

19. 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.

20. List 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, the event must have at least \$300,000 of liquor liability insurance coverage (ORS 471.168).

21. Insurance Company:

22. Policy #: \_\_\_\_\_ 23. Expiration Date: \_\_\_\_\_

**MARIJUANA**  
24. Will marijuana (such as use, consumption, samples, give-away, sale, etc.) be allowed on the special event licensed premises or be part of the event or an adjacent event?  Yes  No

**FOOD SERVICE**  
You must provide at all times and in all areas where alcohol service is available at least two different substantial food items (see the attached sheet for an explanation of this requirement).

25. Name at least two different substantial food items that will be provided:

1. Crab/Shrimp Melts 2. Corndogs and curly fries

**GOVERNMENT RECOMMENDATION**  
You must obtain a recommendation from the local city or county named in #26 before submitting this application to the OLCC.

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

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

27. Name (please print): \_\_\_\_\_

28. Signature: \_\_\_\_\_ 29. Date: \_\_\_\_\_

**CITY OR COUNTY USE ONLY**  
The city/county named in #26 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: \_\_\_\_\_