



Department of Commerce

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
Alcohol Beverage and Tobacco Control Division
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DATE: _____

PHONE NO.: _____

NAME: _____

VILLAGE: _____

ADDRESS: _____

MUNICIPALITY: _____

INSTRUCTION: Draw a sketch indicating the exact direction to the site/location of the proposed establishment. The drawing must also include all residential areas and recognizable features such as roads, nearby buildings, street name and lot number.

LEGAL DESCRIPTION OF PROPERTY:

Signature of Applicant: _____

Date: _____