



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

Application is being made for:

LICENSE TYPES

- Full On-Premises Sales (\$402.60/yr)
 - Commercial Establishment
 - Caterer
 - Passenger Carrier
 - Other Public Location
 - Private Club
- Limited On-Premises Sales (\$202.60/yr)
- Off-Premises Sales (\$100/yr)
 - with Fuel Pumps
- Brewery Public House (\$252.60)
- Winery (\$250/yr)
- Other: _____

ACTIONS

- Change Ownership
- New Outlet
- Greater Privilege
- Additional Privilege
- Other 2ND LOCATION

CITY AND COUNTY USE ONLY

Date application received: _____

The City Council or County Commission:

(name of city or county)

recommends that this license be:

Granted Denied

By: _____
(signature) (date)

Name: _____

Title: _____

OLCC USE ONLY

Application Rec'd by: CAO

Date: 3/04/14

90-day authority: Yes No

Rec'd by Portland

Liquor Licenses

1. Entity or Individuals applying for the license: [See SECTION 1 of the Guide]

① Justin Scott Wafer VDP LLC ③ MAR 07 2014

② _____ ④ PD 100.00
Cash

2. Trade Name (dba): VDP LLC

3. Business Location: 2425 SE 35th Place Portland, OR 97214 S 3840 SE 149th Portland
(number, street, rural route) (city) (county) (state) (ZIP code)
OR 97214

4. Business Mailing Address: 3840 SE 149th Ave Portland, OR 97236
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: (541) 968-6322
(phone) (fax)

6. Is the business at this location currently licensed by OLCC? Yes No

7. If yes to whom: Southeast Wine Collective Type of License: Winery

8. Former Business Name: _____

9. Will you have a manager? Yes No Name: _____
(manager must fill out an Individual History form)

10. What is the local governing body where your business is located? Multnomah (Portland)
(name of city or county)

11. Contact person for this application: Justin Wafer (541) 968-6322
(name) (phone number(s))
3840 SE 149th Ave Portland, OR 97236 N/A justin.wafer@gmail.com
(address) (fax number) (e-mail address)

I understand that if my answers are not true and complete, the OLCC may deny my license application.

Applicant(s) Signature(s) and Date:

① [Signature] Date 3/3/2014 Date _____

② _____ Date _____ ④ _____ Date _____

HM



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: VDP LLC Phone: 541/968-6322

Trade Name (dba): VDP LLC

Business Location Address: 3840 SE 149th

City: Portland ZIP Code: 97236

DAYS AND HOURS OF OPERATION

Business Hours:	Outdoor Area Hours:	The outdoor area is used for:
Sunday _____ to _____	Sunday _____ to _____	<input type="checkbox"/> Food service Hours: _____ to _____
Monday _____ to _____	Monday _____ to _____	<input type="checkbox"/> Alcohol service Hours: _____ to _____
Tuesday _____ to _____	Tuesday _____ to _____	<input type="checkbox"/> Enclosed, how _____
Wednesday _____ to _____	Wednesday _____ to _____	The exterior area is adequately viewed and/or supervised by Service Permittees. _____ (Investigator's Initials)
Thursday _____ to _____	Thursday _____ to _____	
Friday _____ to _____	Friday _____ to _____	
Saturday _____ to _____	Saturday _____ to _____	

Seasonal Variations: Yes No If yes, explain: Neither serving public nor producing wine at this location. Office only.

ENTERTAINMENT

Check all that apply:

<input type="checkbox"/> Live Music	<input type="checkbox"/> Karaoke
<input type="checkbox"/> Recorded Music	<input type="checkbox"/> Coin-operated Games
<input type="checkbox"/> DJ Music	<input type="checkbox"/> Video Lottery Machines
<input type="checkbox"/> Dancing	<input type="checkbox"/> Social Gaming
<input type="checkbox"/> Nude Entertainers	<input type="checkbox"/> Pool Tables
	<input type="checkbox"/> 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: Joshi Wafar Date: 3/4/2014

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



Please Print or Type

LLC Name: VDP LLC Year Filed: 2013

Trade Name (dba): VDP LLC

Business Location Address: 3840 SE 149th Ave

City: Portland ZIP Code: 97236

List Members of LLC:

Percentage of Membership Interest:

1. Justin Wafer
(managing member)
2. _____
(members)
3. _____
4. _____
5. _____
6. _____

100

(Note: If any LLC member is another legal entity, that entity must also complete an LLC, Limited Partnership or Corporation Questionnaire. If the LLC has officers, please list them on a separate sheet of paper with their titles.)

