Block & Lot Block# <u>B</u> Lot# <u>8</u>	Owner: <u>C PORT CREDIT UNION</u>	Telephone: <u>878-6200</u>
Lessee/buyer's name (If applicable)	Current use: <u>CREDIT UNION</u> Proposed use: <u>SAME</u>	Total s.f. of signage <u>58</u> \$2.00 per s.f. \$ _____ plus \$65.00 base fee Fee: \$ _____
Applicant name, address & telephone: <u>NEOKRAFT SIGN Co. - AGENT FOR C-PORT PETER MURPHY 686 MAIN STREET LEWISTON, ME 04240</u>	If vacant, prior use: <u>NA</u> How long has it been vacant? _____ Project description: Number of tenants in lot? _____	Awning-without signage: \$30.00 for first \$1,000 plus \$69.00 each addict. \$1,000 Fee: \$ _____
Freestanding sign? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No More than one sign? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Sign Attached to Building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Dimensions _____ Dimensions _____ Dimensions _____	Height <u>10'7"</u> <u>34.14 S.F.</u> Height _____ <u>EXISTING 3'x4' SIGN TO HAVE</u> Height _____ <u>NEW FACE</u> Height _____ <u>11 S.F. WALL SIGN</u>
Awning Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Is awning backlit? Yes <input type="checkbox"/> No <input type="checkbox"/> Height off sidewalk? _____ Awning Height: _____ Length: _____ Depth: _____	Is there any message, trademark or symbol on it? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, total s.f. of panels/graphics: _____ Please describe: _____	<u>7/20/05</u> <u>per phone call from Peter Murphy the OLD BUREAU free standing sign</u>
List ALL existing signage and their dimensions: <u>ONLY OTHER SIGNS ARE DIRECTIONAL, PARKING + TRAFFIC CONTROL</u>		
Contractor's name, address & telephone: <u>NEOKRAFT SIGN Co. 686 MAIN ST. LEWISTON, ME 04240 282-9654</u> Who should we contact when the permit is ready: <u>PETER MURPHY</u> Mailing address: <u>686 MAIN STREET LEWISTON, ME 04240</u> Phone: <u>782-9654</u> <u>shall be removed</u>		
Once your permit is approved, we will notify you to come in and pick up your permit and review the requirements with our plan reviewer. Beginning work prior to receiving your permit will result in a violation fee of \$50.00.		

SIGN A  
SIGN C  
SIGN B

116  
30  
146

Please submit all of the information outlined in the Signage Application Checklist including a building sketch showing exactly where existing is and proposed signage will be located. Please include sketches/pictures of proposed signage. Failure to do so will result in the automatic denial of your permit.

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information 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: Peter Murphy

Date: \_\_\_\_\_

This is not a Permit; you may not commence any work until the Permit is issued.

**CUMIS INSURANCE SOCIETY, INC.**  
 A STOCK COMPANY OWNED AND OPERATED BY AND FOR CREDIT UNION PEOPLE  
**CERTIFICATE OF INSURANCE**

This is to certify that such insurance policies as indicated below by policy number have been issued on forms in current use by the society. Hazards covered are indicated by (X), This CERTIFICATE OF INSURANCE neither affirmatively nor negatively amends, extends, or alters the coverage afforded by these policies.

**Name and Address of Certificate Holder**

The City of Portland Maine

Type of Insurance	Policy Number	Expiration Date	Limits of Liability
WORKERS' COMPENSATION EMPLOYERS' LIABILITY			Statutory
COMPREHENSIVE GENERAL LIABILITY	003371	Continuous	Combined Single Limit \$5,00,000 Each Occurrence
AUTOMOBILE LIABILITY ( ) Owned Automobiles ( ) Hired Automobiles ( ) Non-Owned Automobiles ( ) Repossessed Automobiles			Combined Single Limit Each Occurrence
EXCESS LIABILITY	,003371	Continuous	Combined Single Limit \$2,000,000 Each Occurrence

Should any of the described policies be cancelled before the expiration date noted, the Society will mail 45 days prior written notice of such cancellation to the above named Certificate Holder. The mailing of the notice shall be sufficient proof of notice.

**Description and location of operations and/or automobiles and/or property covered:**

Premises and Operations of Government Employees Credit Union of Maine located at 50 Riverside Industrial Parkway, Portland ME 04103. Refer to CUPOP 61 02 01 92 for details.

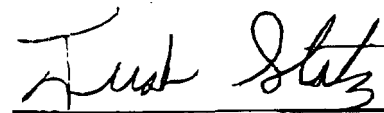
Name and Address of Insured

Attn: Harold Caswell  
 GOVERNMENT EMPLOYEES CREDIT UNION OF  
 MAINE  
 PO Box 777  
 Portland ME 04104 0777

Date:

04/26/2005

By:



AUTHORIZED REPRESENTATIVE

TRISH STATZ



CUMIS Insurance Society, Inc.

