



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: <i>Rec'd by Portland Liquor Licenses</i> JUL 23 2020
<input type="checkbox"/> Brewery 2nd Location	
<input type="checkbox"/> Brewery 3rd Location	Name of City or County# <i>PD 75 ck</i> <i>6176</i>
<input type="checkbox"/> Brewery-Public House 1st Location	
<input type="checkbox"/> Brewery-Public House 2nd Location	Recommends this license be: <input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Brewery-Public House 3rd Location	
<input type="checkbox"/> Distillery	By: _____
<input type="checkbox"/> Full On-Premises, Commercial	Date: _____
<input type="checkbox"/> Full On-Premises, Caterer	OLCC USE ONLY
<input type="checkbox"/> Full On-Premises, Passenger Carrier	
<input type="checkbox"/> Full On-Premises, Other Public Location	Date application received: _____ <i>6/7/20</i> _____
<input type="checkbox"/> Full On-Premises, For Profit Private Club	By: <i>SR</i> _____
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	License Action(s): <i>A/PRIV</i>
<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):

Guys Walks Into A Bar..., LLC

(Applicant #1)

6-26-20 RE

(Applicant #2)

(Applicant #3)

(Applicant #4)

3. Trade Name of the Business (Name Customers Will See) The Richmond Bar		
4. Business Address (Number and Street Address of the Location that will have the liquor license) 3203 SE Division St		
City Portland	County Multnomah	Zip Code 97202



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Guy Walks Into A Bar..., LLC Phone: 213-700-0367

Trade Name (dba): The Richmond Bar

Business Location Address: 3203 SE Division St.

City: Portland ZIP Code: 97202

DAYS AND HOURS OF OPERATION

Business Hours: Sunday 4pm to 2:30am, Monday 4pm to 2:30am, Tuesday 4pm to 2:30am, Wednesday 4pm to 2:30am, Thursday 4pm to 2:30am, Friday 4pm to 2:30am, Saturday 4pm to 2:30am

Outdoor Area Hours: Sunday 4pm to 2:30am, Monday 4pm to 2:30am, Tuesday 4pm to 2:30am, Wednesday 4pm to 2:30am, Thursday 4pm to 2:30am, Friday 4pm to 2:30am, Saturday 4pm to 2:30am

The outdoor area is used for: [X] Food service Hours: 4pm to 2:30am, [X] Alcohol service Hours: 4pm to 2:30am, [X] Enclosed, how fully fenced in. The exterior area is adequately viewed and/or supervised by Service Permittees. NA-RE (Investigator's Initials)

Seasonal Variations: [] Yes [X] No If yes, explain:

ENTERTAINMENT

Check all that apply: [] Live Music, [X] 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: Outdoor: 20 stree, Lounge: 48 Other (explain): 30 patio, Banquet: Total Seating: 98

OLCC USE ONLY
Investigator Verified Seating: (Y) X (N)
Investigator Initials: RE
Date: 6-26-20

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

Applicant Signature: [Signature] managing member Date: 6/5/2020

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