

**NORTH CAROLINA  
ALCOHOLIC BEVERAGE CONTROL COMMISSION**

400 East Tryon Road  
Raleigh, NC 27610

[www.abc.nc.gov](http://www.abc.nc.gov)

**ABC REQUEST FORM**

**Reason for Request:**

Cancel Permit(s)

Update Mailing Address/Contact Information

Update Diagram

Permit Number \_\_\_\_\_

Business Name (Inc/LLC) \_\_\_\_\_ Trade Name \_\_\_\_\_

Location Address \_\_\_\_\_  
Street City State Zip Code

Current Mailing Address \_\_\_\_\_  
Street City State Zip Code

**To Cancel Permit(s):**

Permit Type You Wish to Cancel \_\_\_\_\_

Reason for the Request \_\_\_\_\_

**Updated Mailing Address/Contact Information:**

New Mailing Address, if applicable \_\_\_\_\_

New Phone Number, if applicable \_\_\_\_\_

**Updated Diagram (please attach a copy of the updated diagram and photos of the additional space).**

Describe changes made to the premises \_\_\_\_\_

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**Note: If additional space was constructed on the premises, a new Inspection/Zoning Compliance form must be submitted.**

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send email to: [permits@abc.nc.gov](mailto:permits@abc.nc.gov)