Expansion Applications: ***At this time, Temporary permit expansions will expire on or before 8-5-20 and are to allow “sit down, table service”.

Please submit the following with your application. **Note: your application must be complete with all documents & pictures included.**

- Expansion / Diminution request form - please be detailed describing the area to be expanded.

- Letter from the city / village / township documenting that they have approved the expansion plan.

- Letter from the local health department documenting that they have approved the expansion plan.

- If the space is leased, a letter from the landlord / property owner documenting that they have approved the expansion.

- A detailed sketch of the area to include surrounding business and buildings.

- An affidavit explaining the materials to be used.

- Clear photos of the proposed expanded area.

Please include an email address for correspondence. Your request will be submitted for review and approval.
REQUEST FOR EXPANSION/DIMINUTION (REDUCTION) OF PERMIT PREMISES
(Please print or type all information except signatures)

This request must be completed in its entirety by the permit holder and signed by the permit holder of record. If the permit holder is a corporation, it must be signed by an officer or majority stockholder(s) of corporation; if a partnership, it must be signed by all general partners; and if a limited liability company, it must be signed by all managing members and officers. Attach documents, if any.

<table>
<thead>
<tr>
<th>Permit Number</th>
<th>Permit Class(es)</th>
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</table>

Name of Permit Holder

DBA (doing business as) | Phone Number

<table>
<thead>
<tr>
<th>Permit Premises Address</th>
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<tbody>
<tr>
<td>City</td>
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I, __________________________, do hereby request that the Department of Commerce, Division of Liquor Control conduct an Expansion/Dimination Investigation of the above mentioned permit premises.

I request the following area to be reviewed for:  

☐ Expansion OR ☐ Diminution please (check the appropriate box).

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

I understand that this area may NOT be used as permit premises until official approval has been received from the Department of Commerce - Division of Liquor Control.

Respectfully,

Witnessed & Received by:

__________________________
Signature of Permit Holder

__________________________
Date

__________________________
Liquor Control Compliance Officer
of the Department of Commerce - Division of Liquor Control

Title

Rev. 4/2012
AFFIDAVIT – DIVISION OF LIQUOR CONTROL

The State of Ohio, ____________________________________________ County, s.

Before me, ____________________________________________ (Notary)

personally came ____________________________________________ (PLEASE PRINT - Affiant)

who being duly sworn according to law, deposes and says that on or about the

______________________________________________ day of ______________________ at the County of ______________________


and further affiant saith not.

________________________________________ (Affiant's Signature)

________________________________________ (Print Name) (Time)

Sworn to and subscribed before me this __________ day of _____________________________, 20__


DLC 2004
Form 35-E Rev. 4/12/2012