



OFFICE OF
**Community
& Civic Life**

**LIQUOR LICENSING
PROGRAM**



Dear Applicant:

Chloe Eudaly
Commissioner

Suk Rhee
Director

City Hall
1221 SW 4th Avenue,
Room 110
Portland, OR 97204
Phone: 503-823-4519

www.portlandoregon.gov/civic

The City of Portland is committed to providing meaningful access. To request translation, interpretation, modifications, accommodations, or other auxiliary aids or services, contact 503-823-4000, Relay: 711.

Traducción o interpretación

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Traducere sau Interpretare

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Chuyển Ngữ hoặc Phiên Dịch

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Письмовий або усний переклад

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الترجمة التحريرية أو الشفوية

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翻译或传译

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翻訳または通訳

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Письменный или устный перевод

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Turjumida ama Fasiraadda

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503-823-4000

The City of Portland requires several items be included in your application packet. Before you submit your application to the City of Portland, please make sure you include the following information. The City of Portland takes 45 days to process a liquor license.

The 45-day timeline starts when the City receives a COMPLETE application with the following items:

- License application fee (see below)

OLCC Forms:

- OLCC Application Form – *Reviewed and signed off by the OLCC first*
- OLCC Business Information Form
- OLCC Individual History Form for all applicants
- OLCC Corporate Information or LLC Information form (if applicable)

City of Portland Forms:

- City of Portland, Personal History Forms- *For all applicants and key personnel*
- City of Portland Liquor Outlet Information Form
- Proof of Zoning (*for New Outlet applications only*)-

Go to the **Bureau of Development Services at 1900 SW 4th Avenue between 8am and 3pm Monday through Friday (8am and 12pm on Thursdays)** to obtain a map initialed by staff indicating that the premise to be licensed is zoned commercially, or for commercial use. The phone number is 503-823-7526.

The Annual License Application Processing Fee is:

\$100.00– New Outlet

\$ 75.00– Any other application type (Change of Ownership, Greater Privilege, etc.)

Payment is accepted in the form of **cash, credit card, or check** made payable to the **City of Portland**.

Additionally, certain license types are required to pay the City of Portland an annual license renewal fee of \$35.00. This fee is separate from the OLCC's renewal fee. You can submit your renewal fee to the City of Portland in-person, online or by mail. When paying the annual renewal fee by mail, include a copy of your OLCC renewal form as reference.

If you have questions, please contact:

**Liquor Licensing Program
1221 SW 4th Avenue, Room 110
Portland, OR 97204
503-823-4520
liquor@portlandoregon.gov**



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Important instructions: please read before completing form. All persons who are anticipated to have a financial interest in the business and key personnel must complete a Personal History Form. All blanks must be filled in. Please use full names – no initials. If the question does not apply to you, please N/A (Not Applicable) in the space. If additional space is needed to answer any question, please use additional paper or the reverse side of the form. The Portland Police Bureau may make an unfavorable recommendation based on an incomplete application, and/or false or misleading information. This form goes with the OLCC application packet that you submit to the City after the application has been initialed by your OLCC license investigator.

Application Name:

(Last) (First) (Middle)

Name and Address of Business:

Your Title:

(Owner, Co-owner, President, Manager, etc.)

Residence Address:

City, State, Zip:

Driver's License # and Issuing State:

Phone #: _____ **Business Phone:** _____ **Fax #:** _____

Social Security #: _____ **Date of Birth:** _____ **Email:** _____

Arrest Record: (This is not the same information asked on the OLCC application). Portland Police Bureau background investigation requires that you include all arrests, including all traffic tickets, citations, and arrests of any kind. Please indicate the penalties imposed for violations of any laws, including liquor regulations. State the nature of the charge, jurisdiction, date, and final disposition. If this information is longer than the space provided, please use additional paper.

A false answer and/or omission of any information requested on this form may result in an unfavorable recommendation or denial.

Signature _____ **Date** _____

Please deliver with OLCC application packet and City fee to:

**Liquor Licensing Program
1221 SW 4th Avenue, Room 110
Portland, Oregon 97204
Phone: (503) 823-4520
Fax: (503) 823-3050**

CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

PLEASE SUBMIT TO: Liquor Licensing Notification Program, 1221 SW 4th Avenue, Suite #110, Portland OR 97204

On New Outlet applications, property owners within 300 feet of the location, the Portland Police Bureau and all interested parties are notified by mail (with a copy of this form) and given an opportunity to comment on your application. The OLCC allows the City at least 45 days to complete the recommendation process. Submission of a complete operating plan can expedite the time required to process. A City liquor endorsement is not a confirmation that the property is properly zoned. Call (503) - 823-7526 to confirm that the property is properly zoned.

On submission of this form, you must also include the following:

- OLCC Liquor Application Form, initialed by your OLCC License Investigator
- OLCC Individual History Forms (all persons anticipated to have a financial interest, or key personnel are required)
- City Endorsement Fees

City Endorsement Fees are payable at the beginning of the application process (please make checks payable to City of Portland): New outlets are \$100.00, all others are \$75.00. **All blank sections must be filled in.** If the question does not apply, write "N/A" in the space.

LEGAL NAME OF BUSINESS: _____

DBA OR TRADE NAME: _____ PHONE: _____ FAX: _____

BUSINESS ADDRESS (Including ZIP Code): _____

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): _____

CONTACT PERSON: _____ PHONE: _____ EMAIL: _____

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Food Cart | <input type="checkbox"/> Night Club |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Other: _____ |

SIZE OF SERVICE AREA: _____

EXISTING BUILDING: Yes No

ZONING: _____

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: _____

HAS AN APPLICATION FOR A LIQUOR LICENSE AT THIS LOCATION BEEN RECEIVED BY THE CITY OF PORTLAND IN THE LAST TWO (2) YEARS?
 Yes No I Don't Know

HOURS OF OPERATION

SUNDAY – THURSDAY OPEN: _____ CLOSE: _____ FRIDAY & SATURDAY OPEN: _____ CLOSE: _____

HOW LATE WILL THERE BE OUTSIDE SEATING? _____ HOW LATE WILL THERE BE ENTERTAINMENT? _____

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: _____

NAME & ADDRESS OF PROPERTY OWNER: _____

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Video Poker | <input type="checkbox"/> Live Music | <input type="checkbox"/> Nude Dancers |
| <input type="checkbox"/> Karaoke | <input type="checkbox"/> Video Games/Pinball | <input type="checkbox"/> Recorded Music | <input type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): _____ | <input type="checkbox"/> Events (Describe): _____ | <input type="checkbox"/> Other: _____ | |

The City requires an **Amusement Location Permit** for all locations with amusement devices or pool tables. **Contact the Revenue Bureau for rules and an Amusement Location Permit application form now.** Permits are non-transferable from one owner to another and must be paid before games are placed on the premises. Contact Anne Holm at 503-865-2488. The City of Portland will notify affected nearby neighbors and a copy of this form will be included in our mailing.

Use this area to provide any additional information that you wish to be considered on this liquor application

A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: _____ DATE: _____