

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: 021078CT	Issue Date: 7 2002	CBL: 340 D004001
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Location of Construction: 1435 Forest Ave	Owner Name: Russell Filomena & Robert Jis	Owner Address: 25b Winslow Rd PORTLAND
Business Name: Burr Signs	Contractor Name: Burr Signs	Contractor Address: 10 Buttonwood St. So. Portland
Lessee/Buyer's Name:	Phone: 2077991183	Phone: 750-3176
	Permit Type: Signs - Permanent	Zone: E3

Past Use: Restaurant Repair - Feed takeout less than 9 seats	Proposed Use: Restaurant	Permit Fee: \$100.00
		Cost of Work: \$100.00
		CEO District: 1
		INSPECTION: Use Group: NA Type: NA

Proposed Project Description: Erect (2) 2.5"x8' and (1) 5'x6' Signs	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
		Date: 10/10/02

Permit Taken By: gad	Date Applied For: 09/18/2002
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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 style="text-align: center;">Zoning Approval</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> 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 </td> <td style="width: 50%;"> 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 </td> </tr> <tr> <td style="vertical-align: bottom;"> Date: 10/10/02 </td> <td style="vertical-align: bottom;"> Date: 10/10/02 </td> </tr> </table>	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	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	Date: 10/10/02	Date: 10/10/02
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Date: 10/10/02	Date: 10/10/02				

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	Major <input type="checkbox"/> Minor <input type="checkbox"/> Denied Date: 10/10/02	Date: 10/10/02
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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

02-1073

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

Signage 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>1435 FOREST AVE PORTLAND, ME 04103</u>		Total Square Footage of Proposed Structure		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot	Owner:	Applicant name, address & telephone:		Telephone:	
Chart# <u>340</u> Block# <u>D</u> Lot# <u>004</u>	<u>Flowena Russell</u>	<u>Robert Russell</u> <u>1435 FOREST AVE</u> <u>207-878-8989</u>		<u>750-3176</u>	
Lessee/Buyer's Name (if Applicable) <u>FOREUSE GARDENS INC</u>		Total s.f. of signage <u>70</u> x <u>70</u> plus <u>\$30.00</u> base fee Fee: \$ <u>100</u>			
Current use: <u>RESTAURANT</u>		If the location is currently vacant, what was prior use: <u>RESTAURANT</u>			
Approximately how long has it been vacant: <u>1</u> week		Proposed use: <u>RESTAURANT</u>			
Project description: <u>21' 2.5' x 8' and (1) 5' x 6'</u>		Contractor's name, address & telephone: <u>BPP SUBS 16 Buttonwood ST, SOUTH PORTLAND 04106</u>			
Who should we contact when the permit is ready: <u>CHI LI</u>		Mailing address: <u>1435 FOREST AVE PORTLAND ME 04103</u>			

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 \$50.00 fee if any work starts before the permit is picked up. Phone: 878-8989 X X

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL 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 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: [Signature] Date: 9/6/02

This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME
SEP 18 2002

Application ID Number: 2-073

Department: Zoning

Status: Approved with Conditions

Reviewer: Marge Schmuckal

Comments: 1435 Forest Ave

Approval Date: 10/01/2002

Given On Date: 09/19/2002

OK to Issue Permit

Name: Marge Schirlickal

Date: 10/01/2002

Date 2:

Date 2:

Conditions Section:

This current use of parcel is considered to be illegal and conformity within a residential zone. This use may not be expanded in any way with out Zoning Board Approval. A retail use by definition does allow food take-out and some seating (up to nine seats). This is NOT a restaurant by definition and may NOT be changed to a restaurant.

This permit is only permitting the use of parcel for the purpose of the zoning ordinance. Legal nonconforming uses shall NOT allow the increase in square foot of structure.

Create Date: 09/19/2002

By: gsd

Update Date: 10/01/2002

By: mes

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 1435 FOREST AVE PORTLAND ME ZONE: 04103 Residential

OWNER: FOOTANE BARREN INCORPORATE

APPLICANT: CHILLI

ASSESSOR NO. _____

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES NO

FREESTANDING SIGN? (ex Pole Sign) YES NO DIMENSIONS _____ HEIGHT _____

MORE THAN ONE SIGN? YES NO DIMENSIONS _____ HEIGHT _____

SIGN ATTACHED TO BLDG.? YES NO DIMENSIONS 5' x 11' HEIGHT 2'6" x 8'

MORE THAN ONE SIGN? YES NO DIMENSIONS 2'6" x 8' HEIGHT 8'

AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK 8'

IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT?

