

City of Portland BUILDING PERMIT APPLICATION Fee \$28.20 Zone _____ Map # _____ Lot# _____

City of Portland Building Permit Application Fee \$28.20 Zone _____ Map # _____ Lot# _____
 Name: Victoria Murphy Phone # 773-4457
 Address: XXXXXXXXXX 57 Exchange St - Ptld, ME 04101
 LOCATION OF CONSTRUCTION 168 Middle St.
 Contractor: Bancom Sub: (Picture Yourself)
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: hair salon w sign
 Past Use: hair salon
 # 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 sign - 4'x'4'

PERMIT ISSUED
 For Official Use Only
 Date 8/18/93 Subdivisor Name SEP-7-1993
 Inside Fire Limits _____ Lot _____ Public _____
 Blgd Code _____ City of Portland
 Time Limit _____
 Estimated Cost _____

Zoning: D3
 Status/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) W/ht - 9-3-93

HISTORIC PRESERVATION
 1. Ceiling Joists Size: _____ Spacing _____ Not in District no. Lenawaz
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceiling: _____ Size _____ 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 _____ Approved with conditions
 3. Roof Covering Type _____ Decked

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 Amy Reed Date 8/18/93

Signature of CEO [Signature] Date _____

Inspection Dates _____

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

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Size: _____
 1 Joists Size: _____ Spacing 16" O.C.
 4. 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 _____ Spacing _____
 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 _____

930800

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$28.20 Zone _____ Map # _____ Lot # _____

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

Owner: Victoria Murphy Phone # 773-4457
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 Past Use: hair salon
 # 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 sign - 4'x4'

For Official Use Only
 Date 3/19/93 Submitter _____
 Inside Fire Limits _____
 Bldg Code _____
 Time Limit _____
 Estimated Cost _____
 Owner/City: **CITY OF PORTLAND**
 SEP 7 1993
 Zoning: B3
 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 _____ City Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other: WPH - 9-3-93 (Explain)

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

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 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: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____
 Roof:
 1. Truss or Rafter Size: _____
 2. Sheathing Type: _____
 3. Roof Covering Type: _____
 Chimneys:
 Type: _____ Number of Fire Places _____ Date _____
 Heating:
 Type of Heat: _____
 Electrical:
 Service Entrance size: _____ Smokes 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 Amy Reed Date 3/18/93
 Signature of CEO Amy R. Reed Date _____
 Inspection Dates _____

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 20.20
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Inspection Record

Type	Date
<u>Work complete</u>	<u>12/2/93</u>
_____	_____
_____	_____
_____	_____
_____	_____

COMMENTS

12-2-93 - Work completed - sign is up - dimensions
seem to ~~be~~ be accurate

Signature of Applicant _____

Date _____

CERTIFICATE OF INSURANCE

This is to certify that

- STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
- STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois

is in force for

_____ Name of Policyholder

_____ Address of Policyholder

Location of operations

The following coverages for the periods and limits indicated below

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD (eff./exp.)	LIMITS OF LIABILITY
	<input checked="" type="checkbox"/> Comprehensive General Liability		<input type="checkbox"/> Dual Limits for: <ul style="list-style-type: none"> Each Occurrence \$ _____ BODILY INJURY Aggregate \$ _____
	<input type="checkbox"/> Manufacturers' and Contractors Liability		
	<input type="checkbox"/> Owners', Landlords and Tenants' Liability		Each Occurrence \$ _____ PROPERTY DAMAGE Aggregate \$ _____
The above insurance includes (applicable if indicated by <input checked="" type="checkbox"/>)			<input checked="" type="checkbox"/> Combined Single Limit for: <ul style="list-style-type: none"> Each Occurrence \$ _____ BODILY INJURY AND PROPERTY DAMAGE Aggregate \$ _____
<input checked="" type="checkbox"/> PRODUCTS-COMPLETED OPERATIONS <input type="checkbox"/> OWNERS' OR CONTRACTORS' PROTECTIVE LIABILITY <input type="checkbox"/> CONTRACTUAL LIABILITY <input checked="" type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input checked="" type="checkbox"/> BROAD FORM COMPREHENSIVE GENERAL LIABILITY			
POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD (eff./exp.)	CONTRACTUAL LIABILITY LIMITS (if different than above)
	<input type="checkbox"/>		Each Occurrence \$ _____ BODILY INJURY Aggregate \$ _____
	<input type="checkbox"/>		Each Occurrence \$ _____ PROPERTY DAMAGE Aggregate \$ _____
	<input type="checkbox"/>		Each Occurrence \$ _____ Aggregate \$ _____
	<input type="checkbox"/> EXCESS LIABILITY <input type="checkbox"/> Umbrella <input type="checkbox"/> Other		<input type="checkbox"/> Combined Single Limit for: <ul style="list-style-type: none"> Each Occurrence \$ _____ BODILY INJURY AND PROPERTY DAMAGE Aggregate \$ _____
	<input type="checkbox"/> Workers Compensation and Employers Liability		Part 1 STATUTORY Part 2 BODILY INJURY Each Accident \$ _____ Disease-Each Employee \$ _____ Disease-Policy Limit \$ _____

