



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	<p>Date application received and/or date stamp: _____</p> <p>Name of City or County: _____</p> <p>Recommends this license be:  <input type="checkbox"/> Granted    <input type="checkbox"/> Denied</p> <p>By: _____</p> <p>Date: _____</p>
<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	

Priority Portland  
Liquor Licenses  
NOV 16 2020  
RID \$75  
# 4120

**OLCC USE ONLY**

Date application received: 3-20-2020

By: CJV

License Action(s): A/PRIV

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

Black Water LLC

BLACK WATER RECORDS LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

3. Trade Name of the Business (Name Customers Will See)		
Black Water		
4. Business Address (Number and Street Address of the Location that will have the liquor license)		
835 NE Broadway St		
City	County	Zip Code
Portland	Multnomah	97232



# OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Keith Testerman BLACK WATER LLC  
 BLACK WATER RECORDS LLC Phone: 503 546 1692 503-281-0439  
 Trade Name (dba): BlackWater LLC CJV 4-29-2020 CJV 6-18-2020  
 Business Location Address: 835 NE Broadway  
 City: PORTLAND ZIP Code: 97232

### DAYS AND HOURS OF OPERATION

Business Hours: Temp Hours Outdoor Area Hours: \_\_\_\_\_ The outdoor area is used for:  
 Sunday 12 to 9 Sunday \_\_\_\_\_ to \_\_\_\_\_  Food service Hours: \_\_\_\_\_ to \_\_\_\_\_  
 Monday 9 to 9 Monday \_\_\_\_\_ to \_\_\_\_\_  Alcohol service Hours: \_\_\_\_\_ to \_\_\_\_\_  
 Tuesday 9 to 9 Tuesday \_\_\_\_\_ to \_\_\_\_\_  Enclosed, how \_\_\_\_\_  
 Wednesday 9 to 9 Wednesday \_\_\_\_\_ to \_\_\_\_\_  
 Thursday 9 to 9 Thursday \_\_\_\_\_ to \_\_\_\_\_ The exterior area is adequately viewed and/or  
 Friday 9 to 9 Friday \_\_\_\_\_ to \_\_\_\_\_ supervised by Service Permittees  
 Saturday 12 to 9 Saturday \_\_\_\_\_ to \_\_\_\_\_ (Investigator's Initials)

Seasonal Variations  Yes  No If yes, explain: Temporary hours during Covid-19 restrict

### 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 9 to 11  
 Monday 8 to 11  
 Tuesday 8 to 11  
 Wednesday 8 to 11  
 Thursday 8 to 11  
 Friday 8 to 11  
 Saturday 8 to 11

### SEATING COUNT

Restaurant: 99 Outdoor: \_\_\_\_\_  
 Lounge: \_\_\_\_\_ Other (explain): \_\_\_\_\_  
 Banquet: \_\_\_\_\_ Total Seating: 99 CJV 6-18-2020

**OLCC USE ONLY**  
 Investigator Verified Seating: (Y) NA (N)  
 Investigator Initials: CJV  
 Date: 4-29-2020

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

Applicant Signature: [Signature] Date: 4/3/20

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

(rev. 12/07)