



OREGON LIQUOR CONTROL COMMISSION

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 *[Signature]*

Date 8-31-18

License Action: n/o

*Rec'd by Portland
Liquor Licenses*

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

Applicant #1 <u>Shine Spirits LLC</u>	Applicant #2
Applicant #3	Applicant #4

SEP 01 2018
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324779

2. Trade Name of the Business (the name customers will see): Shine Distillery & Grill

3. Business Location: Number and Street 4232 N. Williams Ave

City Portland County Multnomah ZIP 97217

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

5. Mailing Address (where the OLCC will send your mail): 123 SE 32nd Ave

PO Box, Number, Street, Rural Route

City Portland State Oregon ZIP 97214

6. Phone Number of the Business Location:

7. Contact Person for this Application:

Name Jon Poteet Phone Number 503-250-4968

Mailing Address, City, State, ZIP
123 SE 32nd Ave Portland, OR 97214

Email info@shinedistillerygrill.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 <u><i>[Signature]</i></u>	Signature of Applicant #2
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Signature of Applicant #3	Signature of Applicant #4
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RECEIVED
AUG 27 2018
Initials: *[Signature]*
Oregon Liquor Control Commission



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type Shine Spirits LLC
Applicant Name: Jon Potteet Phone: 503-943-0212
Trade Name (dba): Shine Distillery & Grill
Business Location Address: 4232 N. Williams Ave
City: Portland ZIP Code: 97217

DAYS AND HOURS OF OPERATION

Business Hours: Sunday 8 AM to 11 PM, Monday 11 AM to 11 PM, Tuesday 11 AM to 11 PM, Wednesday 11 AM to 11 PM, Thursday 11 AM to 11 PM, Friday 11 AM to Midnite, Saturday 8 AM to Midnite
Outdoor Area Hours: Sunday 8 am to 11 pm, Monday 11 am to 11 pm, Tuesday 11 AM to 11 pm, Wednesday 11 AM to 11 pm, Thursday 11 AM to 11 pm, Friday 11 AM to Midnite, Saturday 8 AM to Midnite
The outdoor area is used for: X Food service Hours: 8 AM to midnite, X Alcohol service Hours: 11 am to midnite, Enclosed now:
The exterior area is adequately viewed and/or supervised by Service Permittees. (Investigator's Initials)

Seasonal Variations: X Yes No If yes, explain: Not used as much in periods of rain, canopy & table umbrellas occasionally,

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:

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: Date: 8-27-18



OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE

1322475-94

Please Print or Type

LLC Name: Shine Spirits LLC Year Filed: 2017

Trade Name (dba): Shine Distillery & Grill

Business Location Address: 4232 N. Williams Ave

City: Portland ZIP Code: 97217

List Members of LLC:

Percentage of Membership Interest:

1. Jon Poter
(managing member)

2. _____
(members)

3. _____

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: Matthew McInain DOB: 9-27-1968

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

Signature: [Signature] Date: 8-27-17
(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: SHINE SPIRIT Co.

DBA OR TRADE NAME: SHINE DISTILLERY & GRILL PHONE: 503-943-0212 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 4232 NORTH WILLIAMS AVE PORTLAND 97217

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): NEW OUTLET

CONTACT PERSON: Jon Poteet PHONE: 503-943-0212 EMAIL: INFO@SHINE DISTILLERYGRILL.COM

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

<input type="checkbox"/> Food Cart	<input type="checkbox"/> Night Club	SIZE OF SERVICE AREA: <u>3818</u>
<input checked="" type="checkbox"/> Restaurant	<input type="checkbox"/> Sports Bar	EXISTING BUILDING: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Convenience Store	<input checked="" type="checkbox"/> Other: <u>DISTILLERY</u>	ZONING: _____
		STRUCTURAL CHANGES (DESCRIBE): <u>FULL REMODEL</u>

RESTAURANT SEATING CAPACITY: 232 LOUNGE SEATING CAPACITY: NA OUTSIDE SEATING CAPACITY: 25

DESCRIBE SECURITY: CAMERAS AND A FIRE / ALARM SYSTEM (MONITORED)

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: 8 AM CLOSE: 11:59 PM FRIDAY & SATURDAY OPEN: 8 AM CLOSE: 11:59 PM

HOW LATE WILL THERE BE OUTSIDE SEATING? 11 PM HOW LATE WILL THERE BE ENTERTAINMENT? NA

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: NOT SURE

NAME & ADDRESS OF PROPERTY OWNER: RUBEN J. MENASHIE Inc.

