



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

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:	Rec'd by Portland Liquor Licenses
<input type="checkbox"/> Brewery 2 nd Location	Name of City or County:	<i>ME</i> JUN 17 2019
<input type="checkbox"/> Brewery 3 rd Location	Recommends this license be:	PD \$75 * <u>CASH</u>
<input type="checkbox"/> Brewery-Public House 1 st location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied	
<input type="checkbox"/> Brewery-Public House 2 nd location	By: _____	
<input type="checkbox"/> Brewery-Public House 3 rd location	Date: _____	
<input type="checkbox"/> Distillery	OLCC USE ONLY	
<input type="checkbox"/> Full On-Premises, Commercial	Date application received:	
<input type="checkbox"/> Full On-Premises, Caterer	<i>6/6/19</i>	
<input type="checkbox"/> Full On-Premises, Passenger Carrier	By: <i>Jan Z.</i>	
<input type="checkbox"/> Full On-Premises, Other Public Location	Date application accepted as initially complete:	
<input type="checkbox"/> Full On-Premises, For Profit Private Club	<i>6/11/19</i>	
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	By: <i>Jan Z.</i>	
<input type="checkbox"/> Grower Sales Privilege 1 st location	License Action(s): <i>A/Priv</i>	
<input type="checkbox"/> Grower Sales Privilege 2 nd location		
<input type="checkbox"/> Grower Sales Privilege 3 rd location		
<input type="checkbox"/> Limited On-Premises		
<input checked="" type="checkbox"/> Off-Premises		
<input type="checkbox"/> Off-Premises with Fuel Pumps		
<input type="checkbox"/> Warehouse		
<input type="checkbox"/> Wholesale Malt Beverage & Wine		
<input type="checkbox"/> Winery 1 st Location		
<input type="checkbox"/> Winery 2 nd Location		
<input type="checkbox"/> Winery 3 rd Location		

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

Microwave LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

3. Applicant #1 Microwave LLC		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) Mikkeller Portland			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 701 E. Burnside Street			
City Portland	County Multnomah	Zip Code 97214	
6. Does the business address currently have an OLCC liquor license? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Microwave LLC currently has an F-Com at the location.			
7. Does the business address currently have an OLCC marijuana license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your mail) 819 SE Grant St.			
City Portland	State OR	Zip Code 97214	
9. Phone Number of the Business Location 503-222-0600		Email Contact for this Application duke@nwalcohollow.com	
Contact Person for this Application DUKE TUFTY		Phone Number (503) 718-2310 (NO SOLICITATION)	
Mailing Address 7521 NE SANDY BLVD.	City PORTLAND	State OR	Zip Code 97213

I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is **prohibited** on the licensed premises.

I attest that all answers on all forms, documents, and information provided to the OLCC are true and complete.

Applicant Signature(s)

- Each individual person listed as an applicant must sign the application.
- If an applicant is an entity, such as a corporation or LLC, at least one person who is authorized to sign for the entity must sign the application.
- A person with the authority to sign on behalf of the applicant (such as the applicant's attorney or a person with power of attorney) may sign the application. If a person other than an applicant signs the application, please provide proof of signature authority.

Kurt Huffman

Digitally signed by Kurt Huffman
Date: 2019.06.06 12:00:47 -07'00'

(Applicant#1)

(Applicant #2)

(Applicant#3)

(Applicant #4)



**OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION**

Please Print or Type

Applicant Name: Microwave LLC Phone: TBD

Trade Name (dba): Mikkeller Portland

Business Location Address: 701 E. Burnside Street

City: Portland ZIP Code: 97214

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 12pm to 12am
Monday 5pm to 12am
Tuesday 5pm to 12am
Wednesday 5pm to 12am
Thursday 5pm to 12am
Friday 5pm to 1am
Saturday 12pm to 1am

Outdoor Area Hours:

Sunday 12pm to 10pm
Monday 5pm to 10pm
Tuesday 5pm to 10pm
Wednesday 5pm to 10pm
Thursday 5pm to 10pm
Friday 5pm to 10pm
Saturday 12pm to 10pm

The outdoor area is used for:

Food service Hours: 12pm to 10pm
 Alcohol service Hours: 12pm to 10pm
 Enclosed, how _____

The exterior area is adequately viewed and/or supervised by Service Permittees.

(Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: _____

ENTERTAINMENT

Check all that apply:

- Live Music
- Recorded Music
- DJ Music
- Dancing
- Nude Entertainers
- Karaoke
- Coin-operated Games
- Video Lottery Machines
- Social Gaming
- Pool Tables
- Other: _____

DAYS & HOURS OF LIVE OR DJ MUSIC

Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

SEATING COUNT

Restaurant: 80 Outdoor: 64
Lounge: _____ Other (explain): _____
Banquet: _____ Total Seating: 144

OLCC USE ONLY

Investigator Verified Seating: _____ (Y) _____ (N)

Investigator Initials: _____

Date: _____

I understand if my answers are not true and complete, the OLCC may deny my license application.

Applicant Signature: [Signature] Date: 4/16/19

1-800-452-OLCC (6522)
www.oregon.gov/olcc

(rev. 12/07)