

PERMIT ISSUED

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

Permit No: 03-0296	Issue Date: APR 16 2003	CBL: 375 A023001
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Location of Construction: 94 Auburn St	Owner Name: 94 Auburn Llc	Owner Address: Po Box 2133 CITY OF PORTLAND	Phone: 774-6226 <i>Mike Hollyday</i>
Business Name:	Contractor Name: Burr Signs	Contractor Address: 10 Buttonwood St. So. Portland	Phone: 2077991183
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B1

Past Use: Office/Retail	Proposed Use: Office/Retail	Permit Fee: \$41.00	Cost of Work: \$30.00	CEO District: 2
		FIRE DEPT: <i>N/A</i> <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied	INSPECTION: Use Group: <i>U</i> Type: <i>Sign</i> BOLA 99	

Proposed Project Description: Install 5' x2' Illuminated Sign	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: gad	Date Applied For: 04/04/2003	Zoning Approval	
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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..	Special Zone or Reviews <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>4/15/03</i>	Zoning Appeal <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:	Historic Preservation <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

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Business Name:	Contractor Name: Burr Signs	Contractor Address: 10 Buttonwood St. So. Portland	Phone: 2077991183
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B1

Past Use: Office/Retail	Proposed Use: Office/Retail	Permit Fee: \$41.00	Cost of Work: \$30.00	CEO District: 2
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Proposed Project Description: Install 5' x2' Illuminated Sign	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: gad	Date Applied For: 04/04/2003	Zoning Approval	
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<ol style="list-style-type: none"> 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 <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>4/15/03</i>	Zoning Appeal <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:	Historic Preservation <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:
	Signature: <i>[Handwritten Signature]</i>		

CERTIFICATION

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SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-0296	Date Applied For: 04/04/2003	CBL: 375 A023001
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Location of Construction: 94 Auburn St	Owner Name: 94 Auburn Llc	Owner Address: Po Box 2133	Phone: () 774-6226
Business Name:	Contractor Name: Burr Signs	Contractor Address: 10 Buttonwood St. So. Portland	Phone: (207) 799-1183
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Office/Retail	Proposed Project Description: Install 5' x2' Illuminated Sign
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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 04/15/2003
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 04/16/2003
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Separate permits are required for any electrical or plumbing work. 2) Signage Installation to comply with Chapter 31 BOCA 1999			

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

**BUILDING INSPECTION
PERMIT**

Permit Number: 030296

This is to certify that 94 Auburn Llc /Burr Signs
has permission to Install 5' x2' Illuminated Sign
AT 94 Auburn St CB 375 A023001

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 leased or otherwise occupied-in. 24 HOUR NOTICE REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. PERMIT ISSUED
Health Dept. _____
Appeal Board APR 16 2003
Other _____

Department Name

[Signature]
Director - Building & Inspection Services

CITY OF PORTLAND PENALTY FOR REMOVING THIS CARD

03-0296

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

SIGNAGE APPLICATION

THIS IS NOT A PERMIT
CONSTRUCTION CANNOT NOT COMMENCE UNTIL THE PERMIT IS ISSUED

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

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:	94 AUBURN ST
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Total Square Footage of Proposed Structure	10.25	Square Footage of Lot
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Tax Assessor's Chart, Block & Lot Number Chart# 315 Block# A Lot# 023	Owner: 94 AUBURN LLC PO BOX 2133 SO. PORTLAND, ME 04116-2133	Telephone #: 774-6226
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Lessee/Buyer's Name (If Applicable)	Owner's/Purchaser/Lessee Address: SAME	Total s.f of signs 10.25 x \$1.00 \$10.25, plus \$30.00 TOTALS 40.25 41.00
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Current use: OFFICE/RETAIL Proposed use: SAME

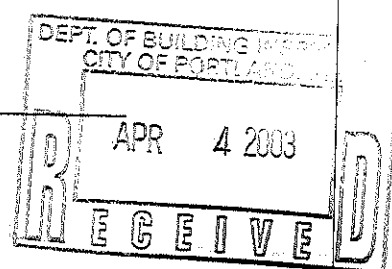
Project description: INSTALL ILLUMINATED ADDRESS SIGN ON EXISTING BRICK STRUCTURE

Applicants Name, Address & Telephone: BURR SIGNS
10 BUTTERNWOOD ST.
SO. PORTLAND, ME 04106
Contractor's Name, Address & Telephone: 799-1183

Who shall we contact when the permit is ready: SAME

Telephone: 799-1183

If you would like it mailed, what mailing address should we use: SAME



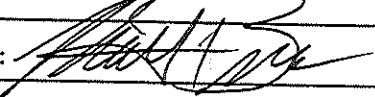
Rec'd By:

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

If the property is located in a HISTORIC DISTRICT, a separate sketch is required indicating the design, dimensions, construction materials and source of illumination if any. A photograph of the building façade should be submitted, showing where each sign is to be installed.

