

**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

| | | | | | |
|---|--|------------------------------------|--|---|--|
| 62784440005 <small>PERMIT NUMBER</small> | | STCK <small>TYPE</small> | | N C SOCCER CLUB INC DBA N C SOCCER CLUB 5661 STOW RD HUDSON OH 44236 | |
| ISSUE DATE | | | | | |
| 09 14 2023 | | | | | |
| <small>FILING DATE</small> | | | | | |
| D51 <small>PERMIT CLASSES</small> | | | | | |
| 77 <small>TAX DISTRICT</small> | | 077 <small>TAX DISTRICT</small> | | C <small>TAX DISTRICT</small> | |
| F32376 <small>RECEIPT NO.</small> | | | | | |

FROM 11/08/2024

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



MAILED 11/08/2024 ¹⁴mg RESPONSES MUST BE POSTMARKED NO LATER THAN. 12/09/2024 ¹⁴mg

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 STCK 6278444-0005**
(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 HUDSON CITY COUNCIL
ATTN: CLERK-FISCAL OFFICER
1140 TEREX ROAD
HUDSON OHIO 44236**