Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read Application And

| Notes, If Any, Attached | | PERMIT | | it Number: 090735 |
|--|-----------------------|---|--------------------|--|
| This is to certify that Rockpre | op Llc /Sign Concepts | | | |
| has permission toinstall 6 | 5'-1.5" x 8'-0" sign | | | |
| AT 14 Veranda St | | | CBL 429 C006001 | |
| provided that the person | on or persons, f | rm or corporation | accepting this par | rmit shall comply with all |
| of the broadstone of the | e statutes of Ma | line and of the Ord | inances of the Cit | ty of Dardland was and attention |
| the construction, main | tenance and us | e of buildings and s | trivetures and of | the application on file in |
| this department. | Action Notice Control | gavernessa samuel | and of | the application on file in |
| Apply to Public Works for sand grade if nature of work such information. | requires give | fication of inspection of an and written permission per this building or part the protherwise closed UR NOTICE IS REQUIRE | procured A certi | ificate of occupancy must be ed by owner before this build-part thereof is occupied. |
| OTHER REQUIRED APPROFICE Dept. | AUG 1 0 | IUO | | |
| Health Dept | 1100 | | ΔM . | ^ () |
| Appeal Board | | nouse creates and the second | 111.+ | () |
| Other Department Name | CITY OF PO | RTLAND | May | 1/26/09 |

PENALTY FOR REMOVING THIS CARD



| 389 Congress Street, 04101 Tel: Location of Construction: 14 Veranda St Business Name: | Owner Name: | 3, Fax: (| | 09-0735 | 1128109 | 429 C0 | 06001 |
|--|--|-----------------------|--|---|--|-----------------------------|----------------|
| 14 Veranda St | W | | | | | | 00001 |
| | And the state of t | | | Owner Address: | | Phone: | |
| Business Name: | T. I. | | 33 Leighton Rd | | | 207-879-0124 | |
| Sign Concepts | | | | Contractor Address: | | Phone 2076992920 | |
| | | | | 75 Bishop Street | Portland | | |
| Lessee/Buyer's Name | Phone: | | | Permit Type: | | | Zone: |
| | | | | Signs - Permaner | nt | | 13-2 |
| Past Use: restaurant "V www of N with restaurant - ins sign | | | | Permit Fee: | Cost of Work: | CEO District: | |
| | | stall 6'-1.5" x 8'-0" | | es e | \$0.00 | 4 | |
| | | | | FIRE DEPT: Approved | | INSPECTION; | |
| Samuel State of the State of th | m disserte | | e to a to the second | | Denied Use C | Group: A. 2 IBE | Type gray 2003 |
| Proposed Project Description: | | | | | | ~ 0.0 | |
| install 6'-1.5" x 8'-0" sign | | | | Signature: | Signa | ture: | |
| | | | • | PEDESTRIAN ACTI | | | |
| | | | | Action: Approv | ved Approved | w/Conditions | Denied |
| | | | | Signature: | | Date: | |
| 1 | pplied For: | | | Zoning | Approval | | |
| tmm 07/10 | 0/2009 | | | | F F 3 3 3 3 | | |
| 1. This permit application does not | preclude the | Spec | ial Zone or Review | s Zonir | ıg Appeal | Historic Prese | ervation |
| Applicant(s) from meeting applicable State and Federal Rules. | | ☐ Sho | oreland | ☐ Variance | e | Not in District or Landmark | |
| 2. Building permits do not include plumbing, septic or electrical work. | | | tland | Miscellaneous | | ☐ Does Not Require Review | |
| 3. Building permits are void if work is not started within six (6) months of the date of issuance. | | ☐ Flo | od Zone | Conditional Use | | Requires Review | |
| False information may invalidate permit and stop all work | a building | Sut | odivision | Interpret | ation | Approved | |
| PERMIT ISS | IIF) | Site | e Plan | Approve | d | Approved w/C | Conditions |
| Моннина, на учения по поставления в поставл | COLLABORATION CONTRACTOR CONTRACT | Maj [€V | | - 1 - | | Denied | |
| AUG 1 0 2 | 009 | Date: 🖫 | Icand-him 19/15/199 AB | Date: | 1 | Date: | |
| CITY OF PORT | TLAND | | | | | | |
| | | Cì | ERTIFICATIO | N | | | |
| hereby certify that I am the owner of have been authorized by the owner to urisdiction. In addition, if a permit fo | make this appli r work described | med proposition as | perty, or that the his authorized application is issued. | proposed work is agent and I agree tued. I certify that t | o conform to all a he code official's | applicable laws of | of this |
| hall have the authority to enter all area uch permit. | | | | | | | |

