

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

Permit No: 05-0615  
 Issued: JUN - 6 2005  
 IBC 2003  
 344 C008001

<b>Location of Construction:</b> 1370 Washington Ave	<b>Owner Name:</b> Wolak Edward	<b>Owner Address:</b> 65 Gray Rd #4	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Spectrum Signs	<b>Contractor Address:</b> 557 Elm St Biddeford	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	<b>Zone:</b> B-2
<b>Past Use:</b> Commercial	<b>Proposed Use:</b> Commercial - strip off old graphics on existing awnings and to replace panel in existing free standing sign	<b>Permit Fee:</b> \$348.00	<b>Cost of Work:</b> \$348.00
<b>Proposed Project Description:</b> Install new awnings and replace panel in free standing sign		<b>CEO District:</b> 4	<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>N/A</i>
		<b>INSPECTION:</b> Use Group: U Type: Sign IBC 2003 Signature: <i>[Signature]</i>	
		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____	

<b>Permit Taken By:</b> dmartin	<b>Date Applied For:</b> 05/16/2005	<b>Zoning Approval</b>		
1. This permit application does not 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..	<b>Special Zone or Reviews</b> <input checked="" type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Date: <i>05/16/05</i>	<b>Zoning Appeal</b> <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: _____	<b>Historic Preservation</b> <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>[Signature]</i>	

**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

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: 050615  
**JUN 6 2005**

**CITY OF PORTLAND**

This is to certify that Wolak Edward/Spectrum Sign

has permission to Install awning and free stand sign

AT 1370 Washington Ave

344 C008001

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 occupied or enclosed-in. **HEAVY 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 \_\_\_\_\_  
 DepartmentName

*[Handwritten Signature]* **6/3/05**

Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit**

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<b>Business Name:</b>	<b>Contractor Name:</b> Spectrum Signs	<b>Contractor Address:</b> 557 Elm St Biddeford	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	

<b>Proposed Use:</b> Commercial - strip off old graphics on existing awnings and to replace panel in existing free standing sign	<b>Proposed Project Description:</b> Install new graphics on existing awnings and replace panel in existing free standing sign
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**Dept:** Zoning      **Status:** Approved      **Reviewer:** Marge Schmuckal      **Approval Date:** 06/01/2005  
**Note:**      **Okto Issue:**

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 06/03/2005

# 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.

Total Square Footage of Proposed Structure <i>1,100 sq ft</i>		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <i>344</i> Block# <i>C</i> Lot# <i>308</i>		Owner: <i>Robert Lockard</i>	Telephone: <i>657-2150</i>
Lessee/Buyer's Name (If Applicable) <i>Sam Lam</i>	Applicant name, address & telephone: <i>Sam Lam 57 county rd. Scarborough, ME 04074 207-450,7276 or 797-5533</i>		Total s.f. of signage x \$2.00 per s.f. plus \$30.00/\$65.00 for H.D. signage = Total Fee: \$ <u>120</u> Awning Fee = Cost Of Work: \$ <u>118</u> Total Fee: \$ <u>238</u>
Current use: <u>Restaurant</u>			
If the location is currently vacant, what was prior use: _____			
Approximately how long has it been vacant: _____			
Proposed use: <u>Chinese Restaurant</u>			
Project description: _____			
Contractor's name, address & telephone: <i>Spectrum Signs. 557, Elm St Biddeford, ME. 04005</i>			
Whom should we contact when the permit is ready: <u>Sam Lam</u>			
Mailing address: <i>1396, Washington Ave Portland, ME 04103</i>			
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A STOP WORK ORDER will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <i>657-2150</i>			

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT. WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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 Code of Ordinances and Inspections Department.

DEPT. OF BUILDING INSPECTION  
CITY OF PORTLAND, ME  
MAY 16 2005  
**RECEIVED**

Signature of applicant: *Sam Lam*

Date: *5.16.05*

**This is NOT a permit, you may not commence ANY work until the permit is issued.**

*#105*

Perkins



Strip old graphics & Apply New  
on 2 awnings

\$ 435 EA x 2 = \$ 870<sup>00</sup>

OPTION A 6'x8' FACE REPLACEMENTS - Simple

2 AT \$ 825 EA = \$ 1650 -

OPTION B 6'x8' FACE REPLACEMENTS - FANCY

2 AT \$ 1080 EA = \$ 2160 -

PAINT POLE & CABINET ADD \$ 135 -

TERMS:

60% DEPOSIT REQUIRED  
BAL. UPON COMPLETION  
SALES TAX NOT INCLUDED.

