



LIQUOR LICENSE APPLICATION

DT

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 9-10-18

License Action: n/o

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

Applicant #1 <u>Hungry Heart PDX, LLC.</u>	Applicant #2	Rec'd by Portland Liquor Licenses
Applicant #3	Applicant #4	SEP 28 2018 PD <u>cc</u> # <u>090070</u>

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

3. Business Location: Number and Street 411 SE 81st Ave.

City Portland County Multnomah ZIP 97215

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

5. Mailing Address (where the OLCC will send your mail):

PO Box, Number, Street, Rural Route 414 SE 80th Ave.

City Portland State OR ZIP 97215

6. Phone Number of the Business Location: (503) 253-3344

7. Contact Person for this Application: Jacklyn Button

Name Jacklyn Button Phone Number (702) 496-9597

Mailing Address, City, State, ZIP 1404 SE 160th Pl. Portland, OR 97233

Email hungryheartpdx@gmail.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 <i>[Signature]</i>	Signature of Applicant #2
Signature of Applicant #3	Signature of Applicant #4

RECEIVED

SEP 04 2018
OLCC Liquor License Application (Rev. 06/2017)

Initials: *[Signature]*
Oregon Liquor Control Commission



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Hungry Heart PDX, LLC Phone: 253-3344
 Trade Name (dba): Heartbreaker Neighborhood Kitchen
 Business Location Address: 411 SE 81st Ave.
 City: Portland ZIP Code: 97215

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 11am to 8pm
 Monday closed
 Tuesday closed
 Wednesday 11am to 8pm
 Thursday 11am to 8pm
 Friday 11am to 9pm
 Saturday 11am to 9pm

Outdoor Area Hours:

Sunday 11am to 8pm
 Monday closed
 Tuesday closed
 Wednesday 11am to 8pm
 Thursday 11am to 8pm
 Friday 11am to 9pm
 Saturday 11am to 9pm

The outdoor area is used for:

Food service Hours: 11am to close
 Alcohol service Hours: open to close
 Enclosed, how _____

The exterior area is adequately viewed and/or supervised by Service Permittees.

(Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: we will not have outdoor seating in place in the colder seasons

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: 18 Outdoor: 12
 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: 8/31/18

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1056699-98

Please Print or Type

LLC Name: Hungry Heart PDX, LLC Year Filed: 2016 2014

Trade Name (dba): Heartbreaker ~~and~~ Neighborhood Kitchen

Business Location Address: 411 SE 81st Ave.

City: Portland, OR 97215 ZIP Code: _____

List Members of LLC:

Percentage of Membership Interest:

1. Jacklyn Button
(managing member)

100%

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: Jacklyn Button DOB: 4/18/1985

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

Signature: [Signature] owner Date: 8/31/18
(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: Hungry Heart PDX, LLC
DBA OR TRADE NAME: Heartbreaker Neighborhood Kitchen PHONE: (503) 583-2054 FAX: _____
BUSINESS ADDRESS (Including ZIP Code): 411 SE 81st Ave. Portland, OR 97215
WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): beer + wine
CONTACT PERSON: Jacklyn Button PHONE: (702) 486-9597 EMAIL: hungryheartpdx@gmail.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- Food Cart Night Club
 Restaurant Sports Bar
 Convenience Store Other: _____

SIZE OF SERVICE AREA: _____
EXISTING BUILDING: Yes No
ZONING: Commercial
STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 16 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: 12

DESCRIBE SECURITY: ADT Pulse security system w/ motion + door sensors

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: 11am CLOSE: 8pm FRIDAY & SATURDAY OPEN: 11am CLOSE: 9pm
HOW LATE WILL THERE BE OUTSIDE SEATING? 30 mins before close HOW LATE WILL THERE BE ENTERTAINMENT? N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Montavilla Guitar Studio
NAME & ADDRESS OF PROPERTY OWNER: Montavilla LLC % Maltase Real Estate Group
P.O. Box 13532 Portland 97213

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): _____ 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: 8/31/18



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: 8037 SE STARK ST

R#: R263864

State ID: 1N2E32DD 12500

Zone: CM2m(MU-N)

Plan District:

Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is an ALLOWED use in the CM2m(MU-N) zone

Additional Comments:

Per 33.130.100 Primary Uses and Table 130-1 Retail Sales and Service uses are allowed by right in the CM2 zone. No restrictions are imposed by the overlay zones.

