



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:
<input type="checkbox"/> Brewery 2 nd Location	Name of City or County:
<input type="checkbox"/> Brewery 3 rd Location	Recommends this license be:
<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	
<input type="checkbox"/> Full On-Premises, Commercial	
<input type="checkbox"/> Full On-Premises, Caterer	
<input type="checkbox"/> Full On-Premises, Passenger Carrier	
<input type="checkbox"/> Full On-Premises, Other Public Location	
<input type="checkbox"/> Full On-Premises, For Profit Private Club	
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	
<input type="checkbox"/> Grower Sales Privilege 1 st location	
<input type="checkbox"/> Grower Sales Privilege 2 nd location	
<input type="checkbox"/> Grower Sales Privilege 3 rd location	
<input checked="" 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	
	OLCC USE ONLY
	Date application received:
	By: _____
	Date application accepted as initially complete:
	By: _____
	License Action(s): C/O. A/Priv. C/TN

Rec'd by Portland
Liquor Licenses
JUL 02 2019
PD \$75.00 clc
478570

2. Identify the applicant(s) applying for the license(s). ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license(s): Pandemia Super Market
S De Mayo Inc.

Daniela Fernandez
(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY



OREGON LIQUOR CONTROL COMMISSION

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3. Applicant #1 <i>Panaderia Super Market 5 De Mayo Inc.</i>		Applicant #2	
<i>Daniela Fernandez</i> NSZ		Applicant #3	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See)			
<i>Panaderia Super Market 5 De Mayo Inc.</i>			
5. Business Address (Number and Street Address of the Location that will have the liquor license)			
<i>1134 Se 82nd ave</i>			
City	County	Zip Code	
<i>Portland</i>	<i>OR</i>	<i>97216</i>	
6. Does the business address currently have an OLCC liquor license? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
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)			
<i>1134 se 82nd ave</i>			
City	State	Zip Code	
<i>Portland</i>	<i>OR</i>	<i>97216</i>	
9. Phone Number of the Business Location		Email Contact for this Application	
<i>503-477-4048</i>		<i>daniela.m.fernandez@gmail.com</i>	
Contact Person for this Application		Phone Number	
<i>Daniela Fernandez</i>		<i>503-928-2233</i>	
Mailing Address	City	State	Zip Code
<i>10228 se Raymond st</i>	<i>Portland</i>	<i>OR</i>	<i>97266</i>

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.

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE

SOS: 199567-99

Please Print or Type

Corporation Name: Panaderia Super Market 5 De Mayo Year Incorporated: 2019

Trade Name (dba): Panaderia Super Market 5 De Mayo Inc.

Business Location Address: 1134 se 82nd ave Portland

City: OR ZIP Code: 97216

List Corporate Officers:

<u>Daniela</u> (name)	<u>owner</u> (title)
_____	_____
_____	_____
_____	_____

List Board of Directors:

(name)	_____
_____	_____
_____	_____
_____	_____

List Stockholders: (Note: If any stockholder is another legal entity, that entity may also need to complete another Corporation Questionnaire. See Liquor License Application Guide for more information.)

Stockholders:	Number of Shares Held:	Number of Stock Shares:
_____	_____	Issued: _____
_____	_____	Unissued: _____
_____	_____	Total Shares Authorized to Issue: _____
_____	_____	

Server Education Designee: _____ DOB: _____
(See Liquor License Application Guide for more information)

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

Officer's Signature: Daniela Fernandez (name) owner (title) Date: 6/28/19