

## **OREGON LIQUOR CONTROL COMMISSION**

## **Marijuana License Notification Form**

## What is this form?

This form is for Recreational Marijuana Licenses to request changes to the trade name, contact information for the licensed premise, and/or a permanent change to the operating hours.

Submit completed form to: marijuana.licensing@oregon.gov

Section 1 – Licensee Information			
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License Number:		Request Date:	
Entity/Licensee:			
Trade Name:			
Premises Address:			
Person Requesting:		Position/Title:	
Contact Number:		Email:	
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Section 2 – Notification			
I am providing notification of the following. Indicate any/all that apply:			
Trade Name for the Premises			
Attach a copy of a written statement including current trade name, new trade name and effective date of the change			
Permanent change of business hours			
	Attach a statement listing your current business hours, your new business hours, and the effective date of the change		
Contact information for the business or individual licensees			
	ch a statement identifying the person (if applicable), the current act information, and the new contact information		