



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 and/or date stamp: <u>Monday Portland Liquor Licenses</u> <u>JUN 22 2020</u> Name of City or County: <u>PD</u> <u>Portland</u> <u>#</u> <u>1247</u> Recommends this license be: <input type="checkbox"/> Granted <input type="checkbox"/> Denied By: _____ Date: _____
<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 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	
	OLCC USE ONLY
	Date application received: <u>5/26/20</u>
	By: <u>SR</u>
	License Action(s): <u>N/O</u>

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

Ben & Esther's Bagels LLC.

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

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

Hot Dog Energy

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

8408 N. Lombard St.

City

Portland

County

Multnomah

Zip Code

97203



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Ben & Esther's Bagels LLC Phone: 971.279.5338

Trade Name (dba): Hot Dog Energy

Business Location Address: 8408 N. Lombard St.

City: Portland ZIP Code: 97203

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 9 AM to 10 PM
 Monday 9 AM to 10 PM
 Tuesday 9 AM to 10 PM
 Wednesday 9 AM to 10 PM
 Thursday 9 AM to 10 PM
 Friday 9 AM to 10 PM
 Saturday 9 AM to 10 PM

Outdoor Area Hours:

Sunday 9 AM to 10 PM
 Monday 9 AM to 10 PM
 Tuesday 9 AM to 10 PM
 Wednesday 9 AM to 10 PM
 Thursday 9 AM to 10 PM
 Friday 9 AM to 10 PM
 Saturday 9 AM to 10 PM

The outdoor area is used for:

- Food service Hours: 9 AM to 10 PM
- Alcohol service Hours: 9 AM to 10 PM
- Enclosed, how walls and awning

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: 2 Outdoor: 20
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 22

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: 5/21/20