

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, if Any,
Attached

BUILDING INSPECTION PERMIT

Permit Number: 080987

This is to certify that ELLIE LLC

has permission to _____ State requirement for Certificate of Occupancy in _____ Name, No construction

AT 289 CUMBERLAND AVE _____ 026 C018001

provided that the person or persons who perform or supervise the construction accepting this permit shall comply with the provisions of the Statutes of the State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file with this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission procedure before this building or part thereof is occupied or service closed-in 24 HOUR NOTICE REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____

PERMIT ISSUED

AUG 11 2008

Department Name

CITY OF PORTLAND

[Signature] 8/11/08
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION 289 CUMBERLAND AVE CBL 026 C018001

Issued to ELLIE LLC

Date of Issue 08/15/2008

This is to certify that the building, premises, or part thereof, at the above location, built — altered — changed as to use under Building Permit No. 08-0987, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

First Floor Left

APPROVED OCCUPANCY

Commercial / Driving School
Use Group B
Type 5B
IBC 2003

Limiting Conditions:

Renewal of Certificate Occupancy permit 02-1284, issued 1/7/03. This does not certify building code compliance, only the use of the property. This certificate is being issued to Advance Driving School as a requirement of Bureau of Motor Vehicle.

This certificate supersedes
certificate issued 1/7/2003

Approved:

8-15-08 *Suzanne Hunt*
.....
(Date) Inspector

[Signature]
.....
Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

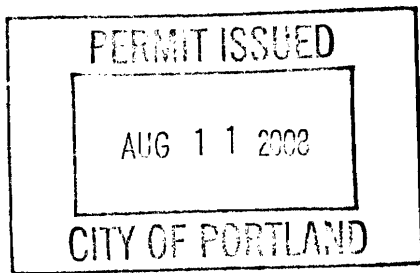
Permit No: 08-0987	Issue Date:	CBL: 026 C018001
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Location of Construction: 289 CUMBERLAND AVE	Owner Name: ELLIE LLC	Owner Address: 3 CAPE WOODS	Phone: 207-272-7351
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Commercial	Zone:

Past Use: Commercial Driving School	Proposed Use: Commercial Driving School - State requirement for Certificate of Occupancy in current Lessee Name, No construction	Permit Fee: \$105.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: State requirement for Certificate of Occupancy in current Lessee Name, No construction		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>[Signature]</i>	INSPECTION: Use Group: <i>B</i> Type: <i>5B</i> <i>IBC 2003</i> Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: Imd	Date Applied For: 08/11/2008
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Zoning Approval		
<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>8/11/08</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>
	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>8/11/08</i></p>	



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 is 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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

DRIVER EDUCATION SCHOOL LICENSE APPLICATION

BUREAU OF MOTOR VEHICLES
DRIVER EDUCATION PROGRAM
#29 STATE HOUSE STATION
AUGUSTA, MAINE 04333-0029
TELEPHONE: (207) 624-9156
Fax: (207) 624-9158
TTY: (207) 624-9105
Email: Driver.Education@maine.gov

Please check one of the following:
Initial Application Renewal Application

Please check one of the following locations:
Main School Branch School

Please check the type of license for this school location:
Class A Class B Truck Endorsement

Please check the class of vehicle that you will be using for instruction:
Class A Class B Class C School Bus

PLEASE PRINT OR TYPE

School Name Advance Driving School

Mailing Address P.O. Box 1692 Gray ME 04039
(Street) (City/Town) (State) (Zip Code)

Actual School Location 291 Cumberland Ave. Cumberland Portland ME 04101
(Street) (County) (City/Town) (State) (Zip Code)

Recordkeeping Location 291 Cumberland Avenue, Portland ME
(Street) (City/Town) (State)

Federal ID# on file Telephone # 842-4074

Fax # 842-4074 Email _____ Website TBA

1. Are you applying for license fee exemption as a non-commercial driver education school?
(X) NO... (If no, skip to question 4) () YES... (If yes, check the type of school below)
 public secondary school applied technology region
 approved private secondary school adult education program
 applied technology center

Please list the name, address, and title of the school administrator responsible for oversight of this "non-commercial" driver education school program.

(Name) (Address) (Title)

2. Are you charging students a fee for the driver education course? () NO () YES