

ORIGINAL



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

Application is being made for:

LICENSE TYPES	ACTIONS
<input type="checkbox"/> Full On-Premises Sales (\$402.60/yr)	<input type="checkbox"/> Change Ownership
<input type="checkbox"/> Commercial Establishment	<input checked="" type="checkbox"/> New Outlet
<input type="checkbox"/> Caterer	<input type="checkbox"/> Greater Privilege
<input type="checkbox"/> Passenger Carrier	<input type="checkbox"/> Additional Privilege
<input type="checkbox"/> Other Public Location	<input type="checkbox"/> Other _____
<input type="checkbox"/> Private Club	
<input type="checkbox"/> Limited On-Premises Sales (\$202.60/yr)	
<input checked="" type="checkbox"/> Off-Premises Sales (\$100/yr)	
<input type="checkbox"/> with Fuel Pumps	
<input type="checkbox"/> Brewery Public House (\$252.60)	
<input type="checkbox"/> Winery (\$250/yr)	
<input type="checkbox"/> Other: _____	

90-DAY AUTHORITY

Check here if you are applying for a change of ownership at a business that has a current liquor license, or if you are applying for an Off-Premises Sales license and are requesting a 90-Day Temporary Authority

APPLYING AS:

Limited Partnership Corporation Limited Liability Company Individuals

CITY AND COUNTY USE ONLY

Date application received: _____

The City Council or County Commission: _____

Manzanita
(name of city or county)

recommends that this license be:

Granted Denied

By: _____ (signature) _____ (date)

Name: Michael Scott

Title: Mayer

OLCC USE ONLY

Application Rec'd by: CS

Date: 7/11/17

90-day authority: Yes No

- Entity or Individuals applying for the license: [See SECTION 1 of the Guide]
 - Dixie L Anderson
 - _____
- Trade Name (dba): Dixie's Vino & More
- Business Location: 174 Laneda Ave, Manzanita (Tillamook) OR 97130
(number, street, rural route) (city) (county) (state) (ZIP code)
- Business Mailing Address: PO Box 368, Manzanita, OR 97130
(PO box, number, street, rural route) (city) (state) (ZIP code)
- Business Numbers: 503.781.7271
(phone) (fax)
- Is the business at this location currently licensed by OLCC? Yes No
- If yes to whom: _____ Type of License: _____
- Former Business Name: _____
- Will you have a manager? Yes No Name: _____
(manager must fill out an Individual History form)
- What is the local governing body where your business is located? Manzanita
(name of city or county)
- Contact person for this application: Dixie L Anderson 503.781.7271
(name) (phone number(s))
PO Box 368, Manzanita, OR 97130 dixiesvino@gmail.com
(address) (fax number) (e-mail address)

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

Applicant(s) Signature(s) and Date:

① [Signature] Date 7/11/17 ③ _____ Date _____

② _____ Date _____ ④ _____ Date _____

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To: OLCC

July 1, 2017

* Answer to Question #24 on Individual History

I owned and operated Vino Manzanita (wine bar) at 387 D Laneda Avenue, Manzanita, Oregon from September 1, 2007 until Oct. 14, 2016.

On October 14, 2016 a tornado hit the building I was currently leasing to run my business, Vino Manzanita in. I had extensive water damage and outdoor damage to my business due to the tornado. Shortly after the tornado hit, my mother fell and needed full time care. I chose to help with her recovery instead of opening up again at 387 D Laneda Avenue, even though the building was being repaired. I chose to not renew my lease with that landlord. My existing license with the OLCC expired in March 2017 and I did not renew.


My mother has recovered from her injury and does not require my full-time care any longer. On June 1, 2017 a small store front came available to rent for commercial use at 174 Laneda Avenue, Manzanita, Oregon. I signed a 5-year lease on this property (please find a copy of the lease agreement enclosed).

I was able to keep my same LLC (Dixie Lee, LLC) with the same registry # and EIN. I applied for a dba as: Dixie's Vino & More with the corporation division and it was accepted.

It is a small space and I plan to do wine/beer retail sales. I will not be opening any containers on the premises. It will strictly be a to-go/off-premises sale operation. I will be selling wine accessories such as glasses, gift bags, corkscrews, etc. I may sell cheeses/salami type packaged food to go and will apply for the required licenses needed with the health department.

I am hoping for a September or October, 2017 opening.

Thank you,



Dixie L Anderson

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OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Dixie L Anderson Phone: 503.781.7271

Trade Name (dba): Dixie's Vino & More

Business Location Address: 174 Laneda Ave.

City: Manzanita ZIP Code: 97130

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 11 am to 9 pm
 Monday 11 am to 9 pm
 Tuesday 11 am to 9 pm
 Wednesday 11 am to 9 pm
 Thursday 11 am to 9 pm
 Friday 11 am to 9 pm
 Saturday 11 am to 9 pm

Outdoor Area Hours: N/A

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

The outdoor area is used for: N/A

- 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: I will be doing business in a coastal/tourist town and may stay open later or extend hours during peak season.

ENTERTAINMENT

Check all that apply: N/A

- Live Music
- Recorded Music
- DJ Music
- Dancing
- Nude Entertainers
- Karaoke
- Coin-operated Games
- Video Lottery Machines
- Social Gaming
- Pool Tables
- Other: N/A

* maybe radio

DAYS & HOURS OF LIVE OR DJ MUSIC

N/A
 Sunday _____ to _____
 Monday _____ to _____
 Tuesday _____ to _____
 Wednesday _____ to _____
 Thursday _____ to _____
 Friday _____ to _____
 Saturday _____ to _____

SEATING COUNT

N/A - no seating

Restaurant: _____ Outdoor: _____
 Lounge: _____ Other (explain): _____
 Banquet: _____ 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: [Signature] Date: July 1, 2017