



# 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>	
<input type="checkbox"/> Brewery 2nd Location		
<input type="checkbox"/> Brewery 3rd Location	Name of City or County: <i>JUL 20 2020</i> <i>PD 75 CK</i> <i>1179</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 checked="" type="checkbox"/> Full On-Premises, Commercial	Date: _____	
<input type="checkbox"/> Full On-Premises, Caterer	<b>OLCC USE ONLY</b>	
<input type="checkbox"/> Full On-Premises, Passenger Carrier	Date application received:	
<input type="checkbox"/> Full On-Premises, Other Public Location	<u>6/5/20</u>	
<input type="checkbox"/> Full On-Premises, For Profit Private Club	By: <u>SR</u>	
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	License Action(s):	
<input type="checkbox"/> Grower Sales Privilege 1st Location	C/O	
<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):

BIG P, LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

3. Trade Name of the Business (Name Customers Will See) MAD GREEK DELI		
4. Business Address (Number and Street Address of the Location that will have the liquor license) 1740 E BURNSIDE		
City PORTLAND	County MULTNOMAH	Zip Code 97214



# OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: BIG P LLC Phone: \_\_\_\_\_

Trade Name (dba): MAD GREEK DELI

Business Location Address: 1740 E. BURNSIDE

City: PORTLAND ZIP Code: 97214

## DAYS AND HOURS OF OPERATION

### Business Hours:

Sunday	<u>11AM</u>	to	<u>8PM</u>
Monday	<u>11AM</u>	to	<u>11PM</u>
Tuesday	<u>11AM</u>	to	<u>11PM</u>
Wednesday	<u>11AM</u>	to	<u>11PM</u>
Thursday	<u>11AM</u>	to	<u>11PM</u>
Friday	<u>11AM</u>	to	<u>10PM</u>
Saturday	<u>11AM</u>	to	<u>8PM</u>

### Outdoor Area Hours:

Sunday	<u>11AM</u>	to	<u>8PM</u>
Monday	<u>11AM</u>	to	<u>11PM</u>
Tuesday	<u>11AM</u>	to	<u>11PM</u>
Wednesday	<u>11AM</u>	to	<u>11PM</u>
Thursday	<u>11AM</u>	to	<u>11PM</u>
Friday	<u>11AM</u>	to	<u>10PM</u>
Saturday	<u>11AM</u>	to	<u>10PM</u>

The outdoor area is used for:

- Food service Hours: 11AM to 8PM
- Alcohol service Hours: 11AM to 8PM
- Enclosed, how \_\_\_\_\_

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

\_\_\_\_\_  
(Investigator's Initials)

Seasonal Variations:  Yes  No If yes, explain: CLOSE EARLY DURING WINTER

AND SLOW TIMES. PATIO SEATING ONLY OPEN DURING SUMMER

## ENTERTAINMENT

Check all that apply:

- |                                                    |                                                 |
|----------------------------------------------------|-------------------------------------------------|
| <input checked="" 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	<u>5PM</u>	to	<u>10PM</u>

## SEATING COUNT

Restaurant: 40 Outdoor: 36

Lounge: 18 Other (explain): \_\_\_\_\_

Banquet: \_\_\_\_\_ Total Seating: 94

### 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: 6/2/20

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)