

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

## BUILDING INSPECTION

### PERMIT

Permit Number: 080866

Please Read Application And Notes, If Any, Attached

This is to certify that TOMAKS LLC / Burr Signs  
has permission to Install Three Sided 2'6"x8' Laminated Glass on the Roof-top  
AT 140 MARGINAL WAY 442 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 procedure is complete this building or part thereof is closed or service closed-in for 4 HOUR NOT REQUIRED.

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

**PERMIT ISSUED**  
OTHER REQUIRED APPROVALS  
FIRE DEPT. \_\_\_\_\_  
HEALTH DEPT. \_\_\_\_\_  
APPEAL BOARD \_\_\_\_\_  
OTHER \_\_\_\_\_  
AUG 6 2008  
CITY OF PORTLAND

*[Signature]* 8/6/08  
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: 08-0866	Issue Date:	CBL: 442 A006001
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Location of Construction: 140 MARGINAL WAY	Owner Name: TOMAKS LLC	Owner Address: 116 ARMOUR RD	Phone: 212-445-4133
Business Name:	Contractor Name: Burr Signs	Contractor Address: 50 DownEast Drive Yarmouth	Phone: 2077991183
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-7

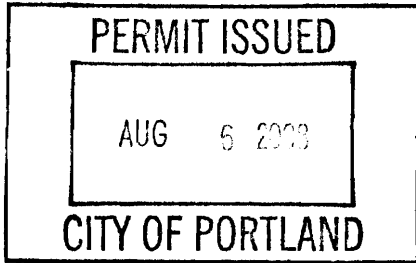
Past Use: Commercial Restaurant/Miss Portland Diner	Proposed Use: Commercial Restaurant/Miss Portland Diner - Install Three Sided 2'6"x8' Illuminated Sign on the Roof-top	Permit Fee: \$156.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Install Three Sided 2'6"x8' Illuminated Sign on the Roof-top		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>N/A</i>	INSPECTION: Use Group: <i>V</i> Type: <i>Sign</i> <i>IBC 2003</i> Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: lmd	Date Applied For: 07/16/2008
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**Zoning Approval**

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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<input 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: <i>7/23/08</i>	Date: <i>7/23/08</i>	Date: _____



**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

*Approved for special exception - cannot be w/ historic district for meets standards for exceptional design merit  
D. Andrews*

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

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

<b>Permit No:</b> 08-0866	<b>Date Applied For:</b> 07/16/2008	<b>CBL:</b> 442 A006001
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<b>Location of Construction:</b> 140 MARGINAL WAY	<b>Owner Name:</b> TOMAKS LLC	<b>Owner Address:</b> 116 ARMOUR RD	<b>Phone:</b> 212-445-4133
<b>Business Name:</b>	<b>Contractor Name:</b> Burr Signs	<b>Contractor Address:</b> 50 DownEast Drive Yarmouth	<b>Phone:</b> (207) 799-1183
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Signs - Permanent	

<b>Proposed Use:</b> Commercial Restaurant/Miss Portland Diner - Install Three Sided 2'6"x8' Illuminated Sign on the Roof-top	<b>Proposed Project Description:</b> Install Three Sided 2'6"x8' Illuminated Sign on the Roof-top
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 07/23/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) This roof sign is being reviewed under 14-368.5.g appeal provisions by the Planning Division (Deb A.) under site plan standards 14-526(a)(22).			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 08/06/2008
<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.			
<b>Dept:</b> Planning	<b>Status:</b> Approved	<b>Reviewer:</b> Deborah Andrews	<b>Approval Date:</b> 07/28/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) * Meets criteria for special exception--rooftop sign of this design and configuration is consistent with era of the Miss Portland Diner and is considered of special design merit.			

<b>Comments:</b>
7/16/2008-lmd: Received permit via postal mail, check amount incorrect, contacted Randy @Burr Signs, he will issue a check for the remaining balance.
7/18/2008-lmd: Received balance owed on sign permit. \$85.00. Ck#9930
7/29/2008-gg: received permit from Historic on 7/28/08, in with plan reviewer (Tammy).