(A) ↑



(B) ↑

Spectrum Signs 294-6388

April 21, 2005

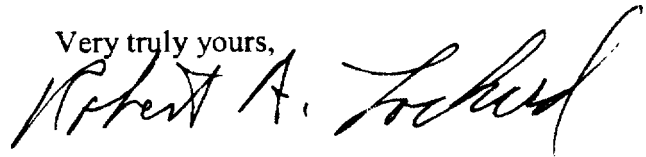
Mr. Sam Woh ~~Lam~~  
57 County Road  
Scarborough, ME 04074

Re. Lease dated April 21, 2005

~~Dear~~ Mr. Lam:

This letter will confirm that as part of the consideration of your agreement to enter into the lease referenced above covering the property at 340 Allen Avenue/1396 Washington Avenue, you will have the right to utilize the lighted sign currently located on the corner of the property at the Allen Avenue/Washington Avenue intersection. You will be able to utilize the sign as you see fit. You will be responsible for maintenance of the sign and for utilities associated with its use.

Very truly yours,

A handwritten signature in black ink that reads "Robert A. Lockard". The signature is written in a cursive style with a large, sweeping flourish at the end.

Robert A, Lockard

Table 2.6

**Regional Business (B-2) Zone - Single-Tenant Lots**

*same as multi-tenant  
less than 1 acre*

**Freestanding Signs**



	Facing street frontage < 200'	Facing street frontage ≥ 200'
- Area	65 sq. ft.	100 sq. ft.
- Height	18 feet	18 feet
- Setback	5 feet	5 feet
- # Permitted per lot	1 (a)	1 (a)

- (a) If lot fronts on more than one street, one freestanding sign is permitted for each additional frontage, but at one-half the maximum allowable area for the original, except in those instances where the freestanding signs are not concurrently visible. In such an instance, additional freestanding signs shall be permitted the full area allowance.

