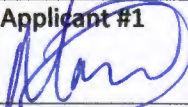




LIQUOR LICENSE APPLICATION

pending

LICENSE FEE: Do not include the license fee with the application (the license fee will be collected at a later time).	CITY AND COUNTY USE ONLY
APPLICATION: Application is being made for: <input type="checkbox"/> Brewery <input type="checkbox"/> Brewery-Public House <input checked="" type="checkbox"/> Distillery <input checked="" type="checkbox"/> Full On-Premises, Commercial <input type="checkbox"/> Full On-Premises, Caterer <input type="checkbox"/> Full On-Premises, Passenger Carrier <input type="checkbox"/> Full On-Premises, Other Public Location <input type="checkbox"/> Full On-Premises, Nonprofit Private Club <input type="checkbox"/> Full On-Premises, For-Profit Private Club <input type="checkbox"/> Grower Sales Privilege <input type="checkbox"/> Limited On-Premises <input type="checkbox"/> Off-Premises <input type="checkbox"/> Off-Premises with Fuel Pumps <input type="checkbox"/> Warehouse <input type="checkbox"/> Wholesale Malt Beverage & Wine (WMBW) <input type="checkbox"/> Winery	Date application received _____ Name of City or County _____ Recommends this license be ___ Granted ___ Denied By _____ Date _____
<i>26725</i>	<div style="text-align: center;">OLCC USE</div> Application received by _____ Date <u>10-8-18</u> License Action: <u>Clb</u> <u>CTN</u>

1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license:			
Applicant #1 <u>DAMETIME INC.</u>	Applicant #2 Rec'd by Portland Liquor Licenses		
Applicant #3	Applicant #4 OCT 12 2018		
2. Trade Name of the Business (the name customers will see):			
<u>MD'S BBQ</u>			
PD <u>CK \$7500</u> # <u>1300</u>			
3. Business Location: Number and Street <u>2226 NE BROADWAY</u>			
City <u>PORTLAND</u>	County <u>MULTNOMAH</u>	ZIP <u>97232</u>	
4. Is the business at this location currently licensed by the OLCC? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
5. Mailing Address (where the OLCC will send your mail): <u>2214 NE 19TH AVE</u>			
PO Box, Number, Street, Rural Route			
City <u>PORTLAND</u>	State <u>OR</u>	ZIP <u>97212</u>	
6. Phone Number of the Business Location: <u>503-946-1621</u>			
7. Contact Person for this Application:			
Name <u>MARLOS OLIVER</u>	Phone Number <u>503-449-6265</u>		
Mailing Address, City, State, ZIP <u>2214 NE 19TH AVE</u> <u>PORTLAND, OR. 97212</u>			
Email <u>MV073COOK@GMAIL.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 <div style="text-align: right;">RECEIVED</div>		
Signature of Applicant #3	Signature of Applicant #4 <div style="text-align: right;"> SEP 28 2018 <i>MFouts</i> Initials: _____ Oregon Liquor Control Commission </div>		



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: DAMETIME INC. Phone: 503-946-1621

Trade Name (dba): MD'S BBQ

Business Location Address: 2226 NE BROADWAY

City: PORTLAND ZIP Code: 97232

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 9am to 10pm
Monday 4pm to 10pm
Tuesday 4pm to 10pm
Wednesday 4pm to 10pm
Thursday 4pm to 10pm
Friday 4pm to 11pm
Saturday 9am to 11pm

Outdoor Area Hours:

Sunday 9am to 10pm
Monday 4pm to 10pm
Tuesday 4pm to 10pm
Wednesday 4pm to 10pm
Thursday 4pm to 10pm
Friday 4pm to 11pm
Saturday 9am to 11pm

The outdoor area is used for:

- Food service Hours: 9am to 11pm
- Alcohol service Hours: 9am to 11pm
- Enclosed, how _____

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

_____(Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: NO OUTSIDE SERVICE IN WINTER DUE TO WEATHER

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: 66 Outdoor: 16
Lounge: _____ Other (explain): _____
Banquet: _____ Total Seating: 82

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: 9/28/18



OREGON LIQUOR CONTROL COMMISSION CORPORATION QUESTIONNAIRE

1474839-94

Please Print or Type

Corporation Name: DAMETIME INC Year Incorporated: 2018 ✓

Trade Name (dba): MD'S BBR

Business Location Address: 2226 NE BROADWAY

City: PORTLAND ZIP Code: 97232

List Corporate Officers:

MARWS OLIVER
(name)

100% OWNER PRES
(title)

List Board of Directors:

MARWS OLIVER
(name)

List Stockholders: (Note: If any stockholder is another legal entity, that entity may also need to complete another Corporation Questionnaire. See Liquor License Application Guide for more information.)

Stockholders:

MARWS OLIVER

Number of Shares Held:
1

Number of Stock Shares:	
Issued:	<u>1</u>
Unissued:	<u>0</u>
Total Shares Authorized to Issue:	<u>1</u>

Server Education Designee: MARWS OLIVER DOB: 06/26/73

(See Liquor License Application Guide for more information) Exp 10/30/22

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

Officer's Signature: [Signature] (name) OWNER (title) Date: 9/28/13

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: DAMETIME INC.

