Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And

RI

Notes, If Any, Attached		PERMI	Permit Number: 081255
This is to certify	that176 RIVERSIDE INI	OUSTRIA PARKW	carboro S
has permission t	toInstall (2) signs. 3'x6'	Freestan g - 5'x10 [all Sig	
AT 176 RIVE	RSIDE IND PKWY		G 330 H003001
of the prov	uction, maintenance a	of Mage and of the	n accepting this permit shall comply with all access of the City of Portland regulating a structures, and of the application on file in
Apply to Pul	olic Works for street line nature of work requires	Not ation o ispected give and writt permission before this but and or permission or oth the NOTICE IS REQUIRED.	nust by A certificate of occupancy must be procured by owner before this building or part thereof is occupied. RED.
OTHER	REQUIPERMITOUSSUED		
Health Dept Appeal Board Other	OCT 1 0 2008		Thomash Market 10/9/08
	CITY OF PORTLAND	ENALTY FOR REMOVING	G THIS CARD

City of Portland, Maine	- Buil	ding or Use	Permi	t Application	n Permi	it No:	Issue Date:	:	CBL:	
389 Congress Street, 04101	Tel: (2	207) 874-8703	, Fax:	(207) 874-871	6	08-1255	<u> </u>		330 H00)3001
Location of Construction:		Owner Name:			Owner A	ddress:	· 		Phone:	
176 RIVERSIDE IND PKWY 176 RIVERSII			DE INI	OUSTRIAL PA	PO BO	X 817			781-265-6	769
Business Name: Contractor Name:			1		Contractor Address:			Phone		
		Scarboro Sign:	s		680 US	Rt. 1 Scar	borough		20788367	96
Lessee/Buyer's Name Phone:					Permit Type:				Zone:	
]	Signs -	- Permanen	t			I-M
Past Use:		Proposed Use:			Permit F	ee:	Cost of Wor	k:	CEO District:]
Industrial - International Car Parts Industrial - Int			ernatio	nal Car Parts -		\$166.00	\$	00.00	5	
auloparts warehore Install (2) sign 5'x10' Wall Sign			Freestanding -	FIRE DI	EPT:	Approved Denied	Use Gro	etion; BC W re: Im 10	TypeSy N 3	
Proposed Project Description:					1			}	_	
Install (2) signs. 3'x6' Freestan	ding - 5	5'x10' Wall Sign			Signature	: :		Signatur	re: In 10	5/9/58
			·		PEDESTRIAN ACTIVITIES DISTRICT		RICT (P	(P.A.D.)		
					Action:	Approve	ed 🗌 App	oroved w/C	Conditions	Denied
					Signature	e: 			Date:	
Permit Taken By:	1 -	plied For: /2008				Zoning	Approva	ıł		
This permit application do	oc not	nracluda tha	Spe	cial Zone or Revie	ws	Zonin	g Appeal		Historic Prese	rvation
Applicant(s) from meeting Federal Rules.			☐ Sh	oreland	Variance			1	✓ Not in District or Landmark	
 Building permits do not include plumbing, septic or electrical work. 			□w	etland		Miscellar	neous		Does Not Require Review	
3. Building permits are void within six (6) months of the			☐ Fle	ood Zone	Conditional !		nal Use	[Requires Review	
False information may invalidate a building permit and stop all work			Subdivision		Interpretation			Approved		
			☐ Si	te Plan		Approved	i	}	Approved w/C	Conditions
PERMIT I	SCIIE	n	Maj	Minor MM		Denied		} [Denied	
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		1 1	Date:	w/condition	(1 D	ate:		Da	<i>y</i> , .	
CITY OF PO	· · · · · · · · · · · · · · · · · · ·	ND	C	ERTIFICATIO	ON					
I hereby certify that I am the ov I have been authorized by the o jurisdiction. In addition, if a pe shall have the authority to enter such permit.	wner to	make this appli work described	cation a	as his authorized application is is	l agent ar sued, I c	nd I agree to ertify that tl	o conform t he code off	o all ap icial's au	plicable laws o uthorized repre	of this esentative
SIGNATURE OF APPLICANT		-		ADDRESS	5		DATE		PHON	IE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland, Mai	ne - Bui	lding or Use Permi	t		Permit No:	Date Applied For:	CBL	:
389 Congress Street, 041	01 Tel:	(207) 874-8703, Fax: ((207) 87	4-8716	08-1255	10/06/2008	33	0 H003001
Location of Construction:		Owner Name:	-		Owner Address:		Phon	e:
176 RIVERSIDE IND PK	WY	176 RIVERSIDE INC	OUSTRIA	L PA	PO BOX 817		781	-265-6769
Business Name:		Contractor Name:			Contractor Address:		Phon	e
		Scarboro Signs			680 US Rt. 1 Scar	borough	(207	7) 883-6796
Lessee/Buyer's Name	-	Phone:]	Permit Type:			
		<u> </u>]		Signs - Permaner	nt		
Proposed Use:				Propose	d Project Description	:		
	Status: A	Approved with Condition	ns Rev	viewer:	Ann Machado	Approval D		10/09/2008
Note:							Ok to	Issue: 🔽
		he condition that the free ade to the top of the sign	_	sign wi	ill be located at lea	st 5' from the proper	ty line	and that it
Dept: Building	Status: A	Approved with Condition	ns Rev	viewer:	Tom Markley	Approval D	ate:	10/09/2008
Note:							Ok to	Issue: 🗹
Permit approved based noted on plans.	on the pla	ns submitted and review	ed w/owr	ner/cont	ractor, with additi	onal information as a	igreed (on and as
2) Signage Installation to	comply w	th Chapter 31 of the IBC	C 2003 bi	ilding o	code.			

