

**TO MAKE CHANGES FROM INDIVIDUAL LICENSEE(S) TO
A LIMITED LIABILITY COMPANY (LLC) AND NO NEW
INDIVIDUALS OR ENTITIES ADDED TO THE NEW LLC**



Please submit completed documents to OLCC.LiquorLicenseApplication@Oregon.Gov

DATE OF REQUEST: _____ TYPE OF LICENSE(S): _____

LICENSEE(S): _____

TRADENAME (dba) OF BUSINESS: _____

PREMISES ADDRESS: _____

CITY: _____ ZIP: _____

CONTACT PERSON: _____

CONTACT PERSON'S PHONE: (_____) _____

CONTACT PERSON'S EMAIL: _____

Include all items below as they apply to your business. Items in **Bold** are attached OLCC forms.

- Change of Information Application** – Complete Section 1 as you are currently licensed and the appropriate portion of Section 2 showing your new Legal Entity information. Sign and date.
- Limited Liability Company Questionnaire**. Follow the directions on the form.
- Business Information form**. Complete and submit **ONLY** if you are also making operational changes along with the ownership changes.
- Liquor Liability Insurance certificate showing the LLC as the insured.

Additional documents may be requested by the OLCC to investigate/document the changes.

Licensee Authorized Representative(s): In order to make changes to a license or to receive information about a license by someone other than the applicant/licensee, Licensee must:

- Complete the [Authorized Representative Form](#) designating a person/entity to act on your behalf and submit with this form.



OREGON LIQUOR & CANNABIS COMMISSION
Change of Information Application

- This form must be signed by a licensee or authorized representative ([see below](#))
- After completion email the form to olcc.liquorlicenseapplication@oregon.gov

Section 1 – Licensee Information

Date of Request(s):		License #:		License Type:	
Licensee of Record Name:					
Trade Name:					
Premises Address:					
Contact Phone Number:		Contact Email:			

Section 2 – Changes Requested

Remove Licensee of Record: Attach a copy of the legal document(s) or letter of resignation signed by the removed party, showing the party will no longer be listed as a licensee of record.
 Name of Removed Licensee of Record: _____

Legal Name: Provide legal documentation of the name change.
 Prior Name: _____ New Name: _____

Legal Entity Name: Complete and attach an updated [LLC](#) or [Corporation](#) Questionnaire & [Real Property Attestation](#) form.
 Prior Name: _____ New Name: _____

Mailing Address (if changing) (You cannot change your premises address using this form)
 Street Address: _____
 City: _____ State: _____ Zip: _____

Server Education Designee
 Name: _____ Date of Birth: _____ ASE Exam Pass Date: _____

Trade Name
 Prior Trade Name: _____ New Trade Name: _____

Lesser Privilege: FCOM to Limited or Off and Limited to Off Only
 Complete and attach the [LESSER PRIVILEGE](#) statement form.

If you are changing locations and need to move your business, you **MUST** apply for New Outlet application

Section 3 – Acknowledgement and Signature

I understand that if my answers are not true and complete, the Oregon Liquor and Cannabis Commission may refuse to process this change of information application.

Signature: _____ Date: _____

Name: _____ Title: _____

Licensee Authorized Representative(s): In order to make changes to a license or to receive information about a license by someone other than the applicant/licensee, Licensee must:

- Complete the [Authorized Representative 7](#) and submit with this form.



**Oregon Liquor & Cannabis Commission (OLCC)
LIMITED LIABILITY COMPANY (LLC)
FORM INSTRUCTIONS**

Definitions

- “Manager-Managed LLC” means an LLC where one or more individuals or entities have the responsibility to run the LLC, and as such, have been named as a “managing member.”
- “Managing member” means an individual or entity who has been named to run a manager-managed LLC.
 - A managing member is not required to own or hold membership in the LLC.
 - A manager of the business is not required to be a member or managing member of the LLC.
- “Member-Managed LLC” means an LLC where all members have the responsibility to run the LLC, and as such, no managing member has been named.
- “Member” means an individual or entity who owns membership in the LLC.
- “Entity” means an association, corporation, limited liability company, partnership, trust, or any similar entity that has legal standing under the laws of Oregon or another state within the United States.
- “Individual” means an individual human being.

When does the OLCC require this form to be submitted?

- The LLC is listed as an applicant in the “Applicant Information” section of the Liquor License Application form;
- The LLC has 20% or more ownership in an entity applicant listed in the “Applicant Information” section of the Liquor License Application;
- The OLCC believes obtaining this information may help the OLCC in its investigation.

