

## Temporary Liquor License

226 S. 5<sup>th</sup> Street, Klamath Falls, Oregon 97601 (541) 883-4950

www.KlamathFalls.city businesslicense@klamathfalls.city

## Legible Print or Type Business Information

Business injernation		
Business Name:		
Business Address:		
Business Phone Number:	¹Business License #:	
Owner Name/Alcohol Manager:		
Owner/Manager Phone #:		
Primary Email Address:		
<sup>1</sup> All Temporary/Special Evo	ent License Requests require a current City Business License.	
A minimum of two weeks is required to process all Temporary/Special Event licenses.  Temporary License/Special Event Details		
Date(s) <sup>2</sup> :	Time of Event:	
Event Name:		
Event Address:		
Will alcohol be served outdoors? ☐ Yes ☐ No	If yes, a site plan and additional event information is required, regardless of OLCC exemptions. <sup>3</sup>	
	<sup>2</sup> up to seven days total and must be at the same location <sup>3</sup> City Requirement	
Required Submittals  ☐ \$35.00 Temporary License Fee  ☐ Completed copy of the OLCC Temporary/Special Event Liquor License Application  ☐ Site Plan, if event outdoors		
Owner/Alcohol Manager Signature	Date	
Print Name		



## CITY OF KLAMATH FALLS DEVELOPMENT SERVICES DEPARTMENT

 $226 \text{ S. } 5^{\text{th}}$  Street, Klamath Falls, OR  $97601 - (541)\ 883-4950$ 

City Use Only		
Received by:	Fe	ees Due:
Date Received:	D	Pate Fees Paid:
City Recommendation		
☐ Grant/Acknowledge Date:		☐ Denial⁴ Date:
City Staff Signature:		
Printed Staff Name:		Staff Title:
Staff Phone:	Staff Email:	
Recommendation sent to Applicant <sup>5</sup> on:		

<sup>4</sup>If Denial recommendation, a written explanation will be included. <sup>5</sup>All license actions will be sent to Applicant and it is the applicant's responsibility to submit the City's recommendation to the OLCC.