



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

(Handwritten initials: KGS)

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: WMBW

ACTIONS

- ☒ Change Ownership
- ☐ New Outlet
- ☐ Greater Privilege
- ☐ Additional Privilege
- ☒ Other: Change address

(Handwritten notes: L252389, P 53603)

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: AK

Date: 4-13-17

90-day authority: ☐ Yes ☐ No

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

① Michelle Pierson ③ Bella world wines LLC

② _____ ④ _____

2. Trade Name (dba): Bella World Wines LLC

3. Business Location: 1625 Washington St. Oregon City OR 97045
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 14333 SE Wagner Ln. Oak Grove OR 97267
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503-998-4088 N/A
(phone) (fax)

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

7. If yes to whom: Chiller Technologies Inc Type of License: WMBW

8. Former Business Name: Awesome Wines Co

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: Michelle Pierson 503-998-4088
(name) (phone number(s))

14333 SE Wagner Ln. Oak Grove OR 97267 N/A Abria711@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 Michelle Pierson Date 4/3/17 ③ _____

② _____ Date _____ ④ _____

RECEIVED

Date APR 13 2017

Date _____

Initials: _____
Oregon Liquor Control Commission