P.O. Box 1084 • 5910 Mineral Point Road  
Madison, WI 53701-1084  
Phone: 608/238-5851

INSURED R S II  
PREMISES YOU LEASE  
CREDIT UNION E OF ROTEC ON

Designation of Premises  
(Part You Lease)

Name of Person or Organization  
(Additional Insured)

50 Riverside Industrial Pkwy  
Portland ME 04103 1426

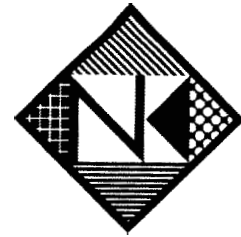
The City of Portland Maine

The following is added to the 'WHO IS AN INSURED' provision of the Business Liability Coverage:

- 6. The person or organization shown above is also an Insured, but only with respect to liability arising out of the ownership, *maintenance or* use of that part of the premises designated above leased to you, and subject to the following additional exclusions:

The insurance does not apply:

- a. To any "occurrence" which takes place after you cease to be a tenant in said premises; or
- b. To structural alterations, new construction or demolition operations performed by or on behalf of the person or organization designated above.



# Neokraft

S I G N S

Neokraft Signs Inc.  
 686 Main Street  
 Lewiston, Maine 04240  
 Telephone: 207.782.9654  
 Facsimile: 207.782.0009  
 1.800.339.2258  
<http://www.neokra+t.com>

Custom Sign Fabrication

Except for designs supplied by the client, all ideas, plans or arrangements indicated on this drawing are copyrighted and owned by Neokraft Signs Inc. and shall not be reproduced, used by or disclosed to any person, firm or corporation without written permission of Neokraft Signs Inc.

## cPort Credit Union FL003897

Location: 50 Riverside Industrial  
 Parkway, Portland ME

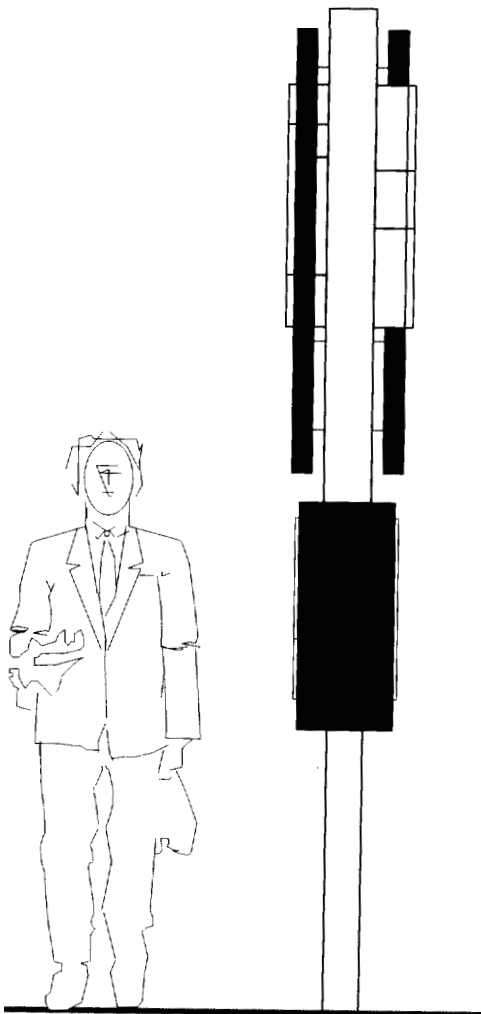
Drawing No.: 1 of 1

Drawn by: DS

Date: 04.12.2005

Revised: 04.20.2005

Gen Ref.:



END VIEW



SIGN B

Peter Murphy

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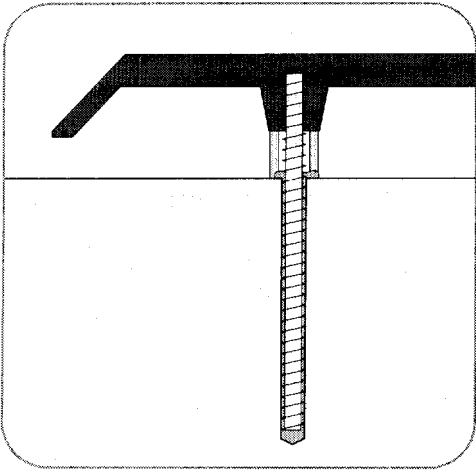


PROPOSED WALL SIGN - NON-LIT

48" X 33" = 11 S.F.

