



LIQUOR LICENSE APPLICATION

DM

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 *BP 273587*
- 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 *[Signature]*

Date 8-21-18

License Action: A/privilege

Rec'd by Portland
Liquor Licenses

AUG 30 2018

PD CK 75.00
31211

1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license:

Applicant #1 One Nation Brewing LLC
Scott Petersen

Applicant #2
Karl Geitman

Applicant #3
Dennis Moxley Jr

Applicant #4

2. Trade Name of the Business (the name customers will see):

Griksen Brewing Company

3. Business Location: Number and Street 1001 SE Division Street Ste 1

City Portland County Multnomah ZIP 97202

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

5. Mailing Address (where the OLCC will send your mail): 1001 SE Division Street Ste 1

PO Box, Number, Street, Rural Route
City Portland State OR ZIP 97202

6. Phone Number of the Business Location:

7. Contact Person for this Application:

Name Scott Petersen Phone Number 503 869 2202

Mailing Address, City, State, ZIP
1001 SE Division Street Suite 1

Email scott@griksen.com

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]

Signature of Applicant #2
[Signature]

Signature of Applicant #3
[Signature]

Signature of Applicant #4

RECEIVED
AUG 20 2018
Initials: *[Signature]*
Oregon Liquor Control Commission



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: One nation Brewing LLC Phone: 971-347-3100
Trade Name (dba): Graxsen Brewing Company
Business Location Address: 1001 SE Division Street
City: Portland ZIP Code: 97202

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 9AM to 10PM
Monday 11AM to 10PM
Tuesday 11AM to 10PM
Wednesday 11AM to 10PM
Thursday 11AM to 12AM
Friday 11AM to 12AM
Saturday 9AM to 12AM

Outdoor Area Hours:

Sunday 9AM to 9PM
Monday 2PM to 9PM
Tuesday 3PM to 9PM
Wednesday 3PM to 9PM
Thursday 3PM to 10PM
Friday 11AM to 10PM
Saturday 9AM to 10PM

The outdoor area is used for:

Food service Hours: ALL OPEN HOURS
 Alcohol service Hours: ALL OPEN HOURS
 Enclosed, how _____
The exterior area is adequately viewed and/or supervised by Service Permittees.

(Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: OUTDOOR AREA IS WEATHER PERMITTING FROM APRIL THROUGH OCTOBER

ENTERTAINMENT

Check all that apply:

- Live Music
- Recorded Music
- DJ Music
- Dancing
- Nude Entertainers
- Karaoke
- Coin-operated Games
- Video Lottery Machines
- Social Gaming
- Pool Tables
- Other: TRIVIA

DAYS & HOURS OF LIVE OR DJ MUSIC

Sunday 8PM to 10PM
Monday — to —
Tuesday — to —
Wednesday — to —
Thursday 8PM to 12AM
Friday 8PM to 12AM
Saturday 8PM to 12AM

SEATING COUNT

Restaurant: 44 Outdoor: 26
Lounge: 36 Other (explain): 10 SEATS MIGRATE IN/OUT depending on weather
EVENT Banquet: 28 Total Seating: 144

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: 8-28-18
1-800-452-OLCC (6522)
www.oregon.gov/olcc



OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE

1027622-91

Please Print or Type

LLC Name: ONE NATION BREWING LLC Year Filed: 2014

Trade Name (dba): GRIXSEN BREWING COMPANY

Business Location Address: 1001 SE DIVISION ST E

City: Portland ZIP Code: 97202

List Members of LLC:

Percentage of Membership Interest:

1. SCOTT PETERSEN 78%
(managing member)

2. KURT GRITMAN 12%
(members)

3. DENNIS MOXLEY 10%

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: Scott Petersen DOB: 4/16/79

exp 4/17/20

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

Signature: [Signature] President Date: 8/20/18
(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: ~~Cyrixsen Brewing~~ ONE NATION Brewing
 DBA OR TRADE NAME: Cyrixsen PHONE: 8 971 347 3100 FAX: _____
 BUSINESS ADDRESS (Including ZIP Code): 1001 SE Division St 1 Portland, OR 97202
 WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): Application of Full License
 CONTACT PERSON: Scott Peterson PHONE: 503 969 2202 EMAIL: Scott@Cyrixsen.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Food Cart | <input type="checkbox"/> Night Club |
| <input checked="" type="checkbox"/> Restaurant | <input type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Other: _____ |

SIZE OF SERVICE AREA: 2700 SQ FT
 EXISTING BUILDING: Yes No
 ZONING: R1 - w/retail overlay
 STRUCTURAL CHANGES (DESCRIBE): NO

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: _____

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: _____ CLOSE: _____ FRIDAY & SATURDAY OPEN: _____ CLOSE: _____

HOW LATE WILL THERE BE OUTSIDE SEATING? _____ HOW LATE WILL THERE BE ENTERTAINMENT? _____

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: none associated with OLCC - IRPC

