

MAR 0 1 2018 New Change of Ownership Greater privilege
MARION COUNTY
BOARD OF COMMISSIONERS Additional privilege Other
BEFORE THE BOARD OF COUNTY COMMISSIONERS OF MARION COUNTY, STATE OF OREGON NO
In the Matter of the Application of St Innocent
For a recommendation regarding the application to the Oregon Liquor Control Commission for:
RECOMMENDATION
This matter coming before the Board of County Commissioners on the application offor a recommendation to the Oregon
Liquor Control Commission under the provisions of ORS 471.166; and the Board having referred said application to the Sheriff of Marion County, Oregon, and having the report of said Sheriff that the applicant has not been convicted of a crime involving a violation of the liquor control laws, or the gambling laws, or of crimes involving moral turpi-tude, and that the applicant is of good moral character, and otherwise qualified to be licensed under the Oregon Liquor Control Act;
IT IS, THEREFORE RECOMMENDED TO THE OREGON LIQUOR CONTROL COMMISSION that the application of the above be refused granted
Dated at Salem, Marion County, Oregon thisday of, 20
Chair Commissioner Commissioner
Approved by County Sheriff 2-25-18-
Business Name Address of Business
St. Innocent Wivery 10052 Enchanted Way SE Managing Agent Date of Birth Je files on, DR 97352
Managing Agent Date of Birth Tellerson, OR 97352
I, Mark Vlossak President, will operate my establishment according to the statues and rules of the OLCC. I authorize Marion County to conduct background checks, including criminal history checks. I also agree to cooperate with agencies of Marion County in reviewing this application. Date: President Presi
Applicant's signature



LIQUOR LICENSE APPLICATION

LICENSE FEE: Do not include the license fee with the	CITY AND COUNTY USE ONLY				
application (the license fee will be collected at a later	CITY AND COUNTY USE ONLY				
time).	Pata application graphed				
	Date application received				
APPLICATION: Application is being made for:	Name of City or County				
☐ Brewery	wante of city of country				
☐ Brewery-Public House	Recommends this license be Granted Denied				
Distillery	Theodyllinerias tha indende se Grantes				
Full On-Premises, Commercial	Ву				
Full On-Premises, Caterer					
Full On-Premises, Passenger Carrier	Date				
Full On-Premises, Other Public Location					
Full On-Premises, Nonprofit Private Club	OLCC USE				
Full On-Premises, For-Profit Private Club	, \ \				
Grower Sales Privilege	Application received by Wolland				
Limited On-Premises	Application received by TyV OOW WILLIAM				
Off-Premises	Date 2-9-18				
Off-Premises with Fuel Pumps	Date Of 10				
Warehouse	License Action:				
☐ Wholesale Malt Beverage & Wine (WMBW)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Winery Second Location	2 Location				
1. LEGAL ENTITY (example: corporation or LLC) or INDIV	IDUAL(S) applying for the license:				
Applicant #1	Applicant #2				
St. Francent, Limiters.					
	10.10				
Applicant #3	Applicant #4				
2. Trade Name of the Business (the name customers will	saa):				
St. Innocent winery					
٠	Enchanted Way SE				
	ity Marion ZIP 17352				
4. Is the business at this location currently licensed by the					
5. Mailing Address (where the OLCC will send your mail):	sane				
PO Box, Number, Street, Rural Route	C1-1-				
City	State ZIP				
	378-1526				
7. Contact Person for this Application:					
Name Mark Vlossak	Phone Number 503- 932- 2129 (cell)				
Mailing Address, City, State, ZIP					
Same					
Email mark @ stinnocentwine.					
I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is					
prohibited on the licensed premises.					
Signature of Applicant #1 / V	Signature of Applicant #1 KECLIVED OREGON LIQUOR CONTROL COMMISSION				
All Proidest	OUTGOUT FIGOUR GOLD TO THE STREET				
	FEB 0.2 2018				
Signature of Applicant #1	Signature of Applicant #1				
	SALEM REGIONAL OFFICE				
	AND THE PARTY OF T				

