



HERMISTON POLICE DEPARTMENT



330 S. First Street
Hermiston, Oregon 97838
www.hermiston.or.us/police/home
Sine Metu Sine Gratia

Phone: 541-567-5519
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Email: records@hermiston.or.us
Without Fear Without Favor

TO: City Manager Byron Smith
FROM: Chief Jason Edmiston 
DATE: March 8th, 2024
SUBJECT: Liquor License Application – Mainstreet Keg & Kork

After review of the liquor license application for Mainstreet Keg & Kork located at 395 E Main Street, Hermiston, I find nothing of substance after performing a criminal history check consistent with established parameters utilized by the city, to deny the application submitted by Paulette Dufloth, Daren Dufloth, Amy Smith, Slade Smith, Trevor Wiley, and Preslee Dufloth.

It is my recommendation this information/request be presented to the City Council.

CC: City Recorder Lilly Alarcon-Strong

LIQUOR LICENSE APPLICATION

Page 1 of 4

Check the appropriate license request option:

New Outlet | Change of Ownership | Greater Privilege | Additional Privilege

Select the license type you are applying for.

More information about all license types is available [online](#).

Full On-Premises

- Commercial
- Caterer
- Public Passenger Carrier
- Other Public Location
- For Profit Private Club
- Nonprofit Private Club

Winery

- Primary location
- Additional locations: 2nd 3rd 4th 5th

Brewery

- Primary location
- Additional locations: 2nd 3rd

Brewery-Public House

- Primary location
- Additional locations: 2nd 3rd

Grower Sales Privilege

- Primary location
- Additional locations: 2nd 3rd

Distillery

- Primary location
- Additional tasting locations: (Use the DISTT form [HERE](#))

Limited On-Premises

- Off Premises
- Warehouse
- Wholesale Malt Beverage and Wine

LOCAL GOVERNMENT USE ONLY

LOCAL GOVERNMENT
After providing your recommendation, return this form to the applicant **WITH** the recommendation marked below

Name of City **OR** County (not both)

City of Hermiston
Please make sure the name of the Local Government is printed legibly or stamped below

Date application received: *03-08-2024*

Optional: Date Stamp Received Below

- Recommend this license be granted
- Recommend this license be denied
- No Recommendation/Neutral

Printed Name

Date

Signature

Mainstreet Keg & Kork

Trade Name

LIQUOR LICENSE APPLICATION

Page 2 of 4

APPLICANT INFORMATION	
Identify the applicants applying for the license. This is the entity (example: corporation or LLC) or individual(s) applying for the license. Please add an additional page if more space is needed.	
Name of entity or individual applicant #1: 2xbrew LLC	Name of entity or individual applicant #2:
Name of entity or individual applicant #3:	Name of entity or individual applicant #4:

BUSINESS INFORMATION		
Trade Name of the Business (name customers will see): Mainstreet Keg & Kork		
Premises street address (The physical location of the business and where the liquor license will be posted): 395 E Main Street		
City: Hermiston	Zip Code: 97838	County: Umatilla
Business phone number: 541	Business email: 2xbrewllc@gmail.com	
Business mailing address (where we will send any items by mail as described in <u>OAR 845-004-0065[1]</u>): 395 E Main Street		
City: Hermiston	State: OR	Zip Code: 97838
Does the business address currently have an OLCC liquor license? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Does the business address currently have an OLCC marijuana license? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

APPLICATION CONTACT INFORMATION – Provide the point of contact for this application. If this individual is <u>not</u> an applicant or licensee, the Authorized Representative Form must be completed and submitted with this application.	
Application Contact Name: Paulette Dufloth	
Phone number: 5415715445	Email: paulette.dufloth@gmail.com

LIQUOR LICENSE APPLICATION

Mainstreet Keg & Kork

Page 4 of 4

Applicant Signature(s): Each individual listed in the applicant information box on page 2 (entity or individuals applying for the license) must sign the application.

If an applicant listed in the applicant information box on page 2 is an entity (such as a corporation or limited liability company), at least one member or officer of the entity must sign the application.

• Each applicant listed in the "Application Information" section of this form has read and understands OLCC 845-006-0362 and attests that:

1. Upon licensure, each licensee is responsible for the conduct of others on the licensed premises, including in outdoor areas.
2. The licensed premises will be controlled to promote public safety and prevent problems and violations, with particular emphasis on preventing minors from obtaining or consuming alcoholic beverages, preventing over-service of alcoholic beverages, preventing open containers of alcoholic beverages from leaving the licensed premises unless allowed by OLCC rules, and preventing noisy, disorderly, and unlawful activity on the licensed premises.

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.

<u>Amy Smith</u> Applicant name	<u>Amy Smith</u> Signature	<u>2-28-2024</u> Date
<u>Slade S. Smith</u> Applicant name	<u>[Signature]</u> Signature	<u>2-28-24</u> Date
<u>PAULETTE DUFFOTH</u> Applicant name	<u>[Signature]</u> Signature	<u>2-29-24</u> Date
<u>Dacen Duffoth</u> Applicant name	<u>[Signature]</u> Signature	<u>2/29/24</u> Date
<u>Preslee Duffoth</u> Applicant name	<u>Preslee Duffoth</u> Signature	<u>2/29/24</u> Date
<u>Trevor Wiley</u> Applicant name	<u>Trevor Wiley</u> Signature	<u>2-29-24</u> Date

Applicant/Licensee Representative(s): If you would like to designate a person/entity to act on your behalf you must complete the Authorized Representative Form. You may submit the form with the application or anytime thereafter. The form must be received by the OLCC before the representative can receive or submit information for the applicant.

Please note that applicants/licensees are responsible for all information provided, even if an authorized representative submits additional forms on behalf of the applicant.



OREGON LIQUOR & CANNABIS COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: 2xbrew LLC Phone: 541 5715445

Trade Name (dba): Mainstreet Keg & Kork

Business Location Address: 395 E Main Street

City: Hermiston ZIP Code: 97838

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 8am to 9pm
 Monday 5am to 9pm
 Tuesday 5am to 9pm
 Wednesday 5am to 9pm
 Thursday 5am to 9pm
 Friday 5am to 10pm
 Saturday 8am to 10pm

Outdoor Area Hours:

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

The outdoor area is used for:

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: winter hours would be shorter/summer hours would be longer.

change of hours will depend of the need of the business *coffee hrs will be early am to afternoon - keg & kork hrs will be late am to 9or 10pm

ENTERTAINMENT

Check ALL that apply:

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

DAYS & HOURS OF LIVE OR DJ MUSIC

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

*Minor Entertainers in an area prohibited to minors need prior approval from the OLCC

SEATING COUNT

Restaurant: _____ Outdoor: _____ Lounge: _____
 Banquet: _____ Other (explain): 70 Same Space Total Seating: 70

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: 2/29/24

www.oregon.gov/olcc

