



LIQUOR LICENSE APPLICATION

pending

LICENSE FEE: Do not include the license fee with the application (the license fee will be collected at a later time).

APPLICATION: Application is being made for:

- Brewery
- Brewery-Public House
- Distillery
- Full On-Premises, Commercial
- Full On-Premises, Caterer
- Full On-Premises, Passenger Carrier
- Full On-Premises, Other Public Location
- Full On-Premises, Nonprofit Private Club
- Full On-Premises, For-Profit Private Club
- Grower Sales Privilege
- Limited On-Premises
- Off-Premises
- Off-Premises with Fuel Pumps
- Warehouse
- Wholesale Malt Beverage & Wine (WMBW)
- Winery

CITY AND COUNTY USE ONLY

Date application received _____

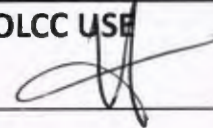
Name of City or County _____

Recommends this license be ___ Granted ___ Denied

By _____

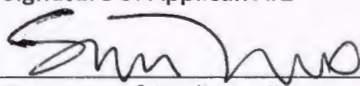
Date _____

OLCC USE

Application received by 

Date 7-18-18

License Action: n/o

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------------------|
| 1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license: | | Rec'd by Portland Liquor Licenses |
| Applicant #1 <u>West Place, LLC</u> | Applicant #2 | AUG 27 2018 |
| Applicant #3 | Applicant #4 | PD CK \$100 ⁰⁰ # <u>2499</u> |
| 2. Trade Name of the Business (the name customers will see): <u>West</u> | | |
| 3. Business Location: Number and Street: <u>1221 NW 218th Ave</u> | | |
| City <u>Portland</u> | County <u>Mult</u> | ZIP <u>97209</u> |
| 4. Is the business at this location currently licensed by the OLCC? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 5. Mailing Address (where the OLCC will send your mail): | | |
| PO Box, Number, Street, Rural Route <u>525 SE Pine St</u> | | |
| City <u>Portland</u> | State <u>OR</u> | ZIP <u>97214</u> |
| 6. Phone Number of the Business Location: <u>N/A</u> | | |
| 7. Contact Person for this Application: | | |
| Name <u>Summer Triato</u> | Phone Number <u>8182921169</u> | |
| Mailing Address, City, State, ZIP <u>525 SE Pine Street, Portland, OR 97214</u> | | |
| Email <u>Summer@unionpine.com</u> | | |
| I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is prohibited on the licensed premises. | | |
| Signature of Applicant #1  | Signature of Applicant #2 | |
| Signature of Applicant #3 | Signature of Applicant #4 | |



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: West Place, LLC Phone: 503-610-2010

Trade Name (dba): West

Business Location Address: 1221 NW 21st Ave

City: Portland ZIP Code: 97209

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 4:00pm to 2:00am
 Monday 4:00pm to 2:00am
 Tuesday 4:00pm to 2:00am
 Wednesday 4:00pm to 2:00am
 Thursday 4:00pm to 2:00am
 Friday 4:00pm to 2:00am
 Saturday 4:00pm to 2:00am

Outdoor Area Hours:

Sunday 4:00pm to 2:00am
 Monday 4:00pm to 2:00am
 Tuesday 4:00pm to 2:00am
 Wednesday 4:00pm to 2:00am
 Thursday 4:00pm to 2:00am
 Friday 4:00pm to 2:00am
 Saturday 4:00pm to 2:00am

The outdoor area is used for:

Food service Hours: 4:00pm to 2:00am
 Alcohol service Hours: 4:00pm to 2:00am
 Enclosed, how iron fence with gate

The exterior area is adequately viewed and/or supervised by Service Permittees.
 _____ (Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: _____

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 10:00am to 2:00am
 Monday _____ to _____
 Tuesday _____ to _____
 Wednesday _____ to _____
 Thursday _____ to _____
 Friday 4:00pm to 2:00am
 Saturday 10:00am to 2:00am

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: [Signature] Date: 6/21/18

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1458004-96

Please Print or Type

LLC Name: West Place, LLC Year Filed: 2018 ✓

Trade Name (dba): WEST

Business Location Address: 1221 NW 21st Ave

City: Portland ZIP Code: 97209

List Members of LLC:

