



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 1 <sup>st</sup> Location	Date application received:
<input type="checkbox"/> Brewery 2 <sup>nd</sup> Location	
<input type="checkbox"/> Brewery 3 <sup>rd</sup> Location	Name of City or County:
<input type="checkbox"/> Brewery-Public House 1 <sup>st</sup> location	
<input type="checkbox"/> Brewery-Public House 2 <sup>nd</sup> location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 3 <sup>rd</sup> location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Distillery	By: _____
<input checked="" type="checkbox"/> Full On-Premises, Commercial	Date: _____
<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 1 <sup>st</sup> location	
<input type="checkbox"/> Grower Sales Privilege 2 <sup>nd</sup> location	
<input type="checkbox"/> Grower Sales Privilege 3 <sup>rd</sup> 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 1 <sup>st</sup> Location	
<input type="checkbox"/> Winery 2 <sup>nd</sup> Location	
<input type="checkbox"/> Winery 3 <sup>rd</sup> Location	

OLCC USE ONLY
Date application received: 3/12/19
By: Jan Z.
Date application accepted as initially complete: 3/27/19
By: Jan Z.
License Action(s): C/O + C/TN

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

Soban, LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY



OREGON LIQUOR CONTROL COMMISSION

**LIQUOR LICENSE APPLICATION**

<b>3. Applicant #1</b> Soban, LLC		<b>Applicant #2</b>	
<b>Applicant #3</b>		<b>Applicant #4</b>	
<b>4. Trade Name of the Business (Name Customers Will See)</b> Perdrix			
<b>5. Business Address (Number and Street Address of the Location that will have the liquor license)</b> 515 Main St			
<b>City</b> Oregon City	<b>County</b> Clackamas	<b>Zip Code</b> 97045	
<b>6. Does the business address currently have an OLCC liquor license?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
<b>7. Does the business address currently have an OLCC marijuana license?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
<b>8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your mail)</b> 515 Main St			
<b>City</b> Oregon City	<b>State</b> Oregon	<b>Zip Code</b> 97045	
<b>9. Phone Number of the Business Location</b> 9712171790		<b>Email Contact for this Application</b> sobanllc@gmail.com	
<b>Contact Person for this Application</b> Dong-Hyun Shin		<b>Phone Number</b> 9712171790 *	
<b>Mailing Address</b> 17868 SW Woodberry Ct	<b>City</b> Beaverton	<b>State</b> OR	<b>Zip Code</b> 97007

I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is **prohibited** on the licensed premises.

I attest that all answers on all forms, documents, and information provided to the OLCC are true and complete.

**Applicant Signature(s)**

- Each individual person listed as an applicant must sign the application.
- If an applicant is an entity, such as a corporation or LLC, at least one person who is authorized to sign for the entity must sign the application.
- A person with the authority to sign on behalf of the applicant (such as the applicant's attorney or a person with power of attorney) may sign the application. If a person other than an applicant signs the application, please provide proof of signature authority.

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)