

APPLICATION FOR A SIGN OR AWNING OVER A PUBLIC WAY

Nonrefundable Application Fee \$250.00

2014 SEP 18 A 11: 04

FOR CITY CLERK'S OFFICE ONLY

Date _____

CITY CLERK'S OFFICE
SOMERVILLE, MA

Date Recorded _____

Amount Paid _____

New Sign, Awning or Advertising Device

New Facing on an Existing Frame

Renewing Existing Sign, Awning or Advertising Device Permit for a New Owner

Business (DBA) Name: Metro PCS Phone: 617-440-5130

Applicant's Federal Employer Identification Number: 46-2569857

Applicant's Legal Name: JK Wireless INC.

Applicant's Address (with Zip Code): 554 Columbia Rd. Dorchester MA 02125

Mailing Name (where we should send correspondence to): Metro PCS

Mailing Address (with Zip Code): 328 Broadway Somerville MA 02145

Emergency Contact: David Kim Phone: 703) 772. 8188

B.

Type of Business (Check Only One and Provide the Names Indicated):

Sole Proprietor: Name of Owner: _____

Partnership (inc. LLP): Name of Partnership: _____

Names of All Partners Who Own More Than 10%: _____

Trust: Name of Trust: _____

Names of All Trustees Who Own More Than 10%: _____

Corporation: Name of Corporation: JK Wireless INC.

Name of President: SOONG C. LEE

Name of Secretary: _____ Name of Treasurer: _____

LLC: Name of LLC: _____

Names of All Managers Who Own More Than 10%: _____

Other (Attach a Description of the Form of Ownership and the Names of Owners)

Name of company erecting sign: Metro PCS
Phone: 617 - 440 - 5130

Detailed description and location of the sign, awning, or advertising device. Attach a sketch. _____
location of the sign = 314 Broadway, Somerville MA
width : 20' depth : 1' Metro : purple } color.
height : 3' PCS : red

ACKNOWLEDGEMENT

I hereby state that all information provided on this application is true and accurate, and I understand that any information that is found to be false or misleading may result in the forfeiture of this permit. This permit will be subject to all of the terms, conditions, and limitations set forth in the Somerville Code of Ordinances, any applicable State and Federal laws, and any conditions prescribed by the City of Somerville. I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all State tax returns and paid all State taxes required under law.

Signature of Applicant: *Soong C. Lee* Date: _____
Print Name: SOONG C. LEE Phone: 646.398.0078

INSPECTIONAL SERVICES DEPARTMENT RECOMMENDATION:

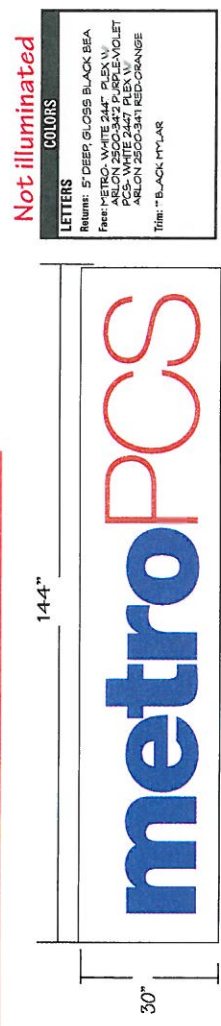
This sign or awning is located in a historic district: _____ True False
Based on a review of the attached plans, I reasonably expect that this sign, awning, or advertising device will conform to all ordinances and the State Building Code. (NOTE: This statement does NOT constitute permission to install the sign, awning, or advertising device.)