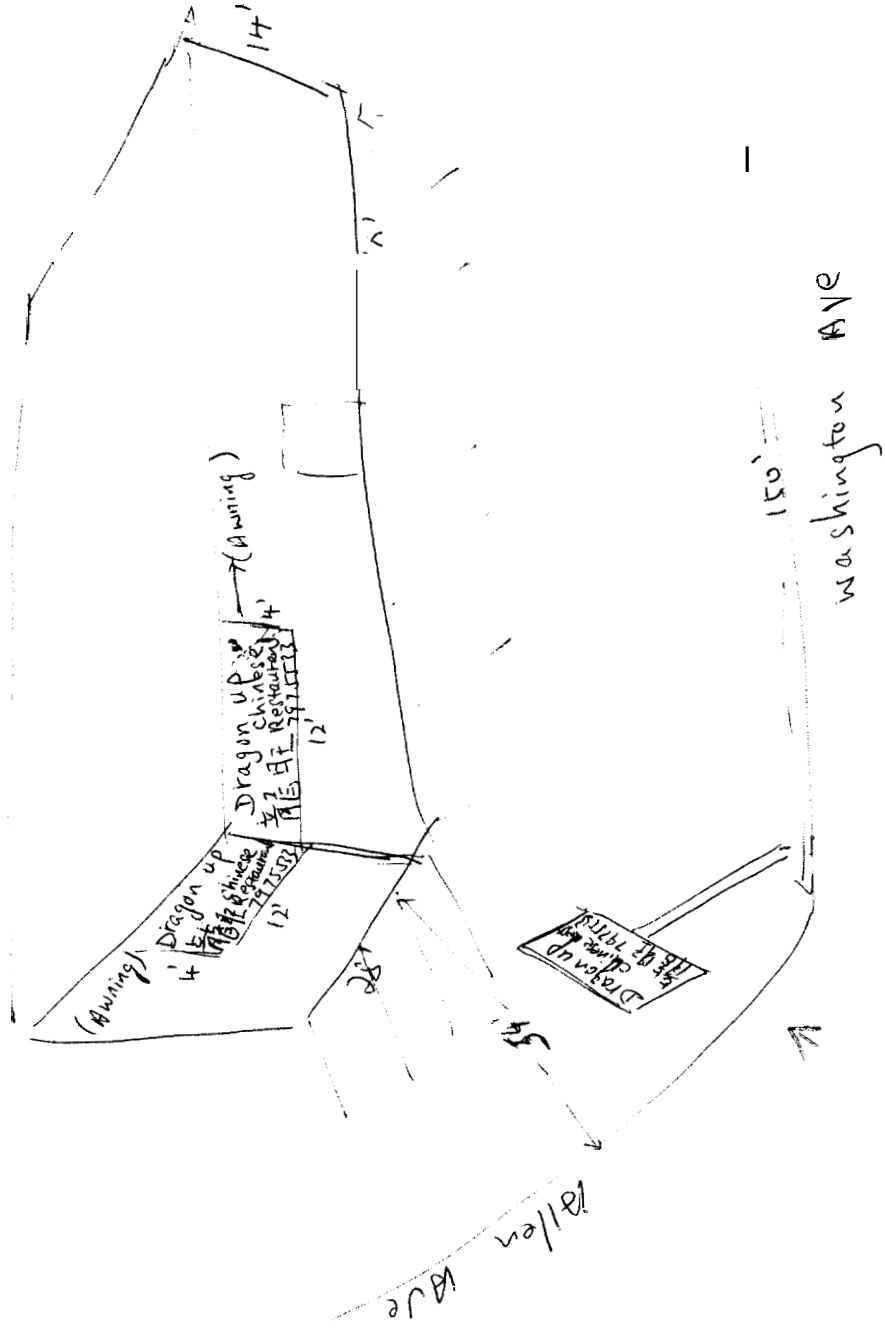
**Building Signs**

	Bldg. face < 150 linear feet	Bldg. face ≥ 150 linear feet
- Maximum cumulative area of all building signs (b)	150 square feet (a)	225 (a)
- Sq. Ft. per linear ft. of bldg. facade on which sign will be placed	2 feet	same
- # Bldg. signs permitted per lot	1 per bldg. facade facing an abutting street + 1 additional	same

- (a) If any one building face on which a sign is to be placed exceeds 150 linear feet, then the maximum allowable sign area for the building as a whole is increased to 225 square feet. However, the limit of 2 square feet per linear foot of building frontage still applies for purposes of calculating maximum sign area for each building face.

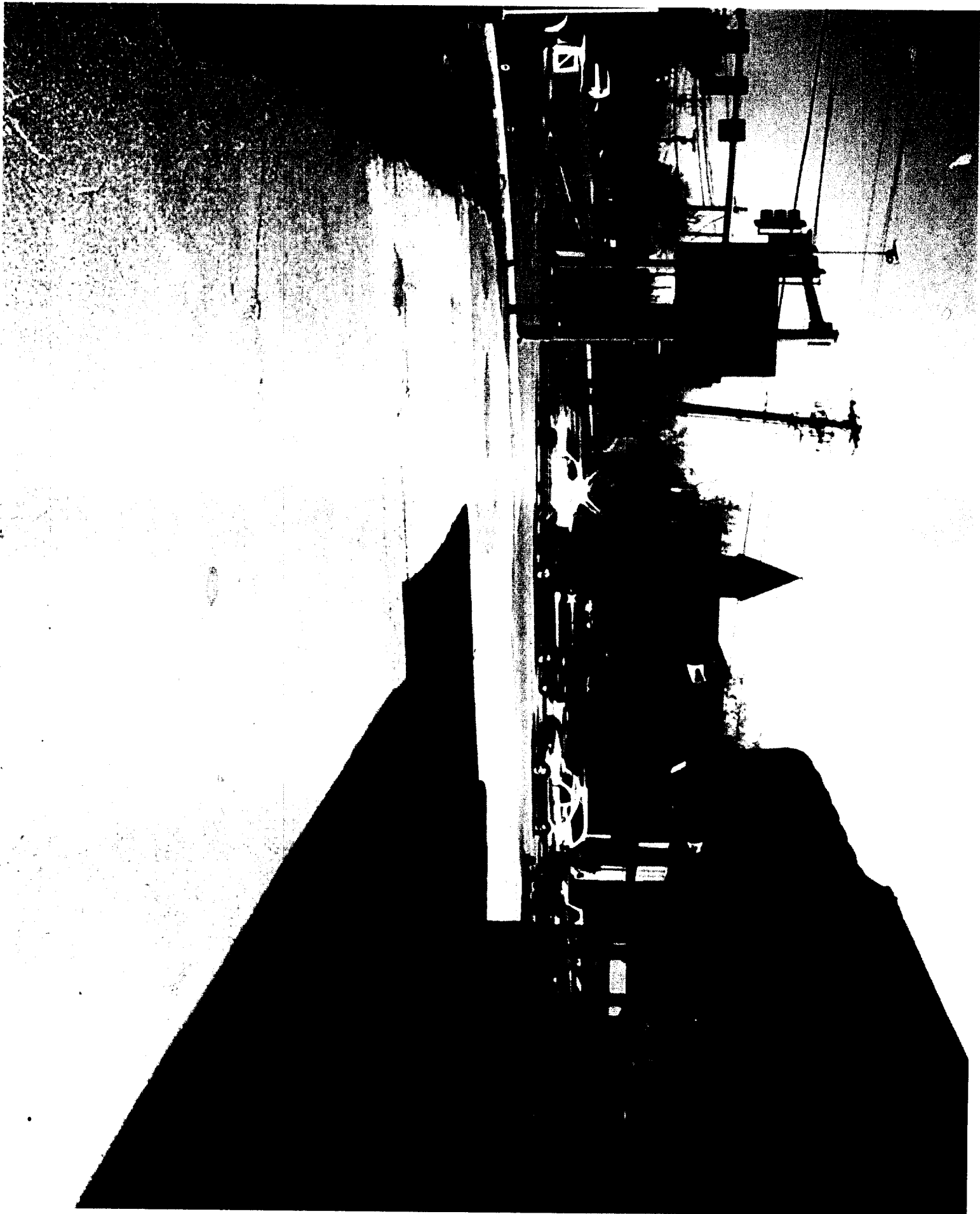
Where a building features two principal entry facades facing parallel streets, each such entry facade shall be eligible for the full amount of signage relative to its frontage, notwithstanding the maximum cumulative sign area.

