

410703
 Permit # City of Portland BUILDING PERMIT APPLICATION Fee \$370. Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: James Mina Phone # _____
 Address: 10 City Center, Ptd, ME
 LOCATION OF CONSTRUCTION: 10 City Center
 Contractor: Rene A. Lie Inc. S.D. # 284-5161 - call to pick up
 Address: 530 Ferry rd; Sico, NE Phone # _____
 Est. Construction Cost: \$70,000. Proposed Use: commercial
 Past Use: commercial
 (Mainway)
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. 55
 # Stories: _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion ALTERATIONS; new front; stairway

For Official Use Only
PERMIT ISSUED
 Date 6/8/90 Subdivision _____ Name _____
 Inside Fire Limits _____ Lot JUL 6 1990
 Bldg Code _____ Ownership: _____
 Time Limit _____ Estimated Cost \$70,000. City Of Portland
 Zoning: 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) Makeover P.M. d. 6-15-90
OK W.D. A. 6-18-90

Foundation:
 1. Type of Sect. _____
 2. Set Backs: Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other _____

Floor:
 1. Sillis Size: _____ Sillis 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: _____ Spacing _____
 2. Ceiling Strapping Size _____
 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 _____

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 Louise E. Chase
 Signature of Applicant Rene A. Lie Date 7-2-90
 Signature of CEO W.D. A. 6-18-90
 Inspection Dates _____

White-Tax Assessor Yellow-GPCOG White Tag-CEO 10 © Copyright GPCOG 1988
M.H. Mitchell

910703
 Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$370. Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: James Mina Phone # _____
 Address: 10 City Center, Portland, ME
 LOCATION OF CONSTRUCTION _____
 Contractor: Rene A. Allie Const. Inc. Sub. 294-5161 *call to pull up*
 Address: 530 Ferry rd; Saco, ME Phone # 84072
 Est. Construction Cost: \$70,000. Proposed Use: commercial
 Past Use: (mainstay)
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. 55
 # Storerooms _____ # Bedrooms _____ Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion ALTERATIONS; new front; stairway

For Official Use Only PERMIT ISSUED
 Date 6/8/90
 Inside Fire Limits _____
 Bldg Code _____
 Time Limit _____
 Estimated Cost \$70,000.
 Subdivision _____
 Name _____
 Lot _____
 Ownership _____
 City Of Portland
 Zoning: 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) *MAINTENANCE PLAN AS PER 6-15-90*
OK WDA 6-7-90

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 2703 _____ Size _____ Spacing 16" O.C.
 4. Joists Size: _____ Size: _____
 5. Bridging Type: _____ Size: _____
 6. Floor Sheathing Type: _____
 7. Other Material: _____

Exterior Walls:
 1. Studding bize _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____ Span(s) _____
 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 _____ Span(s) _____
 3. Wall Covering Type _____
 4. Fire Wall if required _____
 5. Other Materials _____

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

Roof:
 1. Truss or Raftor Size _____ Span _____
 2. Sheathing Type _____ Size _____
 3. Roof Covering _____

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: _____ Square Footage _____
 2. Pool Size: _____
 3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant Rene A. Allie Date _____
 Signature of CEO *William E. Mitchell*

Inspection Dates _____
 White Tag - CEO 10 *MA Mitchell*

PERMIT ISSUED
 WITH LETTER

White - Tax Assessor Yellow - GPCOG

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 300

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

Late Fee \$ _____

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

COMMENTS 7/26/ work started

8/7/90 Stairs (temp) are in waiting for plaster work completion in stairs

11/90 JOB complete MCM

Signature of Applicant _____ Date _____



CITY OF PORTLAND, MAINE

389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 874-8300

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

July 5, 1990

RE: 10 City Center, Portland, Maine

James Mina
10 City Center
Portland, Maine 04101

Dear Sir:

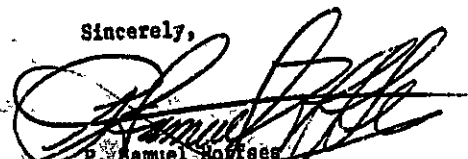
Your application to make alterations (new front) stairway to second floor has been reviewed and a permit is herewith issued subject to the following requirement:

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

1. Stairwell enclosure shall be of 1 hour fire resistance rating construction including fire doors equipped with self closers and fire exit hardware.

