

**TO MAKE CHANGES IN YOUR BUSINESS OPERATIONS - INCLUDING  
BUSINESS HOURS/DAYS OF OPERATION OR CHANGES IN  
ENTERTAINMENT**



Please return completed documents to your local OLCC office.

DATE OF REQUEST: \_\_\_\_\_ TYPE OF LICENSE: \_\_\_\_\_

NAME OF LICENSEE: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

TRADENAME: \_\_\_\_\_

BUSINESS LOCATION: \_\_\_\_\_  
(Address) (City) (Zip)

PHONE: ( ) \_\_\_\_\_

EMAIL: \_\_\_\_\_

Please submit the items below – ITEMS IN BOLD ARE OLCC FORMS

1. LETTER OF REQUEST DESCRIBING WHAT CHANGES YOU ARE MAKING
2. **BUSINESS INFORMATION FORM**
3. **FLOOR PLAN – IF ANY CHANGES**
4. MENU – IF ANY CHANGES

**CHANGES YOU MAKE *MAY* REQUIRE A SITE VISIT BY OLCC.  
BE AWARE THAT CHANGES MADE TO YOUR BUSINESS  
MAY AFFECT YOUR MINOR POSTING OR YOUR LICENSE.**



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Trade Name (dba): \_\_\_\_\_

Business Location Address: \_\_\_\_\_

City: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday \_\_\_\_\_ to \_\_\_\_\_
Monday \_\_\_\_\_ to \_\_\_\_\_
Tuesday \_\_\_\_\_ to \_\_\_\_\_
Wednesday \_\_\_\_\_ to \_\_\_\_\_
Thursday \_\_\_\_\_ to \_\_\_\_\_
Friday \_\_\_\_\_ to \_\_\_\_\_
Saturday \_\_\_\_\_ to \_\_\_\_\_

Outdoor Area Hours:

Sunday \_\_\_\_\_ to \_\_\_\_\_
Monday \_\_\_\_\_ to \_\_\_\_\_
Tuesday \_\_\_\_\_ to \_\_\_\_\_
Wednesday \_\_\_\_\_ to \_\_\_\_\_
Thursday \_\_\_\_\_ to \_\_\_\_\_
Friday \_\_\_\_\_ to \_\_\_\_\_
Saturday \_\_\_\_\_ to \_\_\_\_\_

The outdoor area is used for:

- Food service Hours: \_\_\_\_\_ to \_\_\_\_\_
Alcohol service Hours: \_\_\_\_\_ to \_\_\_\_\_
Enclosed, how \_\_\_\_\_

The exterior area is adequately viewed and/or supervised by Service Permittees.

(Investigator's Initials)

Seasonal Variations: [ ] Yes [ ] No If yes, explain: \_\_\_\_\_

ENTERTAINMENT

Check all that apply:

- Live Music, Recorded Music, DJ Music, Dancing, Nude Entertainers, Karaoke, Coin-operated Games, Video Lottery Machines, Social Gaming, Pool Tables, Other: \_\_\_\_\_

DAYS & HOURS OF LIVE OR DJ MUSIC

Sunday \_\_\_\_\_ to \_\_\_\_\_
Monday \_\_\_\_\_ to \_\_\_\_\_
Tuesday \_\_\_\_\_ to \_\_\_\_\_
Wednesday \_\_\_\_\_ to \_\_\_\_\_
Thursday \_\_\_\_\_ to \_\_\_\_\_
Friday \_\_\_\_\_ to \_\_\_\_\_
Saturday \_\_\_\_\_ to \_\_\_\_\_

SEATING COUNT

Restaurant: \_\_\_\_\_ Outdoor: \_\_\_\_\_
Lounge: \_\_\_\_\_ Other (explain): \_\_\_\_\_
Banquet: \_\_\_\_\_ Total Seating: \_\_\_\_\_

OLCC USE ONLY

Investigator Verified Seating: \_\_\_\_ (Y) \_\_\_\_ (N)
Investigator Initials: \_\_\_\_\_
Date: \_\_\_\_\_

I understand if my answers are not true and complete, the OLCC may deny my license application.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_



OREGON LIQUOR CONTROL COMMISSION

**FLOOR PLAN**

- Your floor plan must be submitted on this form.
- Use a separate Floor Plan Form for each level or floor of the building.
- The floor plan(s) must show the specific areas of your premises (e.g. dining area, bar, lounge, dance floor, video lottery room, kitchen, restrooms, outside patio and sidewalk cafe areas.)
- Include all tables and chairs (see example on back of this form). Include dimensions for each table if you are applying for a Full On-Premises Sales license.

\_\_\_\_\_  
Applicant Name

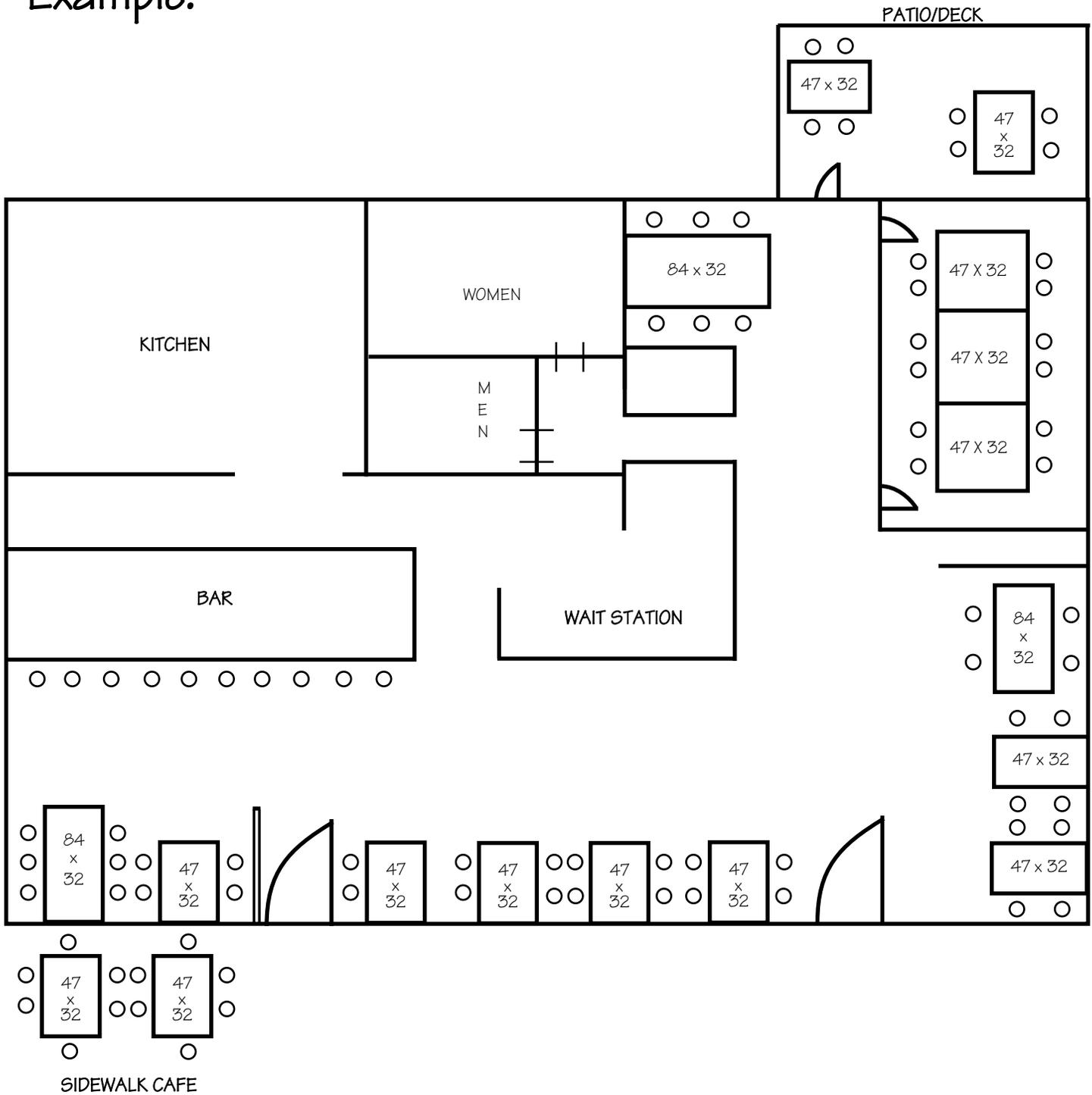
\_\_\_\_\_  
Trade Name (dba):

\_\_\_\_\_  
City and ZIP Code

.....OLCC USE ONLY.....  
MINOR POSTING ASSIGNMENT(S)

Date: \_\_\_\_\_ Initials: \_\_\_\_\_

# Example:



**Note:** Applicants for Full On-Premises Sales licenses are required to:

- Put the dimensions on every table (ie. 2' x 4' or 31" x 38"), or list table sizes outside of diagram
- Indicate where seats are located