

20. Describe your plan to manage alcohol consumption by adults.

Alcohol monitors and servers to watch for over consumption and if necessary will have wrist bands removed and security will escort them to a taxi or max.

21. List the name(s) and service permit number(s) of **alcohol manager(s)** on duty and in the licensed area:

LIQUOR LIABILITY INSURANCE: If the licensed area is open to the public and **expected attendance is 301** or more per day in the licensed area, you must have at least \$300,000 of **liquor liability insurance** coverage (ORS 471.168).

22. Insurance Company: _____ 23. Policy #: _____ 24. Expiration Date: _____

25. Name of insurance agent: _____ 26. Agent's phone number: _____

FOOD SERVICE: See the attached sheet for an explanation of this requirement.

27. Will you provide distilled liquor by the drink?: Yes No

28. If yes to #27, name at least **three (3)** different substantial food items that you or a food service contractor will provide:

1) Crab/Shrimp Melts 2) Clam Chowder 3) Corndogs

TRADE VISITORS (see instructions)

29. Will you provide tastings to trade visitors at this event? Yes No If yes, I will distinguish trade visitors from members of the general public by (check those that apply):

- Providing tastings for trade visitors in separate areas or at separate times from tastings for the general public;
- Using distinctive glassware for trade visitors;
- Using badges or name tags;
- Other (please describe): _____

GOVERNMENT RECOMMENDATION: You must obtain a recommendation from the local city or county named in #30 below **before** submitting this application to the OLCC. The law allows the city or county up to 45 days to process it.

30. Name the city if the event address is within a city's limits, or name the county if the event address is outside the city's limits:

Portland

I affirm that I am authorized to sign this application on behalf of the applicant.

31. Licensee Name (please print): _____

32. LICENSEE SIGNATURE: _____ 33. Date: _____

CITY OR COUNTY USE ONLY

The city/county named in #30 above recommends:

Grant Acknowledge Deny (attach written explanation of deny recommendation)

City/County Signature: _____ Date: _____

FORM TO OLCC: This license is valid only when signed by an OLCC representative. Submit this form to the OLCC office regulating the county in which your special event will happen.

OLCC USE ONLY

Fee Paid: _____ Date: _____ Receipt #: _____

License is: Approved Denied

OLCC Signature: _____ Date: _____