



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION 1 Monument Square 7th-9th-10th floors

Issued to Fernar & Co./Pierce Atwood

Date of Issue October 15, 1992

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No 923503/92 has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, written or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

7th-9th-10th floors

Commercial/Professional

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved:

10/15/92  
(Date)

Inspector

Director of Buildings

Notice: This seal identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or leasee for one dollar.

023603

Permit # \_\_\_\_\_ City of Portland **BUILDING PERMIT APPLICATION** Fee 385.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Kernard & Co./Pierce Atwood Phone # \_\_\_\_\_  
Address: 115N. 1st Street, Sq. 2007  
LOCATION OF CONSTRUCTION: 1 Monument Square, 7th, 9th & 10th floors  
Contractor: W.A.J. Brewer Sub: \_\_\_\_\_  
Address: PO Box 3035 Portland - 04101 Phone # 797-7534 Richard  
Est. Construction Cost: 73,000.00 Proposed Use: Comm Bldg w/int r. no  
Past Use: Comm Bldg/Prof  
# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
# Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
Explain Conversion: Interior Renovations to Comm/Prof Bldg

For Official Use Only	
Date: <u>April 9, 1992</u>	Subdivision: _____
Inside Fire Limits: _____	Name: _____
Bldg Code: _____	Ownership: _____
Time Limit: _____	Public _____
Estimated Cost: _____	CITY OF PORTLAND

PERMIT ISSUED  
APR 29 1992

Zoning: B-3  
Street Frontage Provided: \_\_\_\_\_  
Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
Review Required:  
Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
Special Exception \_\_\_\_\_  
Other: WPA - 7-11-92 (Explain)

Foundation:  
1. Type of Soil: \_\_\_\_\_  
2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
3. Footing Size: \_\_\_\_\_  
4. Foundation Size: \_\_\_\_\_  
5. Other: \_\_\_\_\_

Floor:  
1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
2. Girder Size: \_\_\_\_\_  
3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
7. Other Material: \_\_\_\_\_

Exterior Walls:  
1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
2. No. windows \_\_\_\_\_  
3. No. doors \_\_\_\_\_  
4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
6. Corner Posts Size \_\_\_\_\_  
7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
10. Masonry Materials \_\_\_\_\_  
11. Metal Materials \_\_\_\_\_

Interior Walls:  
1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
3. Well Covering Type \_\_\_\_\_  
4. Fire Wall if required \_\_\_\_\_  
5. Other Materials \_\_\_\_\_

Ceiling:  
1. Ceiling Joists Size: \_\_\_\_\_ Not in District nor Landmark.  
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Does not require review.  
3. Type Ceiling: \_\_\_\_\_  
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_ Requires review.  
5. Ceiling Height: \_\_\_\_\_

Roof:  
1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_ Action: Approved.  
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Approved with conditions.  
3. Roof Covering Type: \_\_\_\_\_  
Date: 4/9/92  
Signature: [Signature]

Chimneys:  
Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_

Heating:  
Type of Heat: \_\_\_\_\_

Electrical:  
Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing:  
1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
2. No. of Tubs or Showers \_\_\_\_\_  
3. No. of Flushes \_\_\_\_\_  
4. No. of Lavatories \_\_\_\_\_  
5. No. of Other Fixtures: \_\_\_\_\_

Swimming Pools:  
1. Type: \_\_\_\_\_  
2. Pool Size: \_\_\_\_\_  
3. Must conform to National Electrical Code and State Code.

PERMIT ISSUED WITH LETTER  
Richard L. Miller  
Date: April 9, 1992  
CEO's District \_\_\_\_\_

White - Tax Assessor

CONTINUED TO REVERSE SIDE  
Ivory Tag - CEO

[Signature]

N  
▲

PLOT PLAN

**FEES (Breakdown From Front)**

Base Fee \$ \_\_\_\_\_  
 Subdivision Fee \$ \_\_\_\_\_  
 Site Plan Review Fee \$ \_\_\_\_\_  
 Other Fees \$ \_\_\_\_\_  
 (Explain) \_\_\_\_\_  
 Late Fee \$ \_\_\_\_\_

Type	Inspection Record	Date
Progress Insp -		4/20/92
"	"	5/12/92
"	"	6/25/92
"	"	7/23/92
"	"	8/20/92
"	"	9/16/92

COMMENTS

9/14/92. Renovation work about completed. will call E.D. & I for final insp. in approx. one week -  
 10/14/92 Completed 125 PEG TUB with LT Germany - S&T lights need Hubs  
 Certificate of Occupancy & authorized 7,910 sq ft

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 has authorized agent and 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 or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT

ADDRESS

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

Inspection Services  
Samuel P. Hoffses  
Chief



Planning and Urban Development  
Joseph E. Gray Jr.  
Director

## CITY OF PORTLAND

April 28, 1992

M.R. Brewer  
P.O. Box 3035  
Portland, ME 04101

RE: 1 Monument Square 7th, 9th, 10th floors

Dear Sir:

Your application to make interior renovations has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy can be issued until all requirements of this letter are met.

1. All newly created areas shall be provided with automatic fire detection rate of rise as a minimum.
2. All automatic electric doors shall be operable upon loss of power in accordance with Section 5-2.1.5 of N.P.A 101 Life Safety Code.
3. Room 902 and adjacent room shall be provided with smoke detection in accordance with Section 10-9 if young children are to use the area and are possibly going to use the space for sleeping at any time.
4. Janitors closet E1004 shall be protected in accordance with Section 26-3.2.
5. Information on proposed location for relocated fire hose cabinets shall be provided to Fire Prevention Bureau for approval.
6. Exit signs and emergency lighting shall be provided in accordance with Section 5-10 and 5-9.
7. Portable fire extinguishers shall be provided in accordance with NFPA #10.
8. Present level of sprinkler protection shall be maintained as a minimum.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

  
Samuel P. Hoffses  
Chief of Inspection Services

jcf

cc: Lt. Wallace Garroway, Fire Prevention Bureau

924311

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$35 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

Applicant: Congress Federal Trust Phone # 772-2257  
Address: c/o Finard & Co- 704 Maine Savings Pl-Ptld, ME

LOCATION OF CONSTRUCTION: One Monument Square

Contractor: Union Oil Co. Sub: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Est. Construction Cost: \_\_\_\_\_ Proposed Use: office bldg w tank

\_\_\_\_\_ Past Use: office bldg

# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_

Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_

# Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lnt Size: \_\_\_\_\_

Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_

Explain Conversion: install a/g tank- #2 oil- 1,000 gals

Foundation: (temporary - to two months)

1. Type of Soil: \_\_\_\_\_
2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_
3. Footings Size: \_\_\_\_\_
4. Foundation Size: \_\_\_\_\_
5. Other \_\_\_\_\_

Floor: \_\_\_\_\_ Sills must be anchored.

1. Sills Size: \_\_\_\_\_
2. Girde Size: \_\_\_\_\_
3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_ Spacing 16" O.C.
4. Joists Size: \_\_\_\_\_
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
7. Other Material: \_\_\_\_\_

Exterior Walls:

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. No. windows \_\_\_\_\_
3. No. Doors \_\_\_\_\_
4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_
6. Corner Posts Size \_\_\_\_\_
7. Insulation Type \_\_\_\_\_ Rize \_\_\_\_\_
8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_
9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_
10. Masonry Materials \_\_\_\_\_
11. Metal Materials \_\_\_\_\_

Interior Walls:

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
3. Wall Covering Type \_\_\_\_\_
4. Fire Wall if required \_\_\_\_\_
5. Other Materials \_\_\_\_\_

hite - Tax Assessor

**For Official Use Only**

04101  
Date: 11/6/92  
Subdivision: \_\_\_\_\_  
Name: \_\_\_\_\_  
Inside Fire Limits: \_\_\_\_\_  
Bldg Code: \_\_\_\_\_  
Time Limit: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
Owner: \_\_\_\_\_  
Lot: \_\_\_\_\_  
City of Portland

NOV 10 1992

Zoning: Street Frontage Provided: \_\_\_\_\_  
Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

Review Required:  
Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
Special Exception \_\_\_\_\_  
Other (Explain): WNA - 11-6-92

Celling:  
1. Ceiling Joists Size: \_\_\_\_\_  
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
3. Type Ceilings: \_\_\_\_\_ Size \_\_\_\_\_  
4. Insulation Type: \_\_\_\_\_  
5. Ceiling Height: \_\_\_\_\_

Roof:  
1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_  
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
3. Roof Covering Type \_\_\_\_\_

Chimneys: Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_

Heating: Type of Heat: \_\_\_\_\_

Electrical: Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing: Yes \_\_\_\_\_ No \_\_\_\_\_  
1. Approval of soil test if required \_\_\_\_\_  
2. No. of Tubs or Showers \_\_\_\_\_  
3. No. of Flushes \_\_\_\_\_  
4. No. of Lavatories \_\_\_\_\_  
5. No. of Other Fixtures \_\_\_\_\_

Swimming Pools:  
1. Type: \_\_\_\_\_  
2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
3. Must conform to National Electrical Code and State Law.

Permit Received By: Louise E Chase Date: 11/6/92

Signature of Applicant: Spencer Jones WITH REQUIREMENTS

CEO's District: 2

CONTINUED TO REVERSE SIDE

Ivory Tng - CEO Mr. J. J. V. J.

PERMIT ISSUED WITH REQUIREMENTS

PERMIT ISSUED WITH REQUIREMENTS

981097

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee 10.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Finard, Murray Phone # \_\_\_\_\_

Address: \_\_\_\_\_

LOCATION OF CONSTRUCTION 1 Monument Square

Contractor: Portland Pump Co. Sub: \_\_\_\_\_

P.O. Box 1180 Scarborough 04074  
Address: \_\_\_\_\_ Phone # 883-4317

Est. Construction Cost: \_\_\_\_\_ Proposed Use: Office w/o tank

Past Use: office

# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_

Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_

# Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size \_\_\_\_\_

Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_

Explain Conversion Remove 1 underground tank

**Foundations:**

1. Type of Soil: \_\_\_\_\_
2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_
3. Footings Size: \_\_\_\_\_
4. Foundation Size: \_\_\_\_\_
5. Other: \_\_\_\_\_

**Floor:**

1. Sills Size: \_\_\_\_\_ Sills must be anchored.
2. Girder Size: \_\_\_\_\_
3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_
4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
7. Other Material: \_\_\_\_\_

**Exterior Walls:**

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. No. windows \_\_\_\_\_
3. No. Doors \_\_\_\_\_
4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_
6. Corner Posts Size \_\_\_\_\_
7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_
9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_
10. Masonry Materials \_\_\_\_\_
11. Metal Material: \_\_\_\_\_

**Interior Walls:**

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
3. Wall Covering Type \_\_\_\_\_
4. Fire Wall if required \_\_\_\_\_
5. Other Materials \_\_\_\_\_

PERMIT ISSUED WITH REQUIREMENTS

White-Tax Assessor

Yellow-GPCOG

White Tag - CEO

2

Copyright GPCOG 1988

**For Official Use Only**

Date Nov 17, 1993 Subdivision: \_\_\_\_\_  
 Inside Fire Lambs \_\_\_\_\_ Name: NOV 23 1993  
 Bldg Code \_\_\_\_\_ Lot \_\_\_\_\_  
 Time Limit \_\_\_\_\_ Ownership: \_\_\_\_\_  
 Estimated Cost \_\_\_\_\_

**Zoning:**

Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

**Review Required:**

Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other: WRA 211-18-93

**Ceiling:**

1. Ceiling Joists Size: \_\_\_\_\_
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ **HISTORIC PRESERVATION**  
Not in District nor Landmark
3. Type Ceiling: \_\_\_\_\_ **Does not require review**
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
5. Ceiling Height: \_\_\_\_\_ **Requires Review**

**Roof:**

1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ **Approved**
3. Roof Covering Type \_\_\_\_\_ **Approved with Conditions**

**Chimneys:**

Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_ Date: \_\_\_\_\_  
 Sign: \_\_\_\_\_

**Heating:**

Type of Heat: \_\_\_\_\_

**Electrical:**

Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

**Plumbing:**

1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_
2. No. of Tubs or Showers \_\_\_\_\_
3. No. of Flushes \_\_\_\_\_
4. No. of Lavatories \_\_\_\_\_
5. No. of Other Fixtures \_\_\_\_\_

**Swimming Pools:**

1. Type: \_\_\_\_\_
2. Pool Size: \_\_\_\_\_ **PERMIT ISSUED**
3. Must conform to National Electrical Code and State Law.

Permit Received By Mary Gispik

Signature of Applicant \_\_\_\_\_ Date Nov 17, 1993

Signature of CEO Jeff Wilson Date \_\_\_\_\_

Inspection Dates \_\_\_\_\_

040526

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee 145.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
 Please fill out any part which applies to job Proper plans must accompany form.

Owner Finard & Company Phone # 772-2257  
 Address: Northeast Cellular P.O. Box 300 Gray, ME 04039  
 LOCATION OF CONSTRUCTION 1 Monument Sq. attn: Steve  
 Contractor: \_\_\_\_\_ Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Est. Construction Cost: 25,000.00 Proposed Use: office w/antenna  
 Past Use: office  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion: Install Antenna as per plans

032-K-012  
 Foundation:

1. Type of Soil: \_\_\_\_\_
2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_
3. Footings Size: \_\_\_\_\_
4. Foundation Size: \_\_\_\_\_
5. Other \_\_\_\_\_

Floors:

1. Sills Size: \_\_\_\_\_ Gills must be anchored.
2. Girder Size: \_\_\_\_\_
3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_
4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
7. Other Material: \_\_\_\_\_

Exterior Walls:

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. No. windows \_\_\_\_\_
3. No. Doors \_\_\_\_\_
4. Header Sizes \_\_\_\_\_
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_
6. Corner Posts Size \_\_\_\_\_
7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_
9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_
10. Masonry Materials \_\_\_\_\_
11. Metal Materials \_\_\_\_\_

Interior Walls:

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. Header Sizes \_\_\_\_\_ Spacing \_\_\_\_\_
3. Wall Covering Type \_\_\_\_\_
4. Fire Wall if required \_\_\_\_\_
6. Other Materials \_\_\_\_\_

White - Tax Assessor

**For Official Use Only**

Date \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_  
 Bldg Code \_\_\_\_\_  
 Time Limit \_\_\_\_\_  
 Estimated Cost \_\_\_\_\_

Zone: B-3  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other (Explain) WDA - 6/11/94

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_ Not in District nor Landmark  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing does not require review  
 3. Type Ceilings: \_\_\_\_\_ Requires Review  
 4. Insulation Type \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

Roof:  
 1. Truss or Rafter Size \_\_\_\_\_ Action: \_\_\_\_\_ Approved \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_

Chimneys:  
 Type: \_\_\_\_\_ Number of Fire Places: \_\_\_\_\_

Heating:  
 Type of Heat: \_\_\_\_\_  
 Electrical:  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing:  
 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Tubs or Showers: \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

Swimming Pools:  
 1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By Max Greik  
 Signature of Applicant Steve McCandless Date 6 May '94  
 CEO's District 2 Steve McCandless

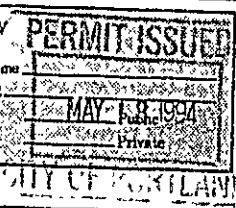
CONTINUED TO REVERSE SIDE  
 Ivory Tag - CEO MS Mc 7 6/11/94  
12 MS Mc 7 6/11/94  
3 B. Andrews

040447

Permit # 040447 City of Portland BUILDING PERMIT APPLICATION Fee \$296.20 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Casco Northern Bank Phone # 774-8221  
Address: One Monument Sq - Ptd, ME 04101  
LOCATION OF CONSTRUCTION Or ment Sq  
Contractor: Barlo Signs Co Phone # 282-2400  
Address: 92 Industrial Park Phone # Saco, ME 04072  
Est. Construction Cost: \_\_\_\_\_ Proposed Use: bank w 10 signs  
Fast Use: bank  
# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
# Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
Explain Conversion erect 10 signs - 0 - 50'x6' 1 - 10'x2'

For Official Use Only  
Date 3/17/94 Subdivision \_\_\_\_\_  
Inside Fire Lines: \_\_\_\_\_ Name \_\_\_\_\_  
Bldg Code: \_\_\_\_\_ Lic \_\_\_\_\_  
Time Limit: \_\_\_\_\_ Ownership \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
Zoning: B-3 PAD  
Street Frontage Provided: \_\_\_\_\_  
Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
Review Required: \_\_\_\_\_  
Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
Special Exception \_\_\_\_\_  
Other (Explain) WDA-223-22-94



Foundations: 1- 8'x3' Ceiling: 2- 24'x2'  
1. Type of Soil \_\_\_\_\_  
2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
3. Footings Size: \_\_\_\_\_  
4. Foundation Size: \_\_\_\_\_  
5. Other \_\_\_\_\_  
Floors:  
1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
2. Girder Size: \_\_\_\_\_  
3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
4. Joists Size: \_\_\_\_\_ Spacing 16" O.C  
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
7. Other Material \_\_\_\_\_

1. Ceiling Joists Size: \_\_\_\_\_ HISTORIC PRESERVATION  
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
3. Type Ceilings: \_\_\_\_\_  
4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
5. Ceiling Height \_\_\_\_\_  
Roof:  
1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_  
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
3. Roof Covering Type \_\_\_\_\_  
Chimneys:  
Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_ Date: \_\_\_\_\_  
Heating:  
Type of Heat: \_\_\_\_\_  
Electrical:  
Services Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_  
Plumbing:  
1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
2. No. of Tubs or Showers \_\_\_\_\_  
3. No. of Flushes \_\_\_\_\_  
4. No. of Lavatories \_\_\_\_\_  
5. No. of Other Fixtures \_\_\_\_\_  
Swimming Pools:  
1. Type: \_\_\_\_\_  
2. Pool Size: \_\_\_\_\_ Square Footage \_\_\_\_\_  
3. Must conform to National Electrical Code and State Law.

