



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>Perkins Portland</u> <u>Liquor Licenses</u>
<input type="checkbox"/> Brewery 2nd Location	<u>JUL 16 2020</u>
<input type="checkbox"/> Brewery 3rd Location	Name of City or County: <u>PD 75 ck</u> <u># 16656</u>
<input type="checkbox"/> Brewery-Public House 1st Location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 2nd Location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Brewery-Public House 3rd Location	By: _____
<input type="checkbox"/> Distillery	Date: _____
<input type="checkbox"/> Full On-Premises, Commercial	OLCC USE ONLY
<input type="checkbox"/> Full On-Premises, Caterer	Date application received:
<input type="checkbox"/> Full On-Premises, Passenger Carrier	<u>4-14-20</u>
<input type="checkbox"/> Full On-Premises, Other Public Location	By: <u>ECH</u>
<input type="checkbox"/> Full On-Premises, For Profit Private Club	License Action(s):
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	<u>A/PRIV</u>
<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):

Paa Dee Inc

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

3. Trade Name of the Business (Name Customers Will See)		
Paadee		
4. Business Address (Number and Street Address of the Location that will have the liquor license)		
6 SE 28th Ave		
City	County	Zip Code
Portland	Multnomah	97214



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Paa Dee Inc Phone: 5033601453

Trade Name (dba): Paadee

Business Location Address: 6 SE 28th Ave.,

City: Portland ZIP Code: 97214

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>12 PM</u>	to	<u>10 PM</u>
Monday	<u>12 PM</u>	to	<u>10 PM</u>
Tuesday	<u>12 PM</u>	to	<u>10 PM</u>
Wednesday	<u>12 PM</u>	to	<u>10 PM</u>
Thursday	<u>12 PM</u>	to	<u>10 PM</u>
Friday	<u>12 PM</u>	to	<u>10 PM</u>
Saturday	<u>12 PM</u>	to	<u>10 PM</u>

Outdoor Area Hours:

Sunday	<u>12 PM</u>	to	<u>10 PM</u>
Monday	<u>12 PM</u>	to	<u>10 PM</u>
Tuesday	<u>12 PM</u>	to	<u>10 PM</u>
Wednesday	<u>12 PM</u>	to	<u>10 PM</u>
Thursday	<u>12 PM</u>	to	<u>10 PM</u>
Friday	<u>12 PM</u>	to	<u>10 PM</u>
Saturday	<u>12 PM</u>	to	<u>10 PM</u>

The outdoor area is used for:

Food service Hours: 12 PM to 10 PM
 Alcohol service Hours: 12 PM to 10 PM
 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:

- | | |
|--|---|
| <input type="checkbox"/> Live Music | <input type="checkbox"/> Karaoke |
| <input checked="" 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: 65 Outdoor: 18
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 83

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: 4/12/2020

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