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 *must* be completed by the building, fire and zoning officials before a permit will be issued

SECTION A - APPLICANT TO COMPLETE

Name of Applicant **Reginald M. Lewis**

Trade Name of Business **CLADom Enterprise LLc.**

Address of Business **544 Falcon Rd Lillington, N.C. - Cathis Farm**

City **Lillington** County **Harnett**

Phone # (**757**) **535-6335**

Type of Establishment **Farm Cathis** Permit(s) Applying For **Retail on site permit**

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 _____

SECTION C - FIRE INSPECTOR TO COMPLETE
Fire Code:

Building is in - ☐ Compliance   ☐ Non-compliance*   ☐ Not Applicable

Fire Inspector's Name (printed) and Signature _____

Phone # (____)_____ Date of Inspection _____

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)   ☐Yes   ☐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   ☐Yes   ☐No

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.

SECTION E - *Noncompliance*

REASONS FOR NONCOMPLIANCE	DATE CORRECTED