



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> NOV 18 2020	
<input type="checkbox"/> Brewery 2nd Location		Name of City or County: <i>PD # 175</i> <i>503</i>	
<input type="checkbox"/> Brewery 3rd Location		Recommends this license be: <input type="checkbox"/> Granted <input type="checkbox"/> Denied	
<input checked="" type="checkbox"/> Brewery-Public House 1st Location		By: _____	
<input type="checkbox"/> Brewery-Public House 2nd Location		Date: _____	
<input type="checkbox"/> Brewery-Public House 3rd Location		OLCC USE ONLY	
<input type="checkbox"/> Distillery			
<input type="checkbox"/> Full On-Premises, Commercial		Date application received: <u>10/27.20</u>	
<input type="checkbox"/> Full On-Premises, Caterer		By: <u>SR</u>	
<input type="checkbox"/> Full On-Premises, Passenger Carrier		License Action(s): C/O	
<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 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):

DPD VENTURES LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

3. Trade Name of the Business (Name Customers Will See) LOOK LONG BREWING COMPANY		
4. Business Address (Number and Street Address of the Location that will have the liquor license) 6550 N INTERSTATE AVE		
City PORTLAND	County MULTNOMAH	Zip Code 97217



**OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION**

Please Print or Type

Applicant Name: DPD VENTURES LLC Phone: (503) 286-0343

Trade Name (dba): LOOK LONG BREWING COMPANY

Business Location Address: 6550 N INTERSTATE AVE

City: PORTLAND ZIP Code: 97217

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 10am to 9pm
 Monday _____ to _____
 Tuesday 12pm to 9pm
 Wednesday 12pm to 9pm
 Thursday 12pm to 9pm
 Friday 12pm to 9pm
 Saturday 10am to 9pm

Outdoor Area Hours:

Sunday 10am to 9pm
 Monday _____ to _____
 Tuesday 12pm to 9pm
 Wednesday 12pm to 9pm
 Thursday 12pm to 9pm
 Friday 12pm to 9pm
 Saturday 10am to 9pm

The outdoor area is used for:

- Food service Hours: 10 to 9
- Alcohol service Hours: 10 to 9
- Enclosed, how FENCE

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

(Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: _____

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: 24 Outdoor: 24
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 48

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: *RMS* Date: 10/13/2020

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)