



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 and on date stamp: <i>Rec'd by Portland Liquor Licenses</i> AUG 27 2020 Name of City or County: <u>PD # 75 OK</u> <u>4412</u> Recommends this license be: <input type="checkbox"/> Granted <input type="checkbox"/> Denied By: _____ Date: _____
<input type="checkbox"/> Brewery 2nd Location	
<input type="checkbox"/> Brewery 3rd Location	
<input type="checkbox"/> Brewery-Public House 1st Location	
<input type="checkbox"/> Brewery-Public House 2nd Location	
<input type="checkbox"/> Brewery-Public House 3rd 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 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	
	OLCC USE ONLY Date application received: <u>7/29/2020</u> By: <u>LT</u> License Action(s): <u>A lpriv</u>

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

Soldware, Inc

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

3. Trade Name of the Business (Name Customers Will See) Yukon Tavern		
4. Business Address (Number and Street Address of the Location that will have the liquor license) 5819 SE Milwaukie Ave-		
City Portland	County Multnomah	Zip Code 97202



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Soldware, Inc Phone: 503-235-6362

Trade Name (dba): Yukon Tavern

Business Location Address: 5819 SE Milaukie Ave

City: Portland ZIP Code: 97202

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 8pm to 10pm
 Monday 8pm to 10pm
 Tuesday 8pm to 10pm
 Wednesday 8pm to 10pm
 Thursday 8pm to 10pm
 Friday 8pm to 10pm
 Saturday 8pm to 10pm

Outdoor Area Hours:

Sunday same to _____
 Monday same to _____
 Tuesday same to _____
 Wednesday same to _____
 Thursday same to _____
 Friday same to _____
 Saturday same to _____

The outdoor area is used for:

- Food service Hours: 8pm to 10pm
- Alcohol service Hours: 8pm to 10p
- Enclosed, how _____

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

(Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: Current hours due to phase 1 lack of business

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 _____ to _____
 Monday _____ to _____
 Tuesday _____ to _____
 Wednesday _____ to _____
 Thursday _____ to _____
 Friday _____ to _____
 Saturday _____ to _____

SEATING COUNT

Restaurant: 49 Outdoor: 12
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 61

OLCC USE ONLY

Investigator Verified Seating: (Y) (N) _____

Investigator Initials: LT

Date: 8-15-2020

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

Applicant Signature: Rainer Wieland Secretary Date: 7/29/2020