

FILE NO. 922-2023

**NOTICE TO LEGISLATIVE
AUTHORITY**

Ward 3 - McCormack

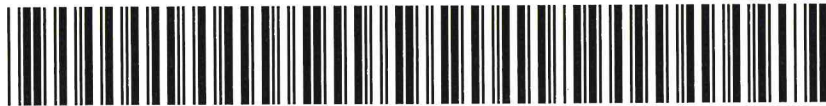
OHIO DIVISION OF LIQUOR CONTROL
6606 TUSSING ROAD, P.O. BOX 4005
REYNOLDSBURG, OHIO 43068-9005
(614)644-2360 FAX(614)644-3166

TO

22625050015 <small>PERMIT NUMBER</small>		N <small>TYPE</small>	DOORDASH ESSENTIALS LLC 1968 W 3RD ST CLEVELAND OH 44113	
<small>ISSUE DATE</small>				
07 12 2023 <small>FILING DATE</small>				
C2 <small>PERMIT CLASSES</small>				
18 <small>TAX DISTRICT</small>	154	C	D85375 <small>RECEIPT NO.</small>	

FROM **07/14/2023**

<small>PERMIT NUMBER</small>		<small>TYPE</small>			
<small>ISSUE DATE</small>					
<small>FILING DATE</small>					
<small>PERMIT CLASSES</small>					
<small>TAX DISTRICT</small>			<small>RECEIPT NO.</small>		



MAILED **07/14/2023**

RESPONSES MUST BE POSTMARKED NO LATER THAN. **08/14/2023**

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 N 2262505-0015

(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

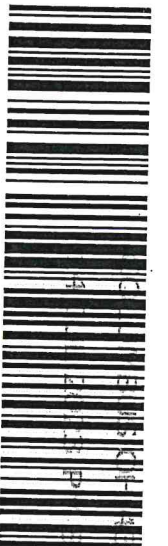
Township Fiscal Officer

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 1827 1946 37



US POSTAGE and PRIME TRAY BOXES
ZIP 43215 \$008.53⁰
02 4M 8383399 JUL 14 2023
0000383399 JUL 14 2023

22625050015
CLERK OF CLEVELAND CITY COUNCIL
601 LAKESIDE AV RM 216
CLEVELAND, OH 44114

44114-107699