*Aggregate not applicable if Owners', Landlords' and Tenants' Liability Insurance excludes structural alterations, new construction or demolition

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

NAME AND ADDRESS OF PARTY TO WHOM CERTIFICATE IS ISSUED

Municipal Man. Comm. Inc.
 215 Washington St.
 Newton, MA 02459
 Tel. 554-1111

Date: 11/14/92
 Signature of Authorized Representative: _____
 Title: _____

CITY OF PORTLAND

HISTORIC
PRESERVATION
ORDINANCE



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175
3

Sign Requirements:
Sign Location: 168 middle st.
Building Owners liability ins: or Permission
Business liability ins: _____
Height of sign from sidewalk: 194 in.
Distance sign projects from building: 54 in
How will sign be installed: Barogram
Will there be lighting? no
Size of lettering: 4-5 in.
Material Sign is made of: wood
How thick is the sign: 1 in.
Sketch of sign, with dimensions: (sketch) 4x4
Photo of area sign will hang: _____
Color scheme: card 16

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN OR AWNING PROPOSED

TO BE ERECTED ON A BUILDING AT 118 Middle Street (57 Exchange Street)

IN PORTLAND, MAINE Travelers / Nathaniel as agent being the owner of the premises

at 118 Middle Street in Portland, Maine hereby gives consent to the

erection of a certain sign owned by Picture Yourself 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 Travelers,

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 still serves the purpose for which it was erected, hereby agrees

for himself or itself, 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 2nd day of August 1943.