Percentage of Membership Interest:

| | |
|----------------------------------------------|-----------|
| 1. <u>Summer Triato</u> (managing member) | <u>70</u> |
| 2. <u>Tom Garnier</u> (members) | <u>25</u> |
| 3. <u>Patrick Triato</u> | <u>5</u> |
| 4. _____ | _____ |
| 5. _____ | _____ |
| 6. _____ | _____ |

(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: Summer Triato (Killingsworth) DOB: 2.28.1978

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

Signature: [Signature] exec. director Date: 6.15.18
(name) (title)

CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

PLEASE SUBMIT TO: Liquor Licensing Notification Program, 1221 SW 4th Avenue, Suite #110, Portland OR 97204

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. Submission of a complete operating plan can expedite the time required to process. A City liquor endorsement is not a confirmation that the property is properly zoned. Call (503) - 823-7526 to confirm that the property is properly zoned.

On submission of this form, you must also include the following:

- OLCC Liquor Application Form, initialed by your OLCC License Investigator
- OLCC Individual History Forms (all persons anticipated to have a financial interest, or key personnel are required)
- City Endorsement Fees

City Endorsement Fees are payable at the beginning of the application process (please make checks payable to City of Portland): New outlets are \$100.00, all others are \$75.00. All blank sections must be filled in. If the question does not apply, write "N/A" in the space.

LEGAL NAME OF BUSINESS: West Place, LLC
DBA OR TRADE NAME: West PHONE: 971.254.4395 FAX: _____
BUSINESS ADDRESS (Including ZIP Code): 1221 NW 21st Ave, Portland OR 97209
WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): Full On-Premises
CONTACT PERSON: Summer Triato PHONE: 971.254.4395 EMAIL: summer@unionpine.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)
 Food Cart Night Club
 Restaurant Sports Bar
 Convenience Store Other: special event venue
SIZE OF SERVICE AREA: _____
EXISTING BUILDING: Yes No
ZONING: _____
STRUCTURAL CHANGES (DESCRIBE): none

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: 30 OUTSIDE SEATING CAPACITY: 18

DESCRIBE SECURITY: in-house trained staff + event staff as needed

HAS AN APPLICATION FOR A LIQUOR LICENSE AT THIS LOCATION BEEN RECEIVED BY THE CITY OF PORTLAND IN THE LAST TWO (2) YEARS?
 Yes No I Don't Know

HOURS OF OPERATION

SUNDAY - THURSDAY OPEN: 4pm CLOSE: 2am FRIDAY & SATURDAY OPEN: 4pm CLOSE: 2am
HOW LATE WILL THERE BE OUTSIDE SEATING? 2am HOW LATE WILL THERE BE ENTERTAINMENT? 2am

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Wildwood
NAME & ADDRESS OF PROPERTY OWNER: Overton Partners, 9760 SW Freeman Dr Wilsonville OR 97070

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)
 Dancing Video Poker Live Music Nude Dancers
 Karaoke Video Games/Pinball Recorded Music DJ Entertainment
 Pool Tables (How Many): _____ Events (Describe): corporate mtgs, weddings, dinners Other: _____

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. The City of Portland will notify affected nearby neighbors and a copy of this form will be included in our mailing.

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: Summer Triato DATE: 7.30.18



City of Portland, Oregon - Bureau of Development Services

1900 SW Fourth Avenue • Portland, Oregon 97201 | 503-823-7300 | www.portlandoregon.gov/bds



ZONING VERIFICATION

Address: 1221 NW 21ST AVE

R#: R141317

State ID: 1N1E33BA 4800

Zone: **CM2dm(MU-U)**

Plan District: **NORTHWEST**

Proposed Use: **RETAIL SALES AND SERVICE**

RETAIL SALES AND SERVICE is an ALLOWED use in the CM2dm(MU-U) zone

Additional Comments:

Per 33.130.100, Primary Uses, and Table 130-1, Retail Sales & Service uses are allowed by right in the CM2 zone.

