

# COMPLAINT FORM



Most businesses that sell alcohol obey the liquor laws and want to be good neighbors, but sometimes problems do occur.

If you have a complaint about a business that sells alcohol, please fill out this form and return it to the nearest OLCC office. An inspector will read your report and decide what action to take.

We can enforce liquor laws best when people with a complaint identify themselves and are willing to testify about the incident. We will also take complaints from people who don't want to testify or give their names.

Name of Business Involved: \_\_\_\_\_ Date of Incident: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Time Incident Occurred (from) \_\_\_\_\_ (to) \_\_\_\_\_ Number of People Involved \_\_\_\_\_

### Type of incident (Please check):

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Shooting/Stabbing       | <input type="checkbox"/> Drinking in public             | <input type="checkbox"/> Alcohol-related litter |
| <input type="checkbox"/> Verbal threat           | <input type="checkbox"/> Loud music from business       | <input type="checkbox"/> Other: _____           |
| <input type="checkbox"/> Prostitute solicitation | <input type="checkbox"/> Gang activity                  |   |
| <input type="checkbox"/> Fighting                | <input type="checkbox"/> Drug activity                  |   |
| <input type="checkbox"/> Harassment              | <input type="checkbox"/> Urinating in public            |   |
| <input type="checkbox"/> Shouting/Yelling        | <input type="checkbox"/> Pushing/Shoving                |   |
| <input type="checkbox"/> Assault                 | <input type="checkbox"/> Trespassing on public property |   |

### Where did the incident occur:

- Inside the business
- Right outside of the business
- In the parking lot
- On the sidewalk next to the business
- In the street near the business
- Other: \_\_\_\_\_

### Check if appropriate:

- Someone was injured
- Weapon involved
- Business employees intervened
- 9-1-1 was called  
Time: \_\_\_\_\_
- Police came
- Business was called  
Time of Call: \_\_\_\_\_  
Who did you speak with: \_\_\_\_\_

### Can you identify anyone who was involved in the incident or who was a witness?

(Please identify on page 2 of this form)

- Yes       No

### Did the incident involve a patron of the business?

- Yes       No

#### If so, did you see the person(s):

- |   |   |
|---|---|
| <input type="checkbox"/> Buy or consume alcohol there | <input type="checkbox"/> Come out of the business |
| <input type="checkbox"/> Go into the business         | <input type="checkbox"/> Other: _____             |

Your name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Are you willing to testify about this incident?     Yes     No    Today's Date: \_\_\_\_\_

*Please describe the incident in your own words on page 2 this form*

**Please describe the incident:**

**PORTLAND MAIN OFFICE**

*Counties: Clackamas, Columbia, Multnomah, Washington*

9079 S.E. McLoughlin Blvd.  
Portland, OR 97222

**Mailing address:**

P.O. Box 22297  
Milwaukie, OR 97269-2297  
Phone: (503) 872-5000  
Fax: (503) 872-5074  
Toll free in Oregon: (800) 452-6522

**BEND**

*Counties: Baker, Crook, Deschutes, Grant, Harney, Jefferson, Malheur, Wheeler*

2146 NE 4th Street, Suite 160  
Bend, OR 97701  
Phone: (541) 633-1108  
Fax: (541) 388-6321

**COOS BAY**

*Counties: Coos, Curry*

500 Central  
PO Box 1176  
Coos Bay, OR 97420  
Phone: (541) 266-7601  
Fax: (541) 266-7234

**CORVALLIS**

*County: Benton*  
260 SW Madison Avenue, Suite 109  
Corvallis, OR 97333  
Phone: (541) 288-6435

**EUGENE**

*Counties: Lane, Linn*  
927 Country Club Road, Suite 200  
Eugene, OR 97401  
Phone: (541) 686-7739  
Fax: (541) 687-7381

**KLAMATH FALLS**

*Counties: Klamath, Lake*  
700 Main St., #204B  
Klamath Falls, OR 97601  
Phone: (541) 883-5600  
Fax: (541) 883-5507

**MEDFORD**

*Counties: Josephine, Jackson*  
7 Crater Lake Avenue, Suite A  
Medford, OR 97504  
Phone: (541) 776-6191  
Fax: (541) 265-4521

**NEWPORT**

*County: Lincoln*  
715 S.W. Fall St.  
Newport, OR 97365  
Phone: (541) 265-4522  
Fax: (541) 265-4521

**PENDLETON**

*Counties: Gilliam, Morrow, Sherman, Umatilla, Union, Wallowa*  
700 S.E. Emigrant, Suite 140  
Pendleton, OR 97801  
Phone: (541) 276-7841  
Fax: (541) 278-4086

**ROSEBURG**

*County: Douglas*  
251 N.E. Garden Valley Blvd., Suite A-3  
Roseburg, OR 97470  
Phone: (541) 440-3362  
Fax: (541) 440-3361

**SALEM**

*Counties: Marion, Polk, Yamhill*  
200 Hawthorne Ave SE, Suite B-210  
Salem, OR 97301  
Phone: (503) 378-4871  
Fax: (503) 378-4594

**TROUTDALE**

*Counties: Hood River, Wasco*  
141 SE Dora Ave  
Troutdale, OR 97060  
Phone: (503) 572-8948  
Fax: (503) 669-0875

**WARRENTON**

*Counties: Tillamook, Clatsop*  
65 Hwy 101 N, Suite 201  
P.O. Box 967  
Warrenton, OR 97146  
Phone: (503) 861-3912  
Fax: (503) 861-6074