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

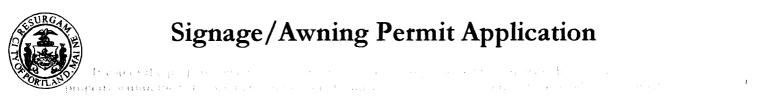
to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

Order Release" will be incurred if the procedure is not followed as stated below.						
A Pre-construction Meeting will take place upon receipt of your building permit.						
X Final inspection required at completi	on of work.					
Certificate of Occupancy is not required for certain your project requires a Certificate of Occupancy.	- ·					
If any of the inspections do not occur, the proje REGARDLESS OF THE NOTICE OR CIRCU						
CERIFICATE OF OCCUPANICES MUST BE THE SPACE MAY BE OCCUPIED.	ISSUED AND PAID FOR, BEFORE					
Signature of Applicant/Designee	Date					
Thomas Monkley	10/9/08					
Signature of Inspections Official	Date					

CBL: 330 H003001 **Building Permit #:** 08-1255



Signage/Awning Permit Application

Location/Address of Construction:	76 Riverside Inclustre	$a \mid Y \mid W \mid Y$
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	76 Riverside Inclustrice Owner: International Can Part	Telephone: 781-449-0943
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone:	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ Awning Fee= cost of work Total Fee: \$
Who should we contact when the permit is a	ready: lon lay lon phone: 9	78-265-6769
Tenant/allocated building space frontag	re (feet): Length: 65 Height 26 Single Tenant or Multi Tenant Lot _	
_		
If vacant, what was prior use:	5 Workhouse	
Proposed Use:		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes _ Bldg. wall sign? (attached to bldg) Yes _	No Dimensions proposed: 3× No Dimensions proposed: 5×	Height from grade:
Proposed awning? Yes No X I		·
Height of awning: Length	of awning: Depth:	
Is there any communication, message, tra	demark or symbol on it? Yes No	£ 2003
Is there any communication, message, tracking the state of panels w/communications of panels w/communi	demark or symbol on it? Yes No sons, message, trademark or symbol: s	6 2003
Is there any communication, message, trailing the state of panels w/communication of the state of panels w/communication on existing and previously particles of the state of	demark or symbol on it? Yes No sons, message, trademark or symbol: s permitted sign(s): No Dimensions: Dimensions:	oct 6 2008
Is there any communication, message, trailing the state of panels w/communication on existing and previously present and sign? Yes Bldg. wall sign? (attached to bldg) Yes Awning? Yes No Sq. ft. A site sketch and building sketch showing sketches and/or pictures of proposed signs.	demark or symbol on it? Yes No sons, message, trademark or symbol: sermitted sign(s): No Dimensions: No Dimensions: area of awning w/communication: area of awning w/communication area of a wning w/communication area	located must be provided.
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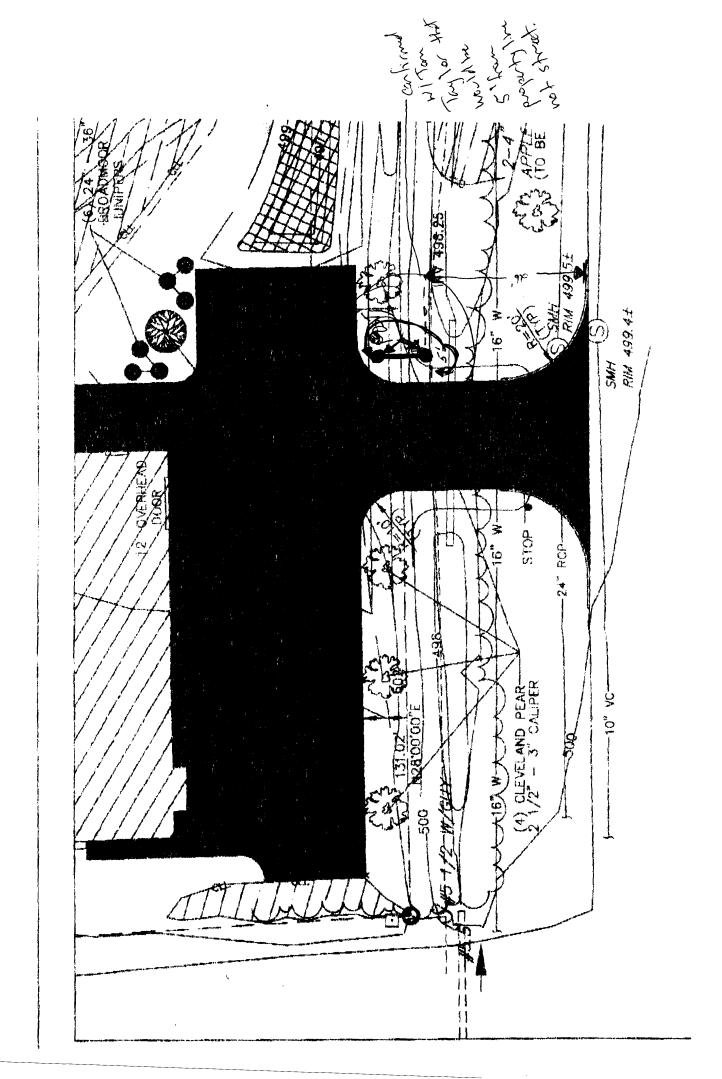