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

5' x 6'
2'6" x 8" - (2)

*** TENANT BLDG. FRONTAGE (IN FEET): 45'

REQUIRED INFORMATION

AREA FOR COMPUTATION

Reference to 1435

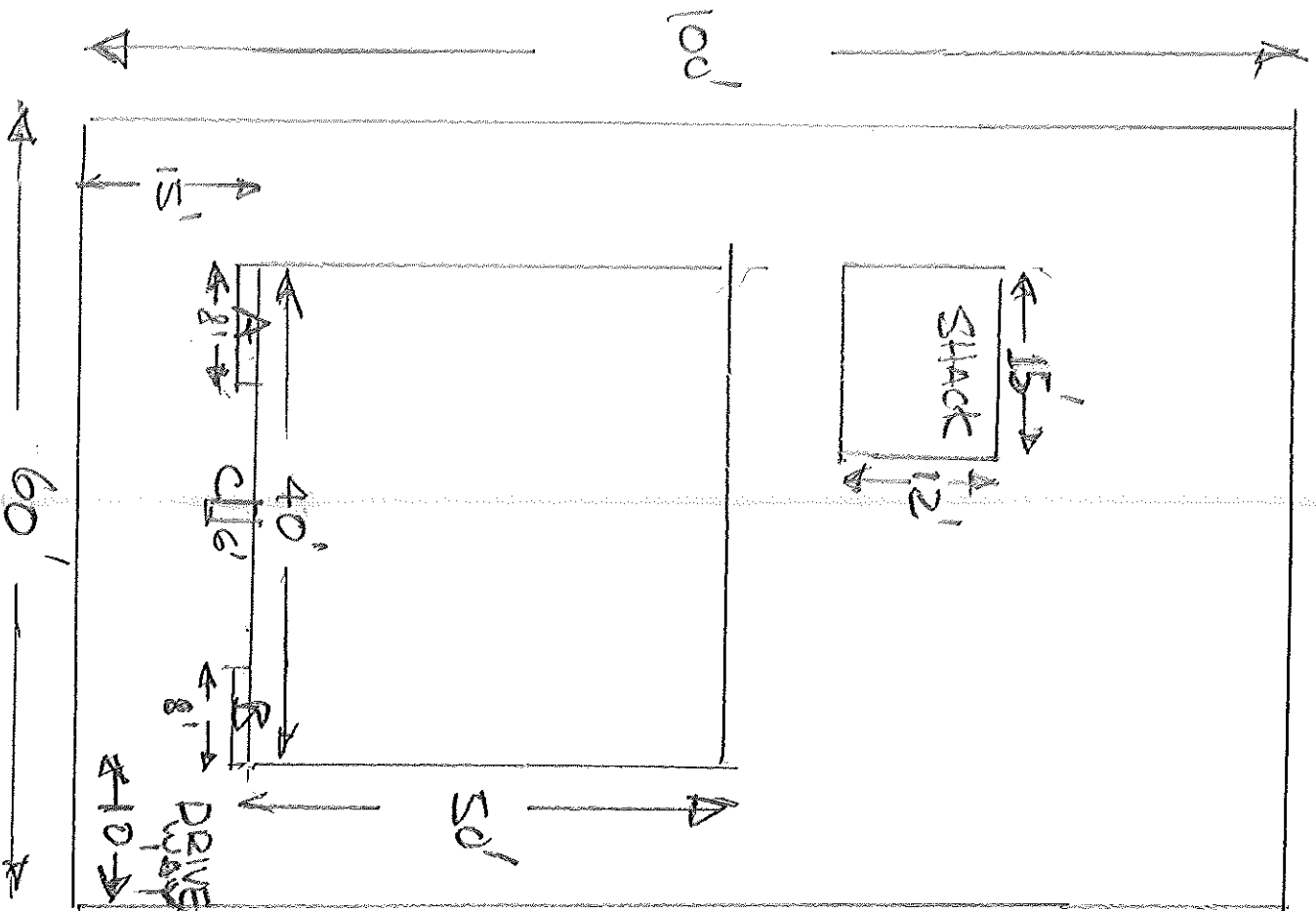
YOU SHALL PROVIDE:

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF PROPOSED ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: _____

DATE: 9/6/02

SKETCH PLAN



- A 2.5' x 8'
- B 2.5' x 8'
- C 5' x 6'

replacing signs

A, B & C ARE EXISTING SIGNS
 PROPOSED SIGNS ARE THE SAME WITH
 DIFFERENT NAME



This certifies that
STATE FARM
INSURANCE

- STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
- STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois
- STATE FARM FIRE AND CASUALTY COMPANY, Scarborough, Ontario
- STATE FARM FLORIDA INSURANCE COMPANY, Winter Haven, Florida
- STATE FARM LLOYDS, Dallas, Texas

CERTIFICATE OF INSURANCE

insures the following policyholder for the coverages indicated below:

Name of policyholder FORTUNE GARDEN, INC.

