



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> <i>JUL 29 2020</i>	
<input type="checkbox"/> Brewery 2nd Location		
<input type="checkbox"/> Brewery 3rd Location	Name of City or County: <i>PD \$100 clc # 1112</i>	
<input checked="" 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	Date application received: <i>6-25-2020</i>	
<input type="checkbox"/> Full On-Premises, Other Public Location	By: <i>LT</i>	
<input type="checkbox"/> Full On-Premises, For Profit Private Club	License Action(s): <i>n/o</i>	
<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 type="checkbox"/> Limited On-Premises		
<input 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):

Mutantis Brewery & Bottle Shop LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

3. Trade Name of the Business (Name Customers Will See) Mutantis Brewery & Bottle Shop		
4. Business Address (Number and Street Address of the Location that will have the liquor license) 6719 NE 18th Ave		
City Portland	County Multnomah	Zip Code 97211



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Mutantis Brewery & Bottle Shop LLC Phone: 650-274-2822

Trade Name (dba): Mutantis Brewery & Bottle Shop

Business Location Address: 6719 NE 18th Ave

City: Portland ZIP Code: 97211

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	12 PM	to	7 PM
Monday	Closed	to	Closed
Tuesday	Closed	to	Closed
Wednesday	3 PM	to	9 PM
Thursday	3 PM	to	9 PM
Friday	3 PM	to	10 PM
Saturday	12 PM	to	10 PM

Outdoor Area Hours:

Sunday	12 PM	to	7 PM
Monday	Closed	to	Closed
Tuesday	Closed	to	Closed
Wednesday	3 PM	to	8 PM
Thursday	3 PM	to	8 PM
Friday	3 PM	to	8 PM
Saturday	12 PM	to	8 PM

The outdoor area is used for:

- Food service Hours: _____ to _____
- Alcohol service Hours: Open to 8 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: Outdoor Area will be closed December through April

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	N/A	to	N/A
Monday		to	
Tuesday		to	
Wednesday		to	
Thursday		to	
Friday		to	
Saturday		to	

SEATING COUNT

Restaurant: 21 Outdoor: 52
 Lounge: N/A Other (explain): N/A
 Banquet: N/A Total Seating: N/A

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: 06/16/2020

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