Signage/Awning Permit Application Checklist

Whet the following into measure of the second and must be second by the Hardenberg of the control of an accordance in a problem of the following the control of the control

	Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way.
	Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
	A sketch plan of lot indicating location of buildings, driveways and any abutting streets or rights of way, lengths of building frontages, street frontages and all existing setbacks. Please indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building façade dimensions for any signage attached to the building.
<u> </u>	A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.
	Certificate of flammability required for awning or canopy.
	A UL# is required for lighted signs at the time of final inspection.
	Pre-application questionnaire completed and attached.
	Photos of existing signage
	Details for sign fastening, attachment or mounting in the ground.
l ⁹ artturis	tee for signage or as ming-with signage. Sill bit pine 5 (30) in a square time of sign.
	too for awaring walloun eighage is based on cross of some for the first \$1,000-00, \$9,00 per indicumal \$4.000 per indicated \$4.000 per

Base application for for any Historic District signings is boson,



INTERNATIONAL CAR PARTS

8/29/08
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eny, or use of these plans



THIS PROOF DRAWING IS FOR YOUR REVIEW & APPROVAL BEFORE FABRICATION BEGINS. SIGNED APPROVAL INDICATES THAT YOU HAVE READ & APPROVE OF THE SPECIFICATIONS STATED SCARBORD SIGNS. LLC WILL NOT BE RESPONSIBLE FOR ERRORS THAT COULD HAVE BEEN PREVENTED BY THE PROPER REVIEW OF THIS FORM. THANK YOU



Client Name: TOM TAYLOR Location:
PORTLAND

Last Revision:		
Job#:	0	SIGNED APPROVAL OF ALL DRAWINGS MUST
Page:	Client Approval	BE RECEIVED BEFORE PRODUCTION BEGINS
File Name:	• Date	·····

Sales Rep: EYLE NOYES 329-1987 Designer:

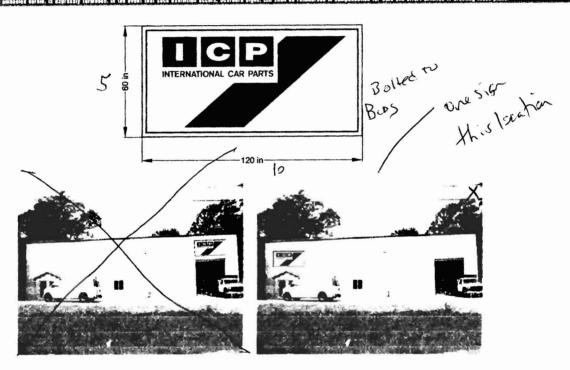


INTERNATIONAL CAR PARTS

Sales Rep: KYLE NOVES 339-1987

Designer:

8/29/08
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any, er use of those plans



THIS PROOF DRAWING IS FOR YOUR REVIEW & APPROVAL BEFORE FABRICATION BEGINS. SIGNED APPROVAL INDICATES THAT YOU HAVE READ & APPROVE OF THE SPECIFICATIONS STATED.

