



# OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION



Application is being made for:

### LICENSE TYPES

- Full On-Premises Sales (\$402.60/yr)
  - Commercial Establishment
  - Caterer
  - Passenger Carrier
  - Other Public Location
  - Private Club
- Limited On-Premises Sales (\$202.60/yr)
- Off-Premises Sales (\$100/yr)
  - with Fuel Pumps
- Brewery Public House (\$252.60)
- Winery (\$250/yr)
- Other: \_\_\_\_\_

### ACTIONS

- Change Ownership
- New Outlet
- Greater Privilege
- Additional Privilege
- Other \_\_\_\_\_

P37324  
L167474

### 90-DAY AUTHORITY

Check here if you are applying for a change of ownership at a business that has a current liquor license, or if you are applying for an Off-Premises Sales license and are requesting a 90-Day Temporary Authority

### APPLYING AS:

- Limited Partnership
- Corporation
- Limited Liability Company
- Individuals

### CITY AND COUNTY USE ONLY

Date application received: \_\_\_\_\_

The City Council or County Commission:

(name of city or county)

recommends that this license be:

- Granted
- Denied

By: \_\_\_\_\_  
(signature) (date)

Name: \_\_\_\_\_

Title: \_\_\_\_\_

### OLCC USE ONLY

Application Rec'd by: JP

Date: 12-4-12

90-day authority:  Yes  No

1. Entity or Individuals applying for the license: [See SECTION 1 of the Guide]

① JMP Deli Holdings LLC ③ \_\_\_\_\_  
② \_\_\_\_\_ ④ \_\_\_\_\_

2. Trade Name (dba): Vip Deli

3. Business Location: 1346C Leland rd Oregon City Clackamas Or 97045  
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 23906 NW St. Helens Rd Portland Or 97231  
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503.557.9999 503.543.0936  
(phone) (fax)

6. Is the business at this location currently licensed by OLCC?  Yes  No

7. If yes to whom: TJM Holdings LLC Type of License: Limited on Premises

8. Former Business Name: Vip Deli

9. Will you have a manager?  Yes  No Name: \_\_\_\_\_  
(manager must fill out an Individual History form)

10. What is the local governing body where your business is located? Oregon City  
(name of city or county)

11. Contact person for this application: James M Patrick 503.543.0936 / 503.369.1045  
(name) (phone number(s))  
23906 NW St. Helens Rd Portland Or 97231 ZEAKPAT09@GMAIL.COM  
(address) (fax number) (e-mail address)

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

Applicant(s) Signature(s) and Date:

① James M Patrick Date 12-3-12 ③ \_\_\_\_\_ Date \_\_\_\_\_  
② Julie M. Patrick Date 12/3/12 ④ \_\_\_\_\_ Date \_\_\_\_\_

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



Please Print or Type

LLC Name: JMP Deli Holdings LLC Year Filed: 2012

Trade Name (dba): Vip Deli

Business Location Address: 1346C Leland Rd

City: Oregon City ZIP Code: 97045

List Members of LLC:

Percentage of Membership Interest:

1. James M Patrick  
(managing member)

50%

2. Julie M Patrick  
(members)

50%

3. \_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

5. \_\_\_\_\_

\_\_\_\_\_

6. \_\_\_\_\_

\_\_\_\_\_

(Note: If any LLC member is another legal entity, that entity must also complete an LLC, Limited Partnership or Corporation Questionnaire. If the LLC has officers, please list them on a separate sheet of paper with their titles.)

Server Education Designee: James M Patrick DOB: 8-30-1961

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

Signature: James M Patrick member Date: 12-3-12  
(name) (title)