



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

pending KH

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 _____

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: *McFouts*

Date: *4/15/2016*

90-day authority: ☐ Yes ☐ No

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

① Historical House Corporation ③ _____

② _____ ④ _____

2. Trade Name (dba): Midway Historic Public House

3. Business Location: 1003 7th Street, Oregon City, Clackamas, Oregon, 97045
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: P O Box 68554, Oak Grove, OR 97267
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503-656-9501
(phone) (fax)

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

7. If yes to whom: Kraig Pauli Type of License: Full On-Premises Sales

8. Former Business Name: KC's Pub & Pool, Inc dba: Midway Historic Public House

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 OR in Clackamas County
(name of city or county)

11. Contact person for this application: Gayle Dee Baker, 503-544-3121
(name) (phone number(s))
PO Box 68554, Oak Grove, OR 97267 None utah689@yahoo.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 Gayle Baker Date 4-8-16 ③ _____ Date _____

② Wendy W. Allen Date 4-10-16 ④ _____ Date _____