

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: 03-1129	Issue Date: 09 23 2003	CEB: 320 A005001
Owner Address: 39 Graystone Ln CITY OF PORTLAND		Phone: 207-700-1183
Contractor Address: 10 Buttonwood St. So. Portland		Phone: 2077991183
Permit Type: Signs - Permanent		
Zone: IM		

Permit Fee: \$94.00	Cost of Work: \$0.00	CEO District: I
FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>Sign</i> Type: <i>Sign</i>
Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Signature: <i>[Signature]</i>
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature: _____ Date: _____		

Owner Name: Crockett Riverside Llc	Contractor Name: Burr Signs
Phone: n/a	Proposed Use: <i>INDUSTRIAL USE</i> Commercial / Warehouse

Proposed Project Description:
 Install 8' x 4' sq. Ft. Internally illuminated sign cabinet and face.
 sq. Ft. internally illuminated sign cabinet and face.

Permit Taken By: SS	Date Applied For: 09/15/2003
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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"/> <i>09/23/03</i> Date: _____	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	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
	Signature: _____ Date: _____		

Zoning Approval

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 _____

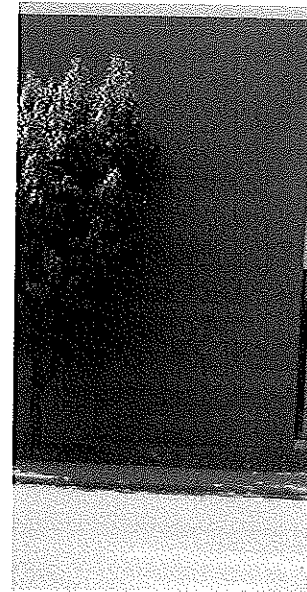
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ DATE _____ PHONE _____

8'-1"

4'-0"



Internally illuminated sign cabinet & face.



SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 460 RIVERSIDE ST. ZONE: I-M

CBL: _____

SINGLE TENANT LOT? YES _____ NO X MULTI TENANT LOT? YES X NO _____
MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES _____ NO X

INFORMATION ON PROPOSED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES _____ NO X DIMENSIONS PROPOSED: _____

BLDG. WALL SIGN? (attached to bldg) YES X NO _____ DIMENSIONS PROPOSED: 4'x8' = 32 sq ft

INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES _____ NO _____ DIMENSIONS: _____

BLDG. WALL SIGN(attached to bldg)? YES X NO _____ DIMENSIONS: 4'x8'

AWNING? YES _____ NO X DIMENSIONS: _____

*for photo
signage - none yet*

LOT FRONTAGE (FEET): 7250
TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET): 37 X 12' high bldg = 444 x 8' = 3552 sq ft

AWNING YES _____ NO X 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: [Signature] DATE: 09/11/03

***** FOR OFFICE USE ONLY *****
Multi-tenant Building
8% max principal facade - 1 per tenant + 1 additional
All other facades 2%

ACORD - CERTIFICATE OF LIABILITY INSURANCE		EXP. DATE	DATE (MM/DD/YY)
PRODUCER		NATIO-4	09/05/03
<p>Barbman Insurance Group Inc 95F Ashley Avenue West Springfield MA 01089</p> <p>J. F. Sullivan Phone No. 413-781-7000 Fax No. 413-733-9545 INSURED</p> <p>National Bath Systems, LLC 27 Berard Drive, Suite 2701 South Burlington VT 05403</p>			
<p>COMPANY A One Beacon America Ins Co.</p> <p>COMPANY B</p> <p>COMPANY C</p> <p>COMPANY D</p>			
<p>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.</p> <p>COMPANIES AFFORDING COVERAGE</p>			
<p>THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.</p>			
CO 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 OWNERS & CONTRACTORS PROT	CBR709911	04/26/05 04/26/04 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 PERSONAL & ADV INJURY \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 COMBINED SINGLE LIMIT \$
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS		
	GARAGE LIABILITY ANY AUTO		
	EXCESS LIABILITY UMBRELLA FORM OTHER THAN UMBRELLA FORM		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR, PARTNER/EXECUTIVE OFFICERS ARE <input type="checkbox"/> INCL <input type="checkbox"/> EXCL OTHER		
<p>DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS</p>			
<p>CITY P38</p> <p>City of Portland 389 Congress Street Portland ME 04101</p>			
<p>CANCELLATION</p> <p>IF ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 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 COMPANY, ITS AGENTS OR REPRESENTATIVES</p> <p>INSURANCE REPRESENTATIVE J. F. Sullivan J. F. Sullivan ACORD CORPORATION 1988</p>			

GEORGE W. CROCKETT
39 GRAYSTONE LANE
PORTLAND, MAINE 04103

207-828-9571

gcrocket2@maine.rr.com

September 8, 2003

Mr. Brian Smith
Bathfitter
190 Riverside St.
Portland, Maine 04103

Dear Brian

This letter is to authorize you to install a sign at your new space at 460
Riverside Street to replace the Ruino sign that is there now.


Sincerely,

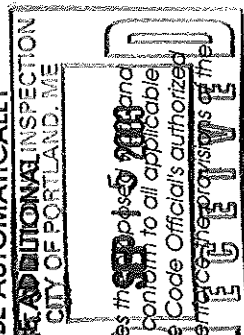


George W. Crockett
Owner
460 Riverside St.

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: 460 RIVERSIDE ST.		Square Footage of Lot
Total Square Footage of Proposed Structure 32		
Tax Assessor's Chart, Block & Lot Chart# 320 Block# A Lot# 005	Owner: GEORGE CROCKETT	Telephone: 898-9571
Lessee/Buyer's Name (If Applicable) BATH FITTER 460 RIVERSIDE ST PORTLAND, ME	Applicant name, address & telephone: BURR SIGNS 10 BUTTOWNWOOD ST. SO. PORTLAND, ME 04106 799-1183	Total s.f. of signage x \$1.00 per s.f. plus \$30.00 = Total Fee: 6430 Awning Fee = Cost Of Work: \$ Total Fee: \$ 9400
Current use: LIGHT INDUSTRIAL		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: RETAIL/WAREHOUSE		
Project description: REPLACE EXISTING SIGN WITH NEW		
Contractor's name, address & telephone: BURR SIGNS - 799-1183		
Who should we contact when the permit is ready: SAUR		
Mailing address: 10 BUTTOWNWOOD ST. SO. PORTLAND, ME 04106		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: 799-1183 <i>cell</i>		
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT. WE MAY REQUIRE ADDITIONAL INSPECTION INFORMATION IN ORDER TO APPROVE THIS PERMIT.		
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the SEP 15 2003 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: 09/11/03



This is NOT a permit, you may not commence ANY work until the permit is issued.

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Business Name: n/a	Contractor Name: Burr Signs	Owner Address: 39 Graystone Ln	Phone: 207-700-1183	
Lessee/Buyer's Name: n/a	Phone: n/a	Contractor Address: 10 Buttonwood St. So. Portland	Phone: (207) 799-1183	
Proposed Use: industrial uses / Warehouse; Install 8' x 4' sq. Ft. internally illuminated sign cabinet and face.	Permit Type: Signs - Permanent	Proposed Project Description: Install 8' x 4' sq. Ft. Internally illuminated sign cabinet and face.		
Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 09/23/2003	Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Mike Nugent	Approval Date: 09/25/2003	Ok to Issue: <input checked="" type="checkbox"/>