



OREGON LIQUOR & CANNABIS COMMISSION

Local Government Recommendation – Liquor License

Annual Liquor License Types

Off-Premises Sales	Brewery-Public House
Limited On-Premises Sales	Brewery
Full On-Premises, Caterer	Distillery
Full On-Premises, Commercial	Grower Sales Privilege
Full On-Premises, For Profit Private Club	Winery
Full On-Premises, Non Profit Private Club	Wholesale Malt Beverage & Wine
Full On-Premises, Other Public Location	Warehouse
Full On-Premises, Public Passenger Carrier	

Section 1 – Submission – To be completed by Applicant:

License Information

Legal Entity/Individual Applicant Name(s): Candace Massari

Proposed Trade Name: Darkbloom Coffee Company

Premises Address: 86 E. Sherman St

Unit:

City: Lebanon

County: Linn

Zip: 97355

Application Type: ☐ New License Application ☐ Change of Ownership ☒ Change of Location

License Type: full on-premises, commercial ☐ Additional Location for an Existing License

Application Contact Information

Contact Name: Candace Massari

Phone: . . . . .

Mailing Address: . . . . .

City: Lebanon

State: OR

Zip: 97355

Email Address: c

Business Details

Please check all that apply to your proposed business operations at this location:

☐ Manufacturing/Production

☐ Retail Off-Premises Sales

☒ Retail On-Premises Sales & Consumption

If there will be On-Premises Consumption at this location:

☒ Indoor Consumption

☐ Outdoor Consumption

☐ Proposing to Allow Minors

Section 1 continued on next page



## Local Government Recommendation – Liquor License

### Section 1 Continued – Submission - To be completed by Applicant:

Legal Entity/Individual Applicant Name(s): Candace Massari

Proposed Trade Name: Darkbloom Coffee Company

**IMPORTANT:** You MUST submit this form to the local government PRIOR to submitting to OLCC.  
Section 2 must be completed **by the local government** for this form to be accepted with your CAMP application.

### Section 2 – Acceptance - To be completed by Local Government:

#### Local Government Recommendation Proof of Acceptance

After accepting this form, please return a copy to the applicant with received and accepted information

City or County Name: City of Lebanon

Optional Date Received Stamp

Date Application Received: October 23, 2025

Received by:

### Section 3 – Recommendation - To be completed by Local Government:

- ☐ Recommend this license be granted
- ☐ Recommend this license be denied (Please include documentation that meets [OAR 845-005-0308](#))
- ☐ No Recommendation/Neutral

Name of Reviewing Official:

Title:

Date:

Signature:

After providing your recommendation and signature, please return this form to the applicant.



# OREGON LIQUOR & CANNABIS COMMISSION

## FLOOR PLAN FORM

**Your floor plan must be submitted on this form**

Candace Massari

Applicant Name

Darkbloom Coffee Company

Trade Name (dba)

.....OLCC USE ONLY.....  
MINOR POSTING ASSIGNMENT(S)

Date: \_\_\_\_\_ Initials: \_\_\_\_\_