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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.

| A Pre-construction Meeting will take place t | ipon receipt of your building permit. |
|--|---|
| X Final inspection required at comp | letion of work. |
| Certificate of Occupancy is not required for cer your project requires a Certificate of Occupancy | tain projects. Your inspector can advise you if y. All projects <u>DO require</u> a final inspection. |
| If any of the inspections do not occur, the pr REGARDLESS OF THE NOTICE OR CIRC | oject cannot go on to the next phase, CUMSTANCES. |
| CERIFICATE OF OCCUPANICES MUST : THE SPACE MAY BE OCCUPIED. | BE ISSUED AND PAID FOR, BEFORE |
| Signature of Applicant/Designee | Date |
| Signature of Inspections Official | Date |

CBL: 429 C006001

| 389 Congress Street, 041 | ne - Building or Use Permit 01 Tel: (207) 874-8703, Fax: (| 207) 874-871 | Permit No: 09-0735 | Date Applied For: 07/10/2009 | CBL: 429 C006001 | | |
|--|---|---|---------------------------|----------------------------------|-----------------------------------|--|--|
| Location of Construction: | Owner Name: | | Owner Address: | | Phone: | | |
| 14 Veranda St | Rockprop Llc | | 33 Leighton Rd | 207-879-0124 | | | |
| Business Name: | Contractor Name: | | | Contractor Address: | | | |
| | Sign Concepts | | 75 Bishop Street Portland | | Phone (207) 600 2020 | | |
| Lessee/Buyer's Name | Phone: | | Permit Type: | Ortiana | (207) 699-2920 | | |
| | | | Signs - Permanent | | | | |
| Proposed Use: | | Propos | sed Project Description: | · | | | |
| restaurant - install 6'-1.5" x | Postoniest in tall CL 1 CH of on t | | | install 6'-1.5" x 8'-0" sign | | | |
| | | msta | 11 0 -1.3 ° X 8 -0 ° Sign | | | | |
| | | | 11 0 - 1.3 X 8 - 0 " sign | | | | |
| * *** ******************************** | Status: Approved with Conditions | - 11 - 12 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15 | : Ann Machado | | ate: 07/15/2009 | | |
| * *** ****** | | - 11 - 12 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15 | | Approval D | | | |
| Dept: Zoning S Note: | | s Reviewer | : Ann Machado | Approval D | ate: 07/15/2009 Ok to Issue: ☑ | | |
| Dept: Zoning S Note: 1) This permit is being issu | Status: Approved with Conditions | Reviewer | : Ann Machado | Approval D be removed. | Ok to Issue: 🗸 | | |
| Dept: Zoning S Note: 1) This permit is being issu Dept: Building S | Status: Approved with Conditions ed with the condition that all the e | Reviewer xisting signs o | : Ann Machado | Approval D | Ok to Issue: 🔽 | | |

Comments:

7/15/2009-amachado: Spoke to Dave at Sign Concepts. Need certificate of liability. He said that he would get it to us.

7/22/2009-amachado: Received certificate of liability.