Exterior Walls:  
1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
2. No. windows \_\_\_\_\_  
3. No. Doors \_\_\_\_\_  
4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
6. Corner Posts Size \_\_\_\_\_  
7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
10. Masonry Materials \_\_\_\_\_  
11. Metal Materials \_\_\_\_\_  
Interior Walls:  
1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
3. Wall Covering Type \_\_\_\_\_  
4. Fire Wall if required \_\_\_\_\_  
5. Other Materials \_\_\_\_\_

Permit Received By Louise E. Chase  
Signature of Applicant Edward Blumenthal Date 3/17/94  
CEO's District \_\_\_\_\_

CONTINUED TO REVERSE SIDE  
Ivory Tag - CEO Ed Blumenthal  
ok P.A.D. 57  
Conditions attached letter D. Andrews

White - Tax Assessor



Planning & Urban Development

Joseph E. Gray Jr.  
Director

CITY OF PORTLAND

May 17, 1994

Mr. Edward Blumenthal  
Barlo Signs Company  
92 Industrial Park Road  
Saco, ME 04072

Re: Signage for Casco Northern Bank; One Monument Square

Dear Mr. Blumenthal:

On Friday, May 13th, the Portland Planning Authority granted approval for erection of 10 signs at Casco Northern Bank's headquarters at One Monument Square. The approval is subject to the following conditions:

- 1) All building signs, other than the three located at the Temple Street drive-through addition shall be of bronze finish. The Temple Street signs may be colored as described in the application materials.
- 2) Regarding the wall sign along the Temple Street drive-through extension, if Casco Bank elects to go to a white letter, the size the of letters should not exceed 16 inches. If bronze-finish letters are used, the letter size could be increased to 14 inches.

The approval is based on the submitted application materials on file in the Planning Department. Should you wish to revise your signage plan in any way, an amended application should be filed with the Department.

Sincerely,

  
Joseph E. Gray, Jr.

cc: Deborah Andrews, Senior Planner  
William Giroux, Zoning Administrator  
✓ P. Samuel Hoffses, Chief of Building Inspections

**City of Portland, Maine - Building or Use Permit Application** 239 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <b>One Monument Square</b>		Owner: <b>Finard and Company</b>		Phone:
Owner Address:		License/Buyer's Name: <b>Fey Bank</b>	Phone:	Business Name:
Contractor Name: <b>Signature Signs</b>		Address:		Phone:
Past Use:		Proposed Use: <b>erect new signage</b>	COST OF WORK: \$	PERMIT FEE: \$47.00
Proposed Project Description: <b>Erect new signage (3) 1- 2' x 10' (new face) 2- 35 sq. ft signs</b>		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: <b>4</b> Use Group: 'Type': <b>NO CA 9/11</b>
Permit Taken By: <b>Victoria A. Dover</b>		Date Applied For: <b>March 28, 1996</b>		Signature: <b>D. Anderson</b> Date: <b>4/2/96</b>

Permit No: **960579**

**PERMIT ISSUED**

Permit Issued:  
**JUN 21 1996**

**CITY OF PORTLAND**

Zone: **B-3** CBL:

Zoning Approval: **4/3/96**

Special Zone or Review:

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan major  minor  minor

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- 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.

*Call when ready.*

**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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: *Keith Morin* P. O. Box 1023 Portland 04104 ✓ 883-2500 3/28/96

ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: **Signature signs** PHONE:

Zoning Appeal

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

Historic Preservation

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:

Approved  
 Approved with Conditions  
 Denied

Date: **3/28/96**

CEO DISTRICT: **1**

*T. M. ...*

CITY OF PORTLAND, MAINE

FIRE DEPARTMENT

Monument Way, Inc.

1 Monument Square

Portland, Maine 04111

RE: Fire at 1 Monument Square

Mr. Chris McLain

On 6/27/93, a fire occurred in the building listed above, of which you are reported to be the owner(X).

If permanent repair work is required for this building, you must obtain a permit from the Building and Inspection Division in City Hall before starting such work.

Very truly yours,

Joseph E. Thomas, Jr.

Chief  
Portland Fire Department

cc Building and Inspection Division  
City Assessor's Office

# ELECTRICAL PERMIT

## City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical code and the following specification:

Date 10 Oct 95

LOCATION: 1 Monument Sq - 5th fl

Permit # 2436

OWNER N.Y. Life Ins. ADDRESS \_\_\_\_\_

							TOTAL EACH FEE	
OUTLETS	20	Receptacles	Switches				20	4.00
FIXTURES	(number of)	Incandescent	fluorescent				.20	
		fluorescent strip					.20	
SERVICES		Overhead		TTL AMPS TO	800		15.00	
		Underground			800		15.00	
TEMPORARY SERV.		Overhead		AMPS OVER	800		25.00	
		Underground			800		25.00	
METERS	(number of)						1.00	
MOTORS	(number of)						2.00	
RESID/COM		Electric units					1.00	
HEATING		oil/gas units					5.00	
APPLIANCES		Ranges	Cook Tops	Wall Ovens			2.00	
		Water heaters	Fans	Dryers			2.00	
Disposals		Dishwasher	Compactors	Others (denote)			2.00	
MISC. (number of)		Air Cond/win					3.00	
		Air Cond/cent					10.00	
		Signs					5.00	
		Pools					10.00	
		Alarms/res					5.00	
		Alarms/com					15.00	
		Heavy Duty					2.00	
		Outlets					25.00	
		Circus/Carnv					5.00	
		Alterations					15.00	
		Fire Repairs					1.00	
		E Lights					20.00	
		E Generators					4.00	4.00
		Panels				1	5.00	
TRANSFER		0-25 Kva					8.00	
		25-200 Kva					10.00	
		Over 200 Kva					25.00	
TOTAL AMOUNT DUE								
MINIMUM FEE							25.00	25.00

INSPECTION: Will be ready \_\_\_\_\_ or will call \_\_\_\_\_

CONTRACTORS NAME Mancini, Elec

ADDRESS 179 Sheridan

TELEPHONE 774-5829

MASTER LICENSE No. 2436

LIMITED LICENSE No. \_\_\_\_\_

SIGNATURE OF CONTRACTOR

*Jim Mancini*



931097

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee 10.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# 3

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Finard, Muzzy Phone # \_\_\_\_\_

Address: \_\_\_\_\_

LOCATION OF CONSTRUCTION 1 Monument SquareContractor: Portland Pump Co. Sub: \_\_\_\_\_Address: P.O. Box 1180 Scarborough 04074 Phone # 883-4317Est. Construction Cost: \_\_\_\_\_ Proposed Use: Office w/o tankPast Use: office

# of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_

Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_

# Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_

Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_

Explain Conversion Remove 1 underground tank

## Foundation:

1. Type of Soil: \_\_\_\_\_
2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_
3. Footings Size: \_\_\_\_\_
4. Foundation Size: \_\_\_\_\_
5. Other: \_\_\_\_\_

## Floors:

1. Sills Size: \_\_\_\_\_ Sills must be anchored.
2. Girder Size: \_\_\_\_\_
3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_
4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.
5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_
6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_
7. Other Material: \_\_\_\_\_

## Exterior Walls:

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. No. windows \_\_\_\_\_
3. No. doors \_\_\_\_\_
4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_
6. Corner Posts Size \_\_\_\_\_
7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_
8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_
9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_
10. Masonry Materials \_\_\_\_\_
11. Metal Materials \_\_\_\_\_

## Interior Walls:

1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_
2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_
3. Wall Covering Type \_\_\_\_\_
4. Fire Wall if required \_\_\_\_\_
5. Other Materials \_\_\_\_\_

White-Tax Assessor

Yellow-GPCOG

White Tag - CEO

2 Ms Copyright GPCOG 1988

## For Official Use Only

Date Nov 17, 1993 Subdivision: \_\_\_\_\_  
 Inside Fire Limits: \_\_\_\_\_ Name NOV 23 1993  
 Bldg Code: \_\_\_\_\_ Lot \_\_\_\_\_  
 Time Limit: \_\_\_\_\_ Ownership: \_\_\_\_\_ Public \_\_\_\_\_ Private \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_

## Zoning:

Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

## Review Required:

Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other WSP (Explain) \_\_\_\_\_

## Ceiling:

1. Ceiling Joists Size: \_\_\_\_\_ HISTORIC PRESERVATION
2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Not in District nor Landmark
3. Type Ceilings: \_\_\_\_\_
4. Insulation Type \_\_\_\_\_ Size: \_\_\_\_\_ Does not require review
5. Ceiling Height: \_\_\_\_\_ Requires Review

## Roof:

1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_ Action: \_\_\_\_\_ Approved
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Approved with Conditions
3. Roof Covering Type \_\_\_\_\_

## Chimneys:

Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_ Date: \_\_\_\_\_

## Heating:

Type of Heat: \_\_\_\_\_

## Electrical:

Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

## Plumbing:

1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_
2. No. of Tubs or Showers \_\_\_\_\_
3. No. of Flushes \_\_\_\_\_
4. No. of Lavatories \_\_\_\_\_
5. No. of Other Fixtures \_\_\_\_\_

## Swimming Pools:

1. Type: \_\_\_\_\_
2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_
3. Must conform to National Electrical Code and State Law.

Permit Received By Mary WilsonSignature of Applicant \_\_\_\_\_ Date Nov 17, 1993Signature of CEO Jeff Wilson Date \_\_\_\_\_

Inspection Dates \_\_\_\_\_

PERMIT ISSUED  
WITH REQUIREMENTSPERMIT ISSUED  
WITH REQUIREMENTS

PLOT PLAN

N  
↑

FEES (Breakdown From Front)

Base Fee \$ \_\_\_\_\_  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ \_\_\_\_\_  
Other Fees \$ \_\_\_\_\_  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

Type

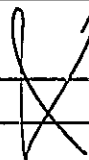
Inspection Record

Date

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS

Tank removed per Lt. Mac.



