



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:

<p style="text-align: center;">License Applied For:</p> <input type="checkbox"/> Brewery 1st Location <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 <input type="checkbox"/> Grower Sales Privilege 2nd Location <input type="checkbox"/> Grower Sales Privilege 3rd Location <input checked="" 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 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	<p style="text-align: center;">CITY AND COUNTY USE ONLY</p> <p>Rec'd by Portland Liquor Licenses</p> <p>Date application received and/or date stamp: JUN 18 2020</p> <p>PD: \$100 dk # 0793633</p> <p>Name of City or County: _____</p> <p>Recommends this license be: <input type="checkbox"/> Granted <input type="checkbox"/> Denied</p> <p>By: _____ Date: _____</p> <hr/> <p style="text-align: center;">OLCC USE ONLY</p> <p>Date application received: 5/13/20</p> <p>By: _____ SR</p> <p>License Action(s): N/O</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):

Mariscos Tinto Del Mar LLC
(Applicant #1) (Applicant #2)

(Applicant #3) (Applicant #4)

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

Mariscos Tinto Del Mar

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

600 SE 146th Ave. Unit B

City Portland	County Multnomah	Zip Code 97236
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OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Medina

Applicant Name: Heriberto M. Brambila Medina Phone: 971-274-9401

Trade Name (dba): Mariscos Tinto Del Mar LLC

Business Location Address: 600 SE 146th Ave.

City: Portland OR ZIP Code: 97236

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>9 AM</u> to <u>8 PM</u>
Monday	<u>9 AM</u> to <u>8 PM</u>
Tuesday	<u>9 AM</u> to <u>8 PM</u>
Wednesday	<u>9 AM</u> to <u>8 PM</u>
Thursday	<u>9 AM</u> to <u>8 PM</u>
Friday	<u>9 AM</u> to <u>8 PM</u>
Saturday	<u>9 AM</u> to <u>8 PM</u>

Outdoor Area Hours:

Sunday	<u>9 AM</u> to <u>8 PM</u>
Monday	<u>9 AM</u> to <u>8 PM</u>
Tuesday	<u>9 AM</u> to <u>8 PM</u>
Wednesday	<u>9 AM</u> to <u>8 PM</u>
Thursday	<u>9 AM</u> to <u>8 PM</u>
Friday	<u>9 AM</u> to <u>8 PM</u>
Saturday	<u>9 AM</u> to <u>8 PM</u>

The outdoor area is used for:

Food service Hours: 9 AM to 8 PM

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: Winter we close @ 6 PM

ENTERTAINMENT

Check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> Live Music | <input type="checkbox"/> Karaoke |
| <input type="checkbox"/> Recorded Music | <input type="checkbox"/> Coin-operated Games |
| <input type="checkbox"/> DJ Music | <input type="checkbox"/> Video Lottery Machines |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Social Gaming |
| <input type="checkbox"/> Nude Entertainers | <input type="checkbox"/> Pool Tables |
| | <input type="checkbox"/> 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: 25 Outdoor: _____

Lounge: _____ Other (explain): _____

Banquet: _____ Total Seating: 25

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: 05/07/20

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)