



# 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 \_\_\_\_\_

Rec'd by Portland  
Liquor Licenses

AUG 14 2014

PD # 1142

### 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: Gina Nicora

Date: 08.14.2014

90-day authority:  Yes  No

### 90-DAY AUTHORITY

Check here if you are applying for a change of ownership at a business that has a current liquor license, or if you are applying for an Off-Premises Sales license and are requesting a 90-Day Temporary Authority

### APPLYING AS:

- Limited Partnership
- Corporation
- Limited Liability Company
- Individuals

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

① CULMINATION BREWING COMPANY ③ \_\_\_\_\_

② \_\_\_\_\_ ④ \_\_\_\_\_

2. Trade Name (dba): Culmination Brewing Company

3. Business Location: 2117 NE OREGON ST PORTLAND MULTNOMAH OR 97232  
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: \_\_\_\_\_  
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503-353-6368  
(phone) (fax)

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

7. If yes to whom: \_\_\_\_\_ Type of License: \_\_\_\_\_

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? PORTLAND, MULTNOMAH CO.  
(name of city or county)

11. Contact person for this application: TOMAS J SWMER  
(name) (phone number(s))  
1764 SW MARLOW AVE (address) (fax number) TOMAS@BREWERYCONSULTANTGROUP.COM (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 8/13/14 ③ \_\_\_\_\_ Date \_\_\_\_\_  
② \_\_\_\_\_ Date \_\_\_\_\_ ④ \_\_\_\_\_ Date \_\_\_\_\_



# OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: TOMAS J SCUTER Phone: 503-353-6368

Trade Name (dba): CULMINATION BREWING CO

Business Location Address: 2117 NE OREGON ST

City: PORTLAND ZIP Code: 97232

## DAYS AND HOURS OF OPERATION

### Business Hours:

Sunday 11:00 P to 12:00 A  
 Monday 7:00 P to 11:00 P  
 Tuesday 7:00 P to 11:00 P  
 Wednesday 7:00 A to 11:00 P  
 Thursday 7:00 A to 11:00 P  
 Friday 7:00 A to 11:00 P  
 Saturday 11:00 A to 12:00 A

### Outdoor Area Hours:

Sunday 11:00 A to 10:00 P  
 Monday 7:00 A to 10:00 P  
 Tuesday 7:00 A to 10:00 P  
 Wednesday 7:00 A to 10:00 P  
 Thursday 7:00 A to 10:00 P  
 Friday 7:00 A to 10:00 P  
 Saturday 11:00 A to 10:00 P

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: NO PATIO SEATING IN WINTER

## 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): TAPROOM - 50 PPL  
 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: 8/13/14



# OREGON LIQUOR CONTROL COMMISSION CORPORATION QUESTIONNAIRE

Please Print or Type

Corporation Name: CULMINATION BREWING COMPANY Year Incorporated: 2013

Trade Name (dba): CULMINATION BREWING COMPANY

Business Location Address: 2117 NE OREGON ST

City: PORTLAND ZIP Code: 97232

### List Corporate Officers:

TOMAS JAMES SWITER PRESIDENT  
(name) (title)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### List Board of Directors:

TOMAS JAMES SWITER  
(name)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List Stockholders:** (Note: If any stockholder is another legal entity, that entity may also need to complete another Corporation Questionnaire. See Liquor License Application Guide for more information.)

Stockholders:	Number of Shares Held:	Number of Stock Shares:
<u>TOMAS JAMES SWITER</u>	<u>100,000 (100%)</u>	Issued: <u>100,000</u>
_____	_____	Unissued: _____
_____	_____	Total Shares Authorized to Issue: _____
_____	_____	

Server Education Designee: TOMAS JAMES SWITER DOB: 7/9/73  
(See Liquor License Application Guide for more information)

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

Officer's Signature: [Signature] (name) \_\_\_\_\_ (title) Date: 8/13/14

# CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

Submit to: Theresa Marchetti, Office of Neighborhood Involvement, 1221 SW 4<sup>th</sup> 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>CULMINATION BREWING COMPANY</u>	
DBA or Trade Name: _____	Phone: <u>503-353-6366</u> Fax: _____
Business Address, including Zip Code <u>2117 NE OREGON ST. PORTLAND, OR 97232</u>	
What type of liquor license are you applying for? (Change owner, new outlet, beer & wine, etc.) <u>BREWERY / PUBLIC HOUSE</u>	
Contact person: <u>TOMAS SWITER</u>	Contact phone: <u>503-353-6366</u> E-mail: <u>TOMAS@BREWERY</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. CONSULTANT GROUP.COM

### 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 type="checkbox"/> Other (Please Describe <u>BREWERY w/ TAPROOM</u> )	Size of Service area: _____ Existing Building: (circle) <u>YES</u> / NO Zoning: <u>EX-O</u> Structural Changes: (describe): :
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Seating Capacity: Restaurant \_\_\_\_\_ Lounge/Bar X Outside Sidewalk \_\_\_\_\_ Outside patio X  
 Will you be seeking a sidewalk café permit? YES (NO) Date Obtained/Applied for  / /

Describe Security: BARTENDER / BREWER ON DUTY

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 9:00 A close 11:00 P Friday & Saturday open 11:00 P close 12:00 A

How late will you have outside seating? 10:00 P How late will you have entertainment? \_\_\_\_\_

### HISTORY OF LOCATION

Previous Business Name of this location: PACIFIC PAPER BOX & BINDERY

Name and Address of Property Owner: SASHA KIROVSKI 1211 NW GLISAN ST. STE 246 PDX 97209

### 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.

**A false answer or omission of any requested information may result in an unfavorable City recommendation.**

Signature: \_\_\_\_\_

Date: 8/13/14