049 SW PORTER ST. SG06-152239

## SG. 06.152239



AUG 16 2006 MICROFILMED





## CITY OF PORTLAND, OREGON

BUREAU OF DEVELOPMENT SERVICES 1900 SW 4th Ave., Suite 5000 Portland, OR 97201



SIGN PERMIT

06-152239-000-00-SG

049 SW PORTER ST Site Address:

Issued: 8/7/06

NATIONAL COLLEGE OF NATURAL MEDICINE- SIGN B

Occ. Group Const. Type PROJECT INFORMATION New Sign/Awning Wall/Fascia Sign Project Description: 2.50 FT BY 20.0 FT = 50.0 SQ FT - WALL FASCIA SIGN- ILLUMINATED- NO CHANGING IMAGE

SECURITY SIGNS \*SCOTT HILDENBRAND\* APPLICANT

PROPERTY OWNER THE NATIONAL COLLEGE OF NATUROPATHIC MEDICINE

Phone (503) 546-7107 Phone (503) 552-2013 ·

CONTRACTOR

Illuminated Sign?

MARC ALAN LINQUIST **Project Details** 

Phone

**Project Details** 

50

Sian Height (sign only) Zoning Enforcement Agency Yes 2.5 Portland Sign Area (sf) Sign Width

20

ENY OF PORTLAND

This permit expires if, at any time, 180 days pass without an approved inspection. If you are not able to obtain an inspection approval within 180 days, you may request a one-time only extension of 180 days by calling 503-823-7304.

BEFORE YOU DIG

ATTENTION: Oregon law requires you to follow rules adopted by the Oregon builty Notification Center. Those rules are set forth in OAR 952-001-0010 through OAR 952-001-0080. You may obtain copies of the rules by calling the center, (Note: the telephone number for the Oregon Billity Modification Center is 1-860-332-2344).

CITY CONTACT

Phone:

Fax: (503) 823-4172

E-Mail:

Building/Trade Inspections - Call Before 6:00 AM:

(503) 823-7000

INSPECTION REQUEST PHONE NUMBERS

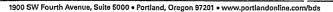
TDD; (503) 823-6868

**IVR Inspection Request** Number: 2593001



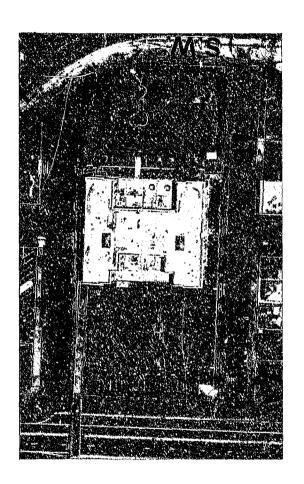
n Permit Application

## CITY OF PORTLAND, OREGON - BUREAU OF DEVELOPMENT SERVICES



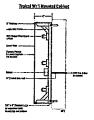


oign i cinac Apparation	Laminania Ora- Living St. 201
FOR INTAKE, STAFF USE ONLY	
Application date	Other inspections
Issued date 87-66	Map zone 3329 Applicable zone RH
Approved by	Overlay zone
Structural engineer's approval	Plan / historic district
APPLICANT: Complete all sections below that appl	y to the project. Please print legibly.
Installation address OH9 SW PORTER S	TREET_Property tax account # 8128 798
Business name NATIONAL COLLEGE	E OF NATURAL MEDICINE
Legal owner of sign	
Address of sign owner	
Property owner name	
Address	
Sign contractor name SECURITY SILAL	LS_Construction contractors board #_127809
Address 2424 SE HOLGATE	
Day Phone 5737232 4177 FAX 5737	301 <i>86</i> email
For electric signs	·
Electrician's name MARC LIMIQUEST	Electrician's license # 3835//a
Which of the following best describes the proposed wo	rk?  New awning Addition to existing awring Addition of a sign to existing awning Projecting Projecting Fascia sign 400 lbs. or less
₩ New sign	☐ New awning
Alteration to existing sign	Addition to existing awring
Addition to an existing sign, size increased by	% Addition of a sign to existing a whing
Type of sign, check all that apply	
☐ Freestanding ☐ Monument	☐ Projecting
☐ Sign on awning ☐ Fascia sign, over	er 400 lbs. Fascia sign 400 lbs. or less
☐ Painted wall/adhered ☐ Pitched roof	Sign on marquee
Other	Sign attached to canopy
Proposed sign dimensions Som A+ Su	m B
	I sign height depth of fascia sign total area of sign
20' th Z'-6" h.	ft. in. 5017 sq.ft.
[M] Do you have permission of the property owner t	o erect this sign?
[Y] (N) Changing image features? If yes, area of char	- 2 <sup>-</sup>
•	Required, a complete listing including type and size area.
[Y] [N] Site plan attached. If a site plan is required it must show size and location of existing signs, for site plan requirements see the Sign Permit Program Guide.	
Applicant's signature	
Applicant's name, printed STI HILDER	BRALO Applicants unone # 503 5267/07
The state of the s	





WALL DISPLAY - 50 SQ. FT



## Wali Display

internally Euminated
Manufacture and Install (2) SIF internally Burninated wall cabinet sign RBCDEFGHIJKLMNOPORSTVIKYZ RBCDEFGHIJKLMNOPORSTUVIKYZ 1234567890 - NEC

Cabbet Fabricated Extrusted aluminum
Painted TM 3M Emerald Green 230/123 Capinal Catal Retainer Stra -Parties have a service of the Service Congress of the FEET. PSV Cotors.

bestalfalfalf Wall Type... Mounting... Position....

Brick Shibitied Large or expansion battle across top and bottom . Deniar on Belifting scious prestiang

3M Emereid Green 230/126

NCNM TO





2424 SE Halpate Bird. Partiand, Oregon 97707 523-222-4172 523-230-1561 fox

PREPARED FOR

049 SW Porter St. Portized, OR 97201

PROJECT MANAGER Joseph Piatr

> D6-4171912 07/31/04

> > Date

Tenant Identification

Project Number Steller Drawn By: Hotel G Laribood Revisions

Approvals Cleat Squatera Landland Document

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Typography

National College of Natural Medicine