Please Print or Type		
Corporation Name: St. Innocent, L	imited	Year Incorporated: 1988
Trade Name (dba): St. Innocent L	Umery	
Business Location Address: 10052 F	inchanted Wa	y SE
City: Jefferson		ZIP Code: 97352
List Corporate Officers: Mark Vlasak (name) Walter Perry III	Presi (title) S	last, Treasurer ecrotary
	•	
List Board of Directors: Mark Vlossak (name) Walter Perry		
Watter R. Miller		
Scott Case beer Ev	ic Bischoff	
List Stockholders: (Note: If any stockholder is a Corporation Questionnaire.	See Liquor License App	entity may also need to complete another lication Guide for more information.)
Stockholders:	Number of <u>Shares Held:</u>	Number of Stock Shares:
Mark Vlorcak	1155	Issued: 1742
Erre Binkoft	163	
Walter Perry III / christine Chite	124	Unissued:
Walter R. Miller	137	Total Shares Authorized to Issue: 10,000
Dsee attached		
Server Education Designee: Mark VISA (See Liquor License Application Guide for more information)	mation)	DOB:
I understand that if my answers are not true and co	ŕ	ay deny my license application. Date: 1 9 18
(Hallie)	(ereic.)	

1-800-452-OLCC (6522) www.oregon.gov/olcc

1.	Name: (LAST) Vlossak (FIRST) Mark (MIDDLE)
2.	Other Names Used (Maiden, Etc.): None
3.	Do you have a Social Security Number (SSN) issued by the US Social Security Administration? Yes No If yes, please provide your SSN:
	SOCIAL SECURITY NUMBER DISCLOSURE: As part of your application for an initial or renewal license, Federal and State laws require you to provide your Social Security Number (SSN) to the Oregon Liquor Control Commission (OLCC) for child support enforcement purposes (42 USC § 666(a)(13) & ORS 25.785). If you are an applicant or licensee and fail to provide your SSN, the OLCC may refuse to process your application. Your SSN will be used only for child support enforcement purposes unless you indicate below.
	Based on our authority under ORS 471,311 and OAR 845-005-0312(6), we are requesting your voluntary consent to use your SSN for the following administrative purposes only: to match your license application to your Alcohol Server Education records (where applicable), and to ensure your identity for criminal records checks. OLCC will not deny you any rights, benefits or privileges otherwise provided by law if you do not consent to use of your SSN for these administrative purposes (5 USC§ 552(a).
	Do you voluntarily consent to the OLCC's use of your SSN as just described? Yes \(\sum \consent\) No
4.	Date of Birth (MM/DD/YYYY):c
8.	Residence Address:
	Mailing Address (if different): Search Completed IAN 3 1 2018
	E-Mail (optional): mark @ stinnocentuine. 20m
	Do you have a spouse or domestic partner? AYes \(\text{No}\) No Vickianne \(\text{P.INITIALS}: \) If yes, list his/her full name:
	If yes to #11, will this person be involved in the management of, or have control over the business? ☐ No ☑ Yes
13.	In the past 10 years, have you been <u>convicted</u> ("convicted" includes paying a fine) in Oregon or another U.S. state of driving a car with a suspended driver license or driving a car with no insurance? No
	In the past 10 years, have you been <u>convicted</u> ("convicted" includes paying a fine) in Oregon or another U.S. state of a <u>FELONY?</u> No Pyes (Please include explanation below) Unsure (Please include explanation below)
	Have you ever been in a drug or alcohol <u>diversion program</u> in Oregon or another U.S. state? A diversion program is where you are required, usually by the court or another government agency, to complete certain requirements in place of being convicted of a drug or alcohol-related offense. No Pes (Please include explanation below) Unsure (Please include explanation below)