NAME & ADDRESS OF PROPERTY OWNER: WH Investments

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Video Poker | <input checked="" type="checkbox"/> Live Music | <input type="checkbox"/> Nude Dancers |
| <input type="checkbox"/> Karaoke | <input type="checkbox"/> Video Games/Pinball | <input type="checkbox"/> Recorded Music | <input checked="" type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): _____ | <input type="checkbox"/> Events (Describe): _____ | <input type="checkbox"/> 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
Already holds license - Requesting additional privilege

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

SIGNATURE: Scott Peterson DATE: 8/27/18



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: 1001 SE DIVISION ST

R#: R276051

State ID: 1S1E02CD 9800

Zone: IG1

Plan District: CENTRAL CITY, CENTRAL EASTSIDE

Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is a LIMITED use in the IG1 zone

Additional Comments:

Per 33.510.119, one Retail Sales and Service use allowed per site, up to 3,000 square feet.

Katie Moore

Name of City Official

City Planner

Title

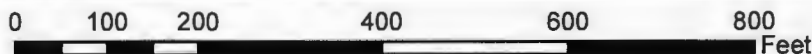
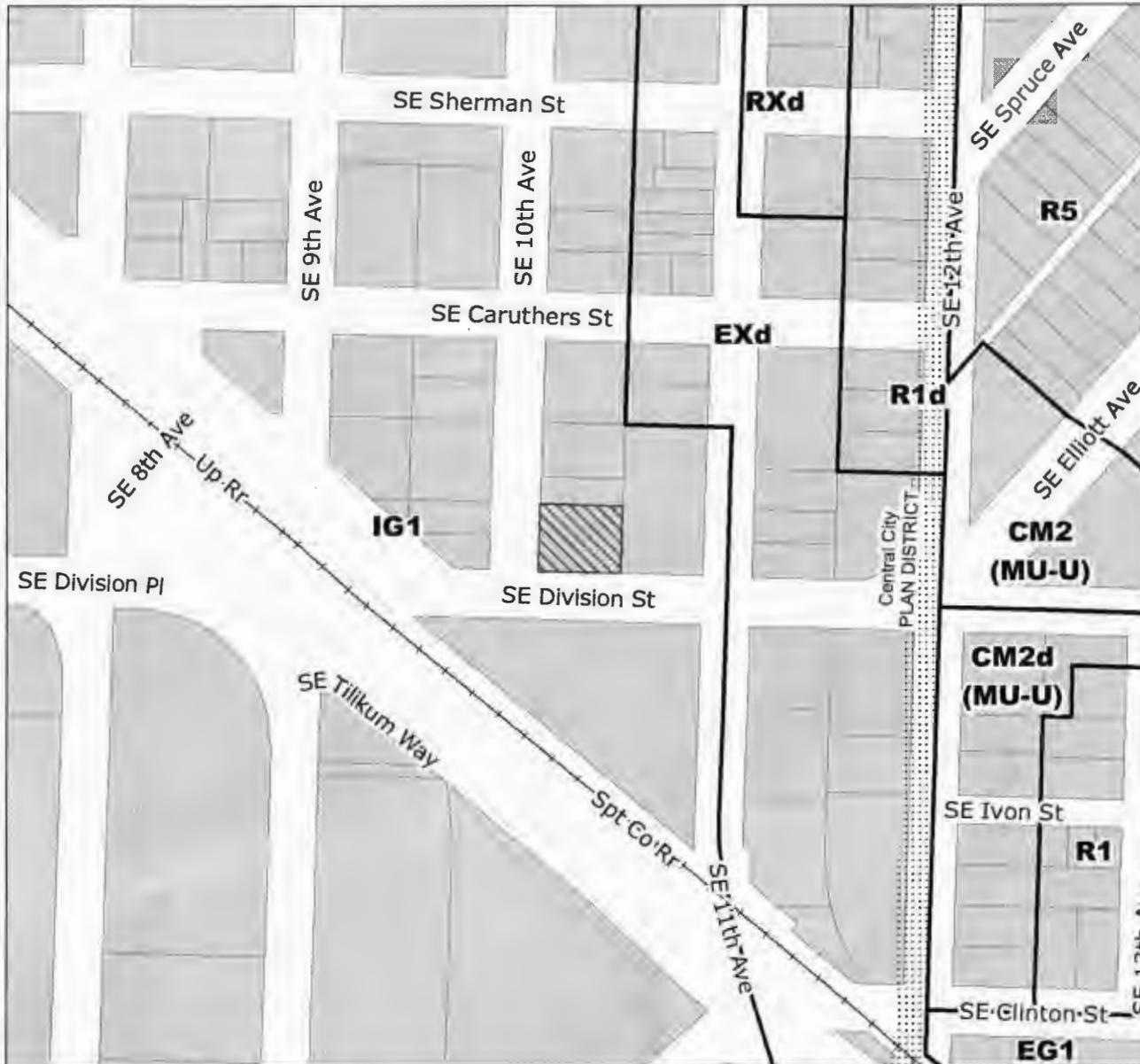
503-823-7344

Contact Number

Signature of Official

8 /31 /2018

Date



1 inch = 200 feet

