

REQUEST FOR CITY COUNCIL ENDORSEMENT    No. \_\_\_\_\_  
Liquor License Application  
City of Hillsboro, Oregon

Indicate type of application:

- \$100.00 Original Application
- \$ 75.00 Change of Ownership
- \$ 75.00 Change of location
- \$ 75.00 Change in privilege
- \$ 35.00 Renewal

License type:

- Full on-premises sales
- Limited on-premises sales
- Off-premises sales
- Brewery Public House
- Other: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

DBA NAME: \_\_\_\_\_

Business Address: \_\_\_\_\_

Applicant: \_\_\_\_\_  
(Full Name)

Home Address: \_\_\_\_\_  
Street Home Phone  
City State Zip Business Phone

Co-Applicant: \_\_\_\_\_  
(Full Name)

If more than one co-applicant, provide complete information on each (attach page(s) as necessary).

Home Address: \_\_\_\_\_  
Street Home Phone  
City State Zip Business Phone

Note: If applicant is a corporation, list name and address of home offices:

\_\_\_\_\_  
\_\_\_\_\_

I hereby attest that the information provided above is true and accurate to the best of my knowledge. It is understood that the City may request additional or supplemental information during the course of processing this application.

Date: \_\_\_\_\_  
Signature(s) of Applicant(s) or Agent(s)

City Business License No.: \_\_\_\_\_ Receipt No. \_\_\_\_\_

Note: This page is to be filled out for new applications, change of ownership, change of location, change of class of license and temporary licenses.

Describe in detail the nature of the establishment you propose to operate. (For example, is your facility going to be a tavern, a family dining establishment, a neighborhood grocery store, part of a community shopping center, a special purpose retail outlet like a wine shop, etc.) If additional space is necessary, please use the back of this form, or attach additional page(s).

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Days and hours of operation: \_\_\_\_\_

Ratio of projected food sales to alcohol sales: \_\_\_\_\_

Service Capacity (i.e. maximum number of customers that can be accommodated at any give time): \_\_\_\_\_

Previous business names and addresses where you have ever been licensed. (Use reverse side of this application for additional space if necessary.)

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Has the applicant ever been issued a liquor license? Yes  No

If yes, describe below the nature and location of the outlet(s), the type of license, and the dates during which the license was held.

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Has the applicant ever been cited or had a compliance plan in effect for a liquor license? Yes  No

If yes, describe below the nature of the license sought, the location of the proposed outlet, the date of the citation, and reasons for the citation.

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Is any building remodeling planned? If so, generally describe the plans:

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Police Department: Approved  Denied  \_\_\_\_\_

Signature

Comments: \_\_\_\_\_

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