Gina Tynan

Name of City Official

City Planner

Title

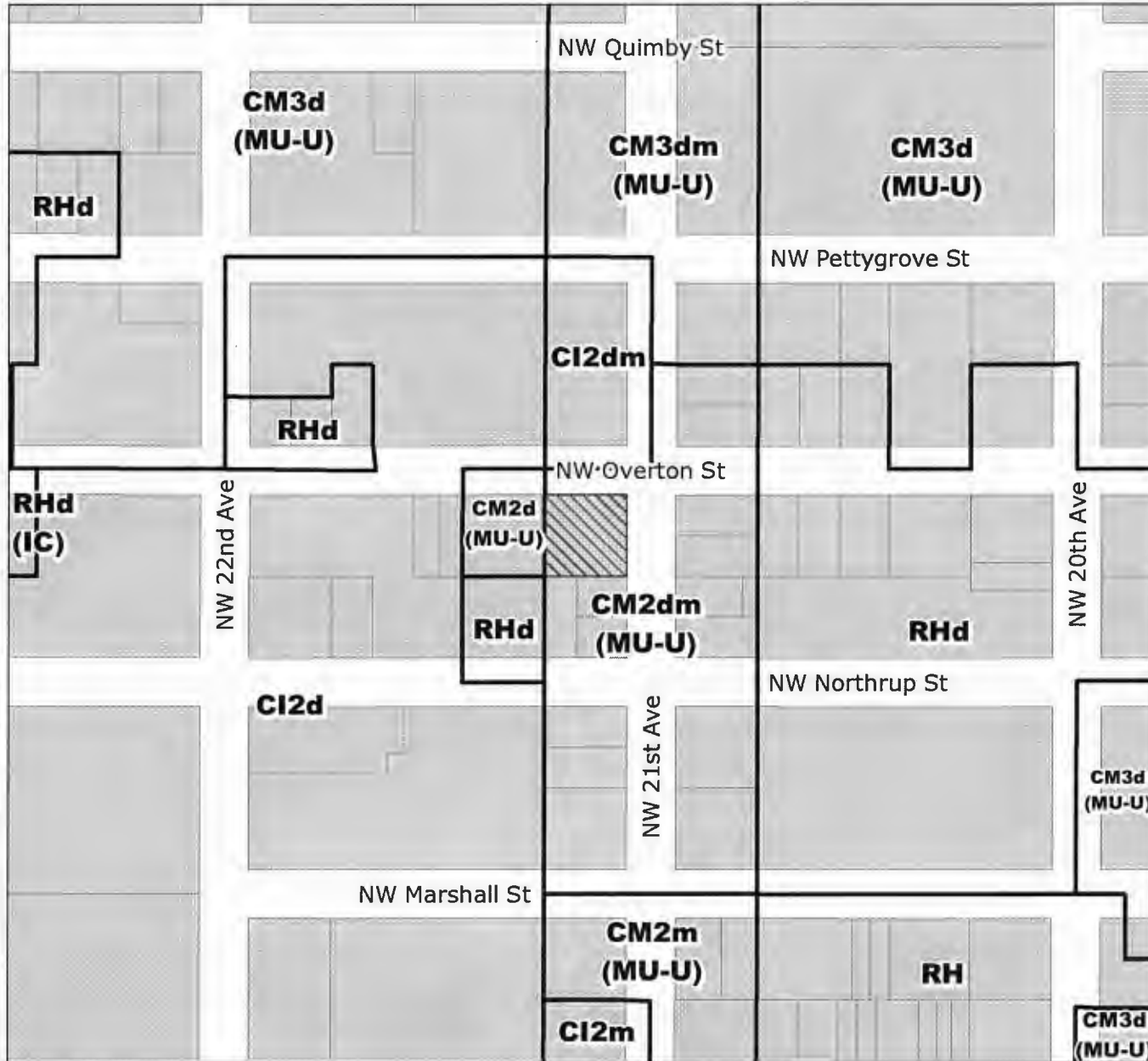
503-823-7271

Contact Number

Signature of Official

8 /22 /2018

Date



0 100 200 400 600 800 Feet

1 inch = 200 feet

