



NICK MATRANGA, LICENSE COMMISSIONER, MOBILE COUNTY

**CERTIFICATION FOR COLD STORAGE**

STATE OF ALABAMA  
COUNTY OF MOBILE

I, \_\_\_\_\_  
(Print Name of Owner or Officer)

certify that I am the \_\_\_\_\_  
(Title)

of the business known as \_\_\_\_\_  
(Print Name of Business)

and that the volume of refrigerated space to the best of my knowledge and belief for said  
business is \_\_\_\_\_ cubic feet.

\_\_\_\_\_  
(Signature of Owner or Officer)

\_\_\_\_\_  
(Date)