# 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>- 140 -</u> <u>138 MARSHALL WAY</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>442</u> Block# <u>A</u> Lot# <u>006</u>	Owner: <u>THOMAS MAWING</u>	Telephone: <u>212-445-4133</u>
Lessee/Buyer's Name (If Applicable) <u>MISS PORTLAND DINER</u>	Contractor name, address & telephone: <u>BURR SIGNS</u> <u>30 DOWNHURST DR.</u> <u>YARMOUTH, ME 04096</u> <u>846-7622</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ <u>70.00</u> Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>RAUDY BURR</u> phone: <u>846-7622</u>		
Tenant/allocated building space frontage (feet): Length: <u>72'</u> Height: <u>12'</u> Lot Frontage (feet) <u>115'</u> Single Tenant or Multi Tenant Lot <u>M</u>		
Current Specific use: <u>NEW</u> If vacant, what was prior use: <u>NEW</u> Proposed Use: <u>RESTAURANT</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes ___ No <input checked="" type="checkbox"/> Dimensions proposed: _____ Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No ___ Dimensions proposed: <u>2'6" x 8'</u>		
Proposed awning? Yes ___ No <input checked="" type="checkbox"/> 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.		
Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes ___ No <input checked="" type="checkbox"/> Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes ___ No <input checked="" type="checkbox"/> Dimensions: _____ 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.		

JUL 16 2008

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:	Date: <u>07/14/08</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 138 MARGUHL WAY ZONE: \_\_\_\_\_

CBL: \_\_\_\_\_

SINGLE TENANT LOT? YES  NO \_\_\_\_\_ MULTI TENANT LOT? YES \_\_\_\_\_ NO   
MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES \_\_\_\_\_ NO

INFORMATION ON PROPOSED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES \_\_\_\_\_ NO \_\_\_\_\_ DIMENSIONS PROPOSED: \_\_\_\_\_  
BLDG. WALL SIGN? (attached to bldg) YES  NO \_\_\_\_\_ DIMENSIONS PROPOSED: 2'-6" x 8'

INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES \_\_\_\_\_ NO  DIMENSIONS: \_\_\_\_\_  
BLDG. WALL SIGN(attached to bldg) ? YES \_\_\_\_\_ NO  DIMENSIONS: \_\_\_\_\_  
AWNING? YES \_\_\_\_\_ NO  DIMENSIONS: \_\_\_\_\_

LOT FRONTAGE (FEET): 115'  
TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET): 72'

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 WITH COMMUNICATIONS/MESSAGE/TRADEMARK/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: \_\_\_\_\_ DATE: \_\_\_\_\_

\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*

**rburr**

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**From:** Deb Andrews [DGA@portlandmaine.gov]  
**Sent:** Tuesday, July 08, 2008 1:59 PM  
**To:** rburr@burrsigns.com  
**Cc:** lloyd@archetypepa.com; Thomas.Manning@Newsweek.com  
**Subject:** Miss Portland Diner sign

Dear Randy:

This is to confirm that I have approved the revised design for the structure supporting the rooftop sign for Miss Portland Diner.

I understand that the sign itself will consist of 4" thick sheet metal letters with exposed neon tubing projecting beyond the face of the letters, consistent with traditional neon signs from the era.

You are aware that the installation of a rooftop sign will require a special waiver, as rooftop signs are generally not allowable under Portland's sign regulations. I am prepared to review and approve the request for an exception.

Thanks. I think the sign promises to be a real landmark in and of itself!

Deb

<b>ACORD™ CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) 07/09/2008
PRODUCER (207)797-4900 FAX (207)874-4069 Coastal Insurance Group LLC 558 Brighton Avenue Portland, ME 04102	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 TOMAKS, LLC DBA: Miss Portland Diner C/O Tom Manning 116 Armour Road Mahwah, NJ 07430	INSURERS AFFORDING COVERAGE	NAIC #
	INSURER A: Peerless Insurance	
	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 (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"/> POL CY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	GL8428618	04/08/2008	04/08/2009	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 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 L MIT (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 EA ACC \$ AUTO ONLY AGG \$								
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$								
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">WC STATUTORY LIMITS</td> <td style="width: 50%;">OTHER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATUTORY LIMITS	OTHER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
WC STATUTORY LIMITS	OTHER												
E.L. EACH ACCIDENT	\$												
E.L. DISEASE - EA EMPLOYEE	\$												
E.L. DISEASE - POLICY LIMIT	\$												