1396, Washington Ave.  
Portland, ME 04103



Panel replacement only  
on fire systems, signs, etc.







# SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE COMPLETE ALL INFORMATION

ADDRESS: 1396 Washington Ave. Portland ME. 04103 ZONE: B-2 Commercial

CBL: \_\_\_\_\_

SINGLE TENANT LOT? YES  NO \_\_\_\_\_ MULTI TENANT LOT? YES \_\_\_\_\_ NO

MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES  NO \_\_\_\_\_

## TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET):

Length: 28' → \*along alle 60' → along Wash. St Height: \_\_\_\_\_  
28 x 2 = 56 sq ft 60 x 2 = 120 sq ft

### INFORMATION ON PROPOSED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES \_\_\_\_\_ NO OK DIMENSIONS PROPOSED: \_\_\_\_\_

BLDG. WALL SIGN? (attached to bldg) YES \_\_\_\_\_ NO \_\_\_\_\_ DIMENSIONS PROPOSED: \_\_\_\_\_

### INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES  NO \_\_\_\_\_ DIMENSIONS: \_\_\_\_\_, 2 - in + ACE ref

BLDG. WALL SIGN (attached to bldg)? YES  NO \_\_\_\_\_ DIMENSIONS: \_\_\_\_\_

AWNING? YES  NO \_\_\_\_\_ DIMENSIONS: \_\_\_\_\_

LOT FRONTAGE (FEET): \_\_\_\_\_

\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*

# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
05/12/2005

PRODUCER (207) 784-5181 FAX (207) 784-4847

Parent Insurance Agency  
P.O. Box 1406  
87 Essex Street  
Lewiston, ME 04240

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.

INSURED Dragon Up Restaurant, Inc.  
1396 Washington Avenue  
Portland, ME 04103

INSURER C	AFFORDING COVERAGE	NAIC #
INSURER A	Middlesex Mutual Assurance Com	14532
INSURER B		
INSURER C		
INSURER D		
INSURER E		

**COVE**

INSR LTR	ADDL INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMIT
A		<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CB 0100022171	04/22/2005	04/22/2006	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS-COMP/OP AGG \$ <b>2,000,000</b>
		<b>AUTOMOBILE LIABILITY</b> <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) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY AGG \$
		<b>EXCESS UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> (ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?) If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER E L EACH ACCIDENT \$ E L DISEASE EA EMPLOYEE \$ E L DISEASE - POLICY LIMIT \$
		<b>OTHER</b>				

DESCRIPTION OF OPERATIONS/ LOCATIONS/ VEHICLES/ EXCLUSIONS ADDED BY ENDORSEMENT/ SPECIAL PROVISIONS  
**operations usual to insured.**

**CERTIFICATE HOLDER**

**CANCELLATION**

City of Portland  
Portland, ME

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 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 INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Julie Gile/JAG

*Julie Gile*

## 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.