



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 1 st Location	Date application received and/or date stamp: Rec'd by Portland Liquor Licenses JUN 30 2020 Name of City or County: <u>PD</u> # <u>75-ck</u> <u>405-76</u> Recommends this license be: <input type="checkbox"/> Granted <input type="checkbox"/> Denied By: _____ Date: _____
<input type="checkbox"/> Brewery 2 nd Location	
<input type="checkbox"/> Brewery 3 rd Location	
<input type="checkbox"/> Brewery-Public House 1 st location	
<input type="checkbox"/> Brewery-Public House 2 nd location	
<input type="checkbox"/> Brewery-Public House 3 rd 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 st location	
<input type="checkbox"/> Grower Sales Privilege 2 nd location	
<input type="checkbox"/> Grower Sales Privilege 3 rd 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 1 st Location	
<input type="checkbox"/> Winery 2 nd Location	
<input type="checkbox"/> Winery 3 rd Location	
	OLCC USE ONLY
	Date application received: <u>5/15/20</u>
	By: <u>RE</u>
	License Action(s): <u>A/PRIV</u>

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

Gusto D'Italia Inc.

Kevin Corsetti

(Applicant #1)

Amy Schott

(Applicant #2)

(Applicant #3)

(Applicant #4)

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

Bar Rione

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

304 NW 12th Ave

City

Portland

County

Multnomah

Zip Code

97209



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: GUSTO D ITALIA Phone: 503 478 0619

Trade Name (dba): BAR RIONE

Business Location Address: 804 NW 12th AVE

City: Portland ZIP Code: 97209

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	3 PM	to	10 PM
Monday	3	to	10
Tuesday	3	to	10
Wednesday	3	to	10
Thursday	3	to	10
Friday	3	to	11
Saturday	3	to	11

Outdoor Area Hours:

Sunday	3 PM	to	9:30 PM
Monday	3	to	9:30
Tuesday	3	to	9:30
Wednesday	3	to	9:30
Thursday	3	to	9:30
Friday	3	to	10:00
Saturday	3	to	10:00

The outdoor area is used for:

Food service Hours: 3pm to 9:30pm

Alcohol service Hours: 3pm to 9:30pm

Enclosed, how NO Minors Allowed

The exterior area is adequately viewed and/or supervised by Service Permittees

____ (Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: NOT OPERATING DURING WINTER MONTHS OUTSIDE

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	6	to	8
Monday		to	
Tuesday		to	
Wednesday	6	to	8
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: [Signature] Date: 1/6/2020