FILE NO. 697-2025



Division Use Only:

Permit #: ____

Permit Type: _____

TEMPORARY LIQUOR PERMIT DIAGRAM OF PROPOSED PERMIT PREMISES Please note that the APPLICANT MUST give a copy of the "Diagram of Permit Premises" to the law enforcement agency that will sign-off on the "Chief Peace Officer Notification" form. Temporary permit applicant Name: Downtown Cleveland Alliance Event Start Date: 07/09/2025 Event End Date: 03/09/2026 ALL temporary liquor permit applicants MUST submit a detailed diagram/drawing of the event's permit premises describing where alcoholic beverages will be stored, sold, and consumed. Include approximate dimensions like 10 x 10. We CANNOT process this application if the diagram is not included. If using a picture or image, please write "image included" below and make sure the image is clear and shows things like streets, barrier locations, etc. Image attached person who prepared diagram or applicant) (Print Name) (Date) Phone

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PUBLIC SQUARE F8 PERMIT BOUNDARIES



Kelling Ulgun 619-818-0844 Director of Programs & Activations Downtown cleveland Alliance

Public Square F8 Permit

- Exterior plaza measures approximately 496 feet wide by 429 feet deep at its furthest points.
- Other permit premises, ReBOL Café, in the southwest corner (75'x87') and Soldiers and Sailors Monument to the southeast corner (122'x101') are not part of the permit premises.
- The grass part of the north part of plaza will be utilized mainly as the cordoned area for liquor consumption for smaller events. Superior Avenue running through the premises will not typically be closed, however when required for larger events, bollards and raptors will be in place.

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Division Use Only:	
Permit #:	
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CTION A - TEMPOR	ARY PERMIT INFORMAT	FION (Completed by F-8 or F-9) applicant)
The temporary perm	it applicant Downtow	n Cleveland Alliance	9ha
a contract with the bo the listed publicly ow	elow legislative authority t	o operate/manage events on th	e governmental entity's behalf at
	(\$	Street Address)	
	(Cleveland	44113
(Township	if applicable)	(City)	(Zip)
The F-8 or F-9 permi FIRST Event DATE:		months. The applicant's first a	
INO ECTION B – Local Le	gislative Signature/Ack	nowledgement (completed b	y government official)
This portion MUST b	missioner clerk, or their o	local legislative official (clerk o lesignee) who has jurisdiction o	over the location where this F-8
officer, or county com or F-9 permit will be i NOT object to the foll • Applicant has events at the • We have been and • We do NOT requirements I acknowledge that the	lowing: s a valid contract / agreen above applied for locatio on notified of and approve object to the issuance of t s under R.C. 4303.26 that	y acknowledge, understand, ha nent with our jurisdiction to com n that is publicly owned for the of any street, alley, or public s his F-8 or F-9 permit, as applic the Division would otherwise b ve in Section A notified us about	duct various temporary permit specified dates; dewalk closures for the event; able, and waive any notice e required to provide.

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Department of Commerce

Division Use Only:	
Permit #:	_
Class Type:	

Division of Liquor Control

INSTRUCTIONS – READ FIRST

If there is any type of public street, alley, or sidewalk closure for the temporary event, submit this form to us, signed by the applicable local official authorizing/acknowledging the closure, with your temporary permit application. Important: Applicant MUST provide a copy of the "Street Closure Acknowledgement" form to the law enforcement agency that signed the "Chief Peace Officer Notification" form.

TEMPORARY PERMIT – STREET CLOSURE ACKNOWLEDGMENT

Section A – Completed by Temporary Permit Applicant

I/We, Downtown Cleveland Alliance

, request the following

(Entity name as listed on the Temporary Permit Application)

public streets, alleys, or sidewalks identified below be closed during the duration of our temporary event as listed on our application. List the street names(s) and address(es) or ranges below (i.e., Main Street – From 600 Block to 700 Block). Use additional sheets, if necessary. We understand that any closures **MUST** have some physical barrier (i.e. ropes, cones, fencing, etc.) to distinguish where the closure begins and ends.

STREET NAME	ADDRESS or STREET RANGE		
STREET NAME	FROM	то	
Example – High Street	200 East	600 East	
SUPERIOR AVENUE	WEST POADWAY	EAST ROADWAN/	
WEST POAD WAY	POCKNELL AVE	SOUTH ROADWAY	
SOUTH ROADWAY	WEST ROADWAY	ONTARIO STRAET	
EUCLID AVENUE	ONTAPID STREET	EAST POADWAY	
EAST ROADWAY	EVCLIP AVANVE	POCKWELL AVE	
POLEWELL AVENUE	WEST RDADWAY	EAST ROADWAY	
Section B - Acknowledgment by Loca	al Government Official		

I, <u>Allan Dreyer</u>, acknowledge receipt of the above temporary permit applicant's request to close the above identified streets, alley ways, or sidewalks during their event. I state that I have the authority to act on behalf of the local government where the event will take place and that I approve the closure request. <u>Clerk of Guncil</u> (Signature) (Title) (Date)

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