

CITY OF NORMAN
BREWER CERTIFICATE OF COMPLIANCE

1. Name of Business (d/b/a) _____
2. Name of Owner (Corp., LLC, Sole) _____
3. Type of Business _____
4. Street or Rural Address of Business _____
5. City _____ County _____ State _____ Zip Code _____
6. Mailing Address _____
7. 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, Bldg. "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, Bldg. "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 fire requirements as required by the Code of the City of Norman are in compliance.

_____ OK State Department of Health 1000 N.E. 10th, OKC	_____ Date 271-5779
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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 Brewer Permit needs to be obtained after the State License is issued.