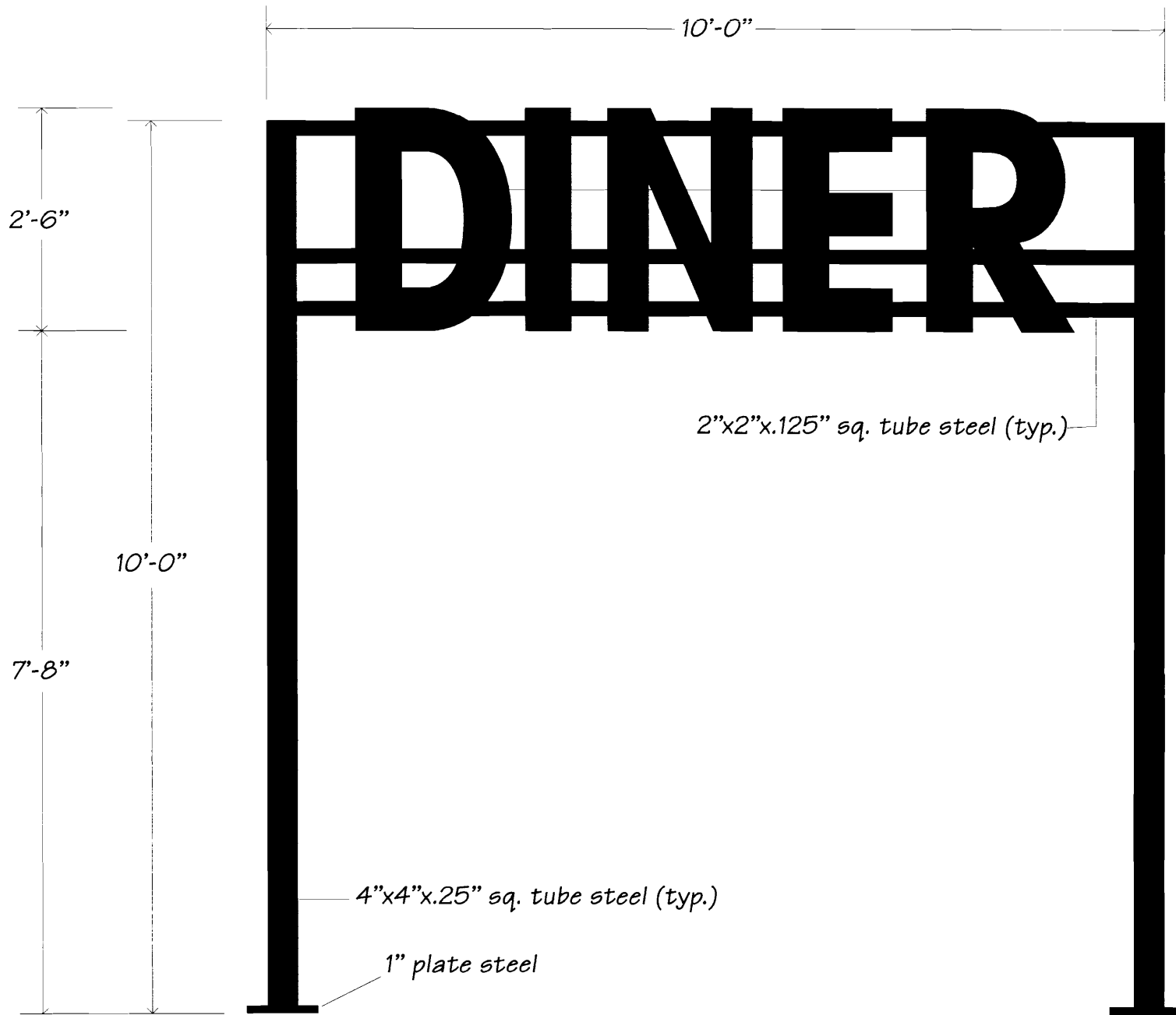
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

<p><b>CERTIFICATE HOLDER</b></p> <p>City Of Portland as additional insured for sign</p>	<p><b>CANCELLATION</b></p> <p>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.</p> <p>AUTHORIZED REPRESENTATIVE Brenda Barriault</p>
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**DNER DNER**

