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 SECTION E, 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

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SECTION A - APPLIC	CANT TO COMPLETE		
Name of Applicant	RAMI	AIZ Sha	nbain
Trade Name of Busine	ss A Value	e mort	
	12061 W	5,421	
City Brodwa	4	County Hal	nett
Phone # (347) 597		1100	
		Permit(s) Applying For	ALCOHOLIC BEVERAGE
SECTION B - BUILDI Building Code:	ING INSPECTOR TO C	COMPLETE	
Building is in -	☐ Compliance	□ Non-compliance*	□ Not Applicable
	ame (printed) and Signatur	00000000000000000000000000000000000000	
Phone # ()		Date of Inspection	
REPORT OF THE PROPERTY OF THE			NET FINANCIA INDICE. SET L'ETIC OF ATT-A DESCRIPTAT PAR APPRICATE MA THE APPRICATE MANAGEMENT A SET AMAZIA.
SECTION C - FIRE IN	NSPECTOR TO COMP	LETE	
Fire Code:			
Building is in -	□ Compliance	□ Non-compliance*	□ Not Applicable
Fire Inspector's Name	(printed) and Signature		
Phone # ()		Date of Inspection	-
ENDING WITH A STREET CAMPAINT OF STREET AND AND ADDRESS OF STREET	NEWSON STREET,		e cultivativous diferit in the continue representative device est a compresentative des des des des des des de
	NG OFFICIAL TO CO	MPLETE	
Zoning: Business is in -	Compliance	□ Non-compliance*	□ Not Applicable
	an Urban Redevelopment A	_	
	2. 8.		opment Area and must comply
with the requirements		□Yes □No	· · · · · · · · · · · · · · · · · · ·
Zoning Classification	PA-30		
Permitted uses in this		IN TOO BUILD	55 Est. Via Special Use Permi
		RANDY BAKER	(Aal)
-	e (printed) and Signature		/
Phone # (910) 84	12. 1223	Date of Inspection	5-20.2025

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