

CITY OF NORMAN
RETAIL WINE CERTIFICATE OF COMPLIANCE

1. Name of Owners of Business _____
2. Name of Business _____
3. Kind of Business _____
4. Street or Rural Address of Business _____
5. City _____ 6. County _____ 7. State & Zip Code _____
8. Mailing Address _____
9. Telephone Number _____

All provisions regarding zoning requirements as required by the Code of the City of Norman are in compliance.

_____ Planning Department 201 West Gray, Building "A"	_____ Date 366-5432
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Remarks: _____

All provisions regarding building codes as required by the Code of the City of Norman are in compliance.

_____ Building Inspection Division 201 West Gray, Building "A"	_____ Date 366-5339
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Remarks: _____

All provisions regarding fire requirements as required by the Code of the City of Norman are in compliance.

_____ Fire Inspector 415 East Main	_____ Date 292-9780
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Remarks: _____

All provisions regarding food service requirements as required by the Code of the City of Norman are in compliance.

_____ Cleveland County Health Dept. 250 12th Avenue N.E.	_____ Date 321-4048
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Remarks: _____

After all signatures are obtained, the Certificate of Compliance needs to be submitted to:

ABLE Commission
3812 N. Santa Fe, Suite 200
Oklahoma City, OK 73118
405-522-3033
www.ok.gov/able/

The City of Norman Retail Wine Permit needs to be obtained after State License is issued