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.

| , | 1 Veranda St., Por | tland |
|---|---|---|
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot# リンタ C G | Owner: Rock prop LLC | Telephone: 879-0124 |
| essee/Buyer's Name (If Applicable) Veranda Noode Bar | Contractor name, address & telephone: Sign Greepts 75 Bishop St. Portland, ME 04103 | Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$/26.00 Awning Fee= cost of work Total Fee: \$ _/26.00 |
| Tho should we contact when the permit is ready the should we contact when the permit is ready the shoulding space frontage (feet) | y: | Multi |
| Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes roposed awning? Yes No Is aw Height of awning: Length of a Is there any communication, message, tradem If yes, total s.f. of panels w/communications, formation on existing and previously perm | rning backlit? Yes No awning: Depth: ark or symbol on it? Yes No message, trademark or symbol: s. | CITY (**) |
| 1 reconstruction (c.g., pose) sign, 1 cs | No Dimensions: 3 × 4 | k ; |
| Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes Awning? Yes No Sq. ft. area | a of awning w/communication: | |
| Bldg. wall sign? (attached to bldg) Yes Awning? Yes No Sq. ft. area site sketch and building sketch showing extetches and/or pictures of proposed signage | a of awning w/communication: sactly where existing and new signage is | located must be provided. |
| Awning? Yes No Sq. ft. area site sketch and building sketch showing extetches and/or pictures of proposed signage lease submit all of the information of ailure to do so may result in the autoorder to be sure the City fully understands the | a of awning w/communication: garactly where existing and new signage is ge and existing building are also required outlined in the Sign/Awning Applipmatic denial of your permit. efull scope of the project, the Planning and I | cation Checklist. |
| Awning? Yes No Sq. ft. area site sketch and building sketch showing extetches and/or pictures of proposed signage lease submit all of the information of ailure to do so may result in the auto- | a of awning w/communication: cactly where existing and new signage is ge and existing building are also required butlined in the Sign/Awning Application denial of your permit. If the full scope of the project, the Planning and I permit. For further information visit us on-liber call 874-8703. The authorized agent. I agree to conform to all d, I certify that the Code Official's authorized rep | Cation Checklist. Development Department may request ne at www.portlandmaine.gov , stop by the orizes the proposed work and that I have been applicable laws of this jurisdiction. In addition, if resentative shall have the authority to enter all |
| Awning? Yes No Sq. ft. area site sketch and building sketch showing extetches and/or pictures of proposed signage lease submit all of the information of ailure to do so may result in the autoorder to be sure the City fully understands the ditional information prior to the issuance of a pillding Inspections office, room 315 City Hall of the cereby certify that I am the Owner of record of the reshorized by the owner to make this application as his ermit for work described in this application is issued. | a of awning w/communication: ge and existing building are also required butlined in the Sign/Awning Applia omatic denial of your permit. e full scope of the project, the Planning and I permit. For further information visit us on-library call 874-8703. Inamed property, or that the owner of record authorized agent. I agree to conform to all d, I certify that the Code Official's authorized repenforce the provisions of the codes applicable to | Cation Checklist. Development Department may request ne at www.portlandmaine.gov , stop by the orizes the proposed work and that I have been applicable laws of this jurisdiction. In addition, if resentative shall have the authority to enter all |

This page contains a detailed description of the Parcel ID you selected. Press the New Search button at the bottom of the screen to submit a new query.

Current Owner Information

Card Number Parcel ID Location

429 C006001 14 VERANDA ST

1 of 1

Land Use

RETAIL & PERSONAL SERVICE

Owner Address

ROCKPROP LLC 33 LEIGHTON RD YARMOUTH ME 04096

Book/Page

Legal

19599/288

429-C-6 VERANDA ST 14

5064 SF

Current Assessed Valuation

Land \$128,300 Building \$151,600

Total \$279,900

Building Information

Bldg #

Year Built 1910

Units

Bldg Sq. Ft. 4637

Identical Units

Total Acres 0.116

Total Buildings Sq. Ft. Structure Type 4637

MIXED RES/COMM

Building Name JUBBA/ DAVANTI HAIR

Exterior/Interior Information

| Section 1 1 1 1 | Levels B1/B1 01/01 02/02 01/01 | Size 1258 1246 1258 535 | Use UNFINISHED RES BSMT MULTI-USE SALES MULTI-USE APARTMENT MULTI-USE SALES |
|-----------------|--|-------------------------------------|---|
| î | A1/A1 | 340 | SUPPORT AREA |

| Height | · Walls |
|--------|---------|
| 9 | |
| 10 | FRAME |
| 9 | FRAME |
| 10 | FRAME |
| 8 | FRAME |
| | |

