

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND BUILDING PERMIT



10/26/12

This is to certify that ATLANTIC PROPERTIES LLC

Located At 281 VERANDA ST

Job ID: 2012-10-5287-SIGN

CBL: 434- C-002-001

has permission to install new 5' x 4' freestanding sign for REMAX By the Bay

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED. A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

N/A

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY PENALTY FOR REMOVING THIS CARD BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 or 874-8693 (ONLY) or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months. If the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.

Final Inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Director of Planning and Urban Development Jeff Levine

Job ID: 2012-10-5287-SIGN

Located At: 281 VERANDA ST

CBL: 434- C-002-001

Conditions of Approval:

Zoning

 This permit is being issued with the condition that the sign is setback a minimum of five (5) feet from any property line and that the maximum height from grade is eight (8) feet.

Building

1. Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.

City of Portland, Maine - Building or Use Permit Application

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

Job No:	Date Applied:		CBL:]			
2012-10-5287-SIGN	10/26/2012		434- C-002-001				
Location of Construction: 281 VERANDA ST	Owner Name: ATLANTIC PROPERTIES LLC		Owner Address: 190 US ROUTE ONE, #122 FALMOUTH, ME 04105			Phone: 207-504-7751	
Business Name: REMAX By the Bay	Contractor Name: Welch Signs		Contractor Address: 7 Lincoln Ave., Scarborough ME 04074			Phone:	
Lessee/Buyer's Name:	Phone:		Permit Type: SIGN - PERM - Signage - Permanent			Zone: R-P	
Past Use:	Proposed Use:		Cost of Work:			CEO District:	
Professional Office Proposed Project Descriptio	Same – Professional of install 4' x 5' freestan for Remax By the Bay	ding sign	Fire Dept: Signature:	Approved Denied N/A			
New freestanding 5' x 4' Sign "R			redestriali Activi	ues District (F.A.L	.)	10/26/12	
Permit Taken By: Lannie			Zoning Approval				
		Special Zo	one or Reviews	Zoning Appeal	Historic P	reservation	
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building Permits do not include plumbing, septic or electrial work. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work. 		Shoreland WetlandsWither of Flood Zone Minimum of Subdivision Signame property Site Plan MajMinMM Date: Otwlcodilize		 Variance Miscellaneous Conditional Use Interpretation Approved Denied 	Does not Requires Approved	here	
			ICATION				

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 appication 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	

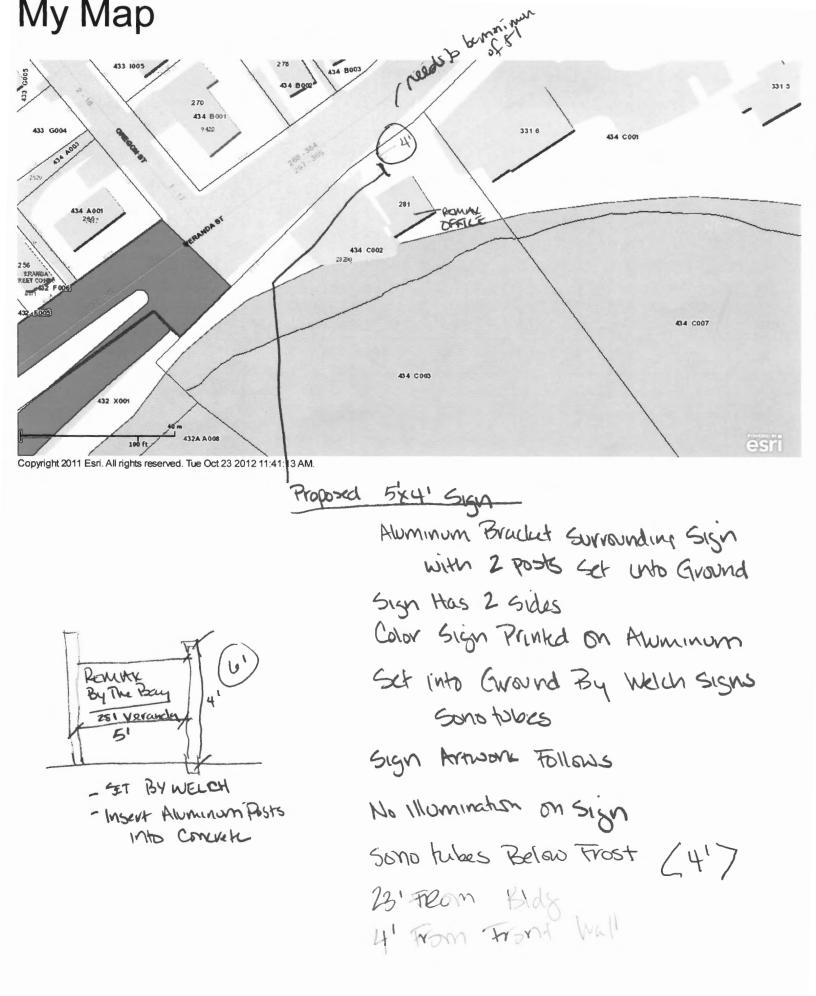
43300 R-P.



2012-10-5287 Signage / Awning Permit Application

If you or the property owner owes real estate or personal property taxes or any other charges on any property within the City, payment arrangement MUST be made before permits are accepted.

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Location/Address: 281 Voanda St	
Tax Assessor's Chart/Block/Lot (CBL) OWNER Name/Address:	Telephone:
Chart: 434 Block: C Lot: 2 Atlantic Properties LLC	207-504-715
134 C 2 190 US ROUK ONL #122	
Falmouth, ME 04105	
LEASEE/BUYER Name (if Applicable) CONTRACTOR name, address/phone	Total S.F. signage \$ 40,9
Welch Signs	SF= 20 x \$2.00
7 Lincold Ave	SF + \$30 Fee: \$30
Scarborough ME OYO74	Historic (\$75): \$
	Awning Fee: \$
Awning Fee = Cost of Work: \$ (\$30/first \$1000; \$10 every other \$1000)	TOTAL FEE: \$
Who should we contact when the permit is ready: Name: Cash wine Culley	Phone: 007-176-0904
Address PO BOX SEILE, Portland ME 04104	
	15
Tenant/allocated building space frontage (in feet): Length:	63
Lot frontage (in feet): <u>301.47</u> Single Tenant or Multi-Tenant Lot:	
Current Specific Use:	
If vacant, what was prior use:	
Proposed Use:	
5	2 8 22
Information on proposed sign(s) Freestanding (e.g. pole) sign? YES X NO Dimensions proposed: 10 (sf)	
	; Height from grade:sf \$
BLDG Wall Sign (attached to bldg.)? YES NO Dimensions proposed:sf	
Proposed Awning: YES NO X If yes, is awning backlit? YES	Height from grade: Sf St
Heigth of awning Length of awning Depth of awning	00
Is there any communication, message, trademark or symbol on it? YES NO	<u>ک</u> ک
If yes, total square footage of panels with communication, message, trademark or symbol on it:st	Q
Information on <i>existing and previously permitted</i> signage:	
Freestanding (e.g. pole) sign? YES NO Dimensions proposed: ft X BLDG Wall Sign (attached to bldg.)? YES NO Dimensions proposed: ft X	ft; Height from grade:
BLDG Wall Sign (attached to bldg.)? YES NO Dimensions proposed: ft X	_ ft
Awning? YES NO total sq ft of panels with communication on it: sf	
A site skateh and building skateh showing exactly where existing and proposed signage is located MUST	be provided
A site sketch and building sketch showing exactly where existing and proposed signage is located MUST Sketches and/or pictures of proposed signage and existing building are also required.	be provided.
Sketenes and/or pictures of proposed signage and existing building are also required.	
Please submit all information outlined in the Sign/Awning Application Checklist. Failure to do so may r	esult in the 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 re issuance of a permit. For further information, visit us on-line at <u>WWW.PORTLANDMAINE.GOV</u> , stop by the Building Inspi	
issuance of a permit. For further information, visit as on-time at <u>mmm is OKTEANDIVATINE.COF</u> , stop by the Building Inspi 207-874-8703.	ections Office, room 515 City mail, or can
I hereby certify I am the Owner of record of the named property, or that the owner of record authorizes the proposed work a	
to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In additic application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas co	
hour to enforce the provisions of the codes applicable to this permit.	verea by mis permit at any reasonable
Signature of Applicant: Dio Date:	10/05/0012
	1-123 1012
Revised 06/2012 This is NOT a permit; you may not commence ANX work until the permit is issued	
freestanding sign - 30th 20th proposed	
freestanding sign - 30\$ 20\$ proported	
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CERTIFICATE DOES BELOW. THIS CERT REPRESENTATIVE OF IMPORTANT: If the c the terms and conditio certificate holder in lie PRODUCER Turner Barker Insurance	ISSUED AS A NOT AFFIRMAT FICATE OF INS PRODUCER, A prtificate holder ns of the policy	MATTER IVELY OF SURANCE ND THE C is an ADI , certain p	ATE OF LIAE OF INFORMATION ONLY NEGATIVELY AMEND, DOES NOT CONSTITUT ERTIFICATE HOLDER. DITIONAL INSURED, the oolicles may require an er	Y AND CONFE EXTEND OR TE A CONTR/ policy(les) mu	ALTI	O RIGHTS ER THE CO BETWEEN 1	UPON THE CERTIFIC	ATE HO	E POLICIES
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			207-773-8156	CONTACT NAME:					
Turner Barker Insurance 207-773-6647 160 Preble Street 207-773-6647 Portland, ME 04101			BUILDING THE REAL						
William L. Burbine				HODILEGO.	INSU	JRER(S) AFFOR	DING COVERAGE		NAIC #
				INSURER A : Pe	erles	s Insuranc	e Co		18333
INSURED David M Banks Realty dba Remax By The Bay, Inc				INSURER B :					
By The Ba	y Referrals			INSURER C :					
Falmouth,	oute 1, #122 ME 04105			INSURER D :					
,			2 0 - 2 . 3	INSURER E :					
COVERAGES	CER	TIFICATE	NUMBER:	MOUNTER F :			REVISION NUMBER:		1
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NSR LTR TYPE OF INSU	RANCE	ADDL SUBR	POLICY NUMBER	POLICY (MM/DD/)	EFF YYY)	POLICY EXP (MM/DD/YYYY)	LIM	ITS	
GENERAL LIABILITY	RAL LIABILITY	x	BOP6877444	06/15	6/12	06/15/13	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ \$	2,000,00
CLAIMS-MADE	X OCCUR						MED EXP (Any one person)	\$	5,00
					1		PERSONAL & ADV INJURY	\$	in
							GENERAL AGGREGATE	\$	4,000,00
GEN'L AGGREGATE LIMIT	[]						PRODUCTS - COMP/OP AGO	3 \$ \$	4,000,00
POLICY PRO- JECT	LOC				-		COMBINED SINGLE LIMIT (Ea accident)		
<u> </u>							(Ea accident) BODILY INJURY (Per person)	\$	
ANY AUTO ALL OWNED	SCHEDULED						BODILY INJURY (Per accider		
AUTOS HIRED AUTOS	AUTOS NON-OWNED						PROPERTY DAMAGE (Per accident)	\$	
	AUTOS							\$	
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EXCESS LIAB	CLAIMS-MADE						AGGREGATE	\$	
DED RETENT								\$	
WORKERS COMPENSATI AND EMPLOYERS' LIABIL	TV						TORY LIMITS		
ANY PROPRIETOR/PARTN OFFICER/MEMBER EXCLU		N/A					E.L. EACH ACCIDENT	\$	· · · · · · · · · · · · · · · · · · ·
(Mandatory in NH)							E.L. DISEASE - EA EMPLOY	EE \$	
If yes, describe under DESCRIPTION OF OPERA Commercial Applica							E.L. DISEASE - POLICY LIMI		
Commercial Applica							4		
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CERTIFICATE HOLDER				CANCELLA	TION		00	1	
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