STUD MOUNTING  
DETAIL ATTACHED





**ALUMINUM STUDS, SET AND SEALED IN HOLES WITH SILICONE ADHESIVE**

**STUD-MOUNTING DETAIL  
HALF-SCALE**

**Wind Load Calculations on Cast or Flat Cut-out Gemini Letters**

Size	Wind Face Load lbs. Force	Wind Side Load lbs. Force	Screw Shear Strength lbs. Force
6	12	5	720
12	50	11	960
14	68	15	960
18	112	22	960
24	198	36	1440
36	447	65	1920

**Gemini Letter Data**

Height in.	Face Area sq.in.	Side Area sq.in.	Screws each	Screw Area psi	Total Screw sq. in.
6	21.6	9	3	0.015	0.045
12	86.4	18	4	0.015	0.06
14	117.6	24.5	4	0.015	0.06
18	194.4	36	4	0.015	0.06
24	345.6	60	6	0.015	0.09
36	777.6	108	8	0.015	0.12

**Assumptions and Facts**

The point of failure will be the aluminum screws in shear of the minor thread diameter.

144 mph wind speed is equal to 82.7 lbs./sq. ft. (0.574 lbs./sq.in.)

Tensile strength at break for 3003 Aluminum is 16,000 psi.

Minor thread area in shear of a 10-24 aluminum screw is .015 sq. in. at 2 threads depth.

Therefore, each screw has a holding force in shear of 240 lbs.

Average face area of a sign letter is 0.6 x height squared.

Maximum depth of letters is 1.0" at 6", 1.5" at 12", 2.0" at 18", 2.5" at 24" and 3.0" at 36".

FAX TO: **CITY OF PORTLAND**  
 COMPANY: **CITY OF PORTLAND**  
 REF: **DATE: 06.10.2005**

NO. OF PAGES: **1 OF 1**  
 REPLY TO: **PETER MURPHY**  
 TEL.: **207.782.9654**  
 FAX: **207.782.0009**  
 JOB NAME: **CAPORT PORTLAND, ME**



**Neokraft**  
S I G N S

Neokraft Signs Inc.  
 686 Main Street  
 Lewiston, Maine 04240  
 Telephone: 207.782.9654  
 Facsimile: 207.782.0009  
 1.800.339.2258  
<http://www.neokraft.com>

SIGN C



EXISTING DIRECTIONAL SIGN (REMOVED) 3'x4'  
SHOWN WITH NEW FACE



# Neokraft

Neokraft Signs Inc.  
 686 Main Street  
 Lewiston, Maine 04240  
 Telephone: 207.782.9654  
 Facsimile: 207.782.0009  
 1.800.339.2258  
<http://www.neokraft.com>

**Transmittal to** CITY OF PORTLAND-INSPECTIONS  
 ATTN: LANNIE DOBSON  
 389 CONGRESS STREET  
 PORTLAND, ME 04101

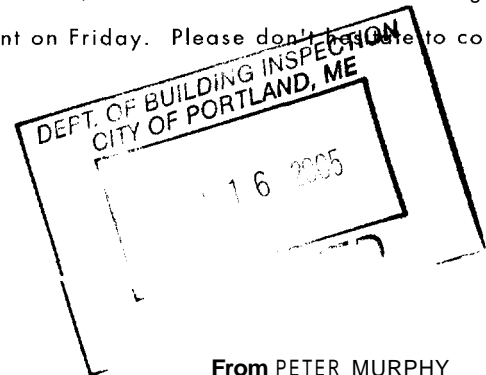
**Date** 06.13.2005  
**Job No.** 3895  
**Re.** SIGN PERMIT  
 VIA MAIL

- Item**
- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Attached | <input type="checkbox"/> Hand Delivered | <input type="checkbox"/> Under separate cover |
| <input type="checkbox"/> Shop Drawings       | <input type="checkbox"/> Prints         | <input type="checkbox"/> Samples              |
| <input type="checkbox"/> Copy of letter      | <input type="checkbox"/> Change Order   | <input type="checkbox"/> Other                |
|  |   | <input type="checkbox"/> Specifications       |

Copies	Date	No.	Description
1	06.13.2005	3895	SIGN PERMIT APPLICATION

- Purpose**
- |                                       |   |   |
|---------------------------------------|---|---|
| <input type="checkbox"/> For approval | <input type="checkbox"/> No exception taken     | <input type="checkbox"/> Rejected           |
| <input type="checkbox"/> For your use | <input type="checkbox"/> Make corrections noted | <input type="checkbox"/> Review and comment |
| <input type="checkbox"/> As requested | <input type="checkbox"/> Revise and resubmit    | <input checked="" type="checkbox"/> Other   |

**Remarks** Lannie: I met with you on Friday to submit a sign permit application for CPort Credit Union [formerly Government Employees Credit Union). As part of my submittal, I have included a sheet showing the "Stud Mounting Detail"-I had overlooked this requirement on Friday. Please don't hesitate to contact me if you should require any additional information.

