

MONTHLY RESTAURANT ZONING COMPLIANCE REPORT

Revenue Department 144 Tichenor Avenue, Suite 6 Auburn, AL 36830 334.501.7239 Fax: 334.501.7297 www.auburnalabama.org

| FOR THE MONTH OF 20 (Pursuant to Ordinance 2676) | | | |
|--|--------------------------|------------------------------|---------|
| Customer Name (DBA): | | | |
| Customer Address: | | | |
| Fotal floor area of establishment: | sq ft. Area de | dicated to restaurant use: | sq ft |
| Gross sales during the month | | | |
| Gross sale of food/non-alcoholic bevera | iges during the r | month | |
| Gross sale of liquor, beer and table win d | e during the mo | nth | |
| STATE OF ALABAMA | | | |
| COUNTY | | | |
| ,, | certify that the a | bove report is true and corr | ect and |
| accurately shows the total of all liquor, v | wine and beer so | old by the ABC Licensee duri | ng the |
| month. | | | |
| Signed & Title | | Date | |
| DUE DATES. This forms is to be filled and from the | | | |

DUE DATES: This form is to be filled out from the 1st day of the month to the end of the month. The form is required to be mailed or faxed to the Revenue Department by the 20th of the following month. FORMS FILED 60 DAYS AFTER THE DUE DATE ARE SUBJECT TO PENALTY. (Pursuant to Section 909 of *the City of Auburn Zoning Ordinance*).