



STATE OF ALABAMA  
STATE BANKING DEPARTMENT



Zoning Attestation  
(Please type, print and sign)

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

I hereby attest that the requested licensed location addressed at:

\_\_\_\_\_ City, \_\_\_\_\_, State \_\_\_\_\_

Zip \_\_\_\_\_ is **not** a residence nor is it zoned residential.

Type Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title : \_\_\_\_\_

**Please Note:** This document must be witnessed by one (1) witness:

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone Number (including area code)