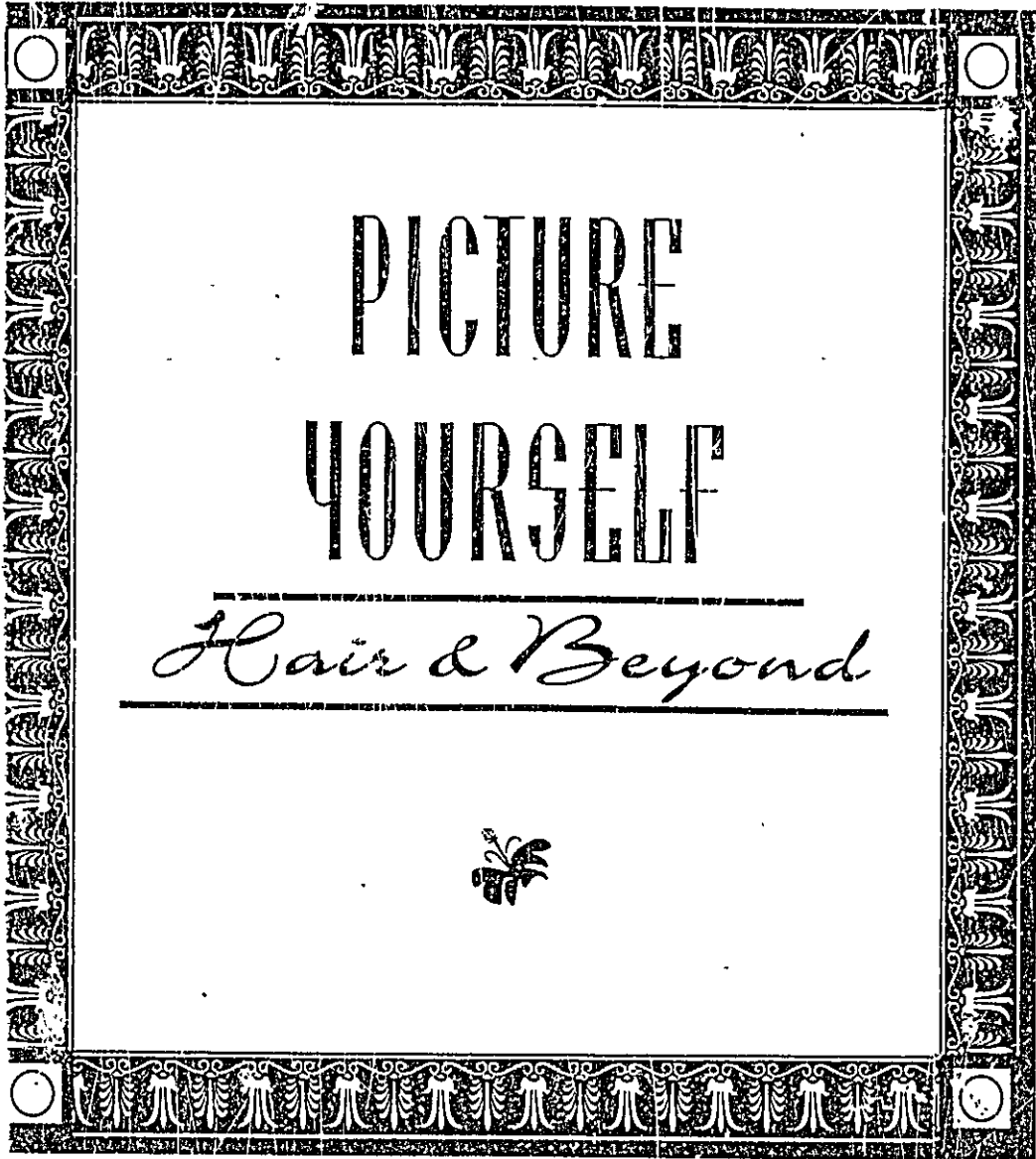
Nathaniel

Owner's Signature

Property Manager
Nathaniel

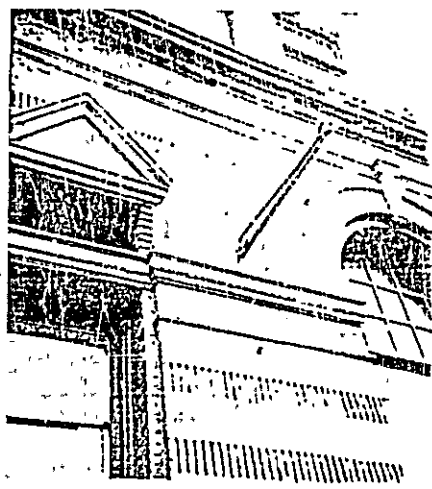
Victoria P. Mayhew

Lessee's signature



4' x 4'

Green and Gold





City of Portland
 Department of Planning and Urban Development
 Room 211 City Hall, 789 Congress Street
 Portland, Maine 04101 207-874-8300

**HISTORIC PRESERVATION
 APPLICATION FOR CERTIFICATE OF APPROPRIATENESS**

Pursuant to review under the City of Portland's Historic Preservation Ordinance (Chapter 14, Article IX of the Portland City Code), application is hereby made for a Certificate of Appropriateness for the following work on the specified historic property:

Property Name and Address: 168 Middle

Applicant: (name) Vicki Murphy (telephone) 773-4457
 (company) Proctor Associates
 (address) 57 Exchange St

Property Owner, if different: (name) Travelers / Northland as agent
 (address) One Portland Square
Portland, ME 04101
 (telephone) 671-7100

Architect (if any): _____
 Contractor or Builder (if any): _____

Local Designation: within historic district: (name) Old Port
 Landmark Contributing Non contributing.
 National Register Status: Landmark District Not Applicable.

Description of Proposed Work (Use additional sheets as necessary. Submit architectural sketches, plans, scale drawings, photographs, specifications, or other supporting documentation as required. All submission materials will be retained by the City. In the case of demolition or removal of a structure, the following indicates the proposed condition and appearance of the property thereafter):

see attached signed drawing

Work is proposed in conjunction with Major site plan application. Minor site plan application.
 Building permit application. None of the above.

Applicant's Signature: [Signature] Owner's Signature (if different): [Signature]
Northland

* Note: No application fee. Applicant is responsible for costs of sending notices and placement of legal ad. Such costs shall be paid prior to issuance of Certificate/Building Permit or upon denial of Application.

FOR CITY USE ONLY
 Historic Resource Inventory Number: _____ Assessor's Chart/Block/Lot: _____

Date Application Submitted: 7/93 Date Application Complete: _____