

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

| | | | | | | | |
|---|--|--|--|---|--|--------------------------------------|--|
| Location of Construction: 692 Congress St | | Owner: Mercy Hospital | | Phone: | | Permit No: 941334 | |
| Owner Address: | | Lease/Buyer's Name: Good Cause Thrift Shop | | Phone: | | Business Name: | |
| Contractor Name: Earlo Sigas 92 Industrial Pk | | Address: Saco, ME 04072 282-2400 | | Phone: | | Permit Issued: DEC 13 1994 | |
| Past Use: Retail | | Proposed Use: Retail w/sign | | COST OF WORK: \$ 29.10 | | PERMIT FEE: 29.10 | |
| Proposed Project Description: Erect Garage As per plans 20.5 sq ft (UL) S2151 | | FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied | | INSPECTION: Use Group: Type: MOCAH | | Signature: <i>[Signature]</i> | |
| | | Signature: | | Signature: <i>[Signature]</i> | | Zoning: CBL-47-C-33 | |
| | | PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) | | Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied | | Zoning Approval: <i>[Signature]</i> | |
| Permit Taken By: Nary Gresik | | Date Applied For: 7 Dec 94 | | Signature: | | Date: | |

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

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] **7 Dec 94**
SIGNATURE OF APPLICANT **Ed Blumenthal** ADDRESS: DATE: 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
 - ☐ 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: *[Signature]*

CEO DISTRICT

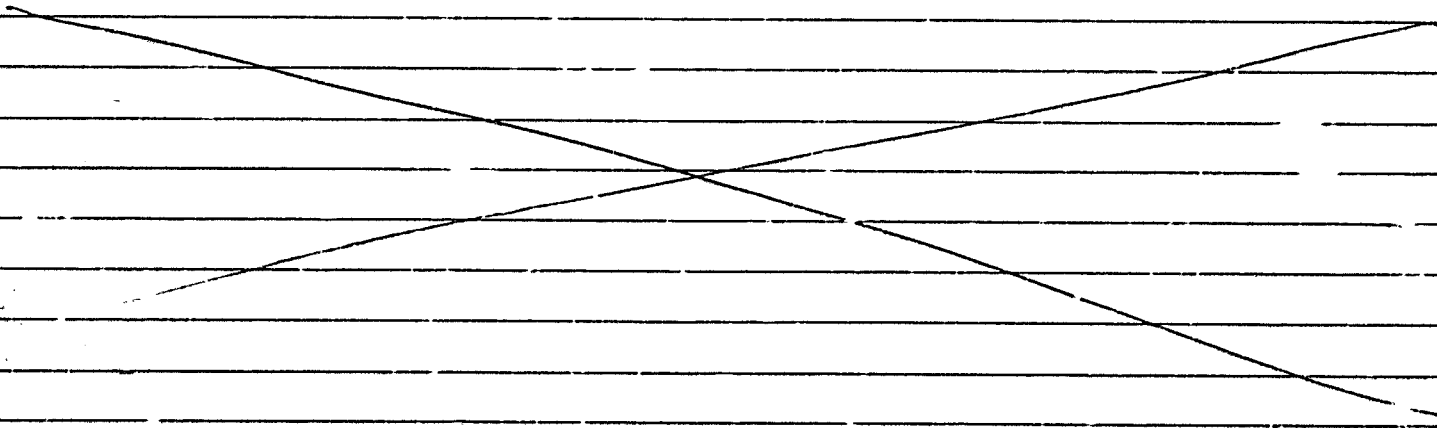
3

[Signature]

COMMENTS

12/20/94 No signage yet. (AS)

1/31/95 Signage installed per submitted plans. (AS)



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

DECLARATIONS

BUSINESSOWNERS POLICY

BOP0015043

Renewal of Number

Policy No. BOP 0015043-01-13

- ☐ LUMBER MUTUAL INSURANCE COMPANY
☐ NORTH AMERICAN LUMBER INSURANCE CO.
☒ SEACO INSURANCE COMPANY
 Coverage is provided in the Company designated by [X] above.

