

FILE NO. 30-2022

Nara Z - McCormack

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

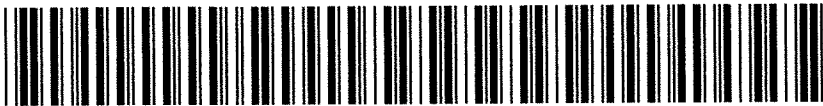
**NOTICE TO LEGISLATIVE
AUTHORITY**

TO

1555085		TREX	CLEVELAND WING CO LLC DBA BUFFALO WILD WINGS ST FL & BSMT & PATIO 724-728 PROSPECT AVE EAST CLEVELAND OH 44115
PERMIT NUMBER		TYPE	
10 01	2019		
ISSUE DATE			
12 14	2021		
FILING DATE			
D5 D6			
PERMIT CLASSES			
18	154	C	F26917
TAX DISTRICT			RECEIPT NO.

FROM **12/16/2021**

7196555			RAMB CO DOWNTOWN LLC DBA BUFFALO WILD WINGS GRILL & BAR ST FL BSMT & PATIO 724-728 PROSPECT AV EAST CLEVELAND OH 44115
PERMIT NUMBER		TYPE	
10 01	2019		
ISSUE DATE			
12 14	2021		
FILING DATE			
D5 D6			
PERMIT CLASSES			
18	154		
TAX DISTRICT			RECEIPT NO.



MAILED **12/16/2021**

RESPONSES MUST BE POSTMARKED NO LATER THAN. **01/18/2022**

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 TREX 1555085**

(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.

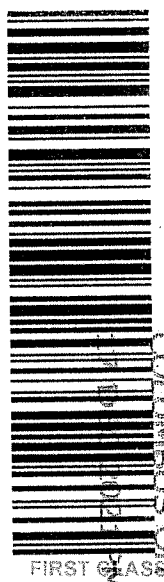
PLEASE SIGN BELOW AND MARK THE APPROPRIATE BOX INDICATING YOUR TITLE:

(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 9290 1806 4323 54

1555085
CLERK OF CLEVELAND CITY COUNCIL
601 LAKESIDE AV RM 216
CLEVELAND, OH 44114



44114-107699

