Washington State
Liquor and Cannabis Board

# NOTICE OF LIQUOR LICENSE APPLICATION

DRL

**WASHINGTON STATE LIQUOR AND CANNABIS BOARD**
License Division - 3000 Pacific, P.O. Box 43075
Olympia, WA 98504-3075
Customer Service: (360) 664-1600
Fax: (360) 753-2710
Website: http://lcb.wa.gov

DATE: 9/17/15

TO: CITY CLERK OF LONGVIEW

RE: NEW APPLICATION
UBI: 603-160-182-001-0002

License: 355551 - 1K County: 08
Tradename: THE TRIANGLE SPORTS PUB
Loc Addr: 934 WASHINGTON WAY
LONGVIEW WA 98632-4030

Mail Addr: 842 WASHINGTON WAY
LONGVIEW WA 98632-4093

Phone No. 360-442-4647 ROBERT DAVIS

APPLICANTS:

OFFICE 842 LLC

DAVIS, ROBERT EDWIN
1966-01-22
DAVIS, CINDY DEAUX
(Spouse) 1970-07-21
PUCCI, ERIC RUSSELL
1971-08-09
PUCCI, JOANNE
(Spouse) 1973-11-19

Privileges Applied For:
SPIRITS/BR/WN REST LOUNGE +

**As required by RCW 66.24.010(8),** the Liquor and Cannabis Board is notifying you that the above has applied for a liquor license. You have 20 days from the date of this notice to give your input on this application. If we do receive this notice back within 20 days, we will assume you have no objection to the issurance of the license. If you need additional time to respond, you must submit a written request for an extension of up to 20 days, with the reason(s) you need more time. If you **need information on SSN, contact our CHRI desk at (360) 664-1724.**

| | YES | NO |
|---|---|---|
| 1. Do you approve of applicant? | ☐ | ☐ |
| 2. Do you approve of location? | ☐ | ☐ |
| 3. If you disapprove and the Board contemplates issuing a license, do you wish to request an adjudicative hearing before final action is taken? (See WAC 314-09-010 for information about this process) | ☐ | ☐ |

4. If you disapprove, per RCW 66.24.010(8) you MUST attach a letter to the Board detailing the reason(s) for the objection and a statement of all facts on which your objection(s) are based.

DATE

SIGNATURE OF MAYOR,CITY MANAGER,COUNTY COMMISSIONERS OR DESIGNEE