

City of Portland, Oregon - Office of Neighborhood Involvement



1221 SW Fourth Avenue | Portland, Oregon 97204 | 503.823.9333 | www.portlandoregon.gov/cannabis

CITY OF PORTLAND MARIJUANA CONTROL PLAN

Entity Name	Must match Secretary of State Business Registry The New Amsterdam LLC				
Trade Name (DBA)	The New Amsterdam LLC				
Facility Address	Street 2201 N Killingsworth Street	^{City} Portland	State OR	^{Zip} 97217	
Mailing Address	Street 1601 Ave N	^{City} Brooklyn	State NY	^{Zip} 11230	
Phone Number: 503-558-6578		Email: yshenkman@thenewamsterdam.com			
Website: thenewamsterdam.com		Facebook Link: Optional			

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Control of the Contro	The Late County of the County
1. Please describe how your business will ensure t	hat no one under the age of 21 is admitted, and
how your business will educate patrons on the r	isks of marijuana use by minors.
There is a front desk employee checking IDs before	e letting customers enter sales floor.
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INTERNAL	. USE	ONLY	

Application No._



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2. Please describe how your business will prevent cannabis products from being consumed around or near your business.

Signs are posted and we are rigitant to the best of our ability.

 Please describe how your business will prevent and address potential negative impacts to neighborhood livability such as noise, parking, garbage, or loltering from your patrons.

Using Courtery and Common business account to Provent any mis conduct.

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MRLA MCP ONI 02/03/2017



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4. Please briefly describe your business's process to respond to and resolve complaints and/or concerns from neighboring businesses or residences.							
We addre manner.	ess any comp	plaints right aw	vay and fi	nd a way to res	olve any iss	ues ASAP in a ve	ry friendl
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