

931150

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$50.60 Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Triumph / Auto Glass Phone # _____
Address: 513 Washington Ave - Ptd. ME 04103
LOCATION OF CONSTRUCTION 513 Washington Ave.
Contractor: Bailey Sign Co Sub.: 774-2843
Address: 9 Thomas Dr - Westbrook Phone # ME 04039
Est. Construction Cost: _____ Proposed Use: manuf/w signs
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 erect three signs - 8'x6' 16'x2.5'

For Official Use Only
Date 12/3/93 Subdivision: _____
Inside Fire Limits _____ Name _____
Bldg Code _____ Lot: DEC - 8100
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 WPA - P12-8-93 (Explain)

HISTORIC PRESERVATION

Foundations:
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 _____ Not in District nor Landmark.
3. Type Ceilings: _____ Does not require review.
4. Insulation Type _____ Size _____ Requires review.
5. Ceiling Height: _____

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: _____

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

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 _____

Chimneys:
Type: _____ Number of Fire Places _____ Date: 12/3/93
Signature: _____

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

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 Kyle Noyes Date 12/3/93

CEO's District 6 Kyle Noyes

CONTINUED TO REVERSE SIDE [6] Mr. Rowe
White - Tax Assessor
Ivory Tag - CEO

981150

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

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 Address: 513 Washington Ave - Ptld, ME 04103
 LOCATION OF CONSTRUCTION 513 Washington Ave.
 Contract # Bailey Sign Co Sub: 774-2843
 Address: 9 Thomas Sr - Westbrook Phone # ME 04039
 Est. Construction Cost: _____ Proposed User: manuf/w signs
 # 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 three signs - 3'x6' 16'x2.5'

For Official Use Only

Date: 12/3/93 Subdivision: _____
 Inside Fire Limits: _____ Name: DEC - 8 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 (Explain): WDA - D12 8 93

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

Roof: _____
 1. Truss or Rafter Size _____ Spacing: Approved
 2. Sheathing Type _____ Size: Approved with Conditions
 3. Roof Covering Type _____

Chimneys: _____
 Type: _____ Number of Fly 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.

HISTORIC PRESERVATION

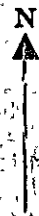
Not in District nor L.A.P.D. area
Does not require review.

Permit Received By Louise E. Chase
 Signature of Applicant Kyle Noyes Date 12/3/93
 CEO's District 6
16 _____

CONTINUED TO REVERSE SIDE
 Ivory Tag - CEO

White - Tax Assessor

PLOT PLAN



FEES (Breakdown From Front)
 Base Fee \$ 50.60
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Type	Inspection Record	Date
<u>Done</u>		<u>12/30/95</u>
		<u>1/1</u>
		<u>1/1</u>
<u>all</u>		<u>1/1</u>
		<u>1/1</u>

COMMENTS

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 [Signature] ADDRESS _____ PHONE NO. _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE NO. _____



CERTIFICATE OF INSURANCE

ONE OTHER ONE NATIONWIDE PLACA... COLLEGE... CPO 4304

The company indicated below certifies that the insurance afforded by the policy or policies numbered and described below is in force as of the effective date of this certificate. This Certificate of Insurance does not amend, extend, or otherwise alter the Terms and Conditions of Insurance coverage contained in any policy numbered and described below.

CERTIFICATE HOLDER:

VJD ENTERPRISES INCORPORATED
ATTN VINCENTO J DEPAOLO
201 HARVARD STREET
PORTLAND, ME 04103

INSURED:

TRIUMPH AUTO GLASS INC
513 WASHINGTON AVENUE
PORTLAND, ME 04103

TYPE OF INSURANCE	POLICY NUMBER & ISSUING CO.	POLICY EFF. DATE	POLICY EXP. DATE	LIMITS OF LIABILITY (*LIMITS AT INCEPTION)
LIABILITY <input checked="" type="checkbox"/> Liability and Medical Expense <input checked="" type="checkbox"/> Personal and Advertising Injury <input checked="" type="checkbox"/> Medical Expenses <input checked="" type="checkbox"/> Fire Legal Liability <input type="checkbox"/> Other Liability	58-PR-248773-0001 Nationwide Mutual Insurance Co.	07-01-93	07-01-94	Any One Occurrence..... \$ 1,000,000 Any One Person/Urg \$ 1,000,000 Any one person \$ 5,000 Any One Fire or Explosion \$ 50,000 General Aggregate* \$ 2,000,000 Prod/Comp Ops Aggregate* \$ 2,000,000
AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> BUSINESS AUTO <input checked="" type="checkbox"/> Owned <input checked="" type="checkbox"/> Hired <input checked="" type="checkbox"/> Non-Owned	58-SA-248773-0002 Nationwide Mutual Insurance Co.	07-01-93	07-01-94	Bodily Injury (Each Person) \$ (Each Accident) \$ Property Damage (Each Accident) \$ Combined Single Limit \$ 1,000,000
EXCESS LIABILITY <input checked="" type="checkbox"/> Umbrella Form	58-UU-248773- Nationwide Insurance Co.	07-01-93	07-01-94	Each Occurrence \$ 10,000,000 Prod/Comp Ops/Disease..... Aggregate* \$ 10,000,000
<input checked="" type="checkbox"/> Workers' Compensation and Employers' Liability	58-WC-248773-0003 Nationwide Mutual Fire Insurance Co.	07-01-93	07-01-94	STATUTORY LIMITS Bodily Injury/Accident ... \$ 100,000 Bodily Injury by Disease Each Employee \$ 100,000 Bodily Injury by Disease Policy Limit \$ 500,000

Should any of the above described policies be cancelled before the expiration date, the insurance company will endeavor to mail written notice to the above named certificate holder, but failure to mail such notice shall impose no obligation or liability upon the company, its agents, or representatives.

DESCRIPTION OF OPERATIONS/LOCATIONS
VEHICLES/RESTRICTIONS/SPECIAL ITEMS

J. M. Man

Effective Date of Certificate: 07-01-1993
Date Certificate Issued: 11-11-1993

Authorized Representative: Nationwide Insurance
Countersigned at: 1192 Highway 315
Wilkes-Barre, PA 18702

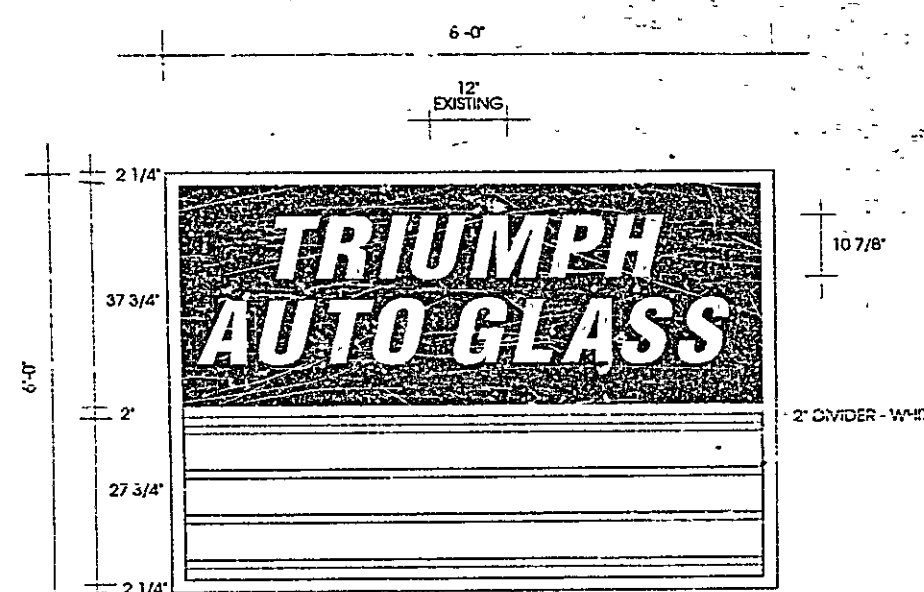
WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN PROPOSED TO BE
ERECTED ON A BUILDING AT 513 WASHINGTON AVE.
IN PORTLAND, MAINE, VINCENZO J. DE ROL being the owner of the premises
at 513 WASHINGTON AVE. in Portland, Maine hereby gives consent to the
erection of a certain sign owned by TRIUMPH AUTO GLASS. over the
public 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 erection of said sign:

And in consideration of the issuance of said permit Vincenzo J. De Rolo
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 within ten days of notice from said
Inspector of Buildings that 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 2 day of 12 1973.