Signature: *Al Barfoot / JTL* Date: 9/18/14
Print Name: AL BARFOOT Title: BUILDING INSPECTOR

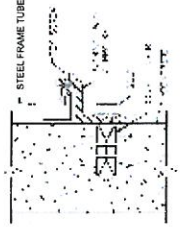
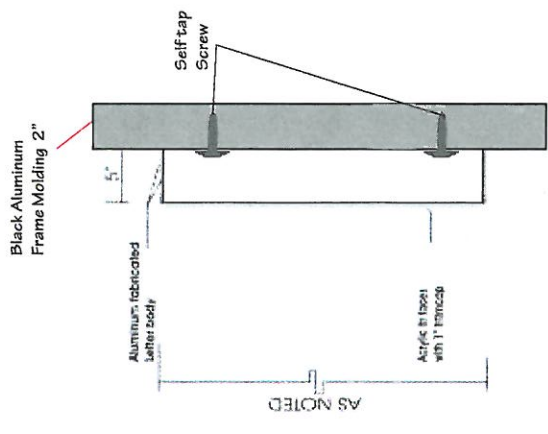
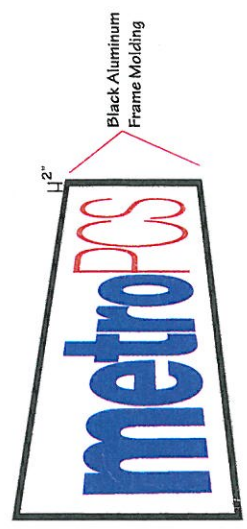
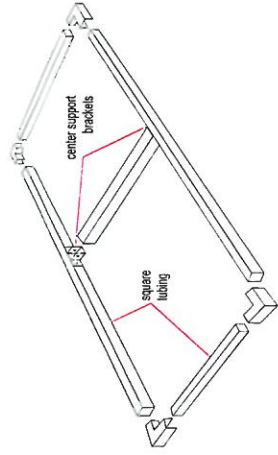
HISTORIC PRESERVATION COMMISSION RECOMMENDATION:

(only required for signs or awnings in a historic district)
The Historic Preservation Commission recommends _____ Approval _____ Denial
Signature: _____ Date: _____
Print Name: _____ Title: _____

PROPOSED NEW SIGN



Interior: Extend	Not illuminated	Drain Holes: Y N
Face Mat: PLEX Th: 3/16"	Returns Mat: BEA Th: .040	Depth: 5"
Back Mat: Mill (White BEA) Laxan Th: .063	Mylar Size: 1 2"	Matel:
Mounting: Nutsert <Thin BEA>	<Thin BEA>	Other:
UL Sticker Location: Not	Rows of LED:	Color:
Manufacturer: Not	Manufacturer: Not	
Power Supply: Not	Voltage: Not	Current: Not



INSTALLATION PROCEDURE ON THE CONCRETE WALL

List of materials to be used to match the drawing:
 3/8 x 5" Sharpoint Steel Lag Screws
 Long Leg Shield



EXISTING BUILDING SIGNAGE



City of Somerville, Massachusetts
Finance Department, Treasury Division

CERTIFICATE OF GOOD STANDING

Exact name of taxpayer/applicant's business: JK wireless INC.

Address of taxpayer/applicant's business in Somerville: 328 Broadway

Address of taxpayer/applicant's home in Somerville: _____

Taxpayer/applicant's phone: day: 646.398.0078 evening: 646.398.0078

I, (print name) SOONG C. LEE, the undersigned Taxpayer, do hereby certify that all the information contained herein is true and correct and all taxes and fees due the City have been paid or that the Taxpayer has entered into an agreement to pay all taxes and fees and is current on said agreement.

SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY, this _____ day of

_____, 20_____.


(Taxpayer's signature)

CITY'S ACKNOWLEDGEMENT

DATE OF ISSUANCE: _____ INCLUDES RELEVANT POSTINGS THROUGH: _____

TAXES AND ACCOUNT NUMBER(S) INCLUDED IN CERTIFICATE:

Real Estate Water/Sewer Personal Property Other: _____
2074 # 201037001 # _____ # _____

NOTES:

CLERK'S INITIALS: 

ORIGINAL STAMP:

