



OREGON LIQUOR & CANNABIS COMMISSION

Lesser Privilege Statement

License #: _____ Existing License Type: Full Limited

Licensee Name: _____

Trade Name (dba): _____

Premises Address: _____
Street Address City State Zip

F to L or O - Existing Full On-Premises Sales License changing to a Limited On-Premises Sales license or Off-Premises Sales license.

I request my license type be changed from a Full On-Premises Sales license to a Limited On-Premises Sales license.

I understand and agree that, once approved, the sale and service of distilled spirits is no longer allowed on the licensed premises.

I request my license type be changed from a Full On-Premises Sales license to an Off-Premises Sales license.

I understand and agree that, once approved, the sale, service and consumption of distilled spirits, and consumption of malt beverage, wine and cider is no longer allowed on the licensed premises. (F to O only)

L to O - Existing Limited On-Premises Sales License changing to an Off-Premises Sales license

I request my license type be changed from a Limited On-Premises Sales license to an Off-Premises Sales license.

I understand and agree that, once approved, the consumption of malt beverage, wine and cider is no longer allowed on the licensed premises.

CHOOSE ONE OF THE FOLLOWING TWO OPTIONS:

Other than the requested lesser privilege license change, no other significant changes in operation have been made that have not been reported to the OLCC (ex: changes in menu, hours of operation, remodeling, etc.).

OR

In addition to the requested lesser privilege license change, the following significant changes in operation have been made that have not been reported to the OLCC (ex: changes in menu, hours of operation, remodeling, etc.):

Signature: _____

Date: _____

Please email this form with the [Change of Information](#) form to olcc.liquorlicenseapplication@oregon.gov