16. Do you, or any legal entity that you are a part of, <u>currently hold</u> or <u>have previously held</u> a liquor license or a recreational marijuana license in Oregon or another U.S. state? (Note: alcohol service permits and marijuana					
worker permits are not liquor licenses).	outh service beruits and manificana				
No X Yes (Please include evolunation below) Unsure (Please i	include explanation below)				
St. Innocent Winery OR-60-389 - stock	cholder President, Board of				
Directors	r.				
17. Have you, or any legal entity that you are a part of, ever had an application	on for a license, permit, or certificate				
denied or cancelled by the OLCC or any other governmental agency in the	. , = . ,				
☑No ☐Yes (Please include explanation below) ☐ Unsure (Please in					
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	ne e estato				
18. Are you applying for a Full On-Premises, Limited On-Premises, Off-Premises, or Br	rewery-Public House license?				
No Please skip questions 19 & 20. Go directly to question 21.					
Yes Please answer questions 19, 20, and 21.					
19. Do you or will you have any ownership interest in a business that manufactures, w	vholesales, or distributes alcohol in Oregon or				
another U.S. state?					
No Yes (Please include explanation below) Unsure (Please in	clude explanation below)				
	and the second of the second o				
20. Does or will an alcohol manufacturer, wholesaler, or distributor in Oregon	or another U.S. state have any				
ownership interest in your business? No Dyes (Please include explanation below) Dunsure (Please in					
No L Yes (Please include explanation below) L Unsure (Please in	iciude explanation below)				
4					
21. Do you currently have, or will you have, any ownership interest in any busi	many in Opening within Sull On Beamings				
Limited On-Premises, Off-Premises, or Brewery-Public House license?	mess in Oregon with a run on-kremises,				
₩o □Yes (Please include explanation below) □Unsure (Please in	clude explanation below)				
	į				
You must sign your own form. Another person, like your attorney or a person					
your form. I affirm that my answers are true and complete. I understand the (
check my records, including but not limited to, criminal history. I understand t	hat if my answers are not true and				
complete, the OLCC may deny my license application. Name: (LAST) (FIRST)	(MIDDLE)				
Name: (LAST) Vlossak Mark	(44.5-2)				
Signature:	Date: 1 25/18				
7 LW07	1162110				