Signature of Applicant

Date

BUILDING PERMIT REPORT

DATE: 11/22/93

ADDRESS: 1 Monument Sq

REASON FOR PERMIT: "Underground Tank Removal Installation"

BUILDING OWNER: Murray Fernald

CONTRACTOR: Portland Pump Co.

PERMIT APPLICATION: Teck Wilson

APPROVED: ✓ DENIED: \_\_\_\_\_

CONDITION OF APPROVAL OR DENIAL:

1. All underground tank removal and/or installation shall be done in accordance with Department of Environmental Protection Regulations Chapter 691.
2. No cutting of tanks on site. Cutting of tanks to be done at an approved tank disposal site.
3. Fire Dispatcher must be notified 48 hours in advance of removal and/or transportation of tanks.



Maine Department of Environmental Protection  
Bureau of Oil & Hazardous Materials Control  
State House Station #17, Augusta, Maine 04333  
Telephone: 207-289-2651  
Attn: Tank Removal Notice

**FAXED**  
12-11-92  
DX

NOTICE OF INTENT  
TO ABANDON (REMOVE) AN  
UNDERGROUND OIL STORAGE FACILITY

Name of Facility Owner: 192 Monument Square  
Mailing Address: 2 Monument Square Telephone No: 874-0397  
City: Portland State: Me Zip Code: 04101  
Contact Person (name, address & telephone no.): Geary Rob M  
Name of Facility: 192 Monument Square Registration No.: 8780  
Facility Location: SAME

1. Identify the tanks at this location which are to be removed:

Tank Number	Age of Tank (Years)	Tank Size (Gallons)	Type of Product Most Recently Stored
A. 1	20+	12,000	#4 Fuel
B.			
C.			
D.			

2. Directions to Facility (be specific):

3. Is tank(s) used for the storage of Class I liquids (e.g. gasoline, jet fuel)? Yes  No  (IF YES, REMOVAL OF THE TANK MUST BE UNDER THE DIRECTION OF A CERTIFIED TANK INSTALLER OR PROFESSIONAL FIREFIGHTER.)

4. Name and telephone number of contractor who will do the tank removal: Portland Pump Company

Certified Tank Installer Certification Number & Name (if applicable):

Professional Firefighter: Yes  No  (Affiliation: John Dantap)

5. Expected date of removal: A.S.A.P. Known Leaker - will speak with

I hereby provide Notice that I intend to properly abandon the underground oil storage facility as described above.

Date: 12-11-92

Portland Pump Co (Agent for Owner)  
Signature of Tank Owner or Operator  
David W. Crox-ford G.M.  
Printed Name and Title

**THIS FORM MUST BE FILED WITH THE DEPARTMENT AND LOCAL FIRE DEPARTMENT 30 DAYS PRIOR TO REMOVAL - RETURN POSTCARD WHEN TANK(S) HAS BEEN REMOVED.**

Mail original and yellow copy to DEP; pink copy to fire dept.; retain gold copy

940447

Permit # 940447 City of Portland BUILDING PERMIT APPLICATION Fee \$296.20 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Casco Northern Bank Phone # 774-8221  
 Address: One Monument Sq - Ptld, ME 04101  
 LOCATION OF CONSTRUCTION One Monument Sq  
 Contractor: Barlo Signs Co Sub: 282-0400  
 Address: 92 Industrial Park Hwy Phone # Saco, ME 04072  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: bank w 10 signs  
 Past Use: bank  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion erect 10 signs - 4- 50'x6' 1- 10'x2'

**For Official Use Only**

Date: 3/17/94 Subdivision: \_\_\_\_\_  
 Inside Fire Limits: \_\_\_\_\_ Name: MAY 18 1994  
 Bldg Code: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Time Limit: \_\_\_\_\_ Ownership: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_

Zoning: B3 PRD  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other: W.A. 23-22-94 (Explain)

Foundation: 1-8'x3' 2- 8'x1' 2- 24'x2' Ceiling:  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other \_\_\_\_\_

Floor:  
 1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

Exterior Walls:  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_

Interior Walls:  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_

**HISTORIC PRESERVATION**

1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ Not in District or Landmark.  
 3. Type Ceilings: \_\_\_\_\_ Does not require review.  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_ Requires Review.  
 5. Ceiling Height: \_\_\_\_\_

Roof:  
 1. Truss or Rafter Size \_\_\_\_\_ Span Action: Approved  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Approves with Conditions  
 3. Roof Covering Type \_\_\_\_\_

Chimneys:  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_

Heating:  
 Type of Heating: \_\_\_\_\_

Electrical:  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing:  
 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Tube or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

Swimming Pools:  
 1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase  
 Signature of Applicant Edward Blumenthal Date 3/17/94  
 CEO's District 2  
 CONTINUED TO REVERSE SIDE  
 Ivory Tag - CEO Ms Mansori attached letter P.A. Dwyer

White - Tax-Assessor

**PLOT PLAN**



**FEES (Breakdown From Front)**  
 Base Fee \$ 296.20  
 Subdivision Fee \$ \_\_\_\_\_  
 Site Plan Review Fee \$ \_\_\_\_\_  
 Other Fees \$ \_\_\_\_\_  
 (Explain) \_\_\_\_\_  
 Late Fee \$ \_\_\_\_\_

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

**COMMENTS**

*June 94 Signs in place OK to close out. X  
 appear to be done per plans.*

**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 has authorized agent and 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 or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT

ADDRESS

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.

*[Signature]* For Barbo Signs

*3/17/94*

*782-2400*

CITY OF PORTLAND, MAINE  
MEMORANDUM

TO: Edward Blumenthal, Barlo/coyne sign

FROM: Philip L. Meyer, Urban Designer

DATE: March 25, 1993

SUBJECT: Signage for Casco Northern

This memo is to confirm our discussion this morning regarding signage for Casco Northern on Congress Street.

1. Signage requirements include "no signage should be placed on portions of buildings or structures exceeding 125 feet in height". For purposes of interpretation on this sign, and assuming based on our conversations that the sign is located in excess of 125 feet in height, we will agree to an interpretation that the sign area (in square foot) is grandfathered as an existing sign. The proposed change should be included within the same square footage. The red underline should be sized in scale with reduced lettering size but is not included in the square footage calculations.
2. The wall sign along Temple Street should be reduced in size. If you go to a white letter, then size should be reduced to 10-inch letters. If you go with a less visible bronze letter against the brick wall, then a 14-inch letter will be acceptable.
3. Other signage is acceptable as submitted.

Please call me if you have any further questions.

Planning & Urban Development

Joseph E. Gray Jr.  
Director

CITY OF PORTLAND

May 17, 1994

Mr. Edward Blumenthal  
Barlo Signs Company  
92 Industrial Park Road  
Saco, ME 04072

Re: Signage for Casco Northern Bank; One Monument Square

Dear Mr. Blumenthal:

On Friday, May 13th, the Portland Planning Authority granted approval for erection of 10 signs at Casco Northern Bank's headquarters at One Monument Square. The approval is subject to the following conditions:

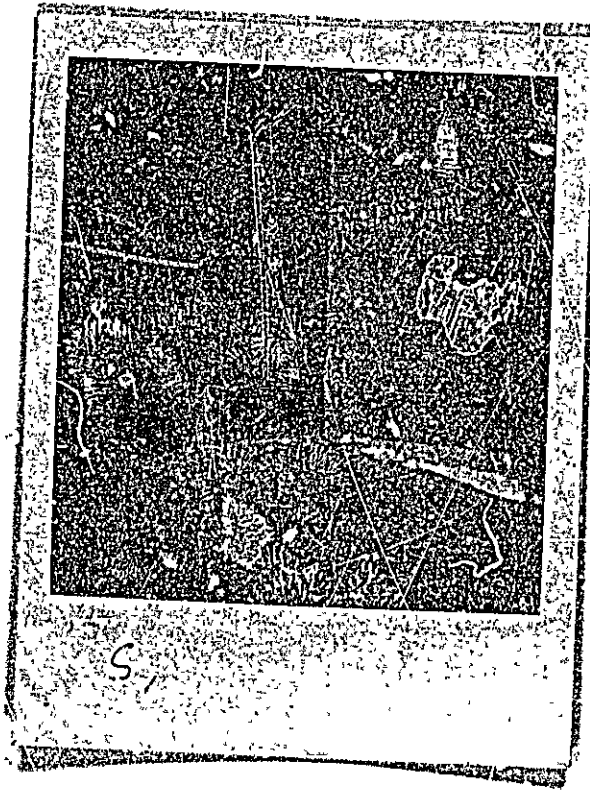
- 1) All building signs, other than the three located at the Temple Street drive-through addition shall be of bronze finish. The Temple Street signs may be colored as described in the application materials.
- 2) Regarding the wall sign along the Temple Street drive-through extension, if Casco Bank elects to go to a white letter, the size the of letters should not exceed 10 inches. If bronze-finish letters are used, the letter size could be increased to 14 inches.

The approval is based on the submitted application materials on file in the Planning Department. Should you wish to revise your signage plan in any way, an amended application should be filed with the Department.

Sincerely,

*Joseph E. Gray, Jr.* (DA)  
Joseph E. Gray, Jr.

cc: Deborah Andrews, Senior Planner  
William Giroux, Zoning Administrator  
P. Samuel Hoffses, Chief of Building Inspections



Sign C-1

illuminated  
box  
sign?