Katie Moore

Name of City Official

City Planner

Title

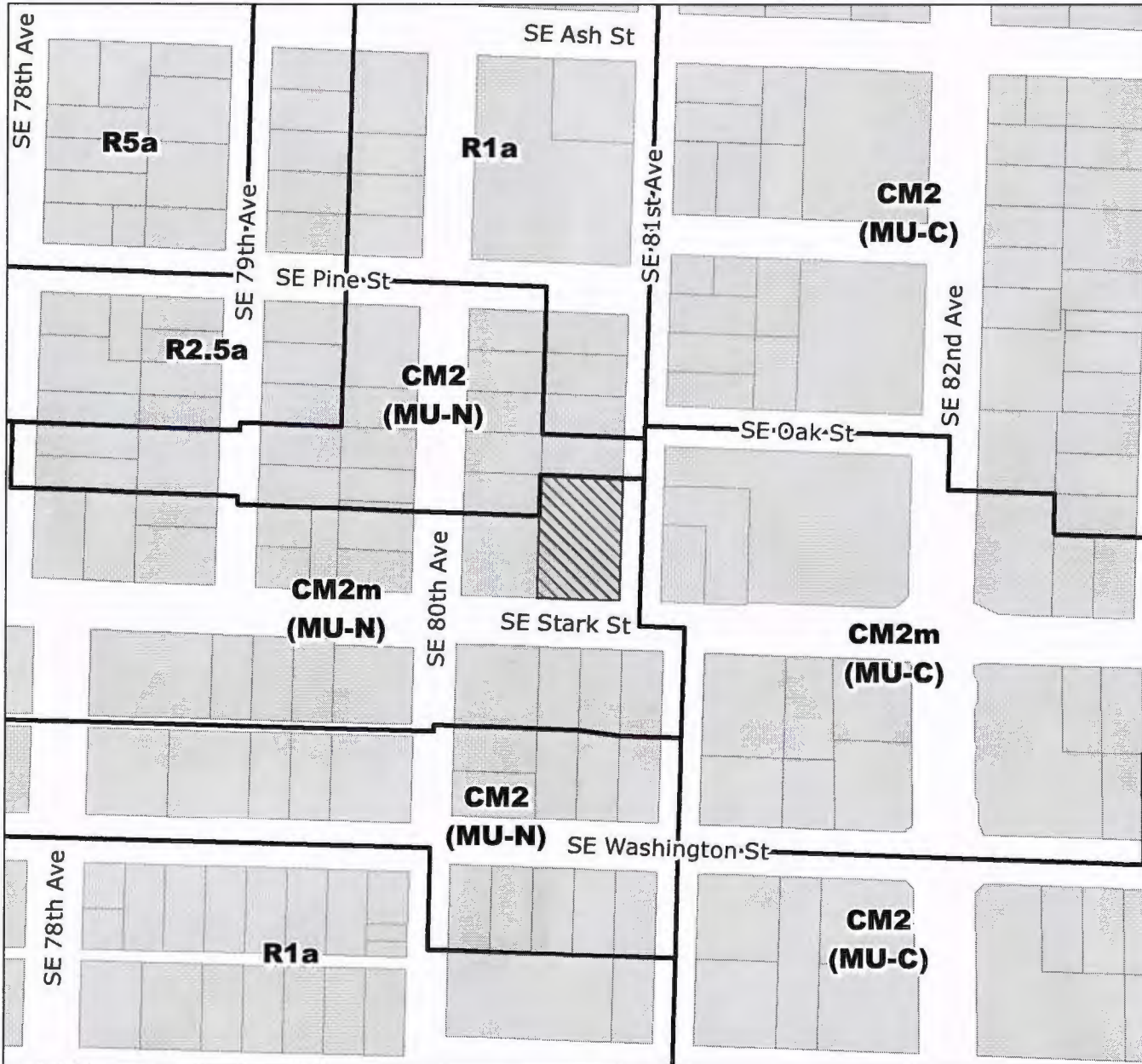
503-823-7344

Contact Number

Signature of Official

9 / 4 / 2018

Date



1 inch = 200 feet

