

**MEMORANDUM**

TO: Mayor and City Council

FROM: Richard Meyers, City Manager

SUBJECT: NEW OFF-PREMISES LIQUOR LICENSE FOR FAMILY DOLLAR  
STORE # 33009, 1137 HWY 99 NORTH

DATE: May 4, 2022

Background

Staff received the attached liquor license application for an Off-Premises Liquor License for Family Dollar Store #33009, 1137 HWY 99 North. The Police Department has completed the necessary background investigation with no derogatory information noted.

Recommendation

It is staff's recommendation that Council forward a favorable recommendation to the OLCC.

Cost

Staff time required to process the application.

  
Richard Meyers, City Manager

FEB 28 2022

OLCC - Eugene



OREGON LIQUOR CONTROL COMMISSION

**LIQUOR LICENSE APPLICATION**

1. Application. **Do not include** any OLCC fees with your application packet (the license fee will be collected at a later time). Application is being made for:

<p><b>License Applied For:</b></p> <input type="checkbox"/> Brewery 1 <sup>st</sup> Location Brewery Additional location (2 <sup>nd</sup> ) <input type="checkbox"/> (3 <sup>rd</sup> ) <input type="checkbox"/> <input type="checkbox"/> Brewery-Public House (BPH) 1 <sup>st</sup> location BPH Additional location (2 <sup>nd</sup> ) <input type="checkbox"/> (3 <sup>rd</sup> ) <input type="checkbox"/> <input type="checkbox"/> Distillery <input type="checkbox"/> Full On-Premises, Commercial <input type="checkbox"/> Full On-Premises, Caterer <input type="checkbox"/> Full On-Premises, Passenger Carrier <input type="checkbox"/> Full On-Premises, Other Public Location <input type="checkbox"/> Full On-Premises, For Profit Private Club <input type="checkbox"/> Full On-Premises, Nonprofit Private Club <input type="checkbox"/> Grower Sales Privilege (GSP) 1 <sup>st</sup> location GSP Additional location (2 <sup>nd</sup> ) <input type="checkbox"/> (3 <sup>rd</sup> ) <input type="checkbox"/> <input type="checkbox"/> Limited On-Premises <input checked="" type="checkbox"/> Off-Premises <input type="checkbox"/> Warehouse <input type="checkbox"/> Wholesale Malt Beverage & Wine <input type="checkbox"/> Winery 1 <sup>st</sup> Location Winery Additional location (2 <sup>nd</sup> ) <input type="checkbox"/> (3 <sup>rd</sup> ) <input type="checkbox"/> (4 <sup>th</sup> ) <input type="checkbox"/> (5 <sup>th</sup> ) <input type="checkbox"/>	<p><b>CITY AND COUNTY USE ONLY</b>                  Received</p> <p>Date application received and/or date stamp:  <b>APR 19 2022</b></p> <p>Name of City or County: City of Cottage Grove                  City Manager's Office</p> <p>Recommends this license be:  <input type="checkbox"/> Granted <input type="checkbox"/> Denied</p> <p>By: _____                  Date: _____</p> <hr/> <p><b>OLCC USE ONLY</b></p> <p>Date application received: <u>2/14/22</u>                  Date application accepted: <u>2/14/22</u></p> <hr/> <p>License Action(s): <u>N/O &amp; C/E</u></p>
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2. Identify the applicant(s) applying for the license(s). **ENTITY (example: corporation or LLC) or INDIVIDUAL(S)<sup>1</sup>** applying for the license(s):

Family Dollar, Inc.

App #1: NAME OF ENTITY OR INDIVIDUAL APPLICANT

App #2: NAME OF ENTITY OR INDIVIDUAL APPLICANT

App #3: NAME OF ENTITY OR INDIVIDUAL APPLICANT

App #4: NAME OF ENTITY OR INDIVIDUAL APPLICANT

<p><b>3. Trade Name of the Business (Name Customers Will See)</b>                  Family Dollar Store #33009</p>		
<p><b>4. Business Address (Number and Street Address of the Location that will have the liquor license)</b>                  1137 Highway 99 North</p>		
<p>City Cottage Grove</p>	<p>County Lane</p>	<p>Zip Code 97424</p>

<sup>1</sup> **Read the instructions on page 1 carefully.** If an entity is applying for the license, list the name of the entity as an applicant. If an individual is applying as a sole proprietor (no entity), list the individual as an applicant.