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

Sincerely,



P. Samuel Hoffses
Chief of Inspection Services

/c1

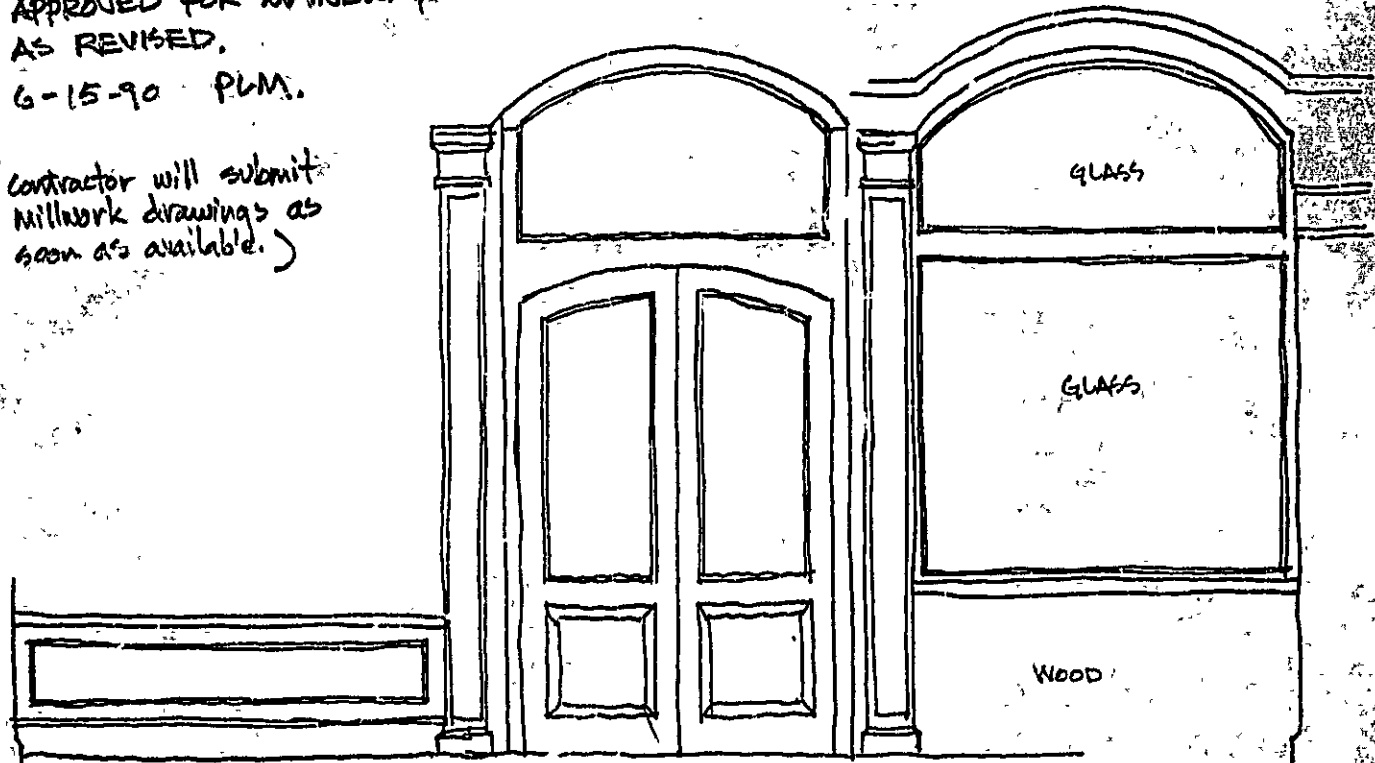
cc: LT. Wallace Garroway, Fire Prevention Bureau

APPROVED FOR MAINWAY.
AS REVISED.

6-15-90 PLM.

(Contractor will submit
millwork drawings as
soon as available.)

