

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

CLERK OF WILLOWICK CITY COUNCIL 30435 LAKESHORE BLVD WILLOWICK OH 44095

## NOTICE TO LEGISLATIVE AUTHORITY

			TO	
10005254-1		NEW	ALFREDOS MARKET, LLC	
PERMIT NUMBER TYPE		TYPE	ALFREDOS ITALIAN MARKET	
ISSUE DATE:			30575 EUCLID AVE	
FILING DATE: <b>7/16/2025</b>			WILLOWICK OH 44095	
PERMIT CLASSES: <b>D-1 D-2 D-6</b>			Muni/Village/Twp: Willowick	
43187	OCT			
TAX DISTRICT		RECEIPT NO	FROM 11/18/2025	
			FROM 11/16/2023	
PERMIT NUMBER		TYPE		
ISSUE DATE:				
FILING DATE:				
PERMIT CLASSES:				
TAX DISTRICT		RECEIPT NO		
MAILED 11/18/2025 RESPONSES MUST BE POSTMARKED NO LATER THAN 12/19/2025  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 NEW 1000 5254-1  (TRANSACTION & NUMBER)  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 TO 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☐ Clerk of City Council☐ Township Fiscal Officer	(Date)
(Printed Name)		2	(Email Address)	(Telephone No.)



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Dear Local Legislative Authority Official:

Please find enclosed the legislative notice that is being sent to you regarding the applied for liquor permit as captioned on the notice. You **must**, within 30 days from the "mailed" date listed on the notice under the bar code:

- Notify the Division whether you object and want a hearing; or
- Ask for your one-time only, 30-day extension. o Any requests for a one-time, 30-day
  extension will be reviewed by the Division upon timely receipt. If granted, your additional
  30-days runs from the expiration of the original 30-day period.

To be considered **timely**, your above response **MUST** be faxed, emailed, or mailed to the Division no later than the postmark deadline date stated on the form. To speed up processing times and reduce paper, the Division respectfully asks that you either fax or email your response. Please send your response to:

FAX:

(614) 644 - 3166

EMAIL:

Liquordocs@com.ohio.gov

MAIL:

Ohio Division of Liquor Control

Attn: Licensing Unit 6606 Tussing Road

PO Box 4005

Reynoldsburg, Ohio 43068-9005

To find out who has disclosed an ownership interest in the permit application to us you can:

- Visit <u>com.ohio.gov/liquorinfo</u>. Select the "Search who has disclosed an ownership interest" tab. Where asked, enter the permit number listed on the legislative notice; or
- Contact your police department or county sheriff (if you are a township fiscal officer or county clerk). We also sent them detailed ownership information to review for any criminal background issues involving the disclosed persons.

We have resources for you at <u>com.ohio.gov/govhelp</u>. Never miss out on when renewal objections are due! Sign-up for our emails at com.ohio.gov/stayinformed.

Thank you in advance for your cooperation,
Division Licensing Section
(rev. 2.12.25)