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

5. Trade Name of the Business (Name Customers Will See) Family Dollar Store #33009			
6. Does the business address currently have an OLCC liquor license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
7. Does the business address currently have an OLCC marijuana license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your license certificate, renewal application and other mailings as described in <a href="#">OAR 845-004-0065[1]</a> .) Attn: Alcohol/Tobacco Team (9th Floor), 500 Volvo Pkwy,			
City Chesapeake	State VA	Zip Code 23320	
9. Phone Number of the Business Location <del>757-324-5000</del> 541-649-6036		10. Email Contact for this Application and for the Business ab-licensing@dollartree.com/ jgill@taylorenghlish.com	
11. Contact Person for this Application Justin Gill		Phone Number 678-336-7239	
Contact Person's Mailing Address (if different) 1600 Parkwood Circle, Suite 200	City Atlanta	State GA	Zip Code 30339

Please note that liquor license applications are public records. A copy of the application will be posted on the OLCC website for a period of several weeks.

**ATTESTATION: \*\*READ CAREFULLY AND MAKE SURE YOU UNDERSTAND BEFORE SIGNING THIS FORM\*\***

I understand that marijuana is prohibited on the licensed premises. This includes marijuana use, consumption, ingestion, inhalation, samples, give-away, sale, etc. I attest that all answers on all forms and documents, and all information provided to the OLCC as a part of this application are true and complete.

I affirm that I have read [OAR 845-005-0311](#) and all individuals (sole proprietors) or entities with an ownership interest (other than waivable ownership interest per [OAR 845-005-0311\[6\]](#)) are listed as license applicants in #2 above. I understand that failure to list an individual or entity who has an unwaivable ownership interest in the business may result in denial of my license or the OLCC taking action against my license in the event that an undisclosed ownership interest is discovered after license issuance.

Applicant(s) Signature

- Each individual (sole proprietor) listed as an applicant must sign the application below.
- If an applicant is an entity, such as a corporation or LLC, at least one **INDIVIDUAL who is authorized to sign for the entity** must sign the application.
- An individual with the authority to sign on behalf of the applicant (such as the applicant's attorney or an individual with power of attorney) may sign the application. If an individual other than an applicant signs the application, please provide written proof of signature authority. Attorneys signing on behalf of applicants may list the state of bar licensure and bar number in lieu of written proof of authority from an applicant. **Applicants are still responsible for all information on this form.**

Harry Spencer  
App. #1: (PRINT NAME)

App. #1: (SIGNATURE)

01/19/2022  
App. #1: Signature Date

N/A  
Atty. Bar Information (if applicable)

App. #2: (PRINT NAME)

App. #2: (SIGNATURE)

App. #2: Signature Date

Atty. Bar Information (if applicable)

App. #3: (PRINT NAME)

App. #3: (SIGNATURE)

App. #3: Signature Date

Atty. Bar Information (if applicable)

App. #4: (PRINT NAME)

App. #4: (SIGNATURE)

App. #4: Signature Date

Atty. Bar Information (if applicable)



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Family Dollar, Inc

Phone: 541-649-6036
757-321-5000

Trade Name (dba): Family Dollar Store #33009

Business Location Address: 1137 Highway 99 North

City: Cottage Grove

ZIP Code: 97424

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 8:00 am to 9:00 PM
Monday 8:00 am to 9:00 PM
Tuesday 8:00 am to 9:00 PM
Wednesday 8:00 am to 9:00 PM
Thursday 8:00 am to 9:00 PM
Friday 8:00 am to 9:00 PM
Saturday 8:00 am to 9:00 PM

Outdoor Area Hours:

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

The outdoor area is used for:

- Food service Hours: N/A to N/A
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:

ENTERTAINMENT

Check all that apply:

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

DAYS & HOURS OF LIVE OR DJ MUSIC

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

SEATING COUNT

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: Date: 01/19/22

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