THE APPLICANT HAS AGREED
TO IMPROVEMENTS CONSISTENT
WITH THIS SKETCH AS
REVISION TO THEIR ORIGINAL
SUBMISSION.



- TALLER DOORS
- REDUCED UPPER GLASS
TRANSOM

- LARGER LOWER GLASS
- REDUCED UPPER GLASS
- WOOD BASE

- ALL GLASS CLEAR



APPLICATION FOR PERMIT - B
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date July 23, 1990
 Receipt and Permit number 01458

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 10 City Center 2nd floor

OWNER'S NAME: Curry Copy Center ADDRESS: same

	FEES
OUTLETS	
Receptacles <u>30</u> Switches <u>15</u> Plugmold _____ ft. TOTAL <u>45</u>	5.00
FIXTURES: (number of)	
Incandescent _____ Fluorescent <u>25</u> (incl strip) TOTAL <u>25</u>	4.50
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____	
METERS: (number of) _____	
MOTORS: (number of)	
Fractional _____	
1 HP or over _____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of)	
Ranges _____ Water Heaters _____	
Cook Tops _____ Disposals _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL	
MISCELLANEOUS: (number of)	
Branch Panels <u>1</u>	1.00
Transformers _____	
Air Conditioners: Central Unit <u>1</u>	5.00
Separate Units (windows) _____	
Blinds 20 sq ft and under _____	
Over 20 sq ft _____	
Swimming Pools: Above Ground _____	
In Ground _____	
Fire/Burglar Alarms: Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Vol (such as welders) 30 amps and under _____	
over 30 amps _____	
Circuit Breakers, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights: battery <u>2</u>	1.00
Emergency Generators _____	

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-16.6) DOUBLE FEE DUE: _____
TOTAL AMOUNT DUE: 16.50

INSPECTION:
 Will be ready on _____ or will call _____
 CONTRACTOR'S NAME: Michael J. Edue
 ADDRESS: 97 Newtown Road Biddéford ME 04005
 TEL: 282-0333
 MASTER LICENSE NO. 9881 SIGNATURE OF CONTRACTOR: Michael J. Edue
 LIMITED LICENSE NO. _____

INSPECTOR'S COPY - WHITE
 OFFICE COPY - CANARY
 CONTRACTOR'S COPY - GREEN

923419

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$32.20 Zone _____ Map # _____

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

Owner: Curry Copy Ctr Phone # 772-5897

Address: 10 City Ctr - Ptld, ME 04101

LOCATION OF CONSTRUCTION 10 City Ctr

Contractor: Gailey Sign Inc Sub: _____

Address: 9 Thomas Dr; Westbrook Phone # ME 04092

Est. Construction Cost: _____ Proposed Use: retail w 2 signs

_____ Past Use: retail

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 2 signs - 12'x2' & 4'x3'

Foundations:

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. Joist 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 Size _____ Span(s) _____
5. Tracing 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 Size _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

White - Tax Assessor

For Official Use Only

Date: 1/21/92 Subdivision: FEB 1 1992

Inside Fire Limits: _____ Name: _____

Bid Code: _____ Owner: _____

Time Limit: _____ Estimated Cost: _____

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) _____

Ceiling: _____

1. Ceiling Joists Size: _____

2. Ceiling Strapping Size _____ Spacing _____

3. Type Ceiling: _____

4. Insulation Type _____ Size _____

5. Ceiling Height: _____

Roof: _____

1. Truss or Rafter Size _____ Span _____ Action: _____

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: _____

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: Louise F. Chase

Signature of Applicant: Andrea Noyes Date: _____

CEO's District: 2

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

MA. IRVIN

PERMIT ISSUED

FEB 1 1992

CITY OF PORTLAND

PERMIT

HISTORIC PRESERVATION

Does not require review.

Requires Review

Approved

Approved with conditions

Signature

Yes No

Yes No

Square Footage

State Law

Date

District

CONTINUED TO REVERSE SIDE

Ivory Tag - CEO

MA. IRVIN

923419

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$32.22 Zone _____ Map # _____
Please fill out any part which applies to job. Proper plans must accompany form.