	. Name: (LAST) Perry III (FIRST) Walter	(MIDDLE)
	Other Names Used (Maiden, Etc.):	
3.	. Do you have a Social Security Number (SSN) issued by the U.S. Social Securit	y Administration?
	Yes No If yes, please provide your SSN:	
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	Server Education records (where applicable), and to ensure your identity for	
	not deny you any rights, benefits or privileges otherwise provided by law if	you do not consent to use or your
	SSN for these administrative purposes (5 USC§ 552(a).	
	Do you voluntarily consent to the OLCC's use of your SSN as just described?	Yes No
	a de la companya de	•
, , , , , , , , , , , , , , , , , , ,	Date of Birth (MM/DD/YYYY):	
4.	Date of Birth (MM/Dio/:TTT):	
		7. State:
8.	Residence Address:	OSPIDMV
		COI I LO INI W
- A	A.A. SHOW - A.M. Charles - 1950 Charles - 1950	Search Completed
9.	Mailing Address (if different):	·
		IAN 3 1 2018
10.	E-Mail (optional);	JANITUA EUTO
	Do you have a spouse or domestic partner? Yes No	*
4.		INITIALS: (MILE)
	If yes, list his/her full name: Christine A. Chuto	,
12.	If yes to #11, will this person be involved in the management of, or have con	trol over the business?
	TRACE TO THE PARTY OF THE PARTY	
	⊠ No ☐Yes	
13.		fine) in Oregon or another ILS, state
13.	In the past 10 years, have you been convicted ("convicted" includes paying a	
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16.	6. Do you, or any legal entity that you are a part of, <u>currently hold</u> or <u>have previously held</u> a liquor license or a					
	recreational marijuana license in Oregon or another U.S. state? (Note: alcohol service permits and marijuana worker permits are not liquor licenses).					
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		and the second of the second o	and the second second			
		, or any legal entity that you are a part of, e				
		cancelled by the OLCC or any other govern				
į	No	Yes (Please include explanation below)	"L. Unsure (Please inclu	ide explanation below)		
	,					
		•		<u>√</u>		
18.	Are you ap	plying for a Full On-Premises, Limited On-Premises.	ses, Off-Premises, or Brew	ery-Public House license?		
	No Ple	ase skip questions 19 & 20. Go directly to quest	ion 21.			
	Yes Ple	ase answer guestions 19, 20, and 21.				
7.2		- The second	 			
	Do you or v another U.	vill you have any ownership interest in a busines	s that manufactures, who	desales, or distributes alcohol in Oregon or		
		Yes (Please include explanation below)	Tilinsure (Please incli	ide explanation below)		
	<u></u>	The triangle inicial of Subjects (Subject to 1)	Elloudde fillegae more	and explanation belong		
		× .				
· · · · · · · · · · · · · · · · · · ·			<u></u>			
		ill an alcohol manufacturer, wholesaler, or o	listributor in Oregon or	another U.S. state have any		
		interest in your business?	TO LEAD TO LEA	1		
1	□No [Yes (Please include explanation below)	Unsure (Please inclu	ide explanation below)		
		•				
		•				
21.	Do you cu	rently have, or will you have, any ownershi	p interest in any busine	ss in Oregon with a Full On-Premises,		
1	Limited O	-Premises, Off-Premises, or Brewery-Public				
j	Mo I	Yes (Please include explanation below)	Unsure (Please inclu	ide explanation below)		
				,		
		¥		,		
		w.	a a			
:						
You	must sign	your own form. Another person, like your a	attorney or a person wi	th power of attorney, may not sign		
	170	ffirm that my answers are true and complet		The state of the s		
chec	k my reco	rds, including but not limited to, criminal hi				
complete, the OLCC may deny my license application.						
Nam	ie: (LAST) -	Perry H) (FIRST) Walt	er	(MIDDLE)		
Sign	ature:	Maritaro		Date: 1/25/2018		

	Administration of the second s
	Name: (LAST) MTLLER (FIRST) UTALTER (MIDDLE) ROBERTS
	Other Names Used (Maiden, Etc.): "RoB"
3.	Do you have a Social Security Number (SSN) issued by the U.S. Social Security Administration?
	Yes No. If yes, please provide your SSN:
	compar interest attendent properties of the security afficient adultation from the total attendent terms of Codomic
	SOCIAL SECURITY NUMBER DISCLOSURE: As part of your application for an initial or renewal license, Federal
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	Do you voluntarily consent to the OLCC's use of your SSN as just described? Yes No
	Do you voignitatily consent to the original use of your saw as just described? My res 27140
4.	Date of Birth (MM/DD/YYYY):
	Driver License or State ID #:
-	
	OSPIDIVIV
9.	Mailing Address (if different): Search Completed
10,	E-Mail (optional): JAN 3 1 2018
11.	Do you have a spouse or domestic partner? XYes \(\Bigcap\) No
	If yes, list his/her full name: SALLY NORTON MILLIERALS: (N)
12.	If yes to #11, will this person be involved in the management of, or have control over the business?
	⊠No □Yes
13.	In the past 10 years, have you been <u>convicted</u> ("convicted" includes paying a fine) in Oregon or another U.S. state
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	No Service (Please include explanation below) Service (Please include explanation below)
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16.	16. Do you, or any legal entity that you are a part of, <u>currently hold</u> or <u>have previously held</u> a liquor license or a					
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	worker permits are not liquor licenses).					
	⊠ No	Yes (Please include explanation below)	Unsure (Please include explanation below)			
			i			
17.	Have yo	ou, or any legal entity that you are a part of, e	ver had an application for a license, permit, or certificate			
		or cancelled by the OLCC or any other govern				
	ΧNο	Yes (Please include explanation below)	Unsure (Please Include explanation below)			
			ises, Off-Premises, or Brewery-Public House license?			
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	LIYes !	Please answer questions 19, 20, and 21.				
40	<u></u>					
19.		or will you have any ownership interest in a busine U.S. state?	ess that manufactures, wholesales, or distributes alcohol in Oregon or			
	□No	that to the first the second of the second o	☐Unsure (Please Include explanation below)			
	7		The state of the s			
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-	Ban 6	المراجع المراج	distributor in Oregon or another U.S. state have any			
ZŲ.		hip interest in your business?	distributor in Oragon of another p.s. state have any			
	□No		Unsure (Please include explanation below)			
	,—	Control of the second s				
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		•				
24	Davac	acceptable have growth the have good or said	nip interest in any business in Oregon with a Full On-Premises,			
		On-Premises, Off-Premises, or Brewery-Publ				
	⊠No		Unsure (Please include explanation below)			
	Paris	the first to the second	#			
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			rattorney or a person with power of attorney, may not sign etc. I understand the OLCC will use the above information to			
			history. I understand that if my answers are not true and			
		the OLCC may deny my license application.	ingskille transcerkitik nightritik migh kendik nan nan diak			
-	me: (LAS	والمناز والمنا	(MIDDLE)			
		MILLER WALT	TER ROBERTS			
Sig	nature:	I I To I Tan Do lan	TER ROBERTS Date: 1/25/18			

