BCOM 1808-0004

NORTH CAROLINA ALCOHOLIC BEVERAGE CONTROL COMMISSION

4307 MAIL SERVICE CENTER RALEIGH NC 27699-4307

(919) 779-0700 FAX: (919) 662-3583

abc.nc.gov

INSPECTION/ZONING COMPLIANCE

IMPORTANT: The Applicant will complete SECTION A, below. SECTION B through SECTIONE, below, are to be completed by the appropriate Inspection/Zoning Official. To request inspections and zoning certifications, please contact the city or county building and fire inspection and zoning departments for your area. Failure to submit this form in a timely manner to these local authorities may result in delays in processing of an ABC permit application. This form <u>must</u> be completed by the building, fire and zoning officials before a permit will be issued

SECTION A - APPLICANT TO COMPLETE
Name of Applicant SM MOLDING (NCORPORATED
Trade Name of Business TRITON QUICE MART
Address of Business _ 202 & FACKSON BLVD.
City ERWIN County MAKNETT
Phone #()
Type of Establishment Permit(s) Applying For
SECTION B - BUILDING INSPECTOR TO COMPLETE Building Code: Building is in - Compliance Non-compliance* Not Applicable
Building Inspector's Name (printed) and Signature
Phone # (Date of Inspection
Fire Code: Building is in - Compliance Non-compliance* Not Applicable Fire Inspector's Name (printed) and Signature Phone # (
SECTION D - ZONING OFFICIAL TO COMPLETE
Zoning: Business is in - □ Compliance □ Non-compliance* □ Not Applicable
Is business located in an Urban Redevelopment Area (Article 22 of Chapter 160A) \Box Yes \Box No
If "Yes", has establishment been given notice that it is in an Urban Redevelopment Area and must comply
with the requirements of N.C.G.S. 18B-309
Zoning Classification
Permitted uses in this zone
Zoning Official's Name (printed) and Signature
Phone # (Date of Inspection

^{*}Please state reasons for "Noncompliance" in SECTION E on back of this page.