Heating HW/STEAM HW/STEAM HW/STEAM HW/STEAM NONE. NONE

A/C NONE NONE NONE NONE NONE NONE

Building Other Features

| Line | Structure Type |
|------|-----------------|
| 2 | PORCH - COVERED |
| 2 | PORCH - ENCL |
| 3 | PORCH - ENCL |
| 2 | CANOPY - ONLY |

Identical Units 2

Yard Improvements

Year Built 1992

Structure Type ASPHALT PARKING

Length or Sq. Ft. 2800

Units

Sales Information

Date 06/01/2003 10/07/1998 Type LAND + BLDING LAND + BLDING Price \$250,800 \$150,000 Book/Page 19599-288 14207-196

Picture and Sketch

<u>Picture</u>

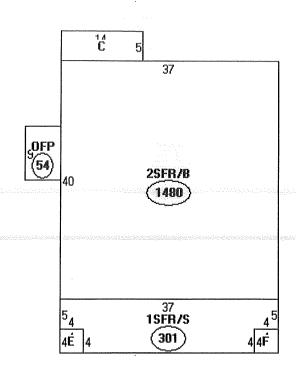
Sketch

Tax Map

Click here to view Tax Roll Information.

Any information concerning tax payments should be directed to the Treasury office at 874-8490 or e-mailed.

New Search!



<u>Descriptor/Area</u> A: 2SFR/B 1480 sqft

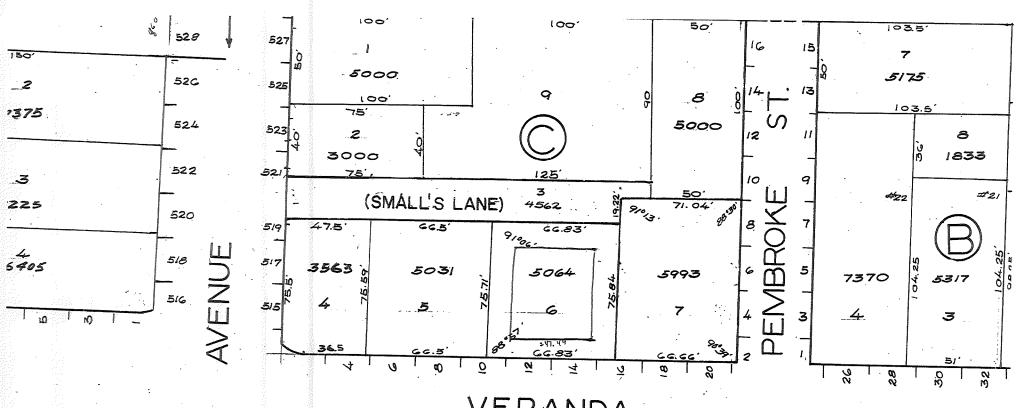
B: OFP 54 sqft

C: 2SEFP/CR 70 sqft

D:1SFR/S 301 sqft

E:CNPY 16 sqft

F: CNPY 16 sqft



VERANDA

randa Noodle Bar

Vietnamese Noodle Soup & Fine Dining



DINE IN TAKE OUT FULL LIQUOUR 123-4567 123-4567



Date: 6/30/09

Scale: 3/4" = 1'

Drawing #: 1

Sales Rep: DF

Rev #: 2

Rev Date:

7/7/09

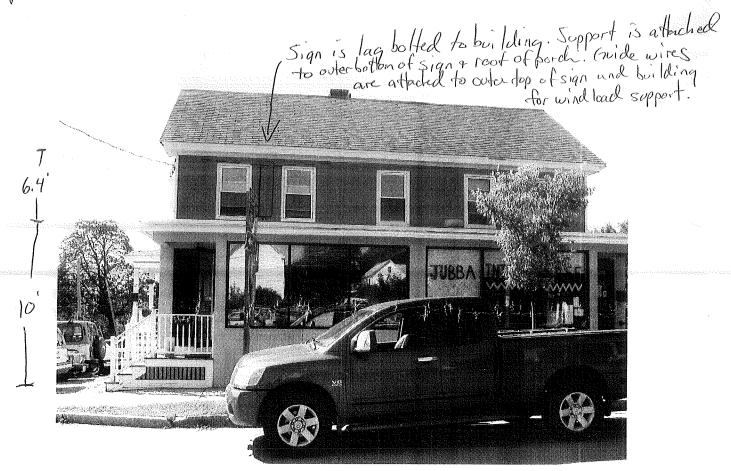
Apprv'd by:

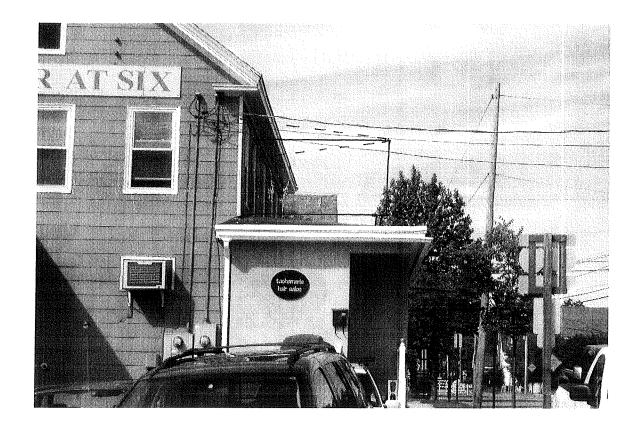
Veranda Noodle Bar

- 1 d/f internally illuminated cantilevered sign
 - · extruded aluminum sign cabinet
 - white Lexan faces
 - · digitally printed graphics
 - white translucent vinyl
 - clear UV laminate

This design is the exclusive property of Sign Concepts, LLC, and cannot be copied, exhibited, or shown to anyone outside of your organization without the prior consent of Sign Concepts, LLC. Copyright @ 2009

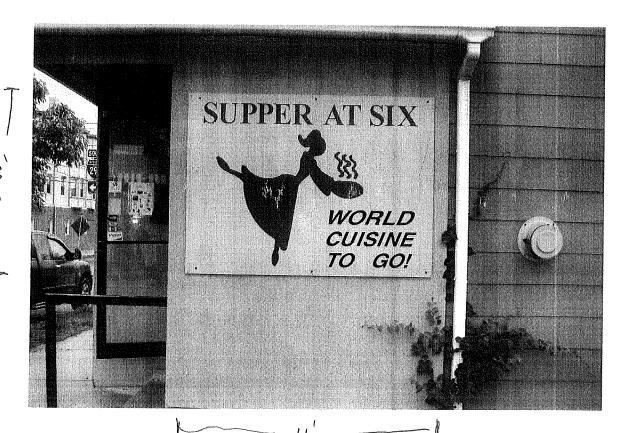
Proposed Signage

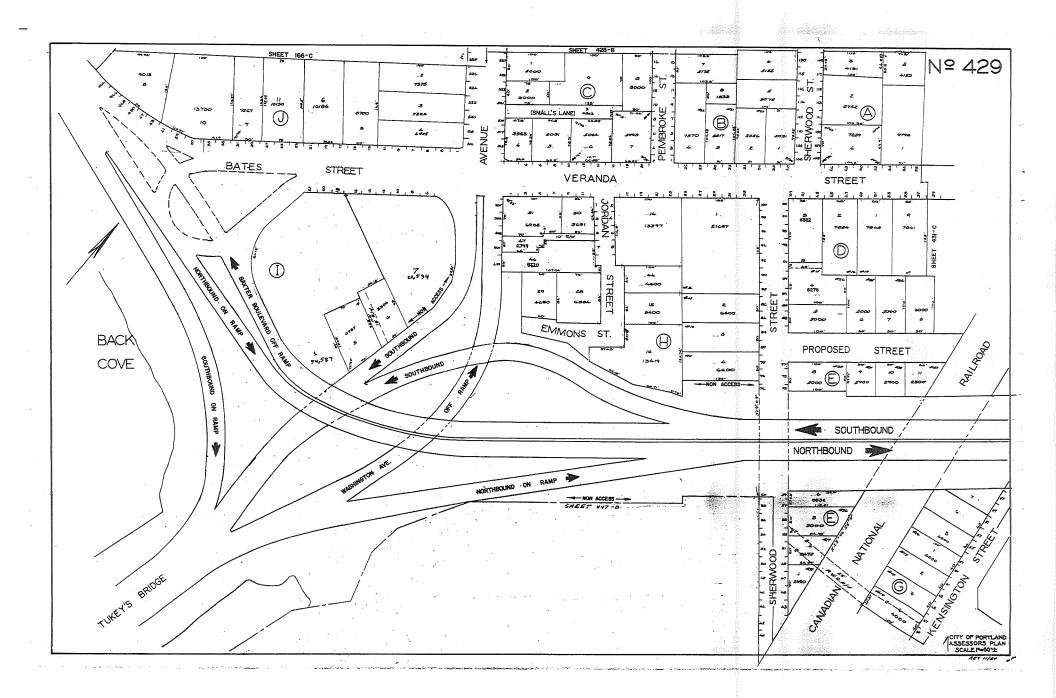




Existing Signage









Ann Machado - Fw: Veranda St soup and noodle sign

From:

"Sign Concepts" <inbox@signconceptsmaine.com>

To:

"Ann Machado" <AMACHADO@portlandmaine.gov>

Date:

7/13/2009 10:19 AM

Subject: Fw: Veranda St soup and noodle sign

---- Original Message ----

From: John Gove

To: inbox@signconceptsmaine.com
Sent: Monday, July 13, 2009 7:18 AM
Subject: Veranda St soup and noodle sign

Rockprop IIc 33 Leighton Rd. Yarmouth,Me. 04096

To Whom It May Concern:

Rockprop IIc hereby gives permission to Hai Pham and Sign Concepts to install any necessary permitted signage at 12-14 Veranda St. in Portland Maine.

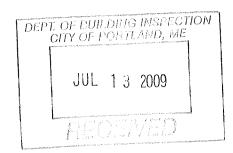
Regards,

John Gove

President, Rockprop IIc









| | ACORD CERTIFIC | CATE OF LIAE | BILITY INS | URANCE | 11 5 5. | | MM/DD/YYYY) /22/2009 |
|----------|--|--|---|--|--|-----------------------------|--------------------------------|
| 31 | DDUCER Phone; 207-858-5500 Fex; 207-858- IDERSON WATKINS ASSOCIATES, CENTRAL STREET STBROOK ME 04092 | -0004 | THIS CONLY A | ERTIFICATE IS IS AND CONFERS NO R. THIS CERTIFIC | SUED AS A MATTER OF D RIGHTS UPON THE CE CATE DOES NOT AMEND AFFORDED BY THE POLI | INFORMA RTIFICAT | ATION E |
| 100 | DEPT. | OF DEPOSITE INSTITUTE ITY OF FOREIGN AND SEE | | FORDING COVER | | vico del | NAIC# |
| HA | URED I PHAM | JUL 2 2 2009 | INSURER A: Tr | avelers Indemnit | y Company | | 25666 |
| 9 V | A VERANDA THAI CUISINE VERANDA ST RTLAND ME 04103 | | INSURER C: | | 1 | | |
| | VERAGES | | INSURER E: | <u> </u> | | | |
| POL | POLICIES OF INSURANCE LISTED BELOW I REQUIREMENT, TERM OR CONDITION OF PERTAIN, THE INSURANCE AFFORDED BY ICIES, AGGREGATE LIMITS SHOWN MAY HAV | IAVE BEEN ISSUED TO THE INS ANY CONTRACT OR OTHER DO THE POLICIES DESCRIBED HER VE BEEN REDUCED BY PAID CL | BURED NAMED ABOVE CUMENT WITH RESPE LEIN IS SUBJECT TO A AIMS. | FOR THE POLICY P CT TO WHICH THIS (ILL THE TERMS, EXC | ERIOD INDICATED, NOTWITH CERTIFICATE MAY BE 183UE LUSIONS AND CONDITIONS | STANDING D OR DF SUCH | |
| LTR | INSRO TTPE OF INSURANCE | POLICY NUMBER | POLICY REPROTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMIT | 3 | |
| | GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY | . I 680 1373M16A TIA 0 | 03/18/09 | 03/18/10 | EACH OCCURRENCE | IS | 1,000,000 |
| | CLAIMS MADE X OCCUR | 1 | | | PREMISES (En occurance) | s | 300,000 |
| A | OLAMO MADEL X.1 OLOGIC | | | | MED. EXP (Any one person) | \$ | 5,000 |
| | | | | | PERSONAL & ADV INJURY | | 1,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | PRODUCTS-COMP/OP AGG. | - 5 | 2,000,000 |
| | POLICY PRO- | | | | PRODUCTO-GOMPOP AGG. | ^a | 2,000,000 |
| | AUTOMOBILE LIABILITY ANY AUTO | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ | |
| | ALL OWNED AUTOS SCHEDULED AUTOS | | | 1 | BODILY INJURY (Per person) | 3 | |
| | NON-OWNED AUTOS | | | İ | BODILY INJURY (Per accident) | | * **** |
| | GARAGE LIABILITY | | U.S. | | PROPERTY DAMAGE (Per accident) | \$ | |
| | . ANY AUTO | | | | AUTO ONLY - EA ACCIDENT | - 4 | · / Pri) |
| | | | 1.46 | | OTHER THAN EA ACI | C 3 3 \$ | |
| | EXCESS / UMBRELLA LIABILITY OCCUR CLAIMS MADE | | | | EACH OCCURRENCE AGGREGATE | \$ | |
| | DEDUČTIBLE | | | ! | 100 1 01 10 to the second (11 to the total to the total total to the total tot | . \$ | 24 1 (m) 100 10 1 (m) 124 (m) |
| | RETENTION S | | | | ect of a 1 to the territory of a number of and a | - S 5 | |
| V | VORKERS COMPENSATION AND | | | | WC STATU- TORY LIMITS OTHER | - | |
| A | MPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE | | | c . | E,L, EACH ACCIDENT | \$ | |
| 0 | OFFIGER/MEMBER EXCLUDED? | | | | E,L, DISEASE-EA EMPLOYEE | 8 | |
| .8 | PECIAL PROVISIONS below | | | | E.L. DISEASE-POLICY LIMIT | 5 | |
| 1 | OTHER: | | | | , , , , , , , , , , , , , , , , , , , | | |
| DES | CONTION OF OREGATIONS! | TIANA (EL LIA) FAITURE IN | | | | | |
| Busi | CRIPTION OF OPERATIONS/LOCA iness Property Is \$20,000 & Genera | Liability will extend to Ve | SIONS ADDED BY erander Noodle Ba | ENDORSEMENT r. | "/ SPECIAL PROVISION | S | |
| | | | | | | | |
| CEP | ITIFICATE HOLDER | | A | B apri place 4 | | | |
| | THE TYPEST | The second secon | CANCELL | | | | |
| 38 | ty of Portland 9 Congress St | | WRITTEN NOTI | THE TO THE PERTICI | CRIBED FOLICIES BE CANCE ISSUING INSURER WILL END CATE HOLDER NAMED TO T TION OR LIABILITY OF ANY KI | EAVOR TO | MAIL 10 DAYS |
| F0 | ortland ME 04101 | | AUTHORIZED RE | EPRESENTATIVE | | and the second | |
| | ntion: | | | 1/10 | 1 2 | | |
| ACO | PRD 25 (2001/08) | Certificate # 1351 | 9 | V - ()() | ACORD CO | RPORAT | ION 1988 |

-