



**OREGON LIQUOR CONTROL COMMISSION
 ENDORSEMENT TO RECEIVE WINE AND CIDER
 SHIPMENTS APPLICATION for OREGON RETAILERS**

Licensee Name: _____ Email: _____

Trade Name: _____ Fax: _____

Premises Address: _____ City/Zip: _____

Please indicate the type of license you hold:

- Full On-Premises Limited On-Premises Off-Premises Brewery-Public House

I am applying for the privilege to receive shipments from manufacturers of wine or cider outside of Oregon who hold a Wine Self Distribution permit. I understand that I may only accept shipments at the licensed location specified above.

I understand that I must keep records of all deliveries I receive from Wine Self Distributor permit holders. I understand that I must keep these records for 2 years. I understand that I must submit monthly reports of the deliveries that I receive from permit holders on forms supplied by the Commission. *The monthly reporting form will be mailed to you with your approval letter.*

The licensee or an authorized corporate officer or a member of a limited partnership or a Limited Liability Company must sign this application.

Licensee Signature: _____ Date: _____

RETURN FORM TO: OLCC
 PO BOX 22297
 MILWAUKIE, OR 97269-2297
 FAX: (503) 872-5018
 PHONE: (503) 872-5123

OLCC USE ONLY License Number: _____ <input type="checkbox"/> Copy sent to licensee Approved by: _____ Date: _____
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