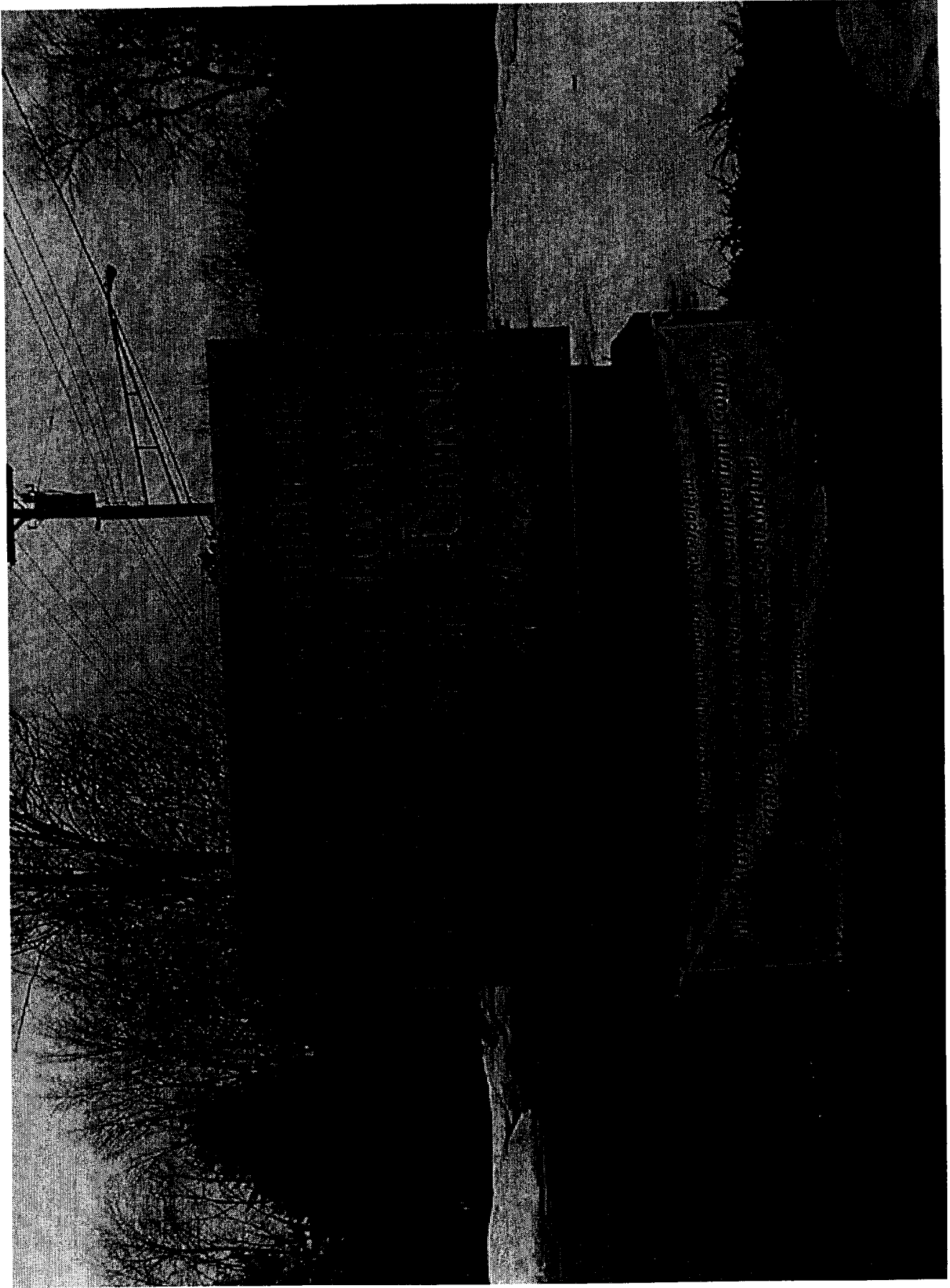


Copy to FILE

From PETER MURPHY

If enclosures are not as noted kindly notify us at once.

OFFICE \CLERICAL\TEMPLATES\TRANSMITTAL FORM.DOT



EXISTING SIGN TO BE REPLACED WITH NEW%QJ  
↓  
will it be Fem red?



**CITY OF PORTLAND, MAINE**  
Department of Building Inspections

7.1 2005

Received from Mossy

Location of Work 50 Riverside Drive

Cost of Construction \$ \_\_\_\_\_

Permit Fee \$ 146

Building (I1)  Plumbing (I5)  Electrical (I2)  Site Plan (U2)

Other Sign

CBL: 2838

Check #: 1694

Total Collected \$ 146.00

**THIS IS NOT A PERMIT**

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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