



# 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:

<p><b>License Applied For:</b></p> <input type="checkbox"/> Brewery 1 <sup>st</sup> Location <input type="checkbox"/> Brewery 2 <sup>nd</sup> Location <input type="checkbox"/> Brewery 3 <sup>rd</sup> Location <input type="checkbox"/> Brewery-Public House 1 <sup>st</sup> location <input type="checkbox"/> Brewery-Public House 2 <sup>nd</sup> location <input type="checkbox"/> Brewery-Public House 3 <sup>rd</sup> location <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 <sup>st</sup> location <input type="checkbox"/> Grower Sales Privilege 2 <sup>nd</sup> location <input type="checkbox"/> Grower Sales Privilege 3 <sup>rd</sup> location <input type="checkbox"/> Limited On-Premises <input 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 <sup>st</sup> Location <input checked="" type="checkbox"/> Winery 2 <sup>nd</sup> Location <input type="checkbox"/> Winery 3 <sup>rd</sup> Location	<p style="text-align: center;"><b>Rec'd by Portland CITY AND COUNTY USE ONLY Liquor Licenses</b></p> <p>Date application received and/or date stamp: <b>APR 30 2020</b></p> <p><b>PD (00) sk</b> <b># 1060</b></p> <p>Name of City or County: _____</p> <p>Recommends this license be:  <input type="checkbox"/> Granted    <input type="checkbox"/> Denied</p> <p>By: _____</p> <p>Date: _____</p> <hr/> <p style="text-align: center;"><b>OLCC USE ONLY RECEIVED</b></p> <p>Date application received: <b>MAR 16 2020</b></p> <p>By: _____ Initials: <b>sk</b> Oregon Liquor Control Commission</p> <p>License Action(s): <b>NLO</b></p>
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2. Identify the applicant(s) applying for the license(s). ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license(s):

Landmass Wines LLC \_\_\_\_\_  
(Applicant #1) (Applicant #2)

\_\_\_\_\_  
(Applicant #3) (Applicant #4)

3. Trade Name of the Business (Name Customers Will See)  
Landmass Wines

4. Business Address (Number and Street Address of the Location that will have the liquor license)  
3201 SE 50<sup>th</sup> Ave

City <u>Portland</u>	County <u>Multnomah</u>	Zip Code <u>97206</u>
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5. Trade Name of the Business (Name Customers Will See) <i>Landmass Wines</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>3923 NE 63<sup>rd</sup> Ave</i>			
City <i>Portland</i>	State <i>OR</i>	Zip Code <i>97213</i>	
9. Phone Number of the Business Location <i>503-453-9505</i>		10. Email Contact for this Application <i>hello@landmasswines.com</i>	
11. Contact Person for this Application <i>Melaney Schmidt</i>		Phone Number <i>909-524-9711</i>	
Contact Person's Mailing Address (if different) <i>3923 NE 63<sup>rd</sup> Ave</i>	City <i>Portland</i>	State <i>OR</i>	Zip Code <i>97213</i>

Please note that liquor license applications are public records. A copy of the application will be posted on the OLCC website for a period of several weeks.

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  
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Landmass Wines LLC Phone: 909-524-9711

Trade Name (dba): Landmass Wines

Business Location Address: 3201 SE 50th Ave

City: Portland ZIP Code: 97206

**DAYS AND HOURS OF OPERATION**

Business Hours:

Sunday \_\_\_\_\_ to \_\_\_\_\_  
Monday \_\_\_\_\_ to \_\_\_\_\_  
Tuesday \_\_\_\_\_ to \_\_\_\_\_  
Wednesday \_\_\_\_\_ to \_\_\_\_\_  
Thursday \_\_\_\_\_ to \_\_\_\_\_  
Friday \_\_\_\_\_ to \_\_\_\_\_  
Saturday \_\_\_\_\_ to \_\_\_\_\_

Outdoor Area Hours:

Sunday \_\_\_\_\_ to \_\_\_\_\_  
Monday \_\_\_\_\_ to \_\_\_\_\_  
Tuesday \_\_\_\_\_ to \_\_\_\_\_  
Wednesday \_\_\_\_\_ to \_\_\_\_\_  
Thursday \_\_\_\_\_ to \_\_\_\_\_  
Friday \_\_\_\_\_ to \_\_\_\_\_  
Saturday \_\_\_\_\_ to \_\_\_\_\_

The outdoor area is used for:

- Food service Hours: \_\_\_\_\_ to \_\_\_\_\_
- Alcohol service Hours: \_\_\_\_\_ to \_\_\_\_\_
- Enclosed, how \_\_\_\_\_

The exterior area is adequately viewed and/or supervised by Service Permittees.  
\_\_\_\_\_  
(Investigator's Initials)

*\* NO business hours related to Landmass Wines*

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: \_\_\_\_\_ Outdoor: \_\_\_\_\_  
Lounge: \_\_\_\_\_ Other (explain): \_\_\_\_\_  
Banquet: \_\_\_\_\_ Total Seating: \_\_\_\_\_

**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: \_\_\_\_\_ Date: 2-8-2020