

Ohio Department of Commerce

Division of Liquor Control

6606 Tussing Road · P.O. Box 4005 Reynoldsburg, OH 43068-9005 (614) 644-2360 FAX (614) 644-3166 http://www.com.state.oh.us Ted Strickland Governor

Kimberly A. Zurz Director

Fax

□ Urg	ent	☐ For Review	☐ Please C	omment	□ Please Reply	☐ Please Recycle
Date:	2-11	-09				
Re:	WE	3 CHECK RESPON	SES	Pages:	2	
	OFF	ICE				
To:	SEC	URE CHECK INC -	DAYTON	From:	KELLYWEITZ	

• Comments:

PLEASE NOTE THAT I NO LONGER HANDLE WEB CHECK RESPONSES - THE LIQUOR LICENSE REGISTRATION FORM HAS BEEN REVISED INDICATING A NEW FAX NUMBER TO USE - PLEASE USE THE ATTACHED REVISED VERSION AND DISCARD ALL OLD VERSIONS AND BEGIN FAXING YOUR RESPONSES TO:

614-644-0381

Kelly A. Weitz
Administrative Assistant
To Deputy Superintendent Bruce D. Stevenson
Division of Liquor Control
Kelly.Weitz@com.state.oh.us
(614) 644-2496
(614) 387-0614 Fax

SECURE CHECK LIQUOR LICENSE REGISTRATION FORM TO BE SUBMITTED WITH EACH BCI& I REPLY

PLEASE PRINT

Name:	····	SSN#:								
Residence Address:										
-		(6)	1771			·				
	(City, State and Zip)									
Residence Phone:										
Have you filed your application	with the Divisio	n of Liquor Control?	•	□YES	or	□ NO				
If YES, please list the following:										
Application/Permit #:										
Application Name:										
Address:	·····									
						_				
		(City, State and	l Zip)							
Business Phone:										
RESULTS WILL BE FAX	ŒD TO:	THE DIVISION O	F LIQUO	OR CONT	ROL (61	4) 644-0381				
	Release of	Background Check	Results							
I hereby certify that I have given me in the files of the Ohio Burea information to the Ohio Departn	u oi Criminal id	lentification and Inve	stigation	CRCT & D	informa and rel	tion pertaining ease that				
By placing my fingerprint image: nformation about me to Secure (period of one year from the date	Uneck and to the	e Ohio Department of	horizing f Comme	BCI & I to rce, Divisi	o release on of Li	criminal histor quor Control fo				
hereby release BCI & I and any lissemination of such criminal hi	and all individustory information	uals connected therew on.	vith from	all liabilit	y in con	nection with the				
Signature		- T	Date							