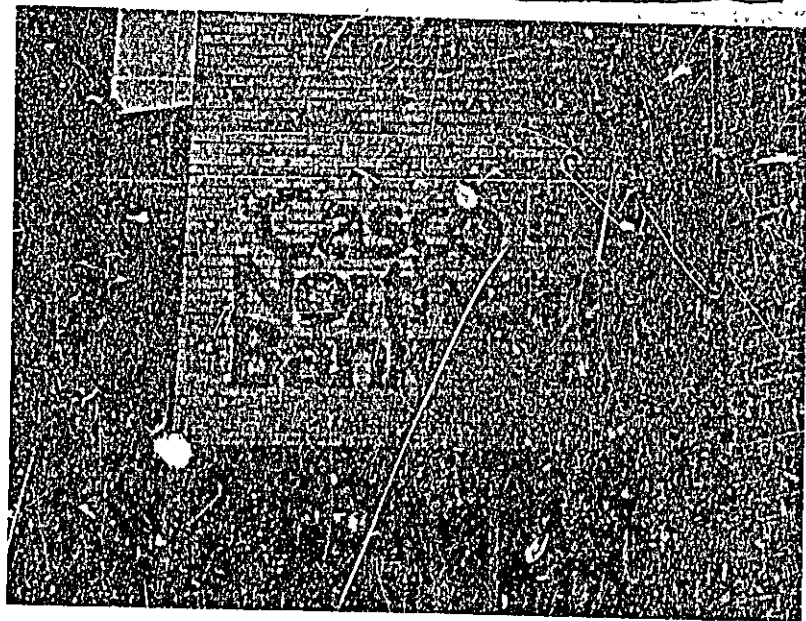
SAME AS SIGN C BUT COPY  
WILL REACT

(LOYO) CASCO NORTHERN 24 HOUR  
BANKING

Sign E  
SAME AS OTHER?



To replace F.L.C. 24" Letters Reading  
CASCO Northern BANK. NEW F.L.C.  
To Read (Logo) CASCO Northern





Signs (B)

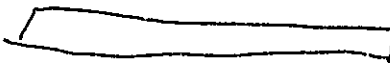
To remove both faces in SIF. 19" x 24"  
illum signs. New copy to read

ENTRANCE

CLEARANCE 10 FT



CASCO Northern



ENTRANCE

CLEARANCE 10 FT.





940526

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee 145.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Finard & Company Phone # 772-2257  
 Address: Northeast Cellular P.O. Box 300 Gray, ME 04039  
 LOCATION OF CONSTRUCTION 1 Monument Sq. attn: Steve  
 Contractor: \_\_\_\_\_ Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Est. Construction Cost: 25,000.00 Proposed Use: office w/antenna  
 Past Use: office  
 # of Existing Res. Units \_\_\_\_\_ # of New Res. Units \_\_\_\_\_  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 # Stories: \_\_\_\_\_ # Bedrooms \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Conversion \_\_\_\_\_  
 Explain Conversion Install Antenna as per plans

**For Official Use Only**

Date \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Name JUN - 7 1994  
 Bldg Code \_\_\_\_\_ Lot \_\_\_\_\_  
 Time Limit \_\_\_\_\_ Ownership: \_\_\_\_\_ Public \_\_\_\_\_  
 Estimated Cost \_\_\_\_\_ City of Portland

Zoning: B-3  
 Street Frontage Provided: \_\_\_\_\_  
 Provided Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_

Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Shoreland Zoning Yes \_\_\_\_\_ No \_\_\_\_\_ Floodplain Yes \_\_\_\_\_ No \_\_\_\_\_  
 Special Exception \_\_\_\_\_  
 Other (Explain) 67-94

037-K-012  
 Foundation:  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other \_\_\_\_\_

Floor:  
 1. Sills Size: \_\_\_\_\_ Sills must be anchored.  
 2. Girder Size: \_\_\_\_\_  
 3. Lally Column Spacing: \_\_\_\_\_ Size: \_\_\_\_\_  
 4. Joists Size: \_\_\_\_\_ Spacing 16" O.C.  
 5. Bridging Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 6. Floor Sheathing Type: \_\_\_\_\_ Size: \_\_\_\_\_  
 7. Other Material: \_\_\_\_\_

Exterior Walls:  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. No. windows \_\_\_\_\_  
 3. No. Doors \_\_\_\_\_  
 4. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 5. Bracing: Yes \_\_\_\_\_ No \_\_\_\_\_  
 6. Corner Posts Size \_\_\_\_\_  
 7. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 8. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 9. Siding Type \_\_\_\_\_ Weather Exposure \_\_\_\_\_  
 10. Masonry Materials \_\_\_\_\_  
 11. Metal Materials \_\_\_\_\_

Interior Walls:  
 1. Studding Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
 3. Wall Covering Type \_\_\_\_\_  
 4. Fire Wall if required \_\_\_\_\_  
 5. Other Materials \_\_\_\_\_

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_ Not in Diagram nor Landmark.  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceilings: \_\_\_\_\_ Does not require review.  
 4. Insulation Type \_\_\_\_\_ Size Requires Review.  
 5. Ceiling Height: \_\_\_\_\_

Roof:  
 1. Truss or Rafter Size \_\_\_\_\_ Action \_\_\_\_\_ Approved \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_

Chimneys:  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_

Heating:  
 Type of Heat: 1118

Electrical:  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing:  
 1. Approval of soil test if required Yes \_\_\_\_\_ No \_\_\_\_\_  
 2. No. of Tubs or Showers \_\_\_\_\_  
 3. No. of Flushes \_\_\_\_\_  
 4. No. of Lavatories \_\_\_\_\_  
 5. No. of Other Fixtures \_\_\_\_\_

Swimming Pools:  
 1. Type: \_\_\_\_\_  
 2. Pool Size: \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By Mary Gresik

Signature of Applicant Steve McCandless Date 6 May '94

CEO's District 2 Steve McCandless

CONTINUED TO REVERSE SIDE  
 Ivory Tag - CEO MS MAN 6/1/94  
PAID  
6/1/94  
B. Anderson

White - Tax Assessor

PLOT PLAN

N



FEES (Breakdown From Front)

Base Fee \$ \_\_\_\_\_  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ \_\_\_\_\_  
Other Fees \$ \_\_\_\_\_  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

Type

Inspection Record

Date

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS

*Antenna installed - appears to be adequately installed & done per plans -*

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 has authorized agent and 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 or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT

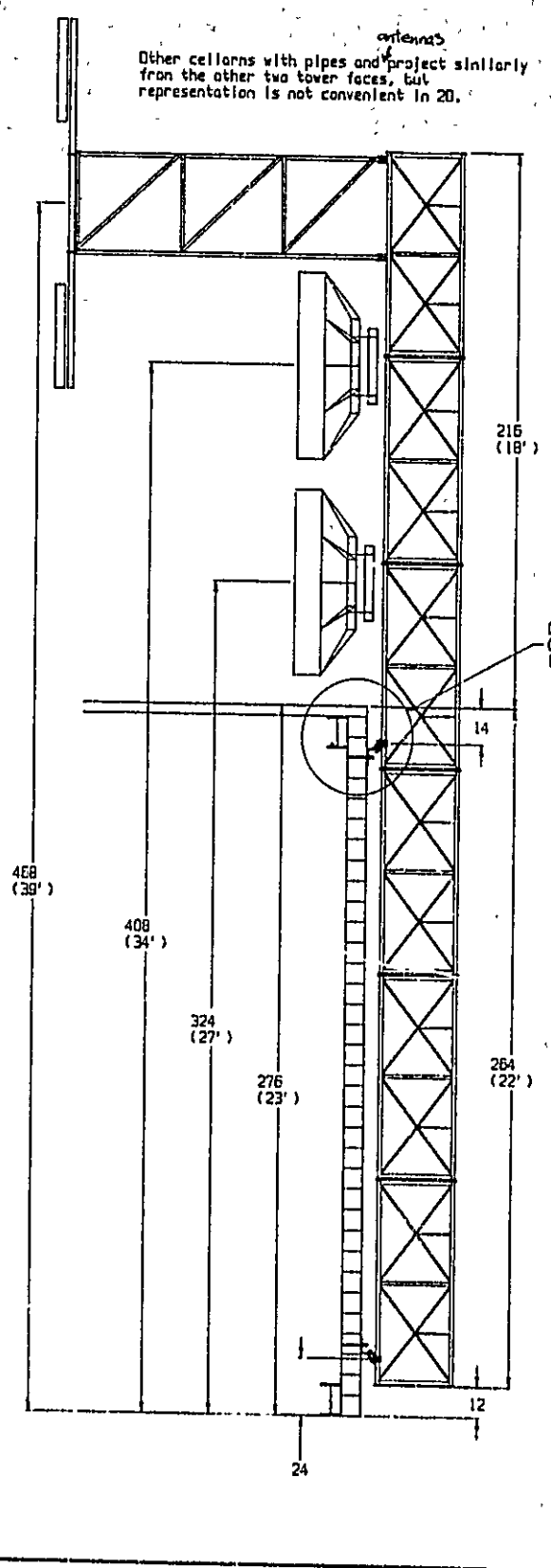
ADDRESS

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

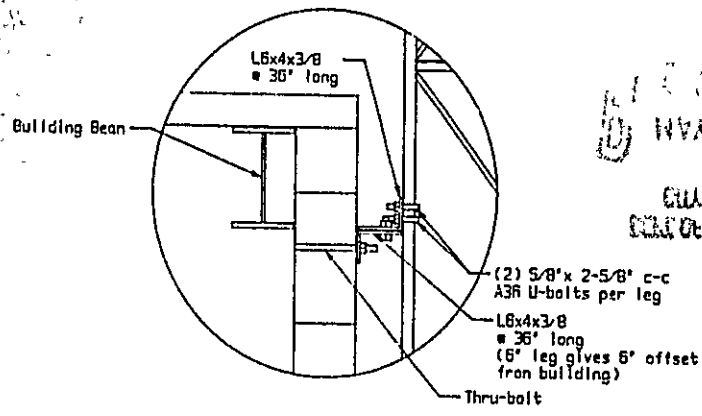
PHONE NO.

antenna  
Other cellars with pipes and project similarly  
from the other two tower faces, but  
representation is not convenient in 20.



