## 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

SECTION A - APPLICANT TO COMPLETE	
Name of Applicant SANJESU Chop	PRA SSP OF ANGER INC
Trade Name of Business SoMN 4's	#2
Address of Business 105, N. RA	LEIGH ST.
City ANGIEK	County Harrett
Phone # (919) 639-2631	919-448-1059
	Permit(s) Applying For off Premiers
SECTION B - BUILDING INSPECTOR TO COMPLETE  Building Code:  Building is in -   Compliance  Non-compliance*  Not Applicable  Building Inspector's Name (printed) and Signature  Phone # (	
SECTION C - FIRE INSPECTOR TO COMP  Fire Code:  Building is in -   Compliance  Fire Inspector's Name (printed) and Signature  Phone # ()	□ Non-compliance* □ Not Applicable □ Date of Inspection
SECTION D - ZONING OFFICIAL TO COMPLETE  Zoning:  Business is in -	
Phone # (	Date of Inspection

<sup>\*</sup>Please state reasons for "Noncompliance" in SECTION E on back of this page.