OREGON LIQUOR CONTROL COMMISSION

INDIVIDUAL HISTORY FORM

1,	Name: (LAST) CAGEBEET2	(FIRST)	POBERT	(MIDDLE)	SCOTT			
2,								
3.	3. Do you have a Social Security Number (SSN) issued by the U.S. Social Security Administration?							
	Yes No If yes, please provide your S	SN:						
	CORNAL SECURITY ALLIANCE DISCERCUES.	المتعادة الما	الغممال مستمالا مما	ing for an initial on to	marual licanes Endaral			
	SOCIAL SECURITY NUMBER DISCLOSURE: A and State laws require you to provide your							
	Commission (OLCC) for child support enfor		-		•			
·	applicant or licensee and fail to provide you							
	will be used only for child support enforcer				n a lé la company en en en en			
	, , , , , , , , , , , , , , , , , , , ,		,					
ŀ	Based on our authority under ORS 471.311							
	to use your SSN for the following administr		•					
	Server Education records (where applicable			· ·	and the second s			
	not deny you any rights, benefits or priviles SSN for these administrative purposes (5 U	7		by law it you do not	consent to use or your			
	25th for these adjunitations has beseed a	oca oorte	a.).					
	Do you voluntarily consent to the OLCC's us	e of your	SSN as just de	scribed? 🗌 Yes 📗]No			
				:				
4.	Date of Birth (MM/DD/YYYY):		i .					
-			i.					
9.	Tylaning Address th dinerently PO BOX		02 973	انيم	JAN 3 T KAIO			
10	E-Mail (optional):	VENUE	112	771				
	Do you have a spouse or domestic partner?	Yes	No	INITI	ALS: (NA)			
	If yes, list his/her full name: CAPPI	E E.	LARSEN	CASEBEER INIT	, in the second			
12.	ti les to utri min tins heisont ne mixonen m	the mana	gement of, or	have control over the	e business?			
	☑No ☐Yes							
13.	In the past 10 years, have you been convicted				gon or another U.S. state			
	of driving a car with a suspended driver lice No Yes (Please include explanation				tion balasid			
	txivo — tes (Please illerude explanation	Delow)	ET ouzare (Si	ease include explana	nou nelow)			
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4:4	E 31	-C736		Contract Con	one acceptant of a			
	In the past 10 years, have you been convicte of a FELONY?	a (convi	ctea includes	baying a rine) in Ore	Bou of another 0.2. state			
	No Yes (Please include explanation I	helow) :	Ulnsure (Ph	ease înclude evolanat	Inn helow!			
,	Min During Harring marine Exhautiments		Eligible (Liv	case melade explains	ion below _f			
2.								
15.	Have you ever been in a drug or alcohol dive	rsion pro	gram in Orego	on or another U.S. sta	te? A diversion program			
	is where you are required, usually by the cou			ent agency, to comple	ete certain requirements			
	in place of being convicted of a drug or alcoh							
	$\overline{\Delta}$ No $\overline{\Box}$ Yes (Please include explanation i	pelow)	∐Unsure (Pl	ease include explanat	ion below)			
					•			
	*							

