

**RESOLUTION #09-0720-13**

**Approve "no hearing" in relation to the transfer of one (1) liquor permit for Blazin Wings Inc / Buffalo Wild Wings Grill and Bar**

**WHEREAS**, Liberty Township has received notice from the County Commissioners regarding the interest of the Blazin Wings Inc / Buffalo Wild Wings Grill and Bar to transfer one (1) liquor license for their property, and

**WHEREAS**, there is no need to unnecessarily delay the administrative processes in light of the quality management of the establishment and lack of community problems related to their ability to regulate their clients activities, and


**NOW, THEREFORE BE IT RESOLVED BY THE BOARD OF TRUSTEES OF LIBERTY TOWNSHIP, DELAWARE COUNTY, OHIO** that the Trustees direct the Township Fiscal Officer to respond to the County and State of Ohio with a position of "no hearing requested" to assist Blazin Wings Inc / Buffalo Wild Wings Grille and Bar in attaining their desired outcome in this process in a timely manner.

This Resolution shall be in force and become effective immediately upon its execution.

Motion made by Sybert and seconded by Mann.

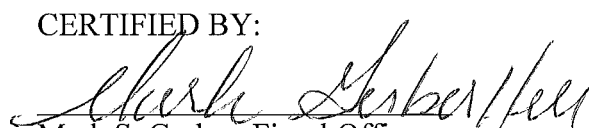
**Vote:** yes Ms. Guzzo yes Mr. Mann yes Mr. Sybert

7/20/09  
Date

  
Robert Mann, Trustee

  
Curtis J. Sybert, Trustee

CERTIFIED BY:

  
Mark S. Gerber, Fiscal Officer

\_\_\_\_\_  
Peggy Guzzo, Trustee

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

07527840215		TREX	BLAZIN WINGS INC
PERMIT NUMBER		TYPE	BUFFALO WILD WINGS GRILL & BAR
10	01	2008	3878 ATTUCKS DR
ISSUE DATE			LIBERTY TWP
07	14	2009	POWELL OH 43065
FILING DATE			
D5			
PERMIT CLASSES			
21	928	B	F01119
TAX DISTRICT			RECEIPT NO.

FROM 07/16/2009

42486490006			JAS 21 CORP
PERMIT NUMBER		TYPE	THOMAS G LOBE RCVR
10	01	2008	DBA HAMILTONS MARTINI BAR
ISSUE DATE			1415 EUCLID AV 1ST FL & BSMT
07	14	2009	CLEVELAND OHIO 44115
FILING DATE			
D5			
PERMIT CLASSES			
18	154		
TAX DISTRICT			RECEIPT NO.



MAILED 07/16/2009

RESPONSES MUST BE POSTMARKED NO LATER THAN. 08/17/2009

**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

**B TREX 0752784-0215**

(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:

*[Handwritten Signature]*

(Signature)

(Title)-  Clerk of County Commissioner

Clerk of City Council

Township Fiscal Officer

*8/11/09*

(Date)

LIBERTY TOWNSHIP TRUSTEES  
ATTENTION TOWNSHIP FISCAL OFFICER  
10104 BREWSTER LN SUITE 125  
POWELL OHIO 43065

FOR OFFICE USE ONLY  
 NEW TRANSFER  
 PERMIT #  
 0752784-0215

**OFFICER/ SHAREHOLDERS DISCLOSURE FORM**

SECTION A. (This form must accompany all applications of a corporate business entity)

Name of Corporation Blazin Wings, Inc.	DBA Name Buffalo Wild Wings Grill & Bar
Permit Premises Address 3878 Attucks Drive	City, State Powell, Ohio
Township, if in Unincorporated Area Liberty Township	Zip Code 43065
	Tax Identification No. (TIN) 41-1957107

SECTION B.

1. Is stock publicly traded?  
 If "YES", indicate exchange \_\_\_\_\_ & Do NOT complete SECTION D.  YES  NO

2. Does any stockholder own 5% or more shares? (If YES, complete section D)  YES  NO

3. Total Number of shares issued 1000

Please be advised that any social security numbers provided to the Division of Liquor Control in this application may be released to the Ohio Department of Public Safety, the Ohio Department of Taxation, the Ohio Attorney General, or to any other state or local law enforcement agency if the agency requests the social security number to conduct an investigation, implement an enforcement action, or collect taxes.

SECTION C. List the top five (5) officers of the captioned corporation. If an office is NOT held please indicate by writing NONE.

**EACH OFFICER LISTED BELOW MUST SUBMIT A CIVILIAN IDENTIFICATION CARD & PERSONAL HISTORY BACKGROUND FORM**

NAME OF OFFICER	SOCIAL SECURITY NUMBER	DATE OF BIRTH
1) CEO Sally Smith		1/7/58
2) President Sally Smith		1/7/58
3) Vice-President James Schmidt		1/22/60
4) Secretary Mary J. Twinem		10/28/60
5) Treasurer Mary J. Twinem		10/28/60

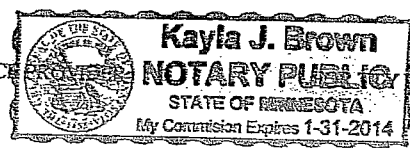
SECTION D. Stockholders holding 5% or more outstanding shares. Note: If you answered Question 1 YES, do not complete this section  
**EACH SHAREHOLDER LISTED BELOW MUST SUBMIT A CIVILIAN IDENTIFICATION CARD & PERSONAL HISTORY BACKGROUND FORM.** If none, please indicate by writing NONE.

1) Stockholder's Name	Social Security No. (if Individual)	NUMBER OF SHARES HELD (NOT PERCENTAGE)
Buffalo Wild Wings, Inc		
Residence Address 5500 Wayzata Blvd. Suite	Tax Identification No. (if applicable)	
City and State Minneapolis, Minnesota 1600	Zip Code 55416	
Telephone No.	Date of Birth	1000
2) Stockholder's Name	Social Security No. (if Individual)	NUMBER OF SHARES HELD (NOT PERCENTAGE)
Residence Address	Tax Identification No. (if applicable)	
City and State	Zip Code	
Telephone No.	Date of Birth	

(PLEASE SEE REVERSE SIDE SHOULD YOU NEED ADDITIONAL SPACE TO LIST STOCKHOLDERS)

STATE OF OHIO, Minnesota Hennepin COUNTYss,  
 I, James M. Schmidt being first duly sworn, according to law, deposes and says that he/she is (Title) Vice President  
 of the Blazin Wings, Inc. a corporation duly authorized by law to do business in the State of Ohio, and that the statements made in the  
 forgoing affidavit are true.

(Signature) James M. Schmidt (Print Name and Corporate Title) James M. Schmidt, Vice President  
 Sworn to and subscribed in my presence this 26th day of May, 2009



Kayla J. Brown (Notary Public)  
 (Notary Expiration) 01-31-2014

FOR OFFICE USE ONLY	
NEW	TRANSFER
PERMIT #	

**OFFICER/SHAREHOLDERS DISCLOSURE FORM**

SECTION A. (This form must accompany all applications of a corporate business entity)

Name of Corporation	Buffalo Wild Wings, Inc.	DBA Name	
Permit Premises Address	5500 Wayzata Blvd., Suite 1600	City, State	Minneapolis, Minnesota
Township, if in Unincorporated Area	N/A	Zip Code	55416
		Tax Identification No. (TIN)	

SECTION B.

1. Is stock publicly traded?  
 If "YES", indicate exchange NASDA & Do NOT complete SECTION D.  YES  NO

2. Does any stockholder own 5% or more shares? (If YES, complete section D)  YES  NO

3. Total Number of shares issued \_\_\_\_\_

Please be advised that any social security numbers provided to the Division of Liquor Control in this application may be released to the Ohio Department of Public Safety, the Ohio Department of Taxation, the Ohio Attorney General, or to any other state or local law enforcement agency if the agency requests the social security number to conduct an investigation, implement an enforcement action, or collect taxes.

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NAME OF OFFICER	SOCIAL SECURITY NUMBER	DATE OF BIRTH
1) CEO Sally J. Smith	[REDACTED]	1/7/58
2) President Sally J. Smith	[REDACTED]	1/7/58
3) Vice-President Mary J. Twinem	[REDACTED]	10/28/60
4) Secretary James M. Schmidt	[REDACTED]	1/22/60
5) Treasurer Mary J. Twinem	[REDACTED]	10/28/60

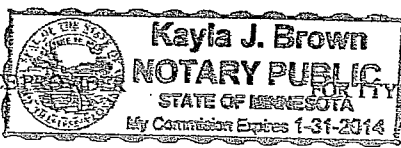
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 EACH SHAREHOLDER LISTED BELOW MUST SUBMIT A CIVILIAN IDENTIFICATION CARD & PERSONAL HISTORY BACKGROUND FORM. If none, please indicate by writing NONE.

1) Stockholder's Name	Social Security No. (if Individual)	NUMBER OF SHARES HELD (NOT PERCENTAGE)
Residence Address	Tax Identification No. (if applicable)	[REDACTED]
City and State	Zip Code	
Telephone No.	Date of Birth	
2) Stockholder's Name	Social Security No. (if Individual)	
Residence Address	Tax Identification No. (if applicable)	[REDACTED]
City and State	Zip Code	
Telephone No.	Date of Birth	

Minnesota (PLEASE SEE REVERSE SIDE SHOULD YOU NEED ADDITIONAL SPACE TO LIST STOCKHOLDERS)  
 STATE OF OHIO, Hennepin COUNTYss,

James M. Schmidt being first duly sworn, according to law, deposes and says that he/she is (Title) Vice President  
 of the Biazin Wings, Inc., a corporation duly authorized by law to do business in the State of Ohio, and that the statements made in the foregoing affidavit are true.

Signature: James M. Schmidt (Print Name and Corporate Title) JAMES M. SCHMIDT, VP  
 sworn to and subscribed in my presence this 26th day of MAY, 2009



Kayla J. Brown (Notary Public) 01-31-2014 (Notary Expiration)