PERMIT ISSUED

FEB 11 1992

Owner: Curry Copystr Phone # 772-5897
 Address: 10 City Ctr - Portland, ME 04101
 LOCATION OF CONSTRUCTION: 10 City Ctr
 Contractor: Bailey Sign, Inc. Sub. Phone # NE 04092
 Address: 9 Thomas Dr, Westbrook
 Est. Construction Cost: _____ Proposed Use: retail w/2 signs
 Past Use: _____
 # of Existing Res. Units: _____ # of New Res. Units: _____
 Building Dimensions: L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms: _____
 Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion: Erect 2 signs - 12'x2' & 4'x3'

For Official Use Only
 Date: 1/21/92
 Inside Fire Limits: _____
 Blg Code: _____
 Time Limit: _____
 Estimated Cost: _____
 Ownership: _____
 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) _____

Ceiling:
 1. Ceiling Joists Size: _____ Spacing: _____
 2. Ceiling Strapping Size: _____
 3. Type Ceiling: _____
 4. Insulation Type: _____
 5. Ceiling Height: _____

Roof:
 1. Truss or Rafter Size: _____
 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: _____
 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 Law
 Permit Received By: Foulsoe, Chase
 Signature of Applicant: _____ Date: _____

CEO's District: 2
 CONTINUED TO REVERSE SIDE
 Ivory Tag - CEO

Foundations:
 1. Type of Soil: _____
 2. Set Backs - Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 6. Other: _____
 Floor:
 1. Sills Size: _____
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Spacing 16" O.C.
 4. Joists Size: _____
 5. Bridging Type: _____
 6. Floor Sheathing Type: _____
 7. Other Materials: _____
 Exterior Walls:
 1. Studding Size: _____
 2. No. Windows: _____
 3. No. Doors: _____
 4. Header Size: _____
 5. Bracing: Yes _____ No _____
 6. Corner Posts Size: _____
 7. Insulation Type: _____
 8. Sheathing Type: _____
 9. Siding Type: _____
 10. Masonry Materials: _____
 11. Metal Materials: _____
 Interior Walls:
 1. Studding Size: _____
 2. Header Size: _____
 3. Wall Covering Type: _____
 4. Fire Wall if required: _____
 5. Other Materials: _____

White - Tax Assessor

PLOT PLAN

N



FEES (Breakdown From Front)

Basic Fee \$ 3,200.00

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Lat Fee \$ _____

Type	Inspection Record	Date
<i>Sign Placement</i>		<u>6/12/92</u>
		<u>8/14/92</u>
		<u>9/16/92</u>

COMMENTS

2nd inspection - placed sign - signed all

9/16/92 - placed at gas plan

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 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.

CITY OF PORTLAND, MAINE
MEMORANDUM

TO: P. Samuel Hoffses, Bill Giroux

FROM: Philip L. Meyer, Urban Designer

DATE: February 3, 1992

SUBJECT: Curry Copy Center Signage

I have reviewed these signs when the P.A.D. signage guidelines as follows:

1. Projecting Sign

I approve this sign with the following conditions:

- a. The lowest point on the sign will be 11'-0" above the sidewalk (as indicated to me by the applicant).
- b. The sign will be installed perpendicular to the corner of the building so as to be visible from Cross and Free Streets (as indicated to me by applicant).
- c. Exterior lighting will be provided. Fixtures shall not cause any glare to pedestrians and shall be focused on the sign only. Two fixtures are proposed, one on each side of the sign. Conduit will run from an existing electrical source on the building face and shall be painted to match the brick.
- d. All sign and electrical attachments shall be made by the gentlest means possible, with anchoring into mortar joints only.

2. Cabinet Sign

I have approved a revised cabinet sign measuring 18" high by 23'-2" long by 7" deep with the following condition:

- a. All attachments shall be made into the mortar and not into the brick.
- b. Exterior conduit, if any, shall be concealed by existing brick detail and painted to match brickwork.

Prior to installation of these signs, the three existing signs shall be removed. (The applicant has indicated this is the intention).

Who do you use the sign?

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN OR AWNING PROPOSED
TO BE ERECTED ON A BUILDING AT 10 City Center

IN PORTLAND, MAINE Evelyn MWA being the owner of the premises
at 10 City Ctr. in Portland, Maine hereby gives consent to the
erection of a certain sign owned by Evelyn MWA over the
sidewalk or on the building from said premises as described in application
to the Division of Inspection Services of Portland, Maine for a permit to
cover the erection of said sign:

See Attached

And in consideration of the issuance of said permit Evelyn MWA,
owner of said premises, in event said sign shall cease to serve the purpose
for which it was erected or shall become dangerous and in event the owner of
said sign shall fail to remove said sign or make it permanently safe in case
the sign shall serve the purpose for which it was erected, hereby agrees
for himself or herself, for his heirs, its successors, and his or its
assigns, to completely remove said sign in such condition and of order
from him to remove it.

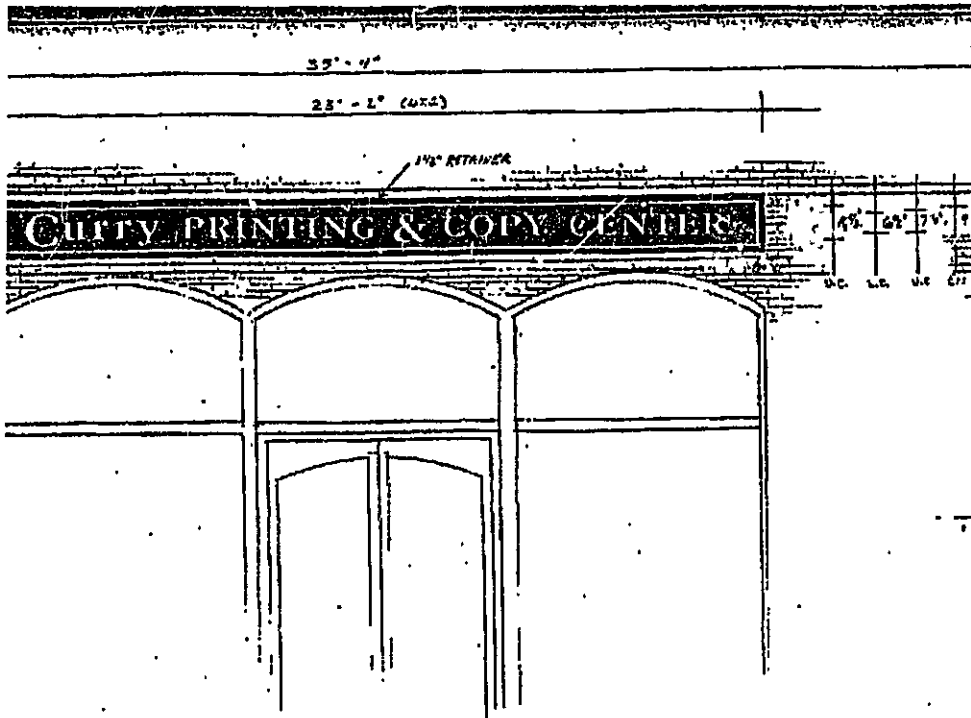
In witness whereof, the owner of said premises has signed this consent and
agreement this 14 day of 1 1992

Evelyn MWA
signature

John K. MWA
Lessee's signature

RECEIVED
JAN 24 1992

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND



* 16'-20'-27" INTERN. ILLUM. SIGN CAB. W/ PRINTED COPY

COLORS: CAB - GREY
 RETAINER - RED PANTONE 032C
 FACE - 1" BORDER - WHITE
 COPY - WHITE
 B/G - B1 - PANTONE 072C

FINAL MFG. PRINT
 DATE 1/10/01
 OK'PER R. Hays
 12/01



DESIGNER	DATE	SCALE	SHEET
L. HAYFIELD	1/10/01	3/8" = 1"	L. of 2
PROJECT #	DRAWING #	DATE	
D-259	02272-02	1/10/01	

Customer: **CURRY PRINTING**
 Location: **10 CITY CENTER, PORTLAND, ME**
 Designer: **L. HAYFIELD** Signature: **R. HAYFIELD**
 Date: **1/10/01** Scale: **3/8" = 1"**
 Sheet: **L. of 2**
 Scale: **3/8" = 1"** Date: **1/10/01**
 Job No.: Sheet: **L. of 2**
 (ACCEPTANCE SIGNATURE/DATE)
 Project #: **D-259** Drawing #: **02272-02**



©COPYRIGHT

Home Office: 9 Thomas Drive, Col. Westbrook Executive Park, Westbrook, ME 04092 207-774-2949
 Portland • Lewiston • Augusta

FEB-7-92 FRI 9:35 207 767 5556 P.01 2.01

FEB-18-92 MON 9:19 ROCKWELL BURR P.01

Certificate of Flame Resistance



REGISTERED FABRIC OR CONCERN NUMBER
E-404.01

ISSUED BY
DICKSON . CONSTANT
22599 Western Ave.
Torrance, CA 90501

Date tested or manufactured
2/7/92

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).
for Custom Canvas of Portland ADDRESS 80 Second Street
City South Portland, Maine STATE Maine 04106

Certification is hereby made that: (Check "a" or "b")

(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used _____ Chem. Reg. No. _____
Method of application _____

(b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

Trade name of flame-resistant fabric or material used DIKO-LET Reg. No. _____

The Flame Retardant Process Used will not Be Removed By Washing

EXCISE TELEPHONE
Name of Applicant or Production Superintendent

By [Signature] SECRETARY

To: Loose Chase In Code Enforcement
Phone Forward ASAP
I enclose here is the awning certificate needed for
Nuplure awning installation at 121 Center St. Rockwell
Total Rockwell Bur Signs 761-5839

THIS REPRODUCIBLE MATRAX IS FOR THE EXCLUSIVE USE OF STATE FIRE MARSHAL LICENSED CONCERNS AND INDIVIDUALS FOR THE DORMITORY OF RESIDENT CHASE

02/10/92 11:20

207 622 3902

BAILLY SIGN

001



Fax Transmitted:

Date: 2/10/92

To: Phil Meyer

Company: City of Portland - Planning Office

From: Andrea Noyes

Project Name: Curry Copy Center

Project No: _____

Number of Pages To Follow: 1

Message: Please let me know if we can begin manufacturing today if possible. Thank you - Andrea

Reply Requested: Yes No

If you have any problems with this FAX transmission, please call us.

(207-774-2843) Telephone #. (207-774-1183) FAX #.

ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

1-14-92

PRODUCER

The Bill Johnson Insurance Agency
P.O. Box 3028
Lewiston, ME 04240

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

COMPANIES AFFORDING COVERAGE

CODE SUB CODE

COMPANY LETTER A Hanover Insurance Co.

INSURED

COMPANY LETTER B Maine Assigned Risk Plan

Bailey Sign Inc.
9 Thomas Drive
Westbrook, ME 04092

COMPANY LETTER C

COMPANY LETTER D

COMPANY LETTER E

COVERAGES

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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS
A	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR OWNER'S & CONTRACTOR'S PROT	ZDP377520500	3-1-91	3-1-92	GENERAL AGGREGATE \$ 2000 PRODUCTS-COMP/OPS AGGREGATE \$ 2000 PERSONAL & ADVERTISING INJURY \$ 1000 EACH OCCURRENCE \$ 1000 FIRE DAMAGE (Any one fire) \$ 50 MEDICAL EXPENSE (Any one person) \$ 5
A	AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS X HIRED AUTOS X NON-OWNED AUTOS GARAGE LIABILITY	ADP387409100	3-1-91	3-1-92	COMBINED SINGLE LIMIT \$ 1000 BODILY INJURY (Per Person) BODILY INJURY (Per Accident) PROPERTY DAMAGE
B	EXCESS LIABILITY OTHER THAN UMBRELLA FORM WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	Binder	1-7-92	1-7-93	STATUTORY \$ 100 (EACH ACCIDENT) \$ 500 (DISEASE-POLICY LIMIT) \$ 100 (DISEASE-EACH EMPLOYEE)
	OTHER				

RECEIVED
JAN 21 1992

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

CERTIFICATE HOLDER

City of Portland
389 Congress Street
Portland, ME 04101

ISSUING OFFICE

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 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.

