

**BEFORE THE LIQUOR CONTROL COMMISSION
STATE OF OHIO**

Permit holder name(s): _____

Case No.(s) _____

Docket #: _____

DBA (Business name): _____

Address of permit location: _____

Permit location telephone number: (____) _____ - _____

Liquor Permit number: # _____

REQUEST TO WITHDRAW APPEAL

I, _____ (permit holder's name), hereby wish to withdraw my appeal, previously filed before the Ohio Liquor Control Commission. I no longer wish to pursue an appeal with the Ohio Liquor Control Commission because:

Respectfully submitted,

Date submitted: _____

Name of person filing this *Request to Withdraw Appeal*: _____; _____
(Printed) (Signature)

Telephone number: (____) _____ - _____; (Cell phone number) (____) _____ - _____

Fax number: (____) _____ - _____ Email: _____

Alternate permit holder mailing address where you can receive certified mail:

If applicable, attorney for appellant/permit holder: _____
(Name, address, phone number)

Please **EMAIL** this form to
The Liquor Control Commission OR
FAX this form to (614) 466-4564