



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 1st Location	Date application received and/or date stamp: <i>Rec'd by Portland Liquor Licenses</i> MAY 14 2020 PD \$100 <i>ck</i> Name of City or County: # <u>865</u>
<input type="checkbox"/> Brewery 2nd Location	
<input type="checkbox"/> Brewery 3rd Location	
<input type="checkbox"/> Brewery-Public House 1st Location	
<input type="checkbox"/> Brewery-Public House 2nd Location	
<input type="checkbox"/> Brewery-Public House 3rd 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 1st Location	Recommends this license be: <input type="checkbox"/> Granted <input type="checkbox"/> Denied By: _____ Date: _____
<input type="checkbox"/> Grower Sales Privilege 2nd Location	OLCC USE ONLY Date application received: _____ 4/27/20 By: _____ SR License Action(s): N/O
<input type="checkbox"/> Grower Sales Privilege 3rd 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 1st Location	
<input type="checkbox"/> Winery 2nd Location	
<input type="checkbox"/> Winery 3rd Location	
<input type="checkbox"/> Winery 4th Location	
<input type="checkbox"/> Winery 5th Location	

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

CellarDog LLC.

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

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

CellarDog

4. Business Address (Number and Street Address of the Location that will have the liquor license)

1620 SE Claybourne St. #106-A

City	County	Zip Code
Portland	Multnomah	97202



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Cellar Dog LLC Phone: 415-819-1931

Trade Name (dba): Cellar Dog

Business Location Address: 1620 SE Claybourne St #106A

City: Portland, OR ZIP Code: 97202

DAYS AND HOURS OF OPERATION

Business Hours: Sunday 2 pm to 9 pm, Monday to Tuesday, Wednesday, Thursday 2 to 9, Friday 2 to 9, Saturday 2 to 9

Outdoor Area Hours: Sunday 2 to 9, Monday to Tuesday, Wednesday, Thursday 2 to 9, Friday 2 to 9, Saturday 2 to 9

The outdoor area is used for: Food service, Alcohol service (checked) Hours: 2 to 9, Enclosed, how, The exterior area is adequately viewed and/or supervised by Service Permittees.

Seasonal Variations: Yes No (checked) If yes, explain:

ENTERTAINMENT

- Check all that apply: Live Music, Recorded Music (checked), 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: 4-8, Lounge: 18-20, 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: 4/24/20