



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 1st Location		Date application received: <u>MAY 21 2020</u>	<i>Rec'd by Board of Liquor Licenses</i> PD COMMUNITY # <u>7161</u>
<input type="checkbox"/> Brewery 2nd Location		Name of City or County: <u>7161</u>	
<input type="checkbox"/> Brewery 3rd Location		Recommends this license be:	
<input type="checkbox"/> Brewery-Public House 1st Location		<input type="checkbox"/> Granted <input type="checkbox"/> Denied	
<input type="checkbox"/> Brewery-Public House 2nd Location		By: _____	
<input type="checkbox"/> Brewery-Public House 3rd Location		Date: _____	
<input type="checkbox"/> Distillery		OLCC USE ONLY	
<input type="checkbox"/> Full On-Premises, Commercial		Date application received: <u>4-15-2020</u>	
<input type="checkbox"/> Full On-Premises, Caterer		By: <u>H</u>	
<input type="checkbox"/> Full On-Premises, Passenger Carrier		License Action(s): <u>A/Priv</u>	
<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			
<input type="checkbox"/> Grower Sales Privilege 2nd Location			
<input type="checkbox"/> Grower Sales Privilege 3rd 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 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):

OSF International, Inc.

(Applicant #1) _____ (Applicant #2) _____

(Applicant #3) _____ (Applicant #4) _____

3. Trade Name of the Business (Name Customers Will See)
 The Old Spaghetti Factory

4. Business Address (Number and Street Address of the Location that will have the liquor license)
 0715 SW Bancroft St.

City	County	Zip Code
Portland	Multnomah	97239



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: OSF International, Inc. Phone: 503-222-5345

Trade Name (dba): The Old Spaghetti Factory

Business Location Address: 0715 SW Bancroft Street (changed by post office to: 715 S. Bancroft)
City: Portland ZIP Code: 97239

DAYS AND HOURS OF OPERATION

WHEN COVID-19 LOCKDOWN IS LIFTED:

Business Hours:

Sunday	<u>11:30</u>	to	<u>9:00</u>
Monday	<u>11:30</u>	to	<u>2:30</u> <u>4:30-9:00</u>
Tuesday	<u>11:30</u>	to	<u>2:30</u> <u>4:30-9:00</u>
Wednesday	<u>11:30</u>	to	<u>2:30</u> <u>4:30-9:00</u>
Thursday	<u>11:30</u>	to	<u>2:30</u> <u>4:30-9:00</u>
Friday	<u>11:30</u>	to	<u>2:30</u> <u>4:30-9:30</u>
Saturday	<u>11:30</u>	to	<u>9:30</u>

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)

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: 450 Outdoor: _____
 Lounge: 75 Other (explain): _____
 Banquet: _____ Total Seating: 533

OLCC USE ONLY	
Investigator Verified Seating: _____ (Y) <input checked="" type="checkbox"/> (N)	
Investigator Initials: <u>J</u>	
Date: <u>5-19-2020</u>	

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

Applicant Signature: by James J. Danuso, Sec. Date: 5/19/20

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

(rev. 12/07)