Certification

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: 03/04/03
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Sign Permit Fee: \$30.00 plus \$1.00 per square foot.

A building permit is also required for any awning based on cost of work-\$30.00 for the first \$1,000.00 and \$6.00 for each additional \$1,000.00

BY FILLING OUT THIS APPLICATION IS DOES NOT MEET THAT YOU WILL BE APPROVED FOR THE AMOUNT OF SIGNAGE YOU ARE APPLYING FOR

IT IS SUGGESTED THAT YOU DO NOT ORDER ANY SIGNAGE UNTIL YOU HAVE RECEIVED YOUR SIGN PERMIT THAT HAS BEEN SIGNED BY THE BUILDING, ZONING AND POSSIBLE HISTORICAL OFFICIALS OF THIS OFFICE

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 94 AUBURN ST ZONE: B-1
 OWNER: 94 AUBURN LLC
 APPLICANT: BURR SIGNS
 ASSESSOR NO. _____

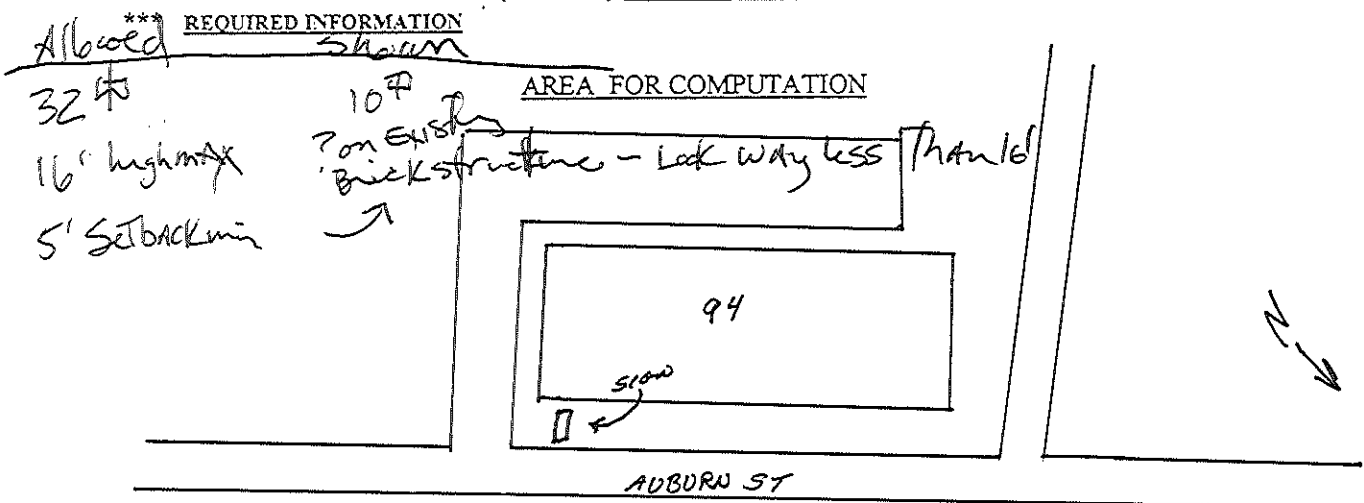
PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES NO MULTI-TENANT LOT? YES NO
 FREESTANDING SIGN? (ex. Pole Sign) YES NO -- DIMENSIONS 5' HEIGHT 2'
 MORE THAN ONE SIGN? YES NO DIMENSIONS _____ HEIGHT _____
 SIGN ATTACHED TO BLDG.? YES NO ^{existing} DIMENSIONS _____
 MORE THAN ONE SIGN? YES NO ^{existing} DIMENSIONS _____
 AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK _____
 IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? _____

*existing bldg.
Signs are for
individual
tenants*

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

*** TENANT BLDG. FRONTAGE (IN FEET): _____



YOU SHALL PROVIDE:

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF PROPOSED ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: [Signature] DATE: 05/04/03

ACORD CERTIFICATE OF LIABILITY INSURANCE		DATE (MMDD/YYYY) 04/03/2003
PRODUCER (207)774-6257 Clark Associates 2385 Congress Street P O Box 3543 Portland, ME 04104	FAX (207)774-2994	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 94 AUBURN LLC P O BOX 2133 P.O. Box 2133 SOUTH PORTLAND, ME 04116-2133		
INSURERS AFFORDING COVERAGE		NAIC #
INSURER A: Peerless Ins Co		24198
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		

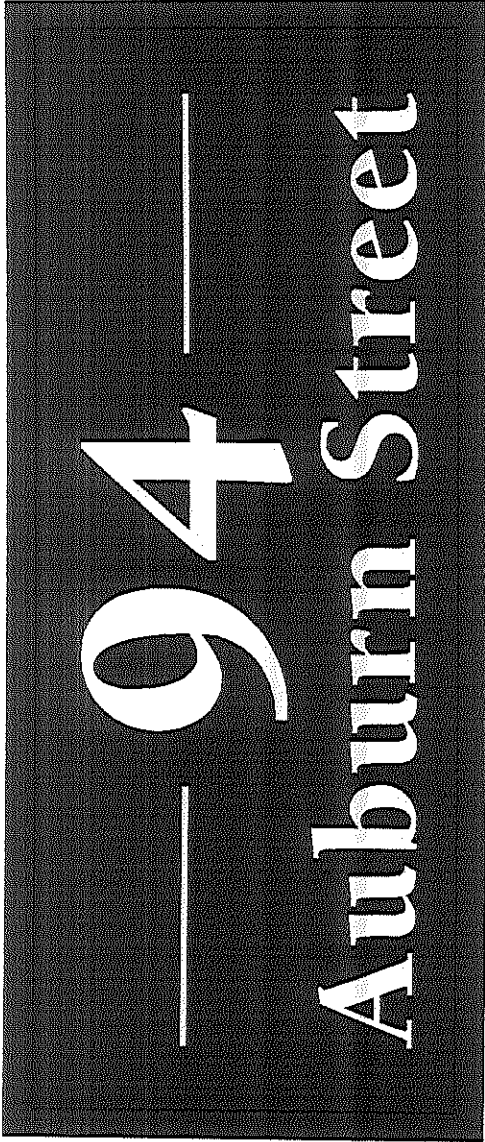
COVERAGES

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 LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MMDD/YYYY)	POLICY EXPIRATION DATE (MMDD/YYYY)	LIMITS	
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	BOP9565234	02/28/2003	02/28/2004	EACH OCCURRENCE	\$ 2,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
						MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$ 2,000,000
						GENERAL AGGREGATE	\$ 4,000,000
						PRODUCTS - COMP/OP AGG	\$ 2,000,000
		AUTOMOBILE LIABILITY <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)	\$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN AUTO ONLY EA ACC	\$
						AGG	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS	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
 City of Portland is named as an additional insured with regards to a sign being installed at 94 Auburn Street, Portland, Maine

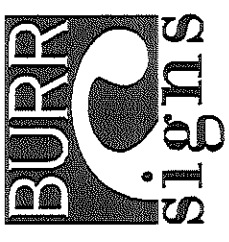
CERTIFICATE HOLDER City of Portland Congress Street Portland, ME 04101	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE Johanna Kerry/HANNA <i>Johanna C. Kerry</i>



Bronze background with white letters

Sign Elevation

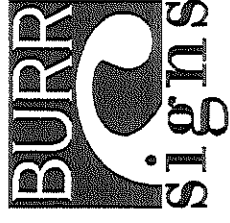
2'-0"x5'-1.5" D/F Internally illuminated monument sign