16. Do you, or any legal entity that you are a part of, <u>currently hold</u> or <u>have previously held</u> a liquor license or a recreational marijuana license in Oregon or another U.S. state? (Note: alcohol service permits and marijuana					
worker permits are not liquor licenses).	100,520 vice perintes and maisfaura				
No Yes (Please include explanation below) Unsure (Please inc	lude explanation below)				
Tito in tease in tease in the second in the					
17. Have you, or any legal entity that you are a part of, ever had an application					
denied or cancelled by the OLCC or any other governmental agency in the U					
🔲 🖾 No 🔲 Yes (Please include explanation below) 🔲 Unsure (Please inc	lude explanation below)				
18. Are you applying for a Full On-Premises, Limited On-Premises, Off-Premises, or Bre-	wery-Public House license?				
No Please skip questions 19 & 20. Go directly to question 21.	(tell) salie (losses)				
Yes Please answer questions 19, 20, and 21.					
19. Do you or will you have any ownership interest in a business that manufactures, wh	olesales, or distributes alcohol in Oregon or				
another U.S. state?	, ,				
No Yes (Please include explanation below) Unsure (Please incl	lude explanation below)				
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	·				
20. Does or will an alcohol manufacturer, wholesaler, or distributor in Oregon o	ranother IIS state have any				
ownership interest in your business?	r another old state have any				
No Tyes (Please include explanation below) Tunsure (Please include)	lude explanation below)				
Entry Entry (children in the control of the control	add gaptangnon pangiry				
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,					
21. Do you currently have, or will you have, any ownership interest in any busin	ess in Oregon with a Full On-Premises,				
Limited On-Premises, Off-Premises, or Brewery-Public House license?					
No Yes (Please include explanation below) Unsure (Please incl	ude explanation below)				
Maria de Mar	And the second of the property of the second				
You must sign your own form. Another person, like your attorney or a person w your form. I affirm that my answers are true and complete. I understand the Ol	Ttn power of attorney, may not sign				
check my records, including but not limited to, criminal history. Tunderstand the					
complete, the OLCC may deny my license application.	aciii iiiy answeis are nocui qe anq				
Name: (LAST)	(MIDDLE)				
CHEREL FOREST	>601				
Signature: 0 - 0	Date: 11-0110				
John Malle	12019				

1.	Name: (LAST) Bischoff		Robert	(MIDDLE) Eric				
2.					,			
3.	3. Do you have a Social Security Number (SSN) issued by the U.S. Social Security Administration?							
	Yes No If yes, please provide	your SSN:			8			
1		1						
	SOCIAL SECURITY NUMBER DISCLOS	-						
	and State laws require you to provide							
	Commission (OLCC) for child support							
	applicant or licensee and fail to provi				ion. Your SSN			
	will be used only for child support en	forcement pu	rposes unless you indicat	e below.	and the same of			
	Based on our authority under ORS 47	1 211 and 014	D 04E ODE 0247/6\ wa a	ro roquesting vous V	aluntaru caracant			
ľ	to use your SSN for the following adn							
	Server Education records (where app	•						
	not deny you any rights, benefits or r							
	SSN for these administrative purpose			And the tree courseint t	o asc of Your			
	paid tol ruitae annumentative bathoat	3 (5 0568,552	Na).					
	Do you voluntarily consent to the OLC	C's use of you	r SSN as just described?	¥ Yes □ No				
	· ` `							
	Date of Birth (MM/DD/YYYY):	<i>r</i>	5. Contact Phone:					
	Driver License or State ID #			7. State: CA				
8.	Residence Address:			OSP/	DMV			
				Search C				
9.	Mailing Address (if different):	•		Ocaron o				
	PO Box 59037, San Jose, CA 95159			IAN-3	1 2018			
	E-Mail (optional): simpkin.1340@gmail							
11.			□No	akamiki či	(my)			
ند ته	If yes, list his/her full name: Nejat S Al			INITIALS:				
12.	If yes to #11, will this person be involv No	ed in the man	lagement of, or have cont	rol over the business	;? 			
13.	In the past 10 years, have you been co		, · · · -	-	other U.S. state			
	of driving a car with a suspended drive							
	🖾 No 💹 Yes (Pléase include explan	ation below)	Unsure (Please inclu	de explanation belov	v)			
	•							
	•							
14.	In the past 10 years, have you been co	nvicted ("con	victed" includes paying a l	fine) in Oregon or an	other U.S. state			
	of a FELONY?	-			·			
	🗵 No 🔲 Yes (Please include explana	ition below)	☐ Unsure (Please includ	de explanation below	<i>r</i>)			
		• • • • •	,	• • • • • • • • • • • • • • • • • • • •				
		*						
15.	Have you ever been in a drug or alcoho	diversion pr	ogram in Oregon or anoti	her U.S. state? A div	ersion program			
	is where you are required, usually by th							
	In place of being convicted of a drug or	alcohol-relate	ed offense.		,			
	X No ☐ Yes (Please include explanation)			de explanation below	i)			
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			- <u> </u>		`.			

16. Do you, or any legal entity that you are a part of, <u>currently hold</u> or <u>have previously held</u> a liquor license or a recreational marijuana license in Oregon or another U.S. state? (Note: alcohol service permits and marijuana				
worker permits are not liquor licenses). No X Yes (Please include explanation below) Unsure (Please inc	clude explanation below)			
Beer Import Company, Union, NJ - company sold ~12 years ago				
Wolf River Brewing, Paso Robles, CA - silent investor - license returned 2017	•			
17. Have you, or any legal entity that you are a part of, ever had an application				
denied or cancelled by the OLCC or any other governmental agency in the L No □Yes (Please include explanation below) □ Unsure (Please inc	to the state of th			
18. Are you applying for a Full On-Premises, Limited On-Premises, Off-Premises, or Bre	wery-Public House license?			
No Please skip questions 19 & 20. Go directly to question 21.	TOTAL			
Yes Please answer questions 19, 20, and 21.				
19. Do you or will you have any ownership interest in a business that manufactures, wh	olesales, or distributes alcohol in Oregon or			
another U.S. state? No Yes (Please include explanation below) Unsure (Please include)	lude explanation below)			
English Englished trease memore appared a selection of the selection of th	add explanation below?			
	·			
20. Does or will an alcohol manufacturer, wholesaler, or distributor in Oregon o	r another U.S. state have any			
ownership interest in your business? No Yes (Please include explanation below) Unsure (Please include)	lude explanation below)			
21. Do you currently have, or will you have, any ownership interest in any busin	ess in Oregon with a Full On Promises			
Limited On-Premises, Off-Premises, or Brewery-Public House license?				
☑No ☑Yes (Please include explanation below) ☑Unsure (Please incl	ude explanation below)			
You must sign your own form. Another person, like your attorney or a person with power of attorney, may not sign				
your form. I affirm that my answers are true and complete. I understand the OLCC will use the above information to check my records, including but not limited to, criminal history, I understand that if my answers are not true and				
complete, the OLCC may deny my license application.				
Name: (LAST) (F(RST) . Bischoff Robert	(MIDDLE) Eric			
Signature:	Date:			
The Much	01/17/2017			



Please Print or Type		
Applicant Name:	St. Innocent, Ltd. St. Innocent Winery	Phone: 503-378-1526
Trade Name (dba):	St. Innocent Winery	
Business Location A	ddress: 10052 Enchanted W	· · · · · · · · · · · · · · · · · · ·
City: SAF I		ZIP Code: 47352
DAYS AND HOURS	OF OPERATION	
Business Hours:	Outdoor Area Hours:	The outdoor area is used for:
Sundayto	Sundayto	☐ Food service Hours:to
Mondayto_ Tuesdayto_	Monday to Tuesday to	
Wednesdayto	Wednesday to	Enclosed, how
Thursdayto	Thursday to to	The exterior area is adequately viewed and/or supervised by Service Permittees.
	Saturdayto	k
ENTERTAINMENT Live Music Recorded Music DJ Music Dancing Nude Entertainers	Check all that apply: Nene	AYS & HOURS OF LIVE OR DJ MUSIC None Sunday to
SEATING COUNT		
Restaurant:	Oútdóor:	OLCC USE ONLY Investigator Verified Seating:(Y)(N)
Lounge:	Other (explain):	Investigator initials:
Banquet:	Total Seating:	Date:
Tunderstand if my ansy	vers are not type and complete, the OLCC	may deny my license application.
Applicant Signature		Date: 1/24/18

1-800-452-OLCC (6522) www.oregon.gov/olcc



OREGON LIQUOR CONTROL COMMISSION

FLOOR PLAN

- Your floor plan must be submitted on this form.
- Use a separate Floor Plan Form for each level or floor of the building.
- The floor plan(s) must show the specific areas of your premises (e.g. dining area, bar, lounge, dance floor, video lottery room, kitchen, restrooms, outside patio and sidewalk cafe areas.)
- Include all tables and chairs (see example on back of this form). Include dimensions for each table if you are applying for a Full On-Premises Sales license.

	Barre	Room	
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	30.	Blacktop latio	r** 1
#2 of 2	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	55 ⁷	•
Applicant Name	Innocent Winers	1 . 4 /	OLCC USE ONLY
Trade Name (dba):		- I TITO	7-/8 Initials; (1)

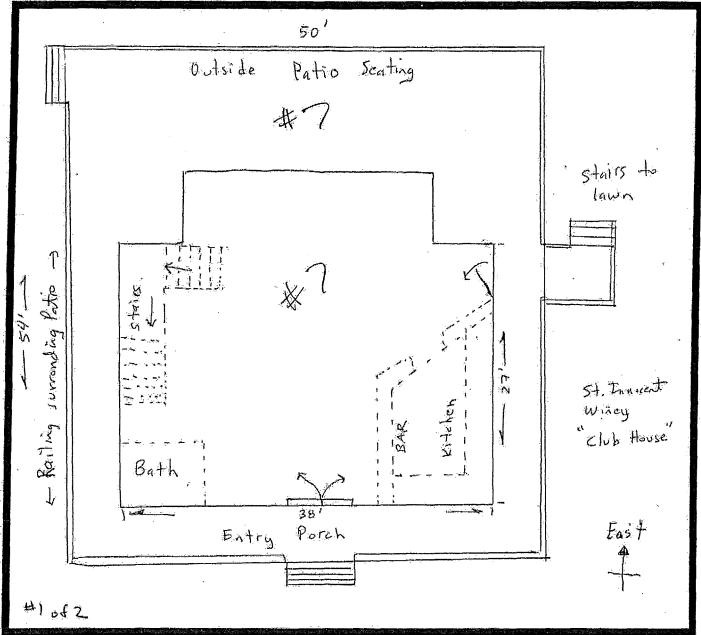
City and ZIP Code



OREGON LIQUOR CONTROL COMMISSION

FLOOR PLAN

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- include all tables and chairs (see example on back of this form). Include dimensions for each table if you are applying for a Full On-Premises Sales license.



Applicant Name	
St. Innocent Winery	#7 entire premises
Trade Name (dba):	•
Jefferson, 97352	Date:Initials:

City and ZIP Code