DBA OR TRADE NAME: MD'S BBQ PHONE: 503-946-1624 FAX: N/A

BUSINESS ADDRESS (Including ZIP Code): 2226 NE BROADWAY PORTLAND, OR. 97232

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

CONTACT PERSON: MARCUS OLIVER PHONE: 503-449-6265 EMAIL: MV073COOK@GMAIL.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: APPROX. 1500 SQ FEET

EXISTING BUILDING: Yes No

ZONING: COMMERCIAL

STRUCTURAL CHANGES (DESCRIBE): NONE

RESTAURANT SEATING CAPACITY: 76 LOUNGE SEATING CAPACITY: N/A OUTSIDE SEATING CAPACITY: 20

DESCRIBE SECURITY: N/A

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: 10pm FRIDAY & SATURDAY OPEN: FRIDAY - 4pm SAT. 9am CLOSE: 11pm

HOW LATE WILL THERE BE OUTSIDE SEATING? 10pm HOW LATE WILL THERE BE ENTERTAINMENT? N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: ICONIC

NAME & ADDRESS OF PROPERTY OWNER: SIXTY ONE TWO, LLC C/O DEERING MANAGEMENT

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 checked="" type="checkbox"/> Recorded Music | <input type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): <u>N/A</u> | <input type="checkbox"/> Events (Describe): <u>N/A</u> | <input type="checkbox"/> Other: <u>N/A</u> | |

HECO SW MACADAM SUITE 120 PORTLAND, OR 97239 ATTN: WENDY BILLINGS

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: 10/11/18



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: 2222-2226 NE BROADWAY

R#: R193056

State ID: 1N1E26DD 4100

Zone: CM2d(MU-U)

Plan District:

Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is an ALLOWED use in the CM2d(MU-U) zone

Additional Comments:

Retail sales and service use is allowed.

Andy Gulizia

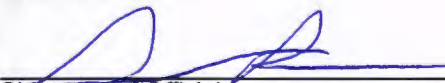
Name of City Official

City Planner

Title

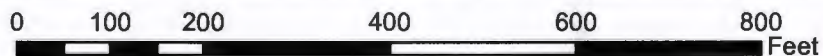
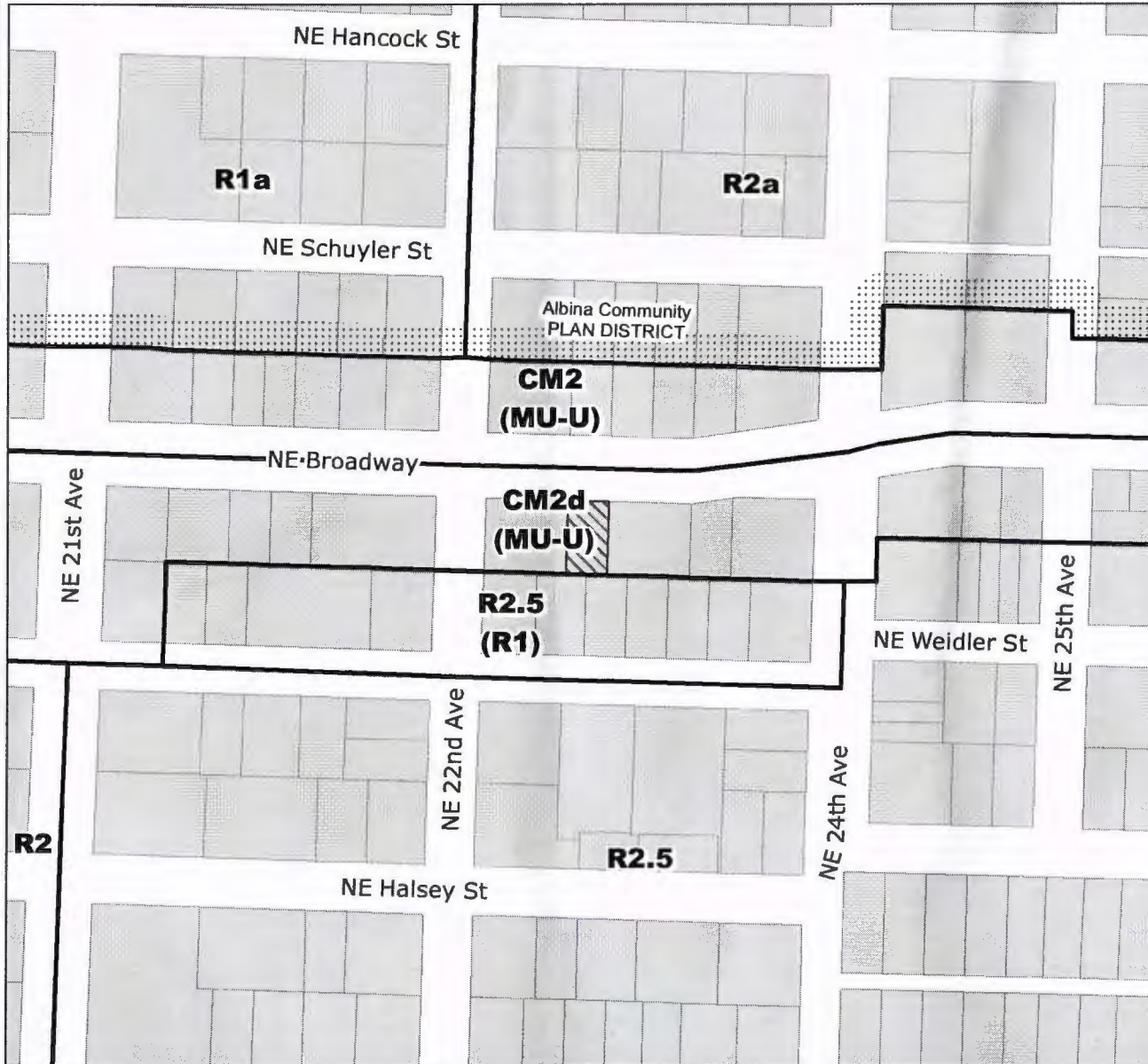
503-823-7010

Contact Number


Signature of Official

10 /12 /2018

Date



1 inch = 200 feet