10 BIRCHWOOD ST.
 SO. PORTLAND, ME 04106
 PH: 207-799-1183 FX: 207-799-1324

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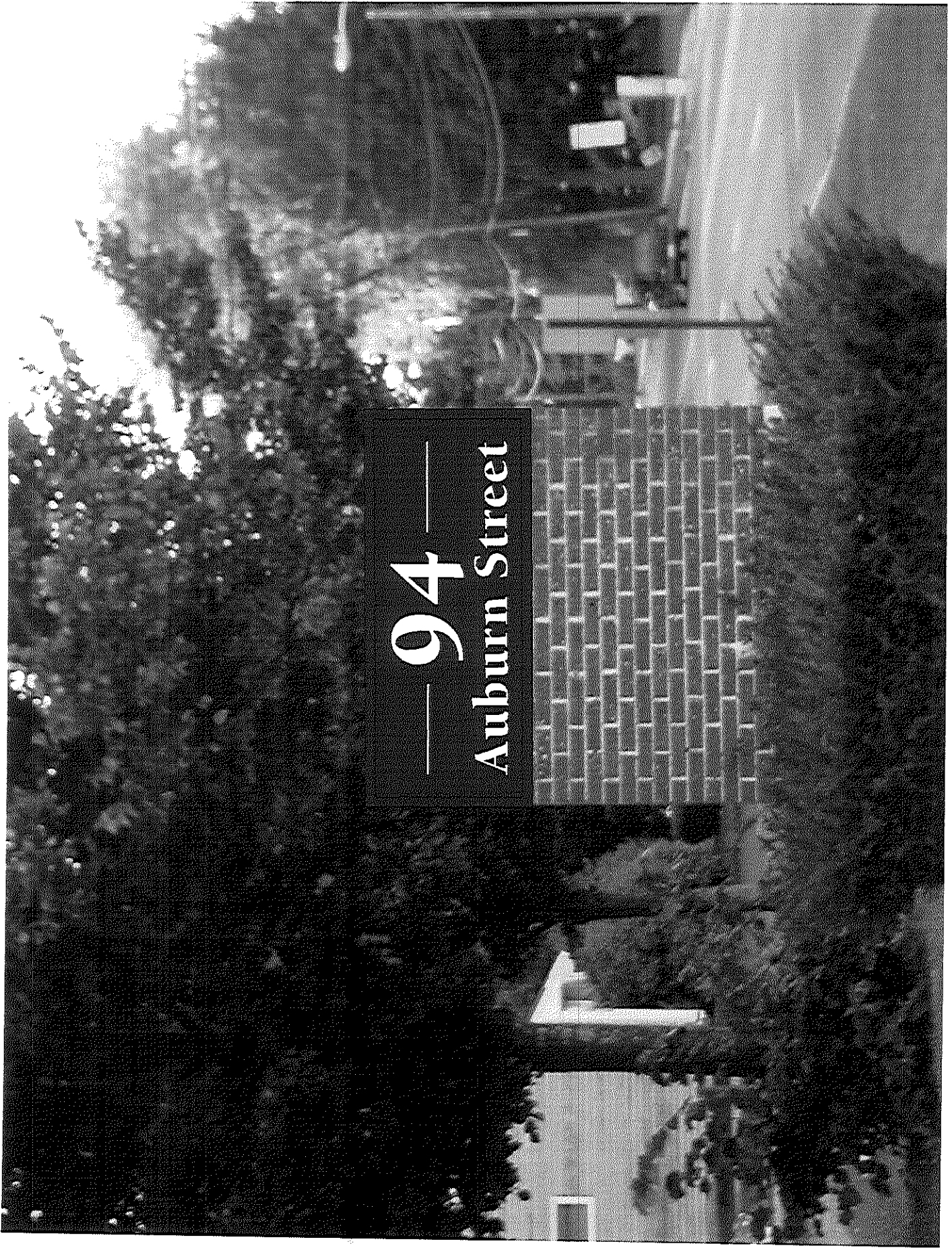
CLIENT	94 AUBURN ST.
LOCATION	PORTLAND, ME
SALES PERSON	R. BURR
DRAWN BY	R. BURR
SCALE	1" = 10"
DATE	03/07/03
ACCEPTANCE SIGNATURE	
	DATE
DRAWING NO	94 Auburn 4.cdl
<small>COLORS SHOWN HERE MAY NOT REPRESENT ACTUAL COLORS. COLOR MATCH NUMBERS MAY BE REQUIRED.</small>	



10 BIRCHWOOD ST.
 SO. PORTLAND, ME 04106
 PH: 207-999-1183 FX: 207-999-1324

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CLIENT	ADDCO
LOCATION	94 AUBURN ST.
SALES PERSON	R. BURR
DRAWN BY	R. BURR
SCALE	N.T.S.
DATE	10/10/02
ACCEPTANCE SIGNATURE	
	DATE
DRAWING NO	94 Auburn 3.cdl



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