



City of Ardmore
 Department of Community Development
 15 1st Avenue SE, Ardmore OK 73401 (580) 223-3477

CITY OF ARDMORE
APPLICATION FOR CERTIFICATE OF COMPLIANCE/ZONING LETTER
 Fee: \$50.00

Business Name _____

Business Owner _____ **Type of Business** _____

Business Address _____

_____	_____	_____
City	State	Zip

Contact Person _____ **Phone Number** _____

Email _____ **Type of ABLE license applying for** _____
 (Beer & Wine, Caterer, Mixed Beverage, Package Store, etc.)

Signature of owner or proper agent **Date**

I, the undersigned as owner or proper agent, request that the City of Ardmore verify that my business, which is involved in the sale of alcoholic beverages, is in compliance with all of the City of Ardmore’s applicable zoning, fire, safety and health codes, as well as is not delinquent with any local or state taxes. This request is submitted in order that I may obtain a Certificate of Compliance to attach my application to be submitted to the ABLE Commission. By signing this application, I consent to the Community Development Director or their designee, and any other applicable inspector to conduct an inspection of the property addressed above, the cost of which is included in this application fee.

STAFF USE ONLY	
Date Received _____	Zoning _____
Building Inspection _____	_____
Date	Comments
Fire Department Inspection _____	_____
Date	Comments