	Manager-Managed LLC	Member-Managed LLC
Registered with the Oregon Secretary of State (SOS)	The OLCC does not require registration in Oregon with the Oregon Secretary of State.	The OLCC does not require registration in Oregon with the Oregon Secretary of State.
Section 1	Must complete this section. <ul style="list-style-type: none"> • List <u>all</u> managing members (may be one or more individuals or entities) 	Not Applicable.
Section 2	Must complete this section. <ul style="list-style-type: none"> • List <u>all</u> members with 20% or more membership (may be one or more individuals or entities). 	
Section 3	<ul style="list-style-type: none"> • An LLC with no officers should skip this section. • An LLC with the following officers must complete this section: president, secretary, treasurer, and vice president (with responsibility over the operation of the business). 	
Individual History form	The following individuals must submit an Individual History form unless an exception applies: <ul style="list-style-type: none"> • All individuals who are a managing member, member with 20% or more membership, or a listed officer. Exceptions: <ul style="list-style-type: none"> • The OLCC has determined that the LLC has provided proof to the OLCC that it is listed on an exchange registered with the U.S. Securities and Exchange Commission; or • The OLCC has determined that the LLC has provided written documentation to the OLCC sufficient to show that control of the day-to-day operation of the business has been relinquished by the individual through a written management agreement, or similar written agreement, to one or more parties who are an applicant or licensee for the same license at the same premises. Relinquishing control over the day-to-day operation of the business includes not managing or controlling the sale or service of alcohol or directly supervising any person who sells or serves alcoholic beverages 	
Section 4	<ul style="list-style-type: none"> • If the application is for a liquor license that allows customers to consume alcohol at the business, an individual must be listed who has completed, or will complete, an OLCC approved Alcohol Server Education class, and has passed the test. This individual must have the authority to set standards and policies for alcohol servers at the business. • If the application is not for a liquor license that allows customers to consume alcohol at the business, this section may be left blank. 	
Section 5	One of the listed members or managing members must sign and date this form.	



LIMITED LIABILITY COMPANY (LLC) QUESTIONNAIRE

LLC Name _____

Trade Name of Business (Name Customers Will See) _____

The LLC named in this document is a (see page 1 for definitions): _____ Manager-Managed LLC _____ Member-Managed LLC

This section is ONLY for a manager-managed LLC. (Directions on page 1. You may include information on a separate sheet.)

Name of Managing Member (please print)	Name of Managing Member (please print)

This section is for BOTH a manager-managed LLC and a member-managed LLC. (Directions on page 1. You may include information on a separate sheet.)

Name of Member (please print)	Percentage of issued membership held

This section is ONLY for an LLC with the listed officers. (Directions on page 1. You may include information on a separate sheet.)

Title	Name (please print)
President	
Secretary	
Treasurer	
Vice president with responsibility over the operation of the business	

SERVER EDUCATION DESIGNEE (Directions on page 1)

Name (please print)	Date of Birth

SIGNATURE (Directions on page 1)

NAME of Signing Person (please type or print) _____

DATE _____
SIGNATURE of signing person (may electronically sign) _____

This box for OLCC use ONLY

Does the entity hold, or has it ever held, an OLCC-issued liquor license? _____



OREGON LIQUOR & CANNABIS COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: _____ Phone: _____

Trade Name (dba): _____

Business Location Address: _____

City: _____ ZIP Code: _____

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

Outdoor Area Hours:

Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

The outdoor area is used for:

Food service Hours: _____ to _____
 Alcohol service Hours: _____ to _____
 Enclosed, how _____
The exterior area is adequately viewed and/or supervised by Service Permittees.
_____ (Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: _____

ENTERTAINMENT

Check ALL that apply:

- Live Music
- Recorded Music
- DJ Music
- Dancing Nude Dancing
- Live Entertainment Minor Entertainers
- Karaoke
- Coin-operated Games
- Video Lottery Machines
- Social Gaming
- Pool Tables
- Other: _____

*Minor Entertainers in an area prohibited to minors need prior approval from the OLCC

DAYS & HOURS OF LIVE OR DJ MUSIC

Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

SEATING COUNT

Restaurant: _____ Outdoor: _____ Lounge: _____
Banquet: _____ Other (explain): _____ Total Seating: _____

OLCC USE ONLY

Investigator Verified Seating: _____(Y) _____(N)
Investigator Initials: _____
Date: _____

I understand if my answers are not true and complete, the OLCC may deny my license application.

Applicant Signature: _____ Date: _____

www.oregon.gov/olcc