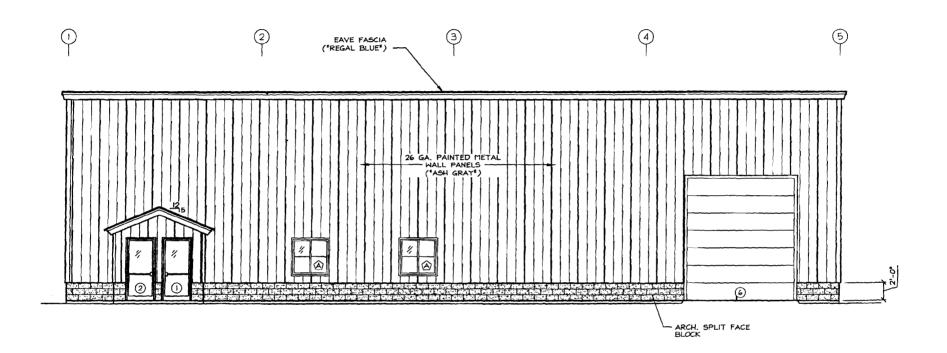
SCARBORO SIGNS. LLC WILL NOT BE RESPONSIBLE FOR ERRORS THAT COULD HAVE BEEN PREVENTED BY THE PROPER REVIEW OF THIS FORM. THANK YOU.



Client Name: TOM TAYLOR PORTLAND

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File Name:	• Date

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DATE:7/8/08

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PATCO
CONSTRUCTION, INC.

1293 MAIN STREET SANFORD, ME 04073 TEL: (207)324-5574 FAX: (207)324-1643 www.patco-construction.com Copyright 0 2004 Pater Construction, Inc. Al Rights Newsred.

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DRWN. BY:

PRODUCER (203) 377-0405 Thomas Edward Agency Inc. 1825 Barnum Ave. Suite 301 P. 0. Box 308 Stratford, CT 06615 INSURER 176 RIVERSIDE INDUSTRIAL PARKWAY, LLC DBA: C/O CPI P. 0. BOX 817 NEEDHAM, MA 02494 THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURER D. THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURER D. THE POLICIES OF INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND COND POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PADID CLAIMS INSURER D. THE POLICIES OF INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND COND POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PADID CLAIMS INSURER D. THE POLICIES OF INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND COND POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PADID CLAIMS INSURER D. TYPE OF INSURANCE POLICY PADID CLAIMS OBMERAL LABBILITY ANY AUTO ALL OWNED AUTOS COMMERCIAL GENERAL LIABILITY ANY AUTO ALL OWNED AUTOS HIRED AUTOS HIRED AUTOS ALL OWNED AUTOS BODILLY INJURY (Per person) SCHEDULED AUTOS HIRED AUTOS ANY AUTO ANY AUTO ANY AUTO ANY AUTO ANY AUTO ANY AUTO THE THAN EBACC IS OTHER THAN EBACC IS OTHER THAN EBACC IS OTHER THAN EBACC IS OTHER THAN E CARRIED ALTOR TO CHARGE CHARLES AFORDED AS A MATTER ON THE CERT HOLDET THIS CERTIFICATE DOES NOT AMEND. AUTO ONLY -EA ACCIDENT SAME BACK OF PROPERTY DAMAGE (Per sociolen) AUTO ONLY -EA ACCIDENT SAME BACK ONLY -EA ACCIDENT SAME AUTO ONLY -EA ACCIDENT SAME THE CERTIFICATE EDES NOT AMEND. THE THAN EXPENDED TO THE THIS CHARLES THE C	10/01/2008				
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EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE E.L. EACH ACCIDENT \$					
OFFICER/MEMBER EXCLUDED? If yes, describe under					
SPECIAL PROVISIONS below E.L. DISEASE - POLICY LIMIT \$					
A BUILDING COVERAGE 31SBVR9403 09/13/2008 09/13/2009 BUILDING LIMIT DEDUCTIBLE	\$600,000 \$1000				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS					
RE:176 RIVERSIDE INDUSTRIAL PARKWAY, PORTLAND, ME	j				
]				
CERTIFICATE UNI DER					
CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BE	PEFORE THE				
EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR	•				
10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAME					
	· · · · · · · · · · · · · · · · · · ·				
	BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND LIBORITHE INSURED, ITS ACENTS OR REPRESENTATIONS				
PORTLAND, ME 04101 AUTHORIZED REPRESENTATIVE	OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE				
Maria Rodrigues					

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (QNLY)

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

X Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee

Signature of Inspections Official

Date

Doto

CBL: 330 H003001 **Building Permit #:** 08-1255