Named Insured and Mailing Address

NICHOLAS & DOROTHY KOUTSIVITIS

148 SUMMIT PARK AVE.
 PORTLAND

ME 04103

Form Applicable

☐ Standard

☒ Special

Policy Period: From 07/19/94 to 07/19/95 at 12:01 A.M.* Standard time at your mailing address shown above. *Exceptions: 12:00 noon in Maine, Michigan, New Hampshire, North Carolina, Puerto Rico and Virginia.

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

BUSINESS DESCRIPTION

Form of Business: ☐ Individual ☐ Joint Venture ☒ Partnership
☐ Corporation ☐ Other
 Description of Business: APARTMENT/LESSOR

DESCRIBED PREMISES

| PREM. NO. | BLDG. NO. | LOCATION/ MORTGAGEE |
|-----------|-----------|--------------------------------------|
| 01 | 01 | |
| 02 | 01 | |
| 01 | 01 | 693 CONGRESS ST., PORTLAND, ME 04103 |

*** CONTINUED ON PAGE 2 ***

(PAGE 1 OF 3)

| PROPERTY | | | | | | |
|---|--------------|--------------|--------------|------------------------------------|--------------|--------------|
| | PREM. NO. | BLDG. NO. | PREM. NO. | BLDG. NO. | PREM. NO. | BLDG. NO. |
| Limits of Insurance | 01 | 01 | 02 | 01 | 01 | 01 |
| BUILDINGS | \$ | | \$ | | \$ | 261000 |
| ACV-BLDG OPTION | | N | | N | | N |
| AUTO INCREASE % | | 8% | | 8% | | 8% |
| BUSINESS PERSONAL PROPERTY | \$ | 0 | \$ | 0 | \$ | 0 |
| DEDUCTIBLE \$ 250 | | | | | | |
| OPTIONAL COVERAGES-APPLICABLE ONLY IF AN "X" IS SHOWN IN THE BOXES BELOW: | | | | | | |
| | | | | LIMITS OF INSURANCE | | |
| 1. <input type="checkbox"/> Outdoor signs | | | | \$ per occurrence | | |
| 2. <input checked="" type="checkbox"/> Exterior Grade Floor Glass | | | | Included | | |
| 3. <input type="checkbox"/> Burglary & Robbery | | | | \$10000 Inside | | |
| 4. <input checked="" type="checkbox"/> Money & Securities (Special form only) | | | | \$ 2000 Outside | | |
| 5. <input type="checkbox"/> Employee Dishonesty | | | | \$ per occurrence | | |
| 6. <input type="checkbox"/> Mechanical Breakdown | | | | Included | | |
| 7. <input checked="" type="checkbox"/> Other | | | | SEE ATTACHED | | |
| LIABILITY AND MEDICAL PAYMENTS | | | | | | |
| Except for Fire Legal Liability, each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to paragraph D.4. of the Business-owners Liability Coverage Form. | | | | | | |
| | | | | LIMITS OF INSURANCE | | |
| Liability and Medical Expenses | | | | \$ 1000000 | | |
| Medical Expenses | | | | \$ 5000 per person | | |
| Fire Legal Liability | | | | \$ 50000 any one fire or explosion | | |

*** CONTINUED ON PAGE 3 ***

(PAGE 2 OF 3)

FORMS AND ENDORSEMENTS

Forms and Endorsements made part of this policy at time of issue:
 BP0002(12-92) BP0006(12-92) BP0009(6-89) EP0122(1-87) IL0247(3-92)
 IL0913(1-82) BPO417(6-89)

PREMIUM

| | | |
|--------------------|-----------------|---------------|
| Annual Premium: \$ | Payable: \$ | at inception; |
| \$ | 1st install. \$ | 2nd install. |

Countersigned:
 Date: 06/10/94

By: SOUTHERN MAINE INS. AGY.
 Authorized Representative

18018

Thomas G. Am...

These declarations, together with the coverage form(s), common policy conditions and forms, and endorsements, if any, issued to form a part thereof, complete the above numbered policy.

JDL 195 - X (ED. 1-87)

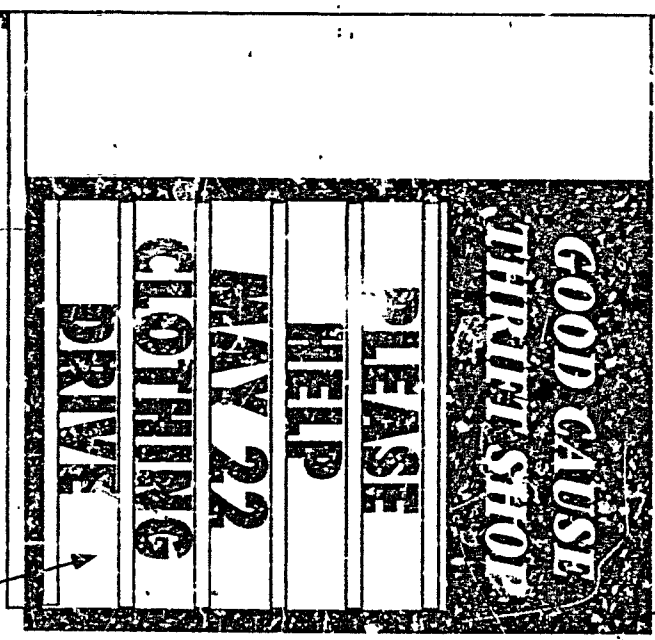
W.O. NO 005-56153
SALES REP. E.B./AWD

| SECTION | ILLUMINATED | LOCATION | DATE |
|-----------------|-----------------|-------------------|---------------|
| CABINET TYPE | 5'4 1/2" | 4'0" 14" | BRONZE |
| CROWN NET COLOR | BRONZE | DIVIDER BAR COLOR | BRONZE |
| FACE 1 MATERIAL | 3/16" WHITE LEX | COPY COLOR | WHITE |
| FACE 2 MATERIAL | 3/16" WHITE LEX | COPY COLOR | WHITE |
| INDUCTION TYPE | ELECTRICAL LOC | MOUNTING | 5'0" |
| POLE COVER FACE | 4'0" | MT. TO GRADE | 11'5 1/2" 204 |
| CUT SIZE | 4'0" | MT. TO GRADE | 11'5 1/2" 204 |
| DRAIN HOLES | 4'0" | MT. TO GRADE | 11'5 1/2" 204 |

Underwriters Laboratories Inc. ®

DESIGNED FOR **MEER HOBBS** LOCATION **PORTLAND, ME**

5'4 1/2"



WHITE FACE

5 LINES 6" CHANGEABLE COPY
ALTERNATE STYLE

MFG. & INST. ONE (1)
D/F ILLUMINATED PROJECTING
SIGN W/ READERBOARD AS SHOWN

**Field Survey
Required**

**CUSTOMER
APPROVED
DRAWING**

| TEXT & COMPUTER SPECIFICATIONS |
|------------------------------------|
| TRACTACT GREENWOOD ULTRA II |
| FILE NAME GOOD CAUSE |
| SALES REP E.B. B |
| PROGRAM CALVARS |

RECEIVED
DEC 7 1994
CITY OF PORTLAND, ME
DEPT. OF BUILDING INSPECTION

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CHECKED BY
DRAWING NUMBER
B-11-C4-00
SHEET OF

THE BARLO GROUP
Electrical Sign Advertising
Screen Process Printing

BARLO SIGNS
HUDSON, NH • 158 Greeley St., Hudson, NH 03051 (603) 882 2630 FAX (603) 882 7880
SACO, ME • 92 Industrial Pk., Saco, ME 04072 (207) 282 2400 FAX (207) 254 9181
BERLIN, NH • 87 Wiland St., Berlin, NH 03570 (603) 752 4440 FAX (603) 752 7157
BRADLEY, ME • 159 R Main St., Bradley, ME 04411 (207) 827 2500 FAX (207) 827 8459
WILLISTON, VT • 35 Commerce St., Williston, VT 05495 (802) 638 2115 FAX (802) 638 4182
BARLO SIGNS GRAPHICS • 158 Greeley St., Hudson, NH 03051 (603) 882 2630 FAX (603) 882 3163

| NO | DATE | REVISIONS | BY |
|----|------|--------------|----|
| 1 | 9/27 | REV. DRAWING | DR |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |