CITY OF NORMAN

MIXED BEVERAGE/CATERER CERTIFICATE OF COMPLIANCE

1.	Name of Owners of	Business		
2.	Name of Business _			
3.				
4.	Street or Rural Address of Business			
5.	City	6. County	7. State & Zip Code	
8.	Mailing Address			
9.	Telephone Number			
	rovisions regarding zon liance.	ning requirements as	required by the Code of the City of	Norman are in
Damas	wlvo.		Planning Department 225 N. Webster, Development Center	Date 366-5432
	rks:			n compliance
All pr	ovisions regarding build	ung codes as required	by the Code of the City of Norman are in	1 compliance.
			Building Inspection Div. 225 N. Webster,	Date 366-5339
Rema	rks:		Development Center	
All pr	ovisions regarding fire r	requirements as require	ed by the Code of the City of Norman ar	e in compliance.
			Fire Inspector 415 East Main	Date 292-9780
Rema	rks:			
_	ovisions regarding food liance.	l service requirements	s as required by the Code of the City o	f Norman are in
			Cleveland County Health Dept. 250 12th Avenue N.E.	Date 321-4048
Rema	rks:			
After	all signatures are obtain	ed, the Certificate of C	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 Mixed Beverage/Caterer Permit needs to be obtained after State License is issued