



LIQUOR LICENSE APPLICATION

INSTRUCTIONS

1. Complete and sign this application.
2. Combine this completed application with the other required application materials to make one application packet.
3. Submit the application packet to your local OLCC office.
4. Do not include any OLCC fees with your application packet (the license fee will be collected at a later time). When it's time to pay the license fee you must pay the full yearly fee for the current license year (the license fee will not be prorated). If you pay in the last quarter of your license year you must also pay the yearly fee for the next license year.

Identify the Applicant(s) Applying for the License(s): these are individuals and entities that will become Licensees of Record (named on the license certificate)

Any entity (like a corporation or limited liability company) and any individual that is not part of an entity and that will own or control the business must be listed as an applicant on this form. This includes:

- Any individual or entity, other than an employee acting under the direction of the owner, that exercises control over, or is entitled to exercise control over, the business;
- Any individual or entity, other than an employee acting under the direction of the owner, that incurs, or is entitled to incur, debt or similar obligations on behalf of the business;
- Any individual or entity, other than an employee acting under the direction of the owner, that enters into, or is entitled to enter into, a contract or similar obligations on behalf of the business; or
- Any individual or entity identified as the lessee of the premises proposed to be licensed.

Please review [OAR 845-005-0311](#) to confirm that all individuals (sole proprietors) or entities with an ownership interest (other than a waivable ownership interest, per [OAR 845-005-0311\[6\]](#)) in the business have been identified as license applicants on this document. Above the signature line for this application, you will be required to attest to the fact that all individuals (sole proprietors) or entities with an ownership interest are listed as applicants for the license. If you have a question about whether an individual or entity needs to be listed as an applicant for the license, discuss this with the OLCC staff person assigned to your application.

Business Address

This is the street address of the location that will have the liquor license.

Applicant Signature(s)

- Each individual listed in Section 2 (entity or individuals applying for the license) must sign the application.
- If an applicant in Section 2 is an entity (such as a corporation or limited liability company), at least one individual who is authorized to sign for the entity must sign the application.
- An individual with authority to sign on behalf of the applicant (such as the applicant's attorney or an individual with power of attorney) may sign the application. The OLCC will likely require proof of such authority. Attorneys signing on behalf of their applicant clients may provide the state of bar licensure and bar number in lieu of providing written proof of their authority to sign on behalf of the applicant. ***Please note that applicants are responsible for all information provided on this form, even if an individual with signing authority signs on behalf of the applicant.***



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PRINT FORM

RESET FORM

1. Application. **Do not include** any OLCC fees with your application packet (the license fee will be collected at a later time). Application is being made for:

License Applied For:	CITY AND COUNTY USE ONLY
<input type="checkbox"/> Brewery 1 st Location	Date application received and/or date stamp:
Brewery Additional location (2 nd) <input type="checkbox"/> (3 rd) <input type="checkbox"/>	
<input type="checkbox"/> Brewery-Public House (BPH) 1 st location	Name of City or County:
BPH Additional location (2 nd) <input type="checkbox"/> (3 rd) <input type="checkbox"/>	
<input type="checkbox"/> Distillery	Recommends this license be:
<input type="checkbox"/> Full On-Premises, Commercial	
<input type="checkbox"/> Full On-Premises, Caterer	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Full On-Premises, Passenger Carrier	By: _____
<input type="checkbox"/> Full On-Premises, Other Public Location	Date: _____
<input type="checkbox"/> Full On-Premises, For Profit Private Club	OLCC USE ONLY
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	
<input type="checkbox"/> Grower Sales Privilege (GSP) 1 st location	Date application received: _____
GSP Additional location (2 nd) <input type="checkbox"/> (3 rd) <input type="checkbox"/>	Date application accepted: _____
<input type="checkbox"/> Limited On-Premises	License Action(s):
<input type="checkbox"/> Off-Premises	
<input type="checkbox"/> Warehouse	
<input type="checkbox"/> Wholesale Malt Beverage & Wine	
<input type="checkbox"/> Winery 1 st Location	
Winery Additional location (2 nd) <input type="checkbox"/> (3 rd) <input type="checkbox"/> (4 th) <input type="checkbox"/> (5 th) <input type="checkbox"/>	

2. Identify the applicant(s) applying for the license(s). **ENTITY (example: corporation or LLC) or INDIVIDUAL(S)¹** applying for the license(s):

App #1: NAME OF ENTITY OR INDIVIDUAL APPLICANT App #2: NAME OF ENTITY OR INDIVIDUAL APPLICANT

App #3: NAME OF ENTITY OR INDIVIDUAL APPLICANT App #4: NAME OF ENTITY OR INDIVIDUAL APPLICANT

3. Trade Name of the Business (Name Customers Will See)		
4. Business Address (Number and Street Address of the Location that will have the liquor license)		
City	County	Zip Code

¹ Read the instructions on page 1 **carefully**. If an entity is applying for the license, list the name of the entity as an applicant. If an individual is applying as a sole proprietor (no entity), list the individual as an applicant.



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5. Trade Name of the Business (Name Customers Will See)			
6. Does the business address currently have an OLCC liquor license? <input type="checkbox"/> YES <input type="checkbox"/> NO			
7. Does the business address currently have an OLCC marijuana license? <input type="checkbox"/> YES <input type="checkbox"/> NO			
8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your license certificate, renewal application and other mailings as described in OAR 845-004-0065[1] .)			
City	State	Zip Code	
9. Phone Number of the Business Location		10. Email Contact for this Application and for the Business	
11. Contact Person for this Application			Phone Number
Contact Person's Mailing Address (if different)	City	State	Zip Code

Please note that liquor license applications are public records. A copy of the application will be posted on the OLCC website for a period of several weeks.

ATTESTATION: **READ CAREFULLY AND MAKE SURE YOU UNDERSTAND BEFORE SIGNING THIS FORM**

I understand that marijuana is **prohibited** on the licensed premises. This includes marijuana use, consumption, ingestion, inhalation, samples, give-away, sale, etc. I attest that all answers on all forms and documents, and all information provided to the OLCC as a part of this application are true and complete.

I affirm that I have read [OAR 845-005-0311](#) and all individuals (sole proprietors) or entities with an ownership interest (other than waivable ownership interest per OAR 845-005-0311[6]) are listed as license applicants in #2 above. I understand that failure to list an individual or entity who has an unwaivable ownership interest in the business may result in denial of my license or the OLCC taking action against my license in the event that an undisclosed ownership interest is discovered after license issuance.

Applicant(s) Signature

- Each individual (sole proprietor) listed as an applicant must sign the application below.
- If an applicant is an entity, such as a corporation or LLC, at least one **INDIVIDUAL who is authorized to sign for the entity** must sign the application.
- An individual with the authority to sign on behalf of the applicant (such as the applicant's attorney or an individual with power of attorney) may sign the application. If an individual other than an applicant signs the application, please provide written proof of signature authority. Attorneys signing on behalf of applicants may list the state of bar licensure and bar number in lieu of written proof of authority from an applicant. **Applicants are still responsible for all information on this form.**

App. #1: (PRINT NAME) App #1: (SIGNATURE) App #1: Signature Date Atty. Bar Information (if applicable)

App. #2: (PRINT NAME) App #2: (SIGNATURE) App #2: Signature Date Atty. Bar Information (if applicable)

App. #3: (PRINT NAME) App #3: (SIGNATURE) App #3: Signature Date Atty. Bar Information (if applicable)

App. #4: (PRINT NAME) App #4: (SIGNATURE) App #4: Signature Date Atty. Bar Information (if applicable)