

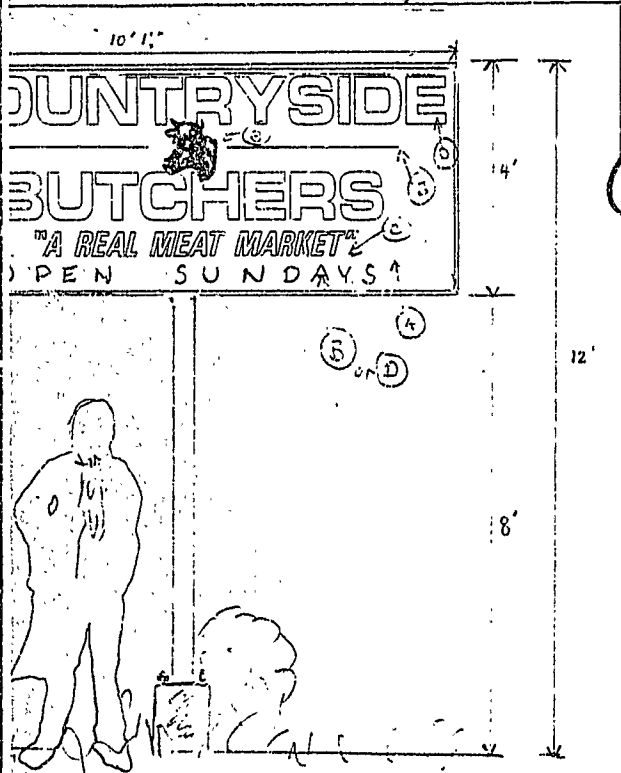
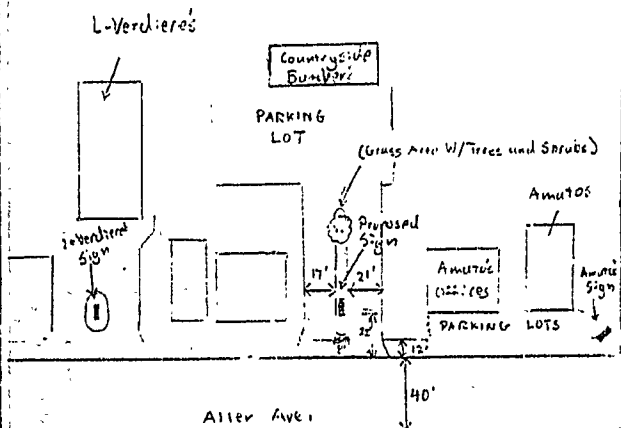
AGRAM LSee 5000 WJ

NOTE: Some of the neighboring buildings and lots are not to scale, but are indicated for reference only. Figures for Countryside lot (365 Allen Ave.) are accurate.

**RECEIVED**

SEP 07 1990

DEPT. OF BUILDING INSPECTION'S  
CITY OF PORTLAND



(The Only Sign To Be on Property)

- LEGEND:
- (A) Translucent White Heavy 56
  - (B) Black 3M Vinyl Film
  - (C) Dic. Gray 3M Vinyl Film
  - (D) Dic. Red 3M

- S/F of Sign: 40 S/F
- Two-sided Illuminated Sign

<b>Rockwell Burr</b>		184 Read St. Portland, ME 04103 (207)761-3939		ACCEPTANCE SIGNATURE				- Copyright	
DATE: 9/4/90		SCALE:		DATE:		REVISIONS:		PROP/CNIC #:	
JOB #/W/O #:		DRAWING #:		DATE:		REVISIONS:		PROP/CNIC #:	
AVE.:		SHEET OF:		DATE:		REVISIONS:		PROP/CNIC #:	

THIS DESIGN IS THE EXCLUSIVE PROPERTY OF ROCKWELL BURR ASSOC. FULL PRODUCTION AND REPRODUCTION RIGHTS ARE FULLY RESERVED BY US.

THIS PRINT HAS BEEN DESIGNED FOR YOUR PERSONAL USE. IT MAY NOT BE SUBMITTED, USED OR EXHIBITED OUTSIDE OF YOUR COMPANY OR ORGANIZATION WITHOUT THE EXPRESSED WRITTEN PERMISSION OF ROCKWELL BURR ASSOCIATES.

SEP 6 '90 9:27 FROM CLAPK-15500-PTLD-ME

FHGE.002

CERTIFICATE OF INSURANCE

DATE: 09/04/90

PRODUCER

Clark Associates  
307 Cumberland Avenue  
P O Box 3543  
Portland, ME 04104  
(207. 774-6257)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHT UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

COMPANIES AFFORDING COVERAGE

COMPANY A Matre Bonding  
LETTER

COMPANY B  
LETTER

COMPANY C  
LETTER

COMPANY D  
LETTER

COMPANY E  
LETTER

INSURED

Rockwell Burr Associates  
184 Read Street  
Portland, ME 04103

COVERAGES

THIS IS TO CERTIFY THAT 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	POLICY EXPIRATION DATE	ALL LIMITS IN THOUSANDS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCURRENCE <input type="checkbox"/> OWNER'S & CONTRACTORS PROTECTIVE	EPA07080246	08/23/90	08/23/91	GENERAL AGGREGATE \$ 600 PRODUCTS-COMP/OPS AGGREGATE \$ 600 PERSONAL & ADVERTISING INJURY \$ 300 EACH OCCURRENCE \$ 300 FIRE DAMAGE (ANY ONE FIRE) \$ 50 MEDICAL EXPENSE (ANY ONE PERSON) \$ 5
	AUTOMOBILE LIABILITY <input 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 <input type="checkbox"/> GARAGE LIABILITY				CSL \$ BODILY INJURY (PER PERSON) \$ BODILY INJURY (PER ACCIDENT) \$ PROPERTY DAMAGE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA				PER OCCURRENCE   AGGREGATE \$   \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY				STATUTORY \$ (EACH ACCIDENT) \$ (DISLAST POLICY LIMIT) \$ (DISEASE EACH EMPLOYEE)
	OTHER				

RECEIVED  
SEP 07 1990  
DEPT. OF BUILDING INSPECTIONS  
CITY OF PORTLAND

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

Countryside Butchers  
Attn: Michael Heglund  
1467A Brackett  
Gorham ME 04038

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

*[Signature]*

# ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)  
9/10/90

PRODUCER  
Pike Conway Dahl Agency  
P.O. Box 1296  
Windham, Maine 04062

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

- COMPANY LETTER A COMMERCIAL UNION INSURANCE
- COMPANY LETTER B
- COMPANY LETTER C
- COMPANY LETTER D
- COMPANY LETTER E

INSURED  
Michael Hogard d/b/a  
Countryside Distributors, Inc.  
RR #4, Box 164A  
Gorham, Maine 04038

### 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 <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR. OWNER'S & CONTRACTOR'S PROT.	FM LB98155	10/18/89	10/18/90	GENERAL AGGREGATE \$ PRODUCTS-COMP. OPS AGGREGATE \$ PERSONAL & ADVERTISING INJURY \$ EACH OCCURRENCE \$ 1,000 FIRE DAMAGE (Any one fire) \$ MEDICAL EXPENSE (Any one person) \$
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	EXCESS LIABILITY OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY \$ (EACH ACCIDENT) \$ (DISEASE-POLICY LIMIT) \$ (DISEASE-EACH EMPLOYEE) \$
	OTHER				

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

Re: Sign Coverage

### CERTIFICATE HOLDER

Portland City Hall  
Attn: Louise Chase  
Congress Street  
Portland, Maine 04101

### CANCELLATION

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 Pike Conway Dahl Agency

*Susan L. Simmons*

FD 25-S (3/88)

ACORD CORPORATION 1988

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

Location of Construction: 365 Allen Ave		Owner: Raymond A. Carye	Phone:	Permit No: <b>960137</b>
Owner Address:	Leasee/Buyer's Name:	Phone:	Business Name:	<b>PERMIT ISSUED</b> MAR - 7 1996 <b>CITY OF PORTLAND</b>
Contractor Name: Northport Realty	Address: 1321 Washington Ave Portland, ME 04103	Phone: 797-3380		
Past Use: 1-fam Dwelling	Proposed Use: Vacant Land	COST OF WORK: \$	PERMIT FEE: \$ 25.00	
		FIRE DEPT <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	
Proposed Project Description: Remove Dwelling		Signature:	Signature: <i>[Signature]</i>	Zone: CBL: 401-A-027
Permit Taken By: Mary Gresik	Date Applied For: 28 February 1996	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Zoning Approval: 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 type="checkbox"/> minor C/mm <input type="checkbox"/>

- 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.

**CERTIFICATION**

I hereby certify that I am the owner of record of the named property, and 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: *Gary Hayes* ADDRESS: DATE: 28 February 1996 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

Action:  
 Approved  
 Approved with Conditions  
 Denied

*[Signature]*

CEO DISTRICT

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

Location of Construction: 315 A. Clark Ave		Owner: <b>Raymond A. Carye</b>	Phone:	Permit No: <b>960137</b>
Owner Address:	Lessor/Buyer's Name:	Phone:	Business Name:	<b>PERMIT ISSUED</b> FEB - 7 1996 <b>CITY OF PORTLAND</b>
Contractor Name: <b>Northgate Realty</b>	Address: 1221 Washington Ave Portland, ME 04103	Phone: 797-3383		
Past Use: <b>1-2 Family Dwelling</b>	Proposed Use: <b>Vacant Land</b>	COST OF WORK: \$	PERMIT FEE: \$ 25.00	Zone: <b>40-1-107</b>
		FIRE DEPT.: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	
Proposed Project Description: <b>Remove Dwelling</b>		Signature: _____		

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Signature: _____ Date: _____
--	--	---------------------------------

Permit Taken By: **Mary Urcaik** Date Applied For: **28 February 1996**

- 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 Approval:**

- Special Zone or Revision:
- Shoreland
- Wetland
- Flood Zone
- Subdivision
- Site Plan map  minor  major

**Zoning Appeal:**

- Variance
- Miscellaneous use
- Conditional Use
- Interpretation
- Approved
- Denied

**Historic Preservation:**

- Historic District or Landmark
- Does Not Require Review
- Requires Review

**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: *Gary Hayes* ADDRESS: \_\_\_\_\_ DATE: **28 February 1996** PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_

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

**PERMIT ISSUED**  
**FEB - 7 1996**  
**CITY OF PORTLAND**

Zone: **40-1-107**

**Zoning Appeal:**

- Variance
- Miscellaneous use
- Conditional Use
- Interpretation
- Approved
- Denied

**Historic Preservation:**

- Historic District or Landmark
- Does Not Require Review
- Requires Review

Action:

- Approved
- Approved with Conditions
- Denied

Date: **2/28/96**

*[Signature]*

CEO DISTRICT

901902

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$30.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Countryside Dist. Inc. Phone # 839-5702  
 Address: 90 Brackett Rd. Gorham, Me. 04038  
 LOCATION OF CONSTRUCTION 365 Allen Ave.  
 Contractor: self Sub: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: Butcher Shop  
 Past Use: \_\_\_\_\_  
 # 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 to erect 2 walls as per plan  
repair door and window

**For Official Use Only PERMIT ISSUED**  
 Date Aug 24, 1990 Subdivision: \_\_\_\_\_ Name \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Lot SEP 12 1990  
 Bldg Code \_\_\_\_\_ Ownership: \_\_\_\_\_ Public \_\_\_\_\_  
 Time Limit \_\_\_\_\_  
 Estimated Cost \$1500.00 City Of Portland

Zoning: B-2  
 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) OK W/O 9-12-90

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

**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 \_\_\_\_\_ Spacing \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_

**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: \_\_\_\_\_

**Chimneys:**  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
**Heating:**  
 Type of Heat: \_\_\_\_\_  
**Electrical:**  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required Yes \_\_\_\_\_ No \_\_\_\_\_

**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 \_\_\_\_\_

**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.

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

Permit Received By Latini  
 Signature of Applicant Michael Hoglund Date 8/24/90  
 Signature of CEO William C. Hanaway Date 9-11-90  
 Inspection Dates \_\_\_\_\_

901902

Permit # 901902 City of Portland BUILDING PERMIT APPLICATION Fees 20.00 Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

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

Owner: Countryside Batches, Inc. Phone # 839-5702

Address: 90 Brackett Rd. Gorham, Me. 04038

LOCATION OF CONSTRUCTION 365 Allen Ave.

Contractor: self Sub: \_\_\_\_\_

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

Est. Construction Cost: \_\_\_\_\_ Proposed Use: Butcher Shop

\_\_\_\_\_ Past Use: \_\_\_\_\_

# 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 to erect 2 walls as per plan

For Official Use Of **PERMIT ISSUED**

Date: Aug 24, 1990 Subdivision Name \_\_\_\_\_  
 Inside Fire Limits \_\_\_\_\_ Lot: SEP 12 1990  
 Bldg Code \_\_\_\_\_ Ownership: \_\_\_\_\_ Public  
 Time Limit \_\_\_\_\_  
 Estimated Cost: \$1500.00 City Of Portland

Zoning: B-2  
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) OK with 9-12-90

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 \_\_\_\_\_ 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 \_\_\_\_\_  
 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 \_\_\_\_\_ Squares Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By Latini

Signature of Applicant Michael Hoglund Date 8/24/90

Signature of CEO Michael Hoglund Date 9-11-90

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

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 \_\_\_\_\_

PLOT PLAN

N



FEES (Breakdown From Front)

Base Fee \$ 30 00

Subdivision Fee \$ \_\_\_\_\_

Site Plan Review Fee \$ \_\_\_\_\_

Other Fees \$ \_\_\_\_\_

(Explain) \_\_\_\_\_

Late Fee \$ \_\_\_\_\_

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

COMMENTS Floor plan submitted

*9-20-90 that is all completed*

Signature of Applicant *Michael Hagha P.E.*

Date Aug 24, 1990



INSULATED  
COOLER

365 ALLEN AVE  
Countrywide Heat  
INC

new

25'  
↓

25'

48'

DRY  
STORAGE

SINK

3'  
Door

COMPRESSOR

OFFICE

BREAK  
ROOM

WALK-IN  
FREEZER

WALK-IN  
COOLER

TABLE

MEAT CASE

30'

SS DRAIN

CUTTING  
ROOM

3'  
Door

SINK

RETAIL  
STORE

TABLE

DRAIN

SINK

MEAT CASE  
CASH

RECEIVED  
AUG 24 1990  
DEPT. OF BUILDING INSPECTIONS  
CITY OF PORTLAND

SAW - TABLE

OVER  
HEAD DOOR  
8'

10'  
16'  
136"  
Door

BR

5'  
Door

901892

Permit # \_\_\_\_\_ City of Portland BUILDING PERMIT APPLICATION Fee \$33. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_  
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Michael Hoglund Phone # 874-5544  
 Address: 365 Allen Ave; Ptd, ME 04103  
 LOCATION OF CONSTRUCTION 365 Allen Ave. (Countryside Butchery)  
 Contractor: Rockwell-Burr Sub: 761-3939  
 Address: 184 Read St; Ptd, ME 04103  
 Est. Construction Cost: \_\_\_\_\_ Proposed Use: Retail Meat Store  
 Past Use: retail meat store  
 # 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 a sign - 4'x10'

**For Official Use Only** **PERMIT ISSUED**  
 Date: 9/7/90 Subdivision: \_\_\_\_\_ Name: \_\_\_\_\_  
 Bldg Code: \_\_\_\_\_ Lot: SEP 11 1990  
 Time Limit: \_\_\_\_\_ Ownership: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 City of Portland  
 Zoning: B-2 Zone  
 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): OK W/ A - 9-11-90

**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: \_\_\_\_\_ 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: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_ NOT IN DISTRICT NOR 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 \_\_\_\_\_ Approved with Conditions.  
 3. Roof Covering Type \_\_\_\_\_  
 Date: 9/7/90  
 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: \_\_\_\_\_ x \_\_\_\_\_ Square Footage \_\_\_\_\_  
 3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase  
 Signature of Applicant [Signature] Date 9/7/90  
 Signature of CEO Jeff Rockwell Date \_\_\_\_\_

Inspection Dates \_\_\_\_\_  
 White-Tax Assessor \_\_\_\_\_ Yellow-GPCOG \_\_\_\_\_ White Tag -CEO 147 Copyright GPCOG 1989 MAKERRY



**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date Sept. 20, 19 90  
 Receipt and Permit number 01601

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: 365 Allen Ave

OWNER'S NAME: Northport Realty ADDRESS: \_\_\_\_\_ FEES

OUTLETS: Receptacles \_\_\_\_\_ Switches \_\_\_\_\_ Plugmold \_\_\_\_\_ ft. TOTAL 1-30 ..... 3.00

FIXTURES: (number of) Incandescent \_\_\_\_\_ Flourescent \_\_\_\_\_ (not strip) TOTAL \_\_\_\_\_  
 Strip Flourescent \_\_\_\_\_ ft. ....

SERVICES: Overhead \_\_\_\_\_ Underground \_\_\_\_\_ Temporary \_\_\_\_\_ TOTAL amperes \_\_\_\_\_

METERS: (number of) \_\_\_\_\_

MOTORS: (number of) Fractional 4 ..... 2.00  
 1 HP or over 4 ..... 4.00

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 unit) \_\_\_\_\_  
 Electric Under 20 kws \_\_\_\_\_ Over 20 kws \_\_\_\_\_

APPLIANCES: (number of) Ranges \_\_\_\_\_ Water Heaters \_\_\_\_\_  
 Cook Tops \_\_\_\_\_ Disposals \_\_\_\_\_  
 Wall Ovens \_\_\_\_\_ Dishwashers \_\_\_\_\_  
 Dryers \_\_\_\_\_ Compactors \_\_\_\_\_  
 Fans \_\_\_\_\_ Others (denote) 2 Grinder-2 Saws  
 TOTAL 4 ..... 6.00

MISCELLANEOUS: (number of) Branch Panels 1 ..... 1.00  
 Transformers \_\_\_\_\_  
 Air Conditioners Central Unit \_\_\_\_\_  
 Separate Units (windows) \_\_\_\_\_  
 Signs 20 sq. ft. and under \_\_\_\_\_  
 Over 20 sq. ft. \_\_\_\_\_  
 Swimming Pools Above Ground \_\_\_\_\_  
 In Ground \_\_\_\_\_  
 Fire/Burglar Alarms Residential \_\_\_\_\_  
 Commercial \_\_\_\_\_  
 Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under \_\_\_\_\_  
 over 30 amps \_\_\_\_\_  
 Circus, Fairs, etc. \_\_\_\_\_  
 Alterations to wires \_\_\_\_\_  
 Repairs after fire \_\_\_\_\_

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE.  
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....  
 TOTAL AMOUNT DUE: 16.00

INSPECTION: Will be ready on NOW, 19 90; or Will Call \_\_\_\_\_

CONTRACTOR'S NAME: Scot Robinett  
 ADDRESS: 123 Ashwamp Road Scarborough, Maine 04074  
 TEL: 797-9026

MASTER LICENSE NO.: 09886 SIGNATURE OF CONTRACTOR: Scot Robinett  
 LIMITED LICENSE NO.: \_\_\_\_\_

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



Permit No. 85/296

Location 313/Albion Ave.

Owner R. Smith, Maryland

Date of permit 4-5-85

Approved 1-9-85

Dwelling

Garage

Alteration - Addition of 2nd floor

NOTES

6/85  
Completed as per  
plans

[Empty lined area for notes]

[Empty lined area for notes, crossed out with a large X]

901892

Permit # 901892 City of Portland Woods Temp Permit BUILDING PERMIT APPLICATION Fee \$33. Zone \_\_\_\_\_ Map # \_\_\_\_\_ Lot# \_\_\_\_\_

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

Owner: Michael Høglund Phone # 974-5544  
Address: 365 Allen Ave; Ptd, ME 04103

LOCATION OF CONSTRUCTION: 365 Allen Ave. (Countryside Butchers)

Contractor: Pockwell-Burr Sub: 761-3939

Address: 184 Read St; Ptd, ME 04103 Phone # 04103

Est. Construction Cost: \_\_\_\_\_ Proposed Use: Retail Meat Store

Past Use: retail meat store

# 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 a sign - 4'x10'

**For Official Use Only PERMIT ISSUED**  
Date: 9/7/90 Sub-division: \_\_\_\_\_  
Name: SEP 11 1990  
Blgd Code: \_\_\_\_\_ Lot: \_\_\_\_\_  
Time Limit: \_\_\_\_\_ Ownership: City of Portland  
Estimated Cost: \_\_\_\_\_

Zoning: DR-2000  
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) 9-11-90 PRESERVATION

**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 15" 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 \_\_\_\_\_  
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11. Metal Materials \_\_\_\_\_

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

**Roof:**  
1. Truss or Raftor Size \_\_\_\_\_ Spacing \_\_\_\_\_ Action: Approved  
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_ Approved with Condition  
3. Roof Covering Type \_\_\_\_\_ Size \_\_\_\_\_ Denied

**Chimneys:**  
Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_  
Date: 9/7/90  
Signature: [Signature]

**Heating:**  
Type of Heat: [Signature]

**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 [Signature] Date 9/7/90

Signature of CEO Jeff Pockwell Date \_\_\_\_\_

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

09/11 White-Tax Assessor Yellow-GPCOG White Tag-CEC 47 Copyright GPCOG 1988 [Signature]

PLOT PLAN



FEES (Breakdown From Front)	Type	Inspection Record	Date
Base Fee \$ <u>33-</u>			
Subdivision Fee \$ _____			
Site Plan Review Fee \$ _____			
Other Fees \$ _____			
(Explain) _____			
Late Fee \$ _____			

COMMENTS 11-6-90 Sign has been put up

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

Date 9/7/90

Please call us at! 1-207-761-3939  
Rockwell Burr  
c/o Jeff Rockwell

~~1-617-723-2266~~  
ATTN: Ellen Moore

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

TO BE ERRECTED ON A BUILDING AT 365 Allen Ave.

IN PORTLAND, MAINE Northport Realty being the owner of the premises

at 365 Allen Ave. in Portland, Maine hereby gives consent to the  
erection of a certain sign owned by Michael Hoglund (For Countryside Butchers) 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:

RECEIVED  
SEP 07 1990

And in consideration of the issuance of said permit \_\_\_\_\_ DEPT OF BUILDING  
CITY OF PORTLAND

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 is 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 4th day of Sept- 19 90.

v \_\_\_\_\_

Owner's signature

(Northport Realty)

Michael Hoglund Pres

Lessee's signature (Mike Hoglund)

(For Owner  
For Landlord)



Plot

CO

1/11

rockwell

CLIENT  
COUNTY  
JOB LOCATION  
365 Allen