Address of policyholder 1435 FOREST AVE. PORTLAND, ME. 04103

Location of operations same

Description of operations MERCHANT: TAKE OUT FOOD

The policies listed below have been issued to the policyholder for the policy periods shown. The insurance described in these policies is subject to all the terms exclusions, and conditions of those policies. The limits of liability shown may have been reduced by any paid claims.

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY (at beginning of policy period)
		Effective Date	Expiration Date	
binder This insurance includes:	<input type="checkbox"/> Comprehensive <input type="checkbox"/> Business Liability <input type="checkbox"/> Products - Completed Operations <input type="checkbox"/> Contractual Liability <input type="checkbox"/> Underground Hazard Coverage <input type="checkbox"/> Personal Injury <input type="checkbox"/> Advertising Injury <input type="checkbox"/> Explosion Hazard Coverage <input type="checkbox"/> Collapse Hazard Coverage	09/1/02	09/12/03	Each Occurrence \$ 1,000,000 General Aggregate \$ 2,000,000 Products - Completed Operations Aggregate \$
		EXCESS LIABILITY <input type="checkbox"/> Umbrella <input type="checkbox"/> Other		BODILY INJURY AND PROPERTY DAMAGE (Combined Single Limit) Each Occurrence \$ 1,000,000 Aggregate \$ 2,000,000 Part 1 STATUTORY Part 2 BODILY INJURY Each Accident \$ Disease Each Employee \$ Disease - Policy Limit \$
POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD Effective Date Expiration Date		LIMITS OF LIABILITY (at beginning of policy period)

THE CERTIFICATE OF INSURANCE IS NOT A CONTRACT OF INSURANCE AND NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR ALTERS THE COVERAGE APPROVED BY ANY POLICY DESCRIBED HEREIN.

CITY OF PORTLAND
389 CONGRESS ST.
PORTLAND, ME, 04101

Name and Address of Certificate Holder

If any of the described policies are canceled before its expiration date, State Farm will try to mail a written notice to the certificate holder _____ days before cancellation. If however, we fail to mail such notice, no obligation or liability will be imposed on State Farm or its agents or representatives.

Signature of Authorized Representative

Title

Agent's Code Stamp

9-12-02
Date

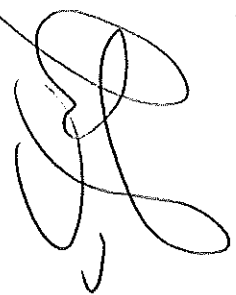
TO: CITY OF PORTLAND
ZONING DEPT

FROM: FORTUNE GARDENS INC.

DEAR SIR,

THIS IS TO CERTIFY THAT
FORTUNE GARDENS TAKE OUT RETAIL
WILL NOT HAVE SEATING CAPACITY
MORE THAN NINE. THANK YOU
FOR YOUR ATTENTION.

REBARDS



PRESIDENT

SEPT 30, 02

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND, ME
OCT 1 2002
RECEIVED

To: THE CITY DEPARTMENT DEPARTMENT

PLEASE BE INFORMED, FORTUNE
GARDEN INCORPORATED IS PERMITTED
TO INSTALL SIGNS ON THE
BUILDING. THANK YOU FOR YOUR
ATTENTION.

REGARDS

Filomena M. Russell

Filomena M. Russell

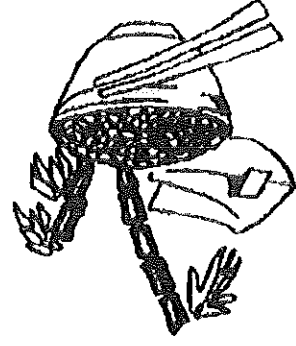
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878-8989 園和園

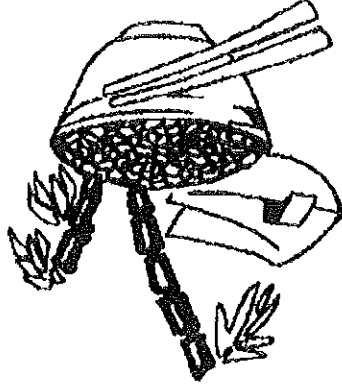
CHINESE TAKE-OUT

FORTUNE GARDEN



25, 2

CHINESE Take-Out



FORTUNE GARDEN 園和園

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