N.T.S.- For concept only



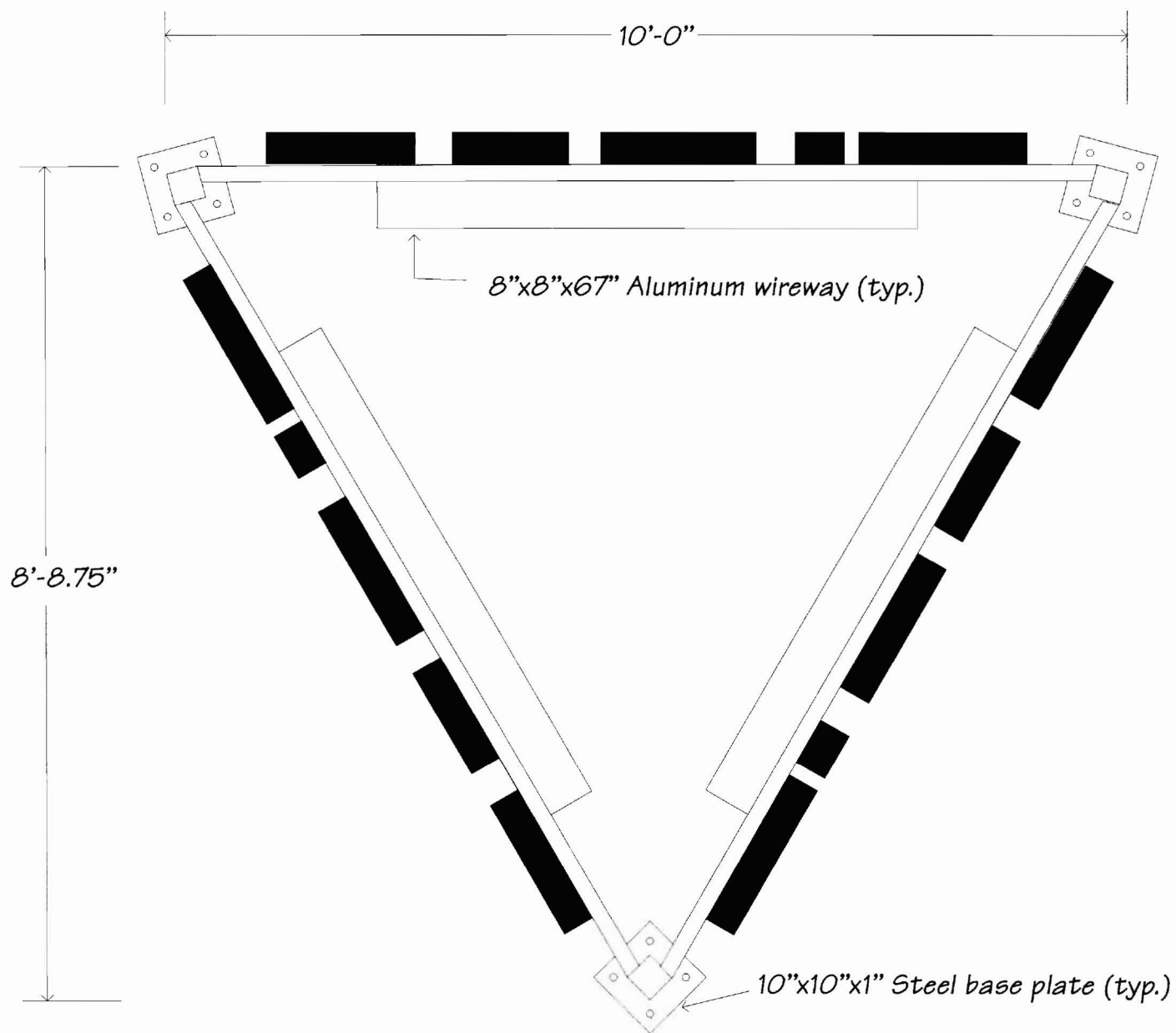


**DRINKER**

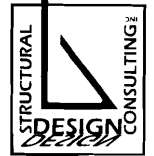
2'-6"

8'-0"

PLAN VIEW

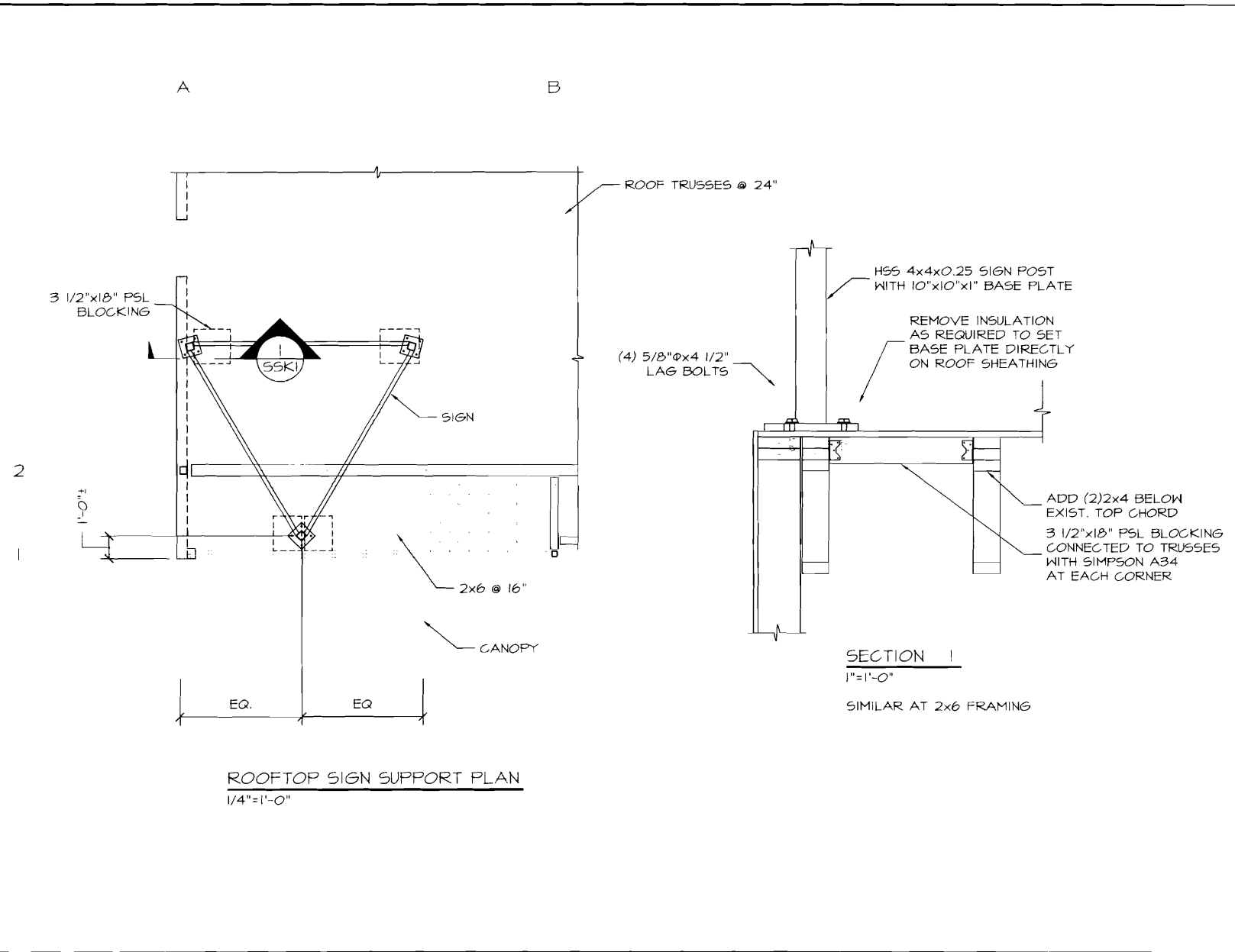


SSKI



MISS PORTLAND DINER  
MARGINAL WAY, PORTLAND, MAINE

revision number	
date	07/10/08



ROOFTOP SIGN SUPPORT PLAN  
1/4"=1'-0"

SECTION 1  
1"=1'-0"  
SIMILAR AT 2x6 FRAMING