Server Education Designee: Justin Wafer DOB: 03/21/1984

I understand that if my answers are not true and complete, the OLCC may deny my license application.

Signature: *Justin Wafer* managing member Date: 3/3/2014
(name) (title)

CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

Submit to: Theresa Marchetti, Office of Neighborhood Involvement, 1221 SW 4th Av, Ste 110, Portland, OR 97204
(503) 823-3092

City Endorsement Fees are payable at the beginning of the application process: New outlets are \$100.00. All others are \$75.00. Make checks payable to the City of Portland. You must include the OLCC Liquor Application form, *initialed by your OLCC License Investigator* and all OLCC Individual History forms. All blanks must be filled in. If the question does not apply, write "N/A" in the space. All persons who are anticipated to have a financial interest and key personnel must complete City of Portland Personal History forms. On New Outlet applications, property owners within 300 feet of the location, the Portland Police Bureau and all interested parties are notified by mail (with a copy of this form) and given an opportunity to comment on your application. The OLCC allows the City at least 45 days to complete the recommendation process. A City liquor endorsement is not a confirmation that the property is properly zoned. Call 823-7526 to confirm that the property is properly zoned.

Legal Name of Business: <u>VDP LLC</u>	
DBA or Trade Name: _____	Phone: <u>541 968-6322</u> Fax: _____
Business Address, including Zip Code <u>3840 SE 149th Ave Portland 97236</u>	
What type of liquor license are you applying for? (Change owner, new outlet, beer & wine, etc.) <u>Winery</u>	
Contact person: <u>Justin Wafer</u>	Contact phone: <u>541 968-6322</u> email: <u>justin.wafer@gmail.com</u>

Please note: New Outlet Package Stores may be subject to the Convenience Store Review process through the Planning Bureau. Call 823-7526 for applicable information, regulations and forms.

DESCRIPTION OF OUTLET:

Type of Operation: (Check all that apply) <input type="checkbox"/> Food Cart/Food Cart Pod <input type="checkbox"/> Restaurant <input type="checkbox"/> Sports bar <input type="checkbox"/> Tavern	<input type="checkbox"/> Night Club <input type="checkbox"/> Convenience Store <input checked="" type="checkbox"/> Other (Please describe <u>custom crush wine/cellar</u>)	Size of Service area: <u>N/A</u> Existing Building: (circle) YES / NO Zoning: <u>R7</u> Structural Changes: (describe): :
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Seating Capacity: Restaurant _____ Lounge/Bar _____ Outside Sidewalk _____ Outside patio _____
 Will you be seeking a sidewalk café permit? YES / NO - Date Obtained/Applied for: / /

Describe Security: N/A Home office only
 Has an application for a liquor license at this location been received by the City of Portland in the last 2 years? yes no don't know

HOURS OF OPERATION

Sunday through Thursday open N/A close N/A Friday & Saturday open _____ close _____
 How late will you have outside seating? N/A How late will you have entertainment? _____

HISTORY OF LOCATION

Previous Business Name of this location: N/A
 Name and Address of Property Owner: Regina Morris 10805 SE Stephens St. 97216

ENTERTAINMENT:

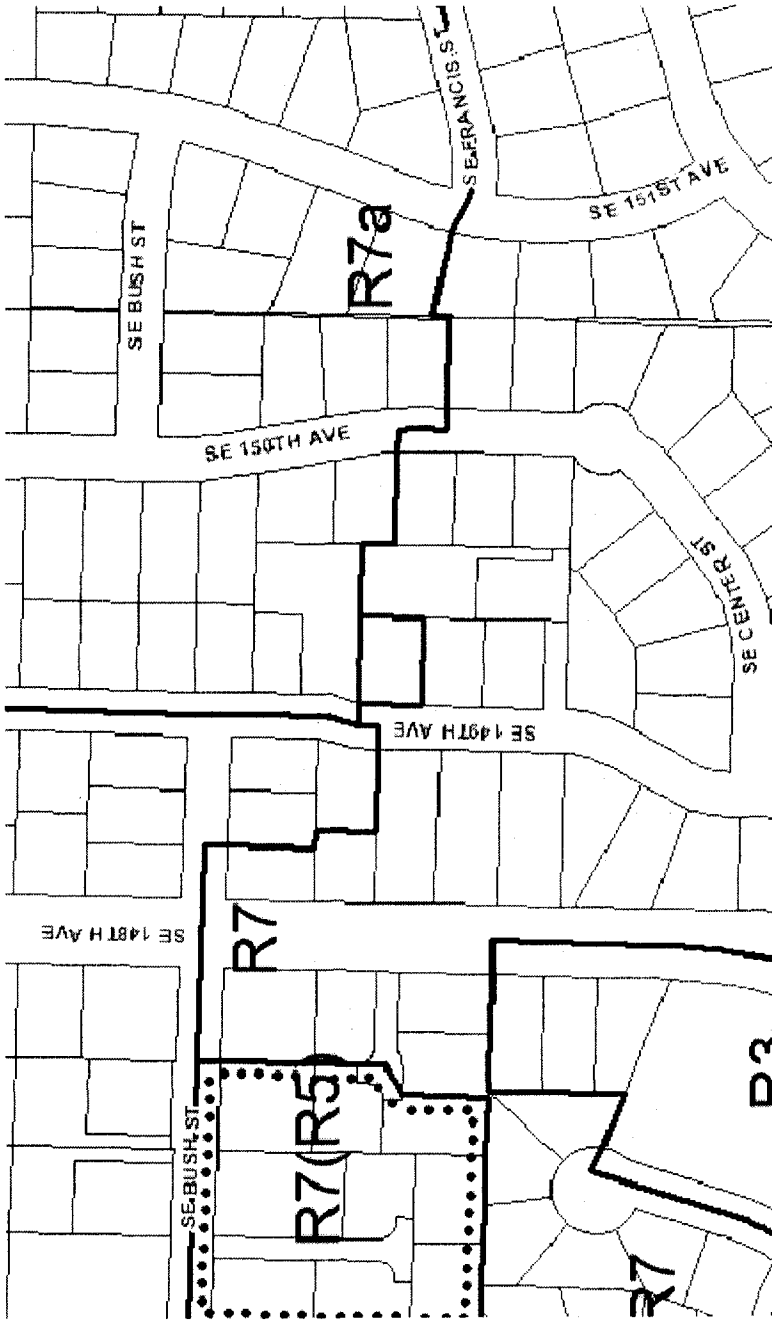
<input type="checkbox"/> Dancing <input type="checkbox"/> Karaoke <input type="checkbox"/> Live Music <input type="checkbox"/> Recorded Music	<input type="checkbox"/> Video Poker <input type="checkbox"/> Video games/Pinball <input type="checkbox"/> Social Gaming <input type="checkbox"/> Pool Tables (if yes, how many?)	<input type="checkbox"/> Nude Dancers <input type="checkbox"/> DJ Entertainment <input type="checkbox"/> Events (describe) _____ <input type="checkbox"/> Other (describe) _____
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The City requires an **Amusement Location Permit** for all locations with amusement devices or pool tables. **Contact the Revenue Bureau for rules and an Amusement Location Permit application form now.** Permits are non-transferable from one owner to another and must be paid before games are placed on the premises. Contact Anne Holm at 503-865-2488.

Use this area to provide any additional information that you wish to be considered on this liquor application.

I am renting winery space, but I receive mail at my home. Because the business is registered here at the federal level I am applying for this license here. No winery operations here.
A false answer or omission of any requested information may result in an unfavorable City recommendation.

Signature: Justin Wafer Date: 3/7/14



Property Search

Owner Name: NORRIS, REGINA M
 Site Address: 10805 SE STEPHENS ST
 State ID: 1S2E12CA 6100
 Account #: R33-4835

Search [Clear] [PortlandMaps]

Geocode Address When Taxlot Not Found
 Search is Based on Active Field Only
 Hide Personal Property Accounts
 Display Taxlot Detail Window

Navigate Query Results [Previous] [Next] [Home] [End]

Owner: NORRIS, REGINA M Site Address: 10805 SE STEPHENS ST State: OR

City of Portland
 Development Services
 By: [Signature] Date: 3/17
 Approved by: [Signature]
 Planning & Zoning Review

Search Legend Add Draw Selection

Taxlot Details

Lot Size: 7200 sqft Building Size: 1051 sqft Map Number: 3445 Zoning Code(s): R7
 Legal Description: SECTION 12 1S 2E, TL 6100 0.17 ACRES Lot & Block: TL 6100
 Historic District: JOHNSON CREEK BASIN Conservation District:
 SubArea:
 Mailing Information: NORRIS, REGINA M
 10805 SE STEPHENS ST
 PORTLAND, OR 97216-3237
 Jurisdiction: Portland
 NRMIP:
 Draw LUR

1/4 Section Map Tax Map Zon
 Plan District: JOHNSON CREEK BASIN LUR Case His
 SubDistrict:
 SubArea:
 NRMIP:
 Draw LUR