

WANT TO KATY

NOTICE TO LEGISLATIVE
AUTHORITY

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

TO

0346803		TRFO	BAD MEDICINE LLC	
PERMIT NUMBER		TYPE	13334 LORAIN AV	
10	01	2023		
ISSUE DATE		CLEVELAND OH 44111		
05	31	2024		
FILING DATE				
D2	D2X	D3	D3A	
PERMIT CLASSES				
18	154	C	F31540	
TAX DISTRICT		RECEIPT NO.		

FROM 06/20/2024

1972757			DALE VICTOR BARBER	
PERMIT NUMBER		TYPE	DBA FLERISH WINE AND GRILL	
10	01	2023		
ISSUE DATE		13334 LORAIN AV		
05	31	2024		
FILING DATE		CLEVELAND OHIO 44111		
D2	D2X	D3	D3A	
PERMIT CLASSES				
18	154			
TAX DISTRICT		RECEIPT NO.		



MAILED 06/20/2024

RESPONSES MUST BE POSTMARKED NO LATER THAN. 07/22/2024

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 0346803**

(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