

FILE NO. 270-2021

WARD 12 - BRANCATELLI

OHIO DIVISION OF LIQUOR CONTROL  
6606 TUSSING ROAD, P.O. BOX 4005  
REYNOLDSBURG, OHIO 43068-9005  
(614)644-2360 FAX(614)644-3166

NOTICE TO LEGISLATIVE  
AUTHORITY

TO

|                |     |      |                            |
|----------------|-----|------|----------------------------|
| 8094040        |     | TRFO | SHIVAAY RETAIL LLC         |
| PERMIT NUMBER  |     | TYPE | SLAVIV VILLAGE BI RITE     |
| 10             | 01  | 2019 | DBA SLAVIC VILLAGE BI RITE |
| ISSUE DATE     |     |      | 6405 FLEET AV 1ST FL       |
| 04             | 02  | 2021 | CLEVELAND OHIO 44105       |
| FILING DATE    |     |      |                            |
| C1             | C2  |      |                            |
| PERMIT CLASSES |     |      |                            |
| 18             | 154 | C    | F25021                     |
| TAX DISTRICT   |     |      | RECEIPT NO.                |

FROM 04/06/2021

|                |     |      |                            |
|----------------|-----|------|----------------------------|
| 8229301        |     |      | SLAVIC VILLAGE MARKET LLC  |
| PERMIT NUMBER  |     | TYPE | DBA SLAVIC VILLAGE BI RITE |
| 10             | 01  | 2019 | 6405 FLEET AV 1ST FL       |
| ISSUE DATE     |     |      | CLEVELAND OHIO 44105       |
| 04             | 02  | 2021 |                            |
| FILING DATE    |     |      |                            |
| C1             | C2  |      |                            |
| PERMIT CLASSES |     |      |                            |
| 18             | 154 |      |                            |
| TAX DISTRICT   |     |      | RECEIPT NO.                |



MAILED 04/06/2021

RESPONSES MUST BE POSTMARKED NO LATER THAN. 05/07/2021

**IMPORTANT NOTICE**

PLEASE COMPLETE AND RETURN THIS FORM TO THE DIVISION OF LIQUOR CONTROL  
WHETHER OR NOT THERE IS A REQUEST FOR A HEARING.

REFER TO THIS NUMBER IN ALL INQUIRIES

**C TRFO 8094040**

(TRANSACTION & NUMBER)

(MUST MARK ONE OF THE FOLLOWING)

WE REQUEST A HEARING ON THE ADVISABILITY OF ISSUING THE PERMIT AND REQUEST THAT  
THE HEARING BE HELD  IN OUR COUNTY SEAT.  IN COLUMBUS.

WE DO NOT REQUEST A HEARING.

DID YOU MARK A BOX? IF NOT, THIS WILL BE CONSIDERED A LATE RESPONSE.

PLEASE SIGN BELOW AND MARK THE APPROPRIATE BOX INDICATING YOUR TITLE:

(Signature)

(Title)-  Clerk of County Commissioner

(Date)

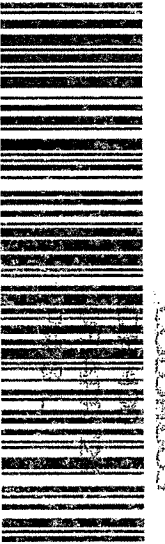
Clerk of City Council

Township Fiscal Officer

CLERK OF CLEVELAND CITY COUNCIL  
ATTENTION CLERK  
601 LAKESIDE AV RM 216  
CLEVELAND OHIO 44114

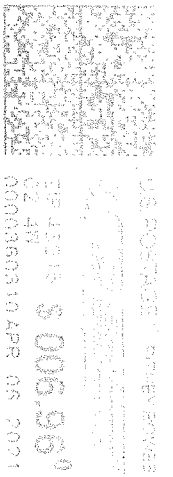


**Department  
of Commerce**  
Division of Liquor Control  
6606 Tussing Road, P.O. Box 4005  
Reynoldsburg, Ohio 43068-9005



9214 7969 0099 9790 1797 3700 93

FIRST CLASS



3094040  
CLERK OF CLEVELAND CITY COUNCIL  
601 LAKESIDE AV RM 210  
CLEVELAND, OH 44114

44114-107899

POSTNET  
44114107899