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

<input type="checkbox"/> Dancing	<input type="checkbox"/> Video Poker	<input 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 type="checkbox"/> DJ Entertainment
<input type="checkbox"/> Pool Tables (How Many): _____	<input checked="" type="checkbox"/> Events (Describe): <u>WEDDINGS</u>	<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

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

SIGNATURE: [Signature] DATE: 9-5-2018



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: 4232 N WILLIAMS AVE

R#: R103211

State ID: 1N1E22DA 5500

Zone: CM3dm(MU-U)

Plan District:

Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is an ALLOWED use in the CM3dm(MU-U) zone

Additional Comments:

Per Table 130-1 and 33.130.100, Retail Sales and Service is an allowed use in the CM3 zone. The overlays have no effect in this case.

Diane Hale

Name of City Official

City Planner

Title

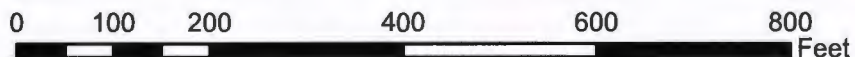
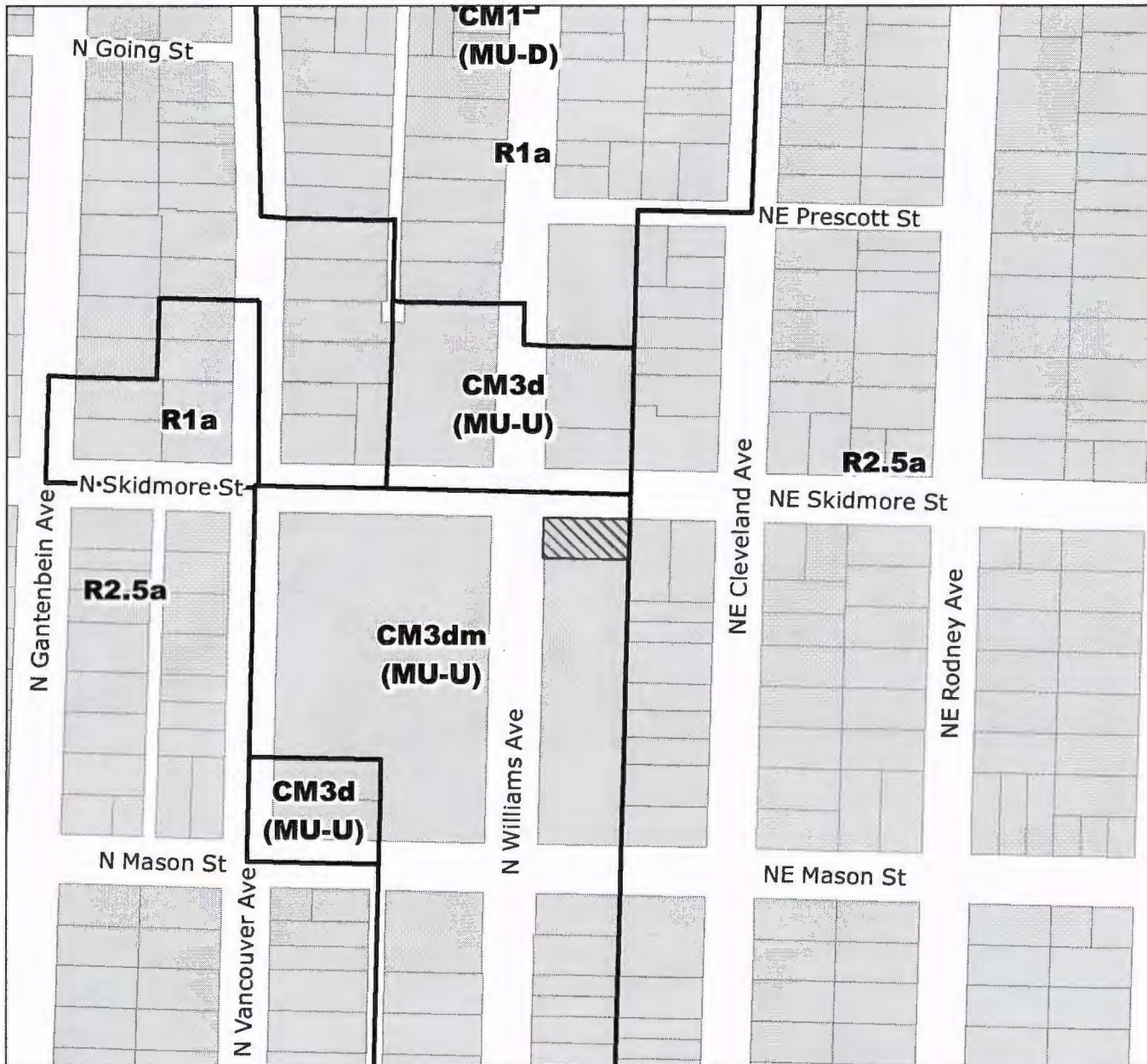
503-823-7705

Contact Number

Diane Hale
Signature of Official

9 / 7 / 2018

Date



1 inch = 200 feet