AUTHORIZED REPRESENTATIVE

John Belanger

ACORD 25-S (3/85)

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ADDENDUM

CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)
8-17-92

PRODUCER

BROOKS INSURANCE AGENCY, INC.
P.O. BOX 307
PORTLAND, ME 04112

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COMPANIES AFFORDING COVERAGE

COMPANY LETTER **A** PEERLESS INSURANCE COMPANY

COMPANY LETTER **B**

COMPANY LETTER **C**

COMPANY LETTER **D**

COMPANY LETTER **E**

INSURED

CURRY COPY CENTER OF PORTLAND
10 CITY CENTER
PORTLAND, ME 04112

COVERAGES

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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	BOP8473868	8/9/91	8/9/92	BODILY INJURY OCC.
	<input checked="" type="checkbox"/> COMPREHENSIVE FORM				BODILY INJURY AGG.
	PREMISES/OPERATIONS				PROPERTY DAMAGE OCC.
	UNDERGROUND EXPLOSION & COLLAPSE HAZARD				PROPERTY DAMAGE AGG.
	PRODUCTS/COMPLETED OPER.				BI & PD COMBINED OCC.
	CONTRACTUAL				BI & PD COMBINED AGG.
	INDEPENDENT CONTRACTORS				PERSONAL INJURY AGG.
	BROAD FORM PROPERTY DAMAGE				
	PERSONAL INJURY				
A	AUTOMOBILE LIABILITY				BODILY INJURY (Per person)
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per accident)
	<input type="checkbox"/> ALL OWNED AUTOS (Priv. Pass.)				PROPERTY DAMAGE
	<input type="checkbox"/> ALL OWNED AUTOS (Other Than Priv. Pass.)				BODILY INJURY & PROPERTY DAMAGE COMBINED
	<input type="checkbox"/> HIRED AUTOS				
<input type="checkbox"/> NON-OWNED AUTOS					
<input type="checkbox"/> GARAGE LIABILITY					
A	EXCESS LIABILITY	UP6473868	8/9/91	8/9/92	EACH OCCURRENCE
	<input checked="" type="checkbox"/> UMBRELLA FORM				AGGREGATE
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				STATUTORY LIMITS
A	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				EACH ACCIDENT
					DISEASE - POLICY LIMIT
					DISEASE - EACH EMPLOYEE
A	OTHER BUILDING	BOP8473868	8/9/91	8/9/92	600,000 "SPECIAL" FORM

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

BAILEY SIGN, INC.
9 THOMAS DRIVE
WESTBROOK, ME 04092

SHOULD 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. FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ANTHONY S. MASON, JR.

Anthony S. Mason, Jr.

PLUMBING APPLICATION

2nd floor
changed office

Department of Human Services
Division of Health Engineering
(207) 283-3825

PROPERTY ADDRESS

Town Or Plantation: Portland

Street Subdivision Lot #: 10-12 City Center

PROPERTY OWNERS NAME

Last: Mina First: James

Applicant Name: Timothy S Darling

Mailing Address of Owner/Applicant (if Different): 42 Reed St

PORTLAND 5184 TOWN COPY

Date Permit Issued: 9/12/94 \$ 8 FEE Charged

L.P.L. # 0124

Local Plumbing Inspector Signature: _____

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant: _____ Date: 9/12/94

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: Tammy Munson Date Approved: 11-94

PERMIT INFORMATION

This Application is for:

- NEW PLUMBING
- RELOCATED PLUMBING

Type Of Structure To Be Served:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER - SPECIFY Office Building

Plumbing To Be Installed By:

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D. HOUSING DEALER, MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # 617160

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<p>OR</p> <p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p> <p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p>Number of Hook-Ups & Relocations: _____</p> <p>Hook-Up & Relocation Fee: _____</p> <p>OR</p> <p>TRANSFER FEE \$[8.00]</p>		Hosebibb / Sillcock		Bathub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	01	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____	01	Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixture
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

\$ 8