

**NORTH CAROLINA  
ALCOHOLIC BEVERAGE CONTROL COMMISSION**

**(919) 779-0700**

Location: 400 E. Tryon Road  
Raleigh, NC 27610

Mail: 4307 Mail Service Center  
Raleigh, NC 27699-4307

RESOLUTION OF THE CITY OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_, REGARDING THE DESIGNATION OF AN OFFICIAL TO MAKE RECOMMENDATIONS TO THE NORTH CAROLINA ALCOHOLIC BEVERAGE CONTROL COMMISSION ON ABC PERMIT APPLICATIONS.

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WHEREAS G.S.18B-904(f) authorizes a governing body to designate an official, by name or by position, to make recommendations concerning the suitability of persons or locations for ABC permits; and

WHEREAS the City of \_\_\_\_\_, County of \_\_\_\_\_, wishes to notify the NC ABC Commission of its designation as required by G.S.18B-904(f);

BE IT THEREFORE RESOLVED that \_\_\_\_\_, \_\_\_\_\_,  
(Name of Official) (Title or Position)

is hereby designated to notify the North Carolina Alcoholic Beverage Control Commission of the recommendations of the City of \_\_\_\_\_, County of \_\_\_\_\_, regarding the suitability of persons and locations for ABC permits within its jurisdiction.

BE IT FURTHER RESOLVED THAT notices to the City of \_\_\_\_\_, County of \_\_\_\_\_, should be mailed or delivered to the official designated above at the following address:

Mailing address: \_\_\_\_\_

Office location: \_\_\_\_\_

City: \_\_\_\_\_, NC

Zip Code: \_\_\_\_\_ Phone #: \_\_\_\_\_

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Mayor/Chairman)

Sworn to and subscribed before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Clerk)