FOR THE ARCHITECTS  
BY THE ARCHITECTS  
CONTACT SUPPLIER





NOV 10 1987

ALL INFORMATION HERE  
IS UNCLASSIFIED

**CONNECTION DETAIL**

1. Connection to building must be approved by customer's architect.

**2. APPLIED LOADS**

Total Deadload = 3000 lb

**LOAD CASE #1** (100 mph wind into the penthouse)

Tension on lower bracket = 3700 lb  
Compression on upper bracket = 9500 lb

**LOAD CASE #2** (100 mph wind coming off the penthouse)

Compression on lower brackets = 3700 lb  
Tension on upper bracket = 9500 lb

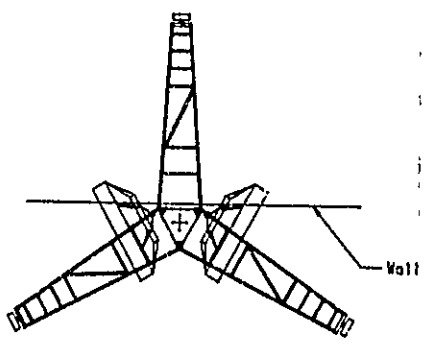
**LOAD CASE #3** (100 mph wind parallel to penthouse wall)

Horizontal Shear at lower bracket = 3000 lb  
Horizontal Shear at upper bracket = 9500 lb  
(Tension is away from the wall, compression is into the wall shear is parallel to the wall)

**CONNECTION DETAILS**  
Bottom connection  
is similar)

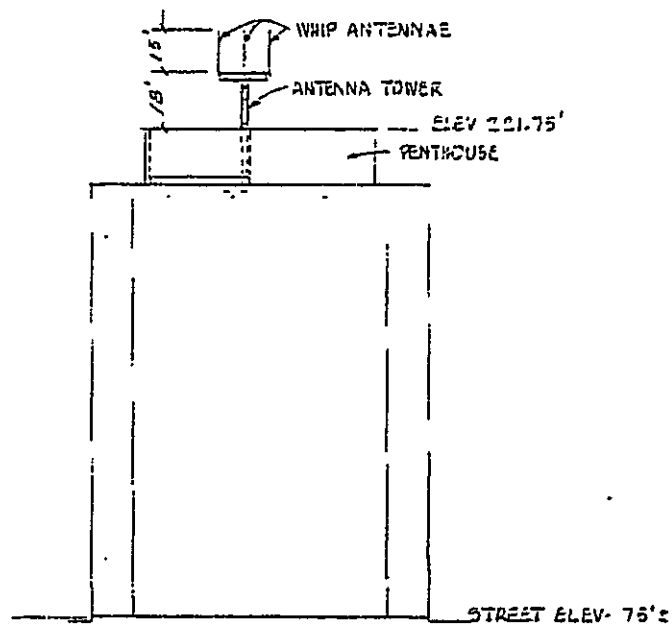
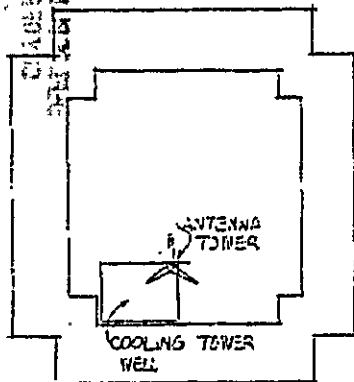
**DESIGN ANTENNA LOADING**

- (3) G30 Celltars
- (6) Sinclair C-4 antennas and 7/8" helix
- (2) 6' High Performance Dishes with Radones 32" with EV62 waveguide



PHONE NO. : 774 2135

FROM : WILLIAM E. WHITED, INC.



Post-It™ brand fax transmittal memo 7671 # of pages 1

To: Stone	From: Bill
Co: NS Solutions	Cu: Bill Stone
Dept:	Phone #:
Fax #: 651-4445	Fax #: 774 2135



William E. Whited, Inc.  
ARCHITECT / ENGINEER  
1283  
8-2-90

3111 CONGRESS ST. CHICAGO  
ILLINOIS 60608  
FLOOR PLAN AND ELEVATIONS

8-2-90  
NS  
S-1

**FINARD &  
COMPANY**

FINARD & COMPANY, INC.  
FLEET PLAZA, SUITE 704  
511 CONGRESS STREET  
PORTLAND, MAINE 04101-3441  
TEL (207) 772-2257  
FAX (207) 773-9830

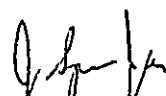
May 2, 1994

To Whom It May Concern:

This is to advise you that Northeast Cellular, a potential tenant, and Congress Federal Trust, owner of One Monument Square in Portland, Maine, are negotiating a lease for space to house operating equipment and the right to install antennae on the penthouse wall of One Monument Square. I am expecting that negotiations will be completed by the end of this month, and occupancy and construction will begin this summer after all necessary permits have been obtained.

Sincerely,

Finard & Company



J. Spencer Jones  
Regional Director

doc: CELLULAR.169



# Omnidirectional Collinear Antennas

806-960 MHz

## Super Stationmaster™ Series

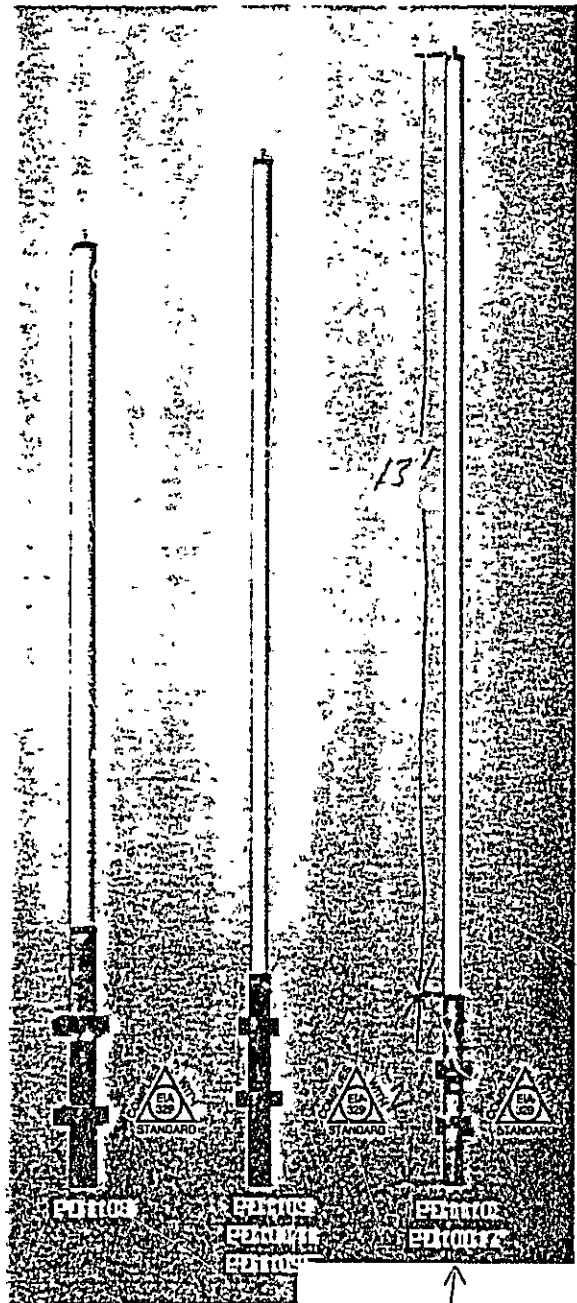
PD1108	5.0 dBd Gain
PD1109	7.5 dBd Gain
PD1109E	7.5 dBd Gain
PD10041 Heavy Duty	7.5 dBd Gain
PD10041E Heavy Duty	7.5 dBd Gain
PD1110	9.0 dBd Gain
PD10017	10 dBd Gain

These center-fed collinear antennas ensure consistent gain and impedance across the operating frequency band, and are specifically designed to meet various omnidirectional requirements for mobile radio services in the 806-960 MHz bands. Copper alloy radiating elements are encased in a weatherproof fiberglass low loss housing and permanently attached to a 6061-T6 aluminum support pipe.

The PD10041 antenna is a rugged version of the PD1109 having a wind velocity rating of 125 mph (200 km/hr). A pressurization option (PD1252) is available for PD1108, PD1109, PD1109E, PD1110, PD10041, PD10041E and PD10017 facilitating pressurization to 12 PSIG. *The above antennas may be mounted inverted. Specify option PD1254. The series is also available with high wind version radomes (200 mph rated wind velocity).*

Various reflector assemblies are shown on pages 97 and 98. Contact our Customer Service Department for specific pattern requirements.

- Fiberglass construction** Protects radiating elements in hostile environments.
- Copper radiating elements** Minimizes possible generation of intermod products.
- Center-fed design** Eliminates beamtilt across the band.



↑  
ANTENNA TO  
BE USED.  
HT. 15'

**CELWAVE**   
DIVISION OF RADIO FREQUENCY SYSTEMS

Route 79, Marlboro, NJ 07746 • Tel. (908)462-1880 • (800)321-4700 • FAX (9

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <b>One Monument Square</b>		Owner: <b>Finard and Company</b>		Phone:	Permit No: <b>960579</b>
Owner Address:		Leasee/Buyer's Name: <b>Key Bank</b>		Phone:	Business Name:
Contractor Name: <b>Signature Signs</b>		Address:		Phone:	<b>PERMIT ISSUED</b> <b>JUN 21 1996</b> <b>CITY OF PORTLAND</b>
Past Use:		Proposed Use: <b>erect new signaga</b>		COST OF WORK: \$	
Proposed Project Description: <b>Erect new signaga (3) 1x 2' x 10' (new face) 2x 35 sq. ft signs</b>		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: <b>101</b> Use Group: Type: <b>1</b> <b>BOCA 93</b> Signature: <i>[Signature]</i>	
Proposed Project Description:		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Signature: <i>[Signature]</i> Date: <b>3/2/96</b>	
Permit Taken By: <b>Victoria A. Dover</b>		Date Applied For: <b>March 28, 1996</b>			

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
  - Building permits do not include plumbing, septic or electrical work.
  - 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..
- Zoning Appeal**
- Variance
  - Miscellaneous
  - Conditional Use
  - Interpretation
  - Approved
  - Denied
- Historic Preservation**
- Not in District or Landmark
  - Does Not Require Review
  - Requires Review
- Action:**
- Approved
  - Approved with Conditions
  - Denied
- Date: **3/29/96**

**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 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 provisions of the code(s) applicable to such permit

*[Signature]*  
SIGNATURE OF APPLICANT

P. O. Box 1023 Portland 04104 ✓ 883-2500 3/28/96

**Keith Morin**

ADDRESS:

DATE:

PHONE:

**Signature signs**

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT

**1**

*T. Munnery*

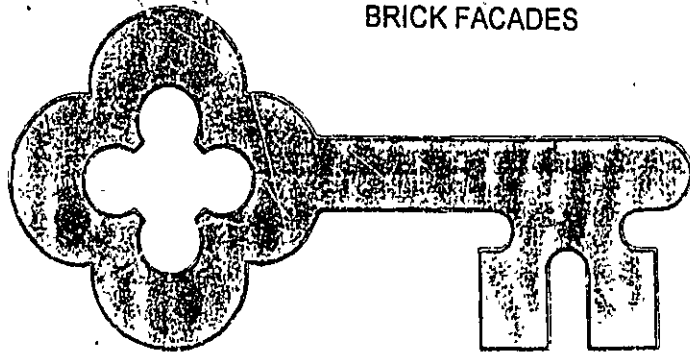
COMMENTS

1/17/97 OK Allow

Type	Inspection Record	Date
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____

MOUNTED ON  
BRICK FACADES

37" KEY  
HEIGHT



63"

16" LETTER  
HEIGHT

KeyBank

5.25

84"

36.75"

1/4" ACRYLIC  
LETTERS AND KEY  
1" SILVA-TRIM

OVERALL IMAGE  
SIZE= 63" H X 84" L

Location: Congress Street  
South Elevation

9' TO SIDEWALK

Congress Street  
North Elevation

Monument Square  
West Elevation

*Signature*  
SIGNS INC.

P O. BOX 1023  
PORTLAND, MAINE 04104  
12 RUNWAY ROAD  
SCARBOROUGH, MAINE 04074

TEL: 207-883-2500  
FAX: 207-883-1634

INTERIOR & EXTERIOR SIGNAGE



VISIBILITY FACTORS PER  
CALIFORNIA INSTITUTE OF TECHNOLOGY

CLIENT **KEY BANK**  
DATE February 14, 1996  
SCALE As Shown  
DRAWN BY Mark Borduas  
MODEL BY

SALES REP **KEITH MORIN**



EASTERN  
STATES  
SIGN  
COUNCIL

Two Monument Square  
3 Sets, Mylar Letters

Red Key, White Trim  
White Type, Black Trim



UNITED  
STATES  
SIGN  
COUNCIL

**ENTRANCE**  
 Clearance 10 FT

 **KeyBank**


**ENTRANCE**  
 Clearance 10 FT

To replace existing signs  
 in DRIVE THRU area

VISUAL OPENING  
 344.5" X 15.5"

**DO NOT ENTER**  **KeyBank** **DO NOT ENTER**

VISUAL OPENING  
 15.5" X 292"




 **KeyBank**

**24 Hour Banking**

To be placed over  
 PEDESTRIAN entryways

A VISUAL OPENING  
 8.5" X 66"

B VISUAL OPENING  
 8.5" X 78"

 7205 10th St Portland, Maine 04108 15 BLANCK RD SCARBOROUGH, MAINE 04174 TEL 207-863-2300 FAX 207-863-1634 WWW.SIGNATURESIGNS.COM	CLIENT KEY BANK DATE February 14 1998 SCALE At 1/2 inch DRAWN BY Mark Erdoski MOD. BY
	SALES REP KEITH MORRIS 
	Rad Ray Wheel Trim Wheel Type Black Trim

POLICY INFORMATION				CERTIFICATE OF INSURANCE		CERTIFICATE NUMBER	
<b>PRODUCER</b> Marsh & McLennan, Inc. Rochester Office P. O. Box 92866 Rochester, NY 14692				THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES LISTED HEREIN.		<b>23148</b>	
<b>INSURED</b> KeyCorp and Its Subsidiaries 127 Public Square Cleveland, OH 44114-1306				<b>COMPANIES AFFORDING COVERAGE</b>			
				<b>COMPANY LETTER</b> A FEDERAL INSURANCE CO			
				<b>COMPANY LETTER</b> B			
				<b>COMPANY LETTER</b> C			
				<b>COMPANY LETTER</b> D			
THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED HEREIN HAVE BEEN ISSUED TO THE INSURED NAMED HEREIN FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES LISTED HEREIN IS SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.							
CO. LTR.	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
C	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE/OCUR. <input type="checkbox"/> OWNERS & CONTRACTORS ENVT.	3533 57 80	5/01/95	5/01/96	GENERAL AGGREGATE	\$	2000000
					PRODUCTS-COM/OP A/R	\$	2000000
					REGIONAL & ADV. BILTY	\$	1000000
					EACH OCCURRENCE	\$	1000000
					FIRE DAWSON (Per one RY)	\$	1000000
					MED EXPENSE (Per one person)	\$	1000
A	AUTOMOBILE LIABILITY <input checked="" 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	7521 40 96	5/01/95	5/01/96	COMBINED SINGLE LIMIT	\$	1000000
					BODILY INJURY (Per person)	\$	
					INDEMNITY (Per building)	\$	
					PROPERTY DAMAGE	\$	
					AUTO ONLY - CA ACCIDENT	\$	
					OTHER THAN AUTO ONLY	\$	
					TOTAL ACCIDENT	\$	
					AGGREGATE	\$	
					EACH OCCURRENCE	\$	
					AGGREGATE	\$	
A	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	(96) 7021 99 93	5/01/95	5/01/96	STATUTORY LIMITS	X	
					EACH ACCIDENT	\$	1000000
					DISEASE - PERIOD LIMIT	\$	1000000
					DISEASE - EACH EMPLOYEE	\$	1000000
					ZURICH SMLP0 013624		
WITH & ALLIED 3533 57 77 5/01/95 5/01/96 \$100,000,000 ALL RISKS \$ 1,000,000 FLOOD EXCL. EXCL. \$001,000,000 EARTHQUAKE EXCL. CA							
DESCRIPTION OF OPERATIONS, LOCATIONS, ACTIVITIES, SPECIAL PERILS (SEE REVERSE AND/OR ATTACHED)							
<b>CERTIFICATE HOLDER</b> City of Portland Code Enforcement City Hall Congress Street Portland, ME 04101				<b>CANCELLATION</b> SHOULD ANY OF THE POLICIES LISTED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER ANYTHING COVERED BY ACCIDENT OR INDEMNITY, OR THE ISSUER OF THIS CERTIFICATE.			
				(NAME OF HOLDING CORPORATION) BY: <i>Richard E. D'Amico</i> DATE: 3/06/96			

KEY RECORD  
 TO: *Maryland*  
*DeBlasis*  
 FR: *KeyBank*  
*Shane*  
*316-687-0836*

Post-It® Fax Note	7071	Date	3 27 96	# of pages	2
To	Kerina Morein		From	BOB COLE	
Co./Dept.	SIGNATURE		Co.	Key Bank	
Phone #			Phone #		
Fax #	883-1624		Fax #	776-7662	

## DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE 023148 (CONTINUED) P36

INSURED : KeyCorp and Its Subsidiaries

HOLDER : City of Portland  
Code Enforcement  
City Hall  
Congress Street  
Portland, ME 04101Automobile Physical Damage  
Policy # : 7321 40 99  
Deductibles : Comprehensive - None; Collision - \$250  
Policy Term : 05-01-95 / 96  
Company A) Federal IncSIR Buyback Policy  
Policy # : 0001  
Applicable Limit :  
Policy Term : 06-01-95 / 96  
\$ 500,000  
Company B) KICLExcess Workers Compensation (ME, NY, OH, OR & WA)  
Policy # : WVA 3400349  
Excess Workers Compensation Limit : \$10,000,000  
Excess Employers Liability Limit : \$ 1,000,000  
Retention : \$ 500,000  
Company C) ST Paul Ins

It is hereby agreed that the City of Portland is an Additional Insured as respects exterior signs for Monument Square (Portland)

COPY OF THIS CERTIFICATE MAILED

Date: 3-6-96To: Ann Duward / Lita Pirano / GregoszCarrier: Federal / Zurich / St. PaulLocation: Portland / Jorden, OH / Cleveland, OHSignature of Sender: [Signature]

MARSH &amp; McLENNAN - ROCHESTER



March 28, 1996

Mr. Keith Morin  
Signature Signs Inc.  
P. O. Box 11023  
Portland, ME 04104

SUBJECT: Key Bank Signs - One Monument Square

Dear Keith:

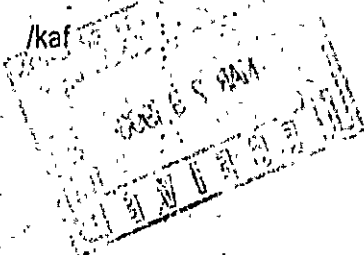
I approve the new Key Bank signs that will be installed on One Monument Square per Signature Signs Inc. drawing dated February 14, 1996 which you faxed to me today.

Sincerely yours,

A handwritten signature in cursive script that reads "Katharine A. Fenn".

Katharine A. Fenn  
Property Manager

/kaf





*Message: I was told your Portland  
have the at from  
Finard + Co  
Nope I don't*

**SIGNAGE**

**PLEASE ANSWER ALL QUESTIONS**

ADDRESS: Key Bank Monument Sq ZONE: B-3

OWNER: FINARD + Co

APPLICANT: SIGNATURE SIGN INC.

ASSESSOR NO.: 027-F-4

SINGLE TENANT LOT? YES \_\_\_\_\_ NO X

MULTI TENANT LOT? YES X NO \_\_\_\_\_

FREESTANDING SIGN? YES \_\_\_\_\_ NO X DIMENSIONS \_\_\_\_\_  
(ex. pole sign..)

MORE THAN ONE SIGN? YES X NO X DIMENSIONS \_\_\_\_\_

BLDG. WALL SIGN? YES X NO \_\_\_\_\_ DIMENSIONS Attached  
(attached to bldg)

MORE THAN ONE SIGN? YES X NO \_\_\_\_\_ DIMENSIONS Attached

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: new: 3 signs  
ATTACHED 1- 2' x 16'  
2- 35 SA FT

LOT FRONTAGE (FEET) 111' x 135' x 110' x 135'

BLDG FRONTAGE (FEET) 180' x 2

AWNING YES \_\_\_\_\_ NO X IS AWNING BACKLIT? YES \_\_\_\_\_ NO X

HEIGHT OF AWNING: none

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES - Key Bank

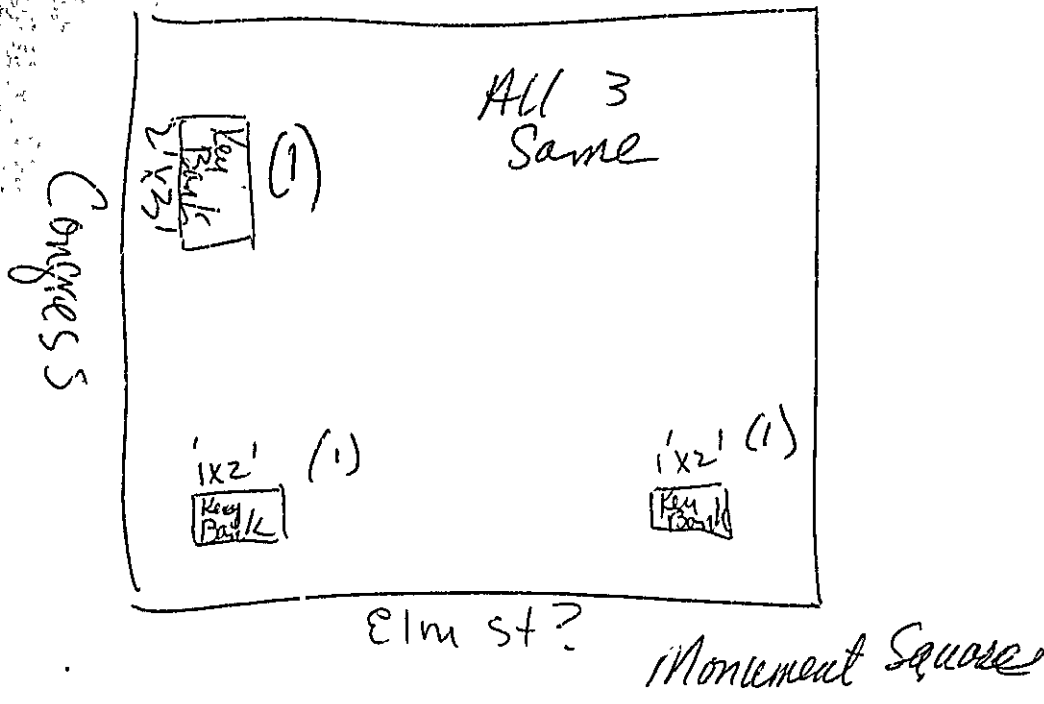
**A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF THE PROPOSED SIGNS ARE ALSO REQUIRED.**

**Signature**  
SIGNS INC.

Key Bank  
Monument Sq

Exterior & Interior Signage

Existing Signs (to be removed)  
When new installed



new to go in same locations as ones removed

**City of Portland, Maine - Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 1. Monument Sq		Owner: Murray Finard		Phone:		Permit No: <b>080953</b>	
Owner Address:		Leasee/Buyer's Name: Key Bank		Phone:		Business Name:	
Contractor Name: Portland Safe		Address: 550 Congress St Pctd, ME 04101		Phone: 775-3015		<div style="border: 1px solid black; padding: 5px;">                 DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME   <b>SEP 27 1996</b>                  RECEIVED                  Zoning Approval             </div>	
Past Use: Bank		Proposed Use: Same		COST OF WORK: \$ 5,000.00		PERMIT FEE: \$ 45.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
Proposed Project Description: Install ATT into existing drive-up window				Signature:		Signature:	
				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)		Zoning Approval	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		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 major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By:		Date Applied For: 11 September 1996		Signature: <i>D. Andrus</i>		Date: <i>9/16/96</i>	

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- 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.

Sam - No plans as per Phil Buker?

call Adriana for P/U 775-3015

*Any exterior changes?*  
  
*NO New structures*

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

Date: *9/12/96*

Signature: *D. Andrus*

CEO DISTRICT 2  
*A. Powell*

**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 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 provisions of the code(s) applicable to such permit

Signature of Applicant: <i>Adriana Bayley</i>		DATE: 11 September 1996	
ADDRESS: <i>Portland Safe Consulting &amp; Design, Inc.</i>		PHONE: <i>775-3015</i>	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		PHONE:	

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

City of Portland, Maine - Building or Use Permit Application: 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <b>1 Monument Sq</b>		Owner: <b>Kurray Finard</b>		Phone:		Permit No: <b>060953</b>	
Owner Address:		Leasee/Buyer's Name: <b>Key Bank</b>		Phone:		Business Name:	
Contractor Name: <b>Portland Safe</b>		Address: <b>550 Congress St, Portland, ME 04101</b>		Phone: <b>775-3015</b>		<div style="border: 2px solid black; padding: 5px; text-align: center;">                 DEPT. OF BUILDING INSPECTION                  CITY OF PORTLAND, ME  <b>SEP 27 1996</b>                  RECEIVED             </div>	
Past Use: <b>Bank</b>		Proposed Use: <b>Bank</b>		COST OF WORK: <b>\$ 5,000.00</b>		PERMIT FEE: <b>\$ 45.00</b>	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type: <b>ok</b>	
Proposed Project Description: <b>Install ATM into existing drive-up window</b>				Signature:		Signature: <b>[Signature]</b>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zoning Approval: <b>ok</b>	
				Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		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 <input checked="" type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By:		Date Applied For: <b>11 September 1996</b>		Signature: <b>[Signature]</b>		Date: <b>9/17/96</b>	

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
  - Building permits do not include plumbing, septic or electrical work.
  - 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.
- Sam - No plans as per Phil Bukar?**

*Call address for P/A 775-3015*

*NO NEW STRUCTURES*

**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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT <b>Adriana Bayley</b>		ADDRESS:		DATE: <b>11 September 1996</b>		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				PHONE:			

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**Zoning Appeal**

Variance  
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 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not In District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

Date: **9/17/96**

**CEO DISTRICT** **2**

7

COMMENTS

2/7/97 OK Above

	Type	Inspection Record	Date
Foundation:	_____	_____	_____
Framing:	_____	_____	_____
Plumbing:	_____	_____	_____
Final:	_____	_____	_____
Other:	_____	_____	_____