



Department of
Commerce

Division of Liquor Control

Ward 3 Welch

com.ohio.gov

Mike DeWine, Governor Jim Tressel, Lt. Governor Sherry Maxfield, Director

NOTICE TO LEGISLATIVE AUTHORITY

| | | | |
|-----------------------------|-------------------|---|---------------------------|
| 08827899-1 PERMIT NUMBER | LLC TYPE | TAZA II LLC 1400 W 6TH ST 1ST FL & BSMT & PATIO CLEVELAND OH 44113 | FILE NO. 1383-2025 |
| ISSUE DATE 9/12/2025 | FILING DATE | Muni/Village/Twp: Cleveland | |
| D-5 PERMIT CLASSES | | | |
| 18154 TAX DISTRICT | OCT RECEIPT NO | | |
| | | | |

FROM 10/14/2025

| | | |
|----------------|------------|--|
| PERMIT NUMBER | TYPE | |
| ISSUE DATE | | |
| FILING DATE | | |
| PERMIT CLASSES | | |
| TAX DISTRICT | RECEIPT NO | |
| | | |

MAILED 10/14/2025

RESPONSES MUST BE POSTMARKED NO LATER THAN 11/14/2025

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: OCT REN 08827899-1

(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

(Printed Name)

(Email Address)

(Telephone No.)

CLERK OF CLEVELAND CITY COUNCIL
601 LAKESIDE AV
RM 216
CLEVELAND OH 44114