Vincenzo J. De Rolo

03/25/88



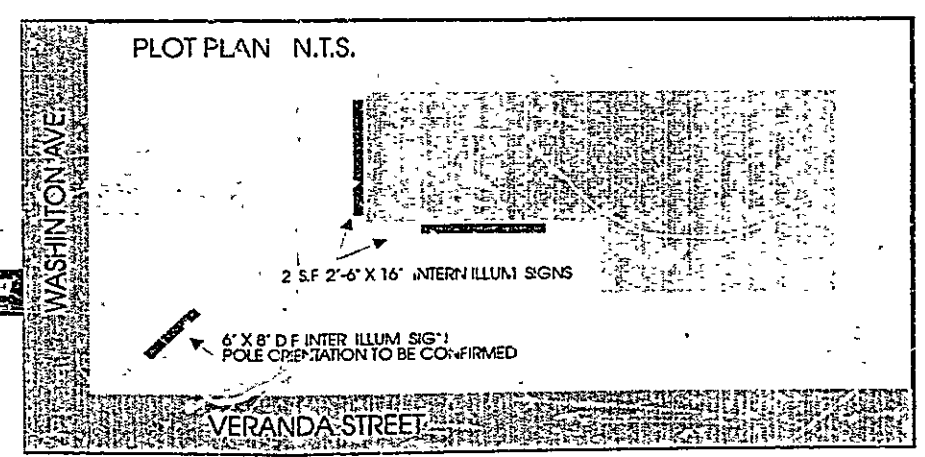
1 D.F. 6'-0" X 8'-0" X 14" INTERN. ILLUM SIGN

CAB. 1/2 1/4" RET. 1/2" DIVIDER / PAINT EXISTING POLE = WHITE
 WHITE LEXAN FACE
 COPY = WHITE
 B/G COLOR BLOCK = RED VINYL # ____
 1/2" OUTLINE = BLACK VINYL
 RAB - 3 LINES 6 ON 7 .060 CHANGEABLE COPY - M.N.V.O. = 33 1/8"

PLEASE CONFIRM TYPEFACE & VINYL COLOR

EXISTING POLE - 6' X 12' X
 ORIENTATION TO ROAD TO BE CONFIRMED

FINAL MFG. PRINT
 DATE _____
 OK PER _____



PLEASE NOTE:
 THIS IS A PROPOSAL FOR A FIELD MEASUREMENTS MAY OR MAY NOT BE TO BE VERIFIED.
 THIS SIGN IS THE PROPERTY OF BALLY, INC. AND ALL RIGHTS TO ITS USE OR REPRODUCTION ARE RESERVED.
 COPIES SHOWN IN ALL DISSEMINATION ONLY
 CO. OF MANUFACTURERS WILL BE NOTED

Bally Signs
 9 Prospect Drive Essex, Ohio 43027
 Call (614) 892-0400
 Fax (614) 892-0407
 207 774-2843 / 1 800 659 5621

CUSTOMER
TRIUMPH AUTO GLASS
 LOCATION
 VERANDA/WASHINGTON AVE.
 PORTLAND, ME

SALESPERSON:
K. NOYES

DRAWN BY
L.W.MERRIFIELD

REVISIONS
 11/22/93 CUTLINE
 11/22/93 SHADOW

PS # D-025 WO #

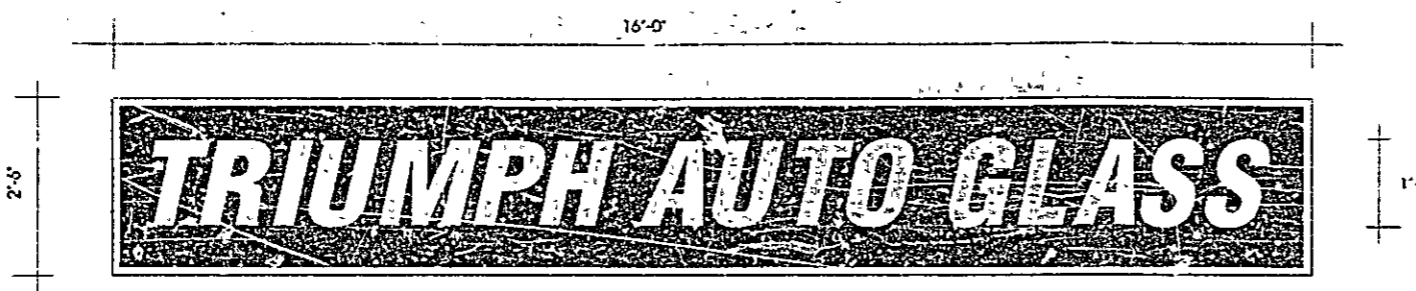
SCALE 1/2" = 1' DATE 11/9/93

ACCEPTANCE SIGNATURE DATE
 SALES CLIENT

DRAWING NO. 02781 B R2
 SHEET

1 © COPYRIGHT

MERRIFIELD

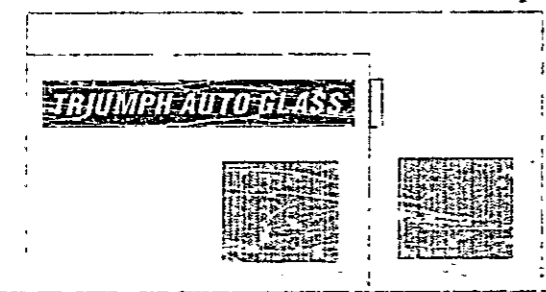


2 S.F. 2'-6" X 16'-0" X ____" INTERN. ILLUM SIGN - LEXAN FACE

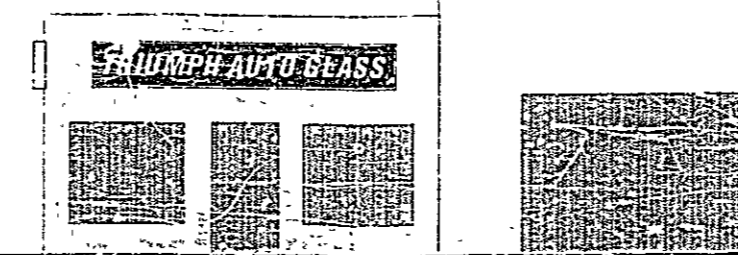
COLORS: CAB & 1 1/2" RET = WHITE B/G = RED VINYL COPY = WHITE SHADOW = BLACK VINYL

PLEASE CONFIRM TYPEFACE & VINYL #

PLOT PLAN N.T.S.
CENTER IN WALL AREAS



WASHINGTON AVE. ELEVATION



VERANDA STREET ELEVATION

81.25
46
FINAL MFG. PRINT
DATE _____
OK PER _____

PLEASE NOTE:
THIS IS A PRELIMINARY PRINT. IF DIMENSIONS MAINS MAY
OR MAY NOT BE TO BE VERIFIED.
THIS DESIGN IS THE EXCLUSIVE PROPERTY OF BALLY SIGN
RECORDS AND ALL RIGHTS TO THIS USE OR REPRODUCTION
ARE RESERVED.
LOCAL SIGN PARTS IN AIR CONDITIONING ONLY
COLOR MATCHING AIRS WILL BE USED

9 Everett Drive
Col. Westbrook Park
Westbrook, ME 04092
207 774 2843 / 1 800 839 8391

CUSTOMER:
TRIUMPH AUTO GLASS
LOCATION:
VERANDA/WASHINGTON AVE.
PORTLAND, ME

SALESPERSON:
K. NOYES

DRAWN BY:
L.W. MERRIFIELD

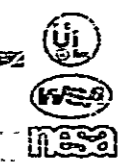
REVISIONS:
11/22/93 LAYOUT OUTLINE / RESIZE
11/23/93 LAYOUT SHADOW

P.S.#: **D-025** W.O.#: _____

SCALE: **1/2" = 1'** DATE: **11/9/93**

ACCEPTANCE SIGNATURE: _____ DATE: _____
SALES CAPT: _____

DRAWING NO: **02781 A R2**
SHEET: _____



141521K