



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

Date application received _____

Name of City or County _____

Recommends this license be Granted Denied

By _____

Date _____

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

OLCC USE

Application received by 

Date 11-5-18

License Action:

N/O

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

Applicant #1

Alberta Street Gallery LLC

Applicant #2

Rec'd by Portland
Liquor Licenses

Applicant #3

Applicant #4

NOV 13 2018

PD CK \$100.00
1121

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

Alberta Street Gallery

3. Business Location: Number and Street 1829 NE Alberta St. Unit B

City Portland

County Multnomah

ZIP 97211

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 same as above

City _____ State OR

ZIP _____

6. Phone Number of the Business Location: 503-954-3314

7. Contact Person for this Application:

Name Maquette / Michel Keever

Phone Number 503-867-3599

Mailing Address, City, State, ZIP

5107 NE 19th Ave, Portland OR 97211

Email maquette@albertaartworks.org

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

RECEIVED

Signature of Applicant #3

Signature of Applicant #4

OCT 30 2018

Initials: 
Oregon Liquor Control Commission



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type Alberta Street Gallery LLC 954-3314
 Applicant Name: Michel Reverts Phone: 503-867-3599
 Trade Name (dba): Alberta Street Gallery
 Business Location Address: 1829 NE Alberta St. Suite B
 City: Portland ZIP Code: 97211

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 11 to 7
 Monday 11 to 7
 Tuesday 11 to 7
 Wednesday 11 to 7
 Thursday 11 to 7
 Friday 11 to 7
 Saturday 11 to 7

Outdoor Area Hours:

Sunday _____