

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BU STION

## PERMIT

Permit Number: 090378

Please Read  
Application And  
Notes, If Any,  
Attached

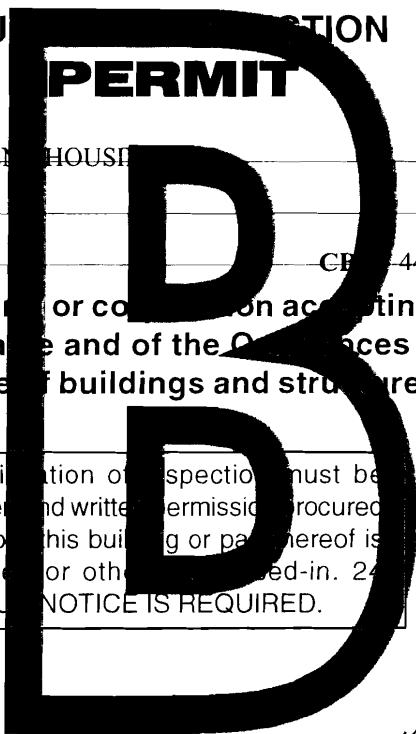
This is to certify that BAYSIDE VILLAGE STUDENT HOUSE

has permission to 24" x 38" Sidewalk sign

AT 132 MARGINAL WAY

CE 442 A001001

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 lathed or otherwise red-in. 24 HOUR 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 \_\_\_\_\_

Department Name

*Thomas N. MacFarley* 5/12/09  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

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

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

Permit No: 09-0378	Issue Date:	CBL: 442 A001001
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Location of Construction: 132 MARGINAL WAY	Owner Name: BAYSIDE VILLAGE STUDENT H	Owner Address: 247 COMMERCIAL ST	Phone:
Business Name: The UPS Store	Contractor Name:	Contractor Address:	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Side Walk	Zone: B-7

Past Use: Commercial - UPS Store	Proposed Use: Commercial - UPS Store - (1) 24" x 38" Sidewalk sign	Permit Fee: \$42.00	Cost of Work: \$42.00	CEO District: 1
Proposed Project Description: 24" x 38" Sidewalk sign		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <b>B</b> Type: <i>Sign</i> <b>IBC 2003</b>	
		Signature:	Signature: <i>Jm 5/12/09</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: Ldobson	Date Applied For: 04/28/2009	<b>Zoning Approval</b>
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</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><b>Special Zone or Reviews</b></p> <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"/> <i>OK w/ conditions</i> Date: <i>5/12/09 JBN</i>	<p><b>Zoning Appeal</b></p> <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: _____	<p><b>Historic Preservation</b></p> <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 <i>JBN</i> 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



# 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>132 Marginal Way</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>442</u> Block# <u>A</u> Lot# <u>1</u>	Owner: <u>Bayside Village Student Housing</u> <u>247 Commercial St</u> <u>Block Port Me 04856</u>	Telephone:
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone:	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>Debra Radcourt</u> phone: <u>207 961-0173</u>		
Tenant/allocated building space frontage (feet): Length: <u>(86)</u> Height: _____ Lot Frontage (feet) <u>22 ft +/-</u> Single Tenant or Multi Tenant Lot <u>multi</u>		
Current Specific use: <u>The UPS Store</u>		
If vacant, what was prior use: _____		
Proposed Use: _____		
<b>Information on proposed sign(s):</b> Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: <u>24" w/ Height from grade: 38" H</u> Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions proposed: _____		
<b>Proposed awning?</b> 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.		
<b>Information on existing and previously permitted sign(s):</b> Freestanding (e.g., pole) sign? Yes _____ No <input checked="" type="checkbox"/> Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions: <u>12' x 2'</u> Awning? Yes _____ No <input checked="" type="checkbox"/> Sq. ft. area of awning w/communication: _____		
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 and existing building are also required.		

24" wide max - 24" ok  
40" h for sign in place - 38"  
6 x 2 + 30

Please submit all of the information outlined in the Sign/Awning Application Checklist. Failure to do so may 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](http://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: <u>Debra Radcourt</u>	Date: <u>4-22-09</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

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

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

<b>Permit No:</b> 09-0378	<b>Date Applied For:</b> 04/28/2009	<b>CBL:</b> 442 A001001
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<b>Location of Construction:</b> 132 MARGINAL WAY	<b>Owner Name:</b> BAYSIDE VILLAGE STUDENT H	<b>Owner Address:</b> 247 COMMERCIAL ST	<b>Phone:</b>
<b>Business Name:</b> The UPS Store	<b>Contractor Name:</b>	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Side Walk	

<b>Proposed Use:</b> Commercial - UPS Store - (1) 24" x 38" Sidewalk sign	<b>Proposed Project Description:</b> 24" x 38" Sidewalk sign
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 05/06/2009
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) All sidewalk signs shall be removed when the business is closed or while any snow or ice exists on the walkway within eight feet of the sign in any direction. All sidewalk signs shall be located near the curb rather than the building face. The sidewalk shall maintain a width of no less than 4 1/2 feet of unobstructed sidewalk width perpendicular to major flows. For a single tenant listing, the maximum width is 24 inches or less if needed for the 4.5 feet of unobstructed sidewalk width. The maximum height of a sidewalk sign is 40 inches to the top of the sign in place. The minimum height of a sidewalk sign is 30 inches to the top of the sign in place. The sign must be located a maximum of 20' from the entrance of the advertiser.			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tom Markley	<b>Approval Date:</b> 05/12/2009
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.			
2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.			

24"

**UPS STORE**

**OPEN**

**PARK HERE**

**15 MIN.**

**FREE**

301



BAYSIDE VILLAGE  
Student Apartment Community

132 Marginal Way  
Portland, Maine 04101

April 24, 2009

UPS Store #0279  
Attn: Debbie Rancourt  
110 Marginal Way  
Portland, ME 04101

Re: Request for "Tent signs for parking"

Dear Debbie,

We are in receipt and acknowledgement of your request to place "tent signs/portable signage" on the property of 110-132 Marginal Way in Portland for customer parking in the "15 minute public parking spaces" in front of Bayside Village Student Apartments.

As your landlord, your request has been accepted and permission has been given to you to place the portable signs on the property as notice to your customers where they can park.

If you have any additional questions or requests, please give us a call at 207-879-4244 or email me [tbryant@realtyresourcesgroup.com](mailto:tbryant@realtyresourcesgroup.com).

Sincerely,

Tara L. Bryant  
Property Manager  
Bayside Village Student Apartments



This Institution is an Equal  
Opportunity Provider.

Realty Resources, LLC and  
Bayside Village Student Housing, LLC

1-888-832-4BAY  
[www.baysidevillagemaine.com](http://www.baysidevillagemaine.com)

<b>ACORD™ CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) <b>04/22/2009</b>												
PRODUCER (207)783-2246 FAX (207)782-7881 Champoux Insurance Agency 416 Sabattus St PO Box 220 Lewiston, ME 04243-0220		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 <b>Randu Group, Inc</b> DBA: The UPS Store 89 Auburn St Portland, ME 04101		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURERS AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A: <b>Massachusetts Bay Ins. Co.</b></td> <td><b>22306</b></td> </tr> <tr> <td>INSURER B: <b>Citizens Ins. Co.</b></td> <td><b>31534</b></td> </tr> <tr> <td>INSURER C: <b>Hanover Insurance Company</b></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: <b>Massachusetts Bay Ins. Co.</b>	<b>22306</b>	INSURER B: <b>Citizens Ins. Co.</b>	<b>31534</b>	INSURER C: <b>Hanover Insurance Company</b>		INSURER D:		INSURER E:	
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**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	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 <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	ODP0036190-02	05/01/2009	05/01/2010	EACH OCCURRENCE \$ <b>2,000,000</b>								
		DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>300,000</b> MED EXP (Any one person) \$ <b>10,000</b> PERSONAL & ADV INJURY \$ <b>2,000,000</b> GENERAL AGGREGATE \$ <b>4,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>4,000,000</b>												
B		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 checked="" type="checkbox"/> NON-OWNED AUTOS	ABP0036205-02	05/01/2009	05/01/2010	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b>								
		BODILY INJURY (Per person) \$												
		BODILY INJURY (Per accident) \$												
		PROPERTY DAMAGE (Per accident) \$												
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$								
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$	UHP0044131-02	05/01/2009	05/01/2010	EACH OCCURRENCE \$ <b>1,000,000</b> AGGREGATE \$ <b>1,000,000</b>								
B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	WBP0036273-02	05/01/2009	05/01/2010	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">WC STATU-TORY LIMITS</th> <th style="width:50%;">OTH-ER</th> </tr> <tr> <td>E.L. EACH ACCIDENT \$ <b>500,000</b></td> <td></td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE \$ <b>500,000</b></td> <td></td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT \$ <b>500,000</b></td> <td></td> </tr> </table>	WC STATU-TORY LIMITS	OTH-ER	E.L. EACH ACCIDENT \$ <b>500,000</b>		E.L. DISEASE - EA EMPLOYEE \$ <b>500,000</b>		E.L. DISEASE - POLICY LIMIT \$ <b>500,000</b>	
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E.L. DISEASE - EA EMPLOYEE \$ <b>500,000</b>														
E.L. DISEASE - POLICY LIMIT \$ <b>500,000</b>														

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

re: The UPS Store, 110 Marginal Way Location

Certificate holder to be included as Additional Insured with respect to general liability insurance as required by contract or permit.

**CERTIFICATE HOLDER**

**CANCELLATION**

City of Portland 389 Congress Street Portland, ME 04101	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 Michelle Augello/MAA
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## 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.