

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-0062	Issue Date:	CBL: 358 A06001
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Location of Construction: 110 DAVIS FARM RD	Owner Name: CHILDREN'S ODYSSEY	Owner Address: 110 DAVIS FARM RD	Phone:
Business Name:	Contractor Name: Philip McCormick	Contractor Address: 17 Mason St. Falmouth	Phone: 2077812875
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: JM

Past Use: Commercial	Proposed Use: Commercial Install a 12sf free standing sign mounted on 4x4 wooden posts	Permit Fee: \$54.00	Cost of Work: \$54.00	CEO District: 5
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: U Type: Sign <i>IBC 2003</i>	
		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: dmartin	Date Applied For: 01/12/2006	Zoning Approval	
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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>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p><i>OK</i> Date: 1/20/06 <i>dm</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p><i>dm</i> Date:</p>
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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

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read Application And Notes, If Any, Attached

CITY OF PORTLAND DEPARTMENT OF BUILDING & INSPECTION PERMIT

PERMIT ISSUED FEB 06 2006 PERMIT NUMBER 368 A006001 CITY OF PORTLAND

This is to certify that CHILDREN'S ODYSSEY / Bill McCormick has permission to Install a 12 sf free standing mounted on 4x4 wood post AT 110 DAVIS FARM RD 368 A006001

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 when permission is procured before this building or part thereof is occupied or services closed-in. OUR NOTICE 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 and date 2/2/06 Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



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>110 DAVIS FARM ROAD</u>		
Total Square Footage of Proposed Structure <u>11+ SQUARE FEET</u>	Square Footage of Lot <u>> 56,000 SQUARE FEET</u>	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>368 A 006</u>	Owner: <u>CHILDREN'S ODYSSEY</u>	Telephone: <u>878-8868</u>
Lessee/Buyer's Name (if Applicable)	Applicant name, address & telephone: <u>CHILDREN'S ODYSSEY</u> <u>110 DAVIS FARM ROAD</u> <u>PORTLAND, ME,</u> <u>878-8868</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ <u>54</u> Awning Fee= cost of work Total Fee: \$
Current Specific use: <u>PRESCHOOL</u>		
If vacant, what was prior use: <u>OMNI HEALTH CARE, NCS HEALTH CARE</u>		
How long has it been vacant? <u>18 MONTHS</u>		
Proposed Use: <u>PRESCHOOL</u>		
Project Description: <u>PLYWOOD SIGN (28"x44") MOUNTED ON 4"x4" WOOD POSTS</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>PHILIP MCCORMICK</u>		
Mailing address: <u>17 MASON STREET</u> <u>FALMOUTH, ME 04105</u>		
Phone: <u>781 2675</u>		

Please submit all of the information outlined in the Sign/Awning Application Checklist. Failure to do so will 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: 1/11/06

This is not a permit; you may not commence ANY work until the permit is issued.



Signage/Awning Pre-Application Questionnaire

Please complete all of the following information.

Address: 110 DAVIS FARM ROAD Zone: IM
CBL: _____

Single Tenant Lot? Yes No _____ Multi Tenant Lot? Yes _____ No

Tenant/allocated building space frontage (feet): Length: _____ Height: _____

Information on proposed sign(s):

Freestanding (e.g., pole) sign? Yes No _____ Dimensions proposed: 35" x 45 1/2"
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 proposed: _____
Bldg. wall sign? (attached to bldg) Yes _____ No Dimensions proposed: _____
Awning? Yes _____ No Dimensions: _____
Lot frontage (feet): 600 PLUS FEET

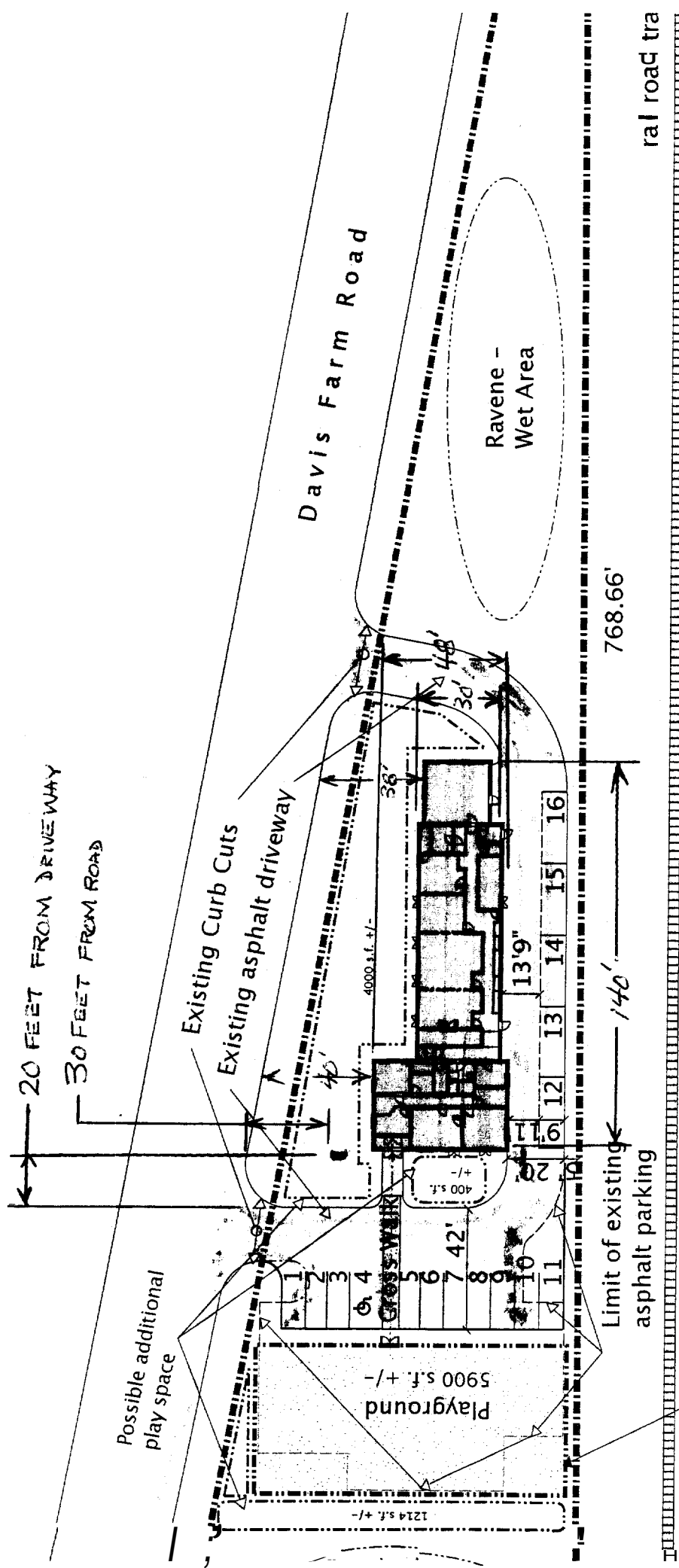
Awning? Yes _____ No Is awning backlit? Yes _____ No _____
Height of awning: _____ Length of awning: _____ Depth: _____
Is there any communication, message, trademark or symbol on it? Yes _____ No _____
If yes, total s.f. of panels w/communications, message, trademark or symbol: _____ s.f.

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 are also required.

Signature of applicant: [Signature] Date: 1/11/06

-For office use only-
ok. $44" \times 28" = 1232 \div 144 = 8.6 \text{ sq ft}$
35" max
10' high max.
setback 5'
1 per lot
6.2' as cham.
stain
✓

CHILDREN'S ODYSSEY PEE SCHOOL

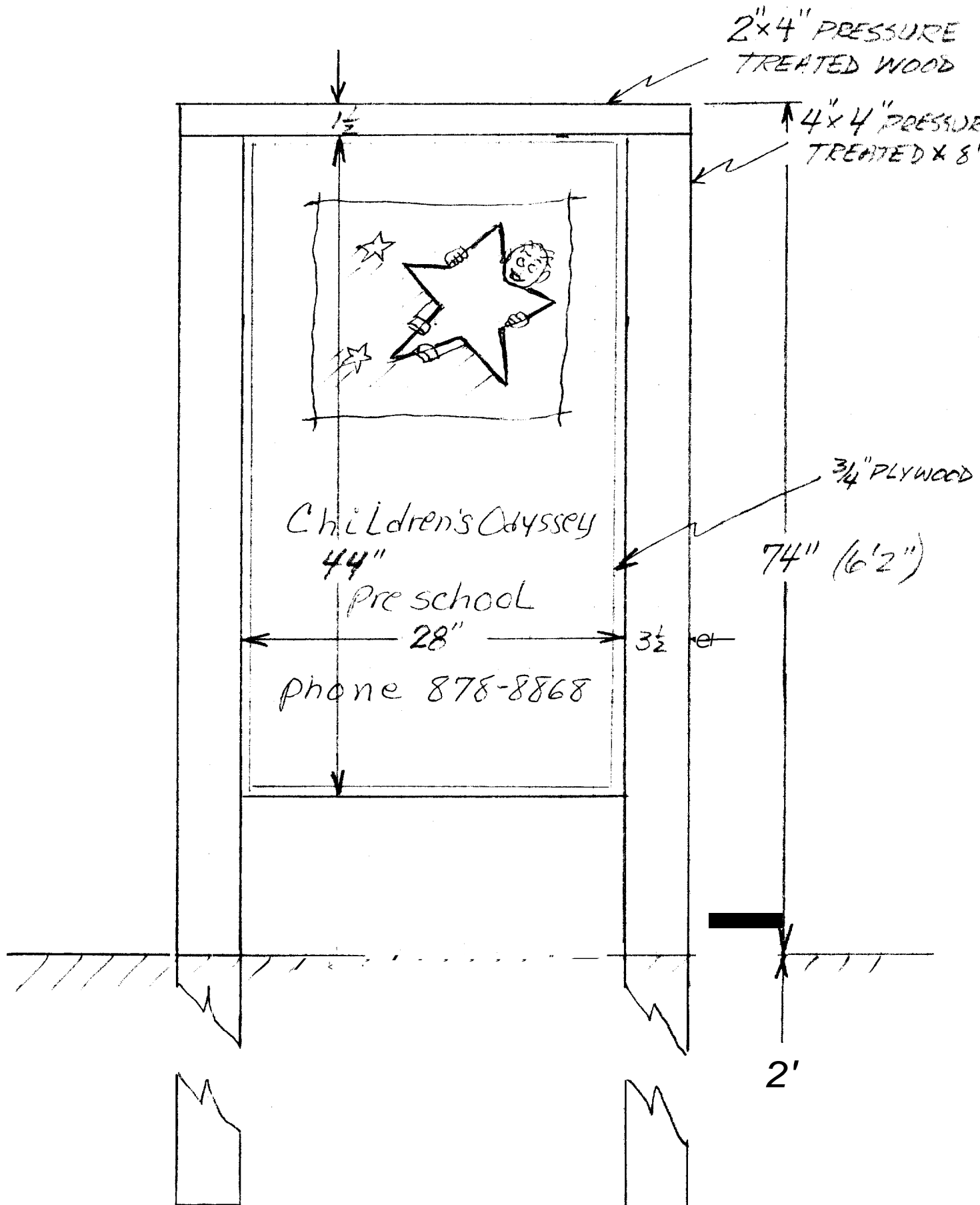


Asphalt removed as required for new 5895 s.f. playground enclosed in solid wood six foot high fence, surrounded with evergreen shrub buffer zone.

Note:

Information d... was gathered

CHILDREN'S ODYSSEY PRESCHOOL

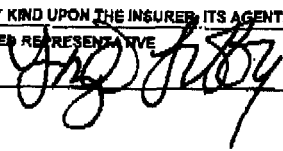


ACORD CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 01/20/2006
PRODUCER (207)774-2617 FAX (207)774-2869 DANIEL T HALEY AGENCY 21 1/2 Eastern Promenade Portland, ME 04101		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED Children's Odyssey, Susan McCormick dba PO BOX 6038 Falmouth, ME 04105		
		INSURERS AFFORDING COVERAGE
		NAIC #
		INSURER A: Peerless Ins. Co. 24198
		INSURER B:
		INSURER C:
		INSURER D:
		INSURER E:

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	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	CBP 9091485	07/23/2005	07/23/2006	EACH OCCURRENCE \$ 300,000
		GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 300,000 GENERAL AGGREGATE PRODUCTS - COM/OP AGG \$ 300,000
		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" 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 (Paraccident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN 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				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER 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

CERTIFICATE HOLDER City of Portland Permit Department 389 Congress Street Portland, ME 04101	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ 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 
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Business Name:	Contractor Name: Philip McCormick	Contractor Address: 17 Mason St. Falmouth	Phone: (207) 781-2875
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial Install a 12 sf free standing sign mounted on 4x4 wooden posts	Proposed Project Description: Install a 12 sf free standing sign mounted on 4x4 wooded posts
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Dept: Zoning **Status:** Approved **Reviewer:** Ann Machado **Approval Date:** 01/20/2006
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 02/02/2006
Note: **Ok to Issue:**

- 1) Separate Permits shall be required for any new signage.
- 2) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.

Comments:

1/20/06-amachado: I spoke with Judy McCormick. I told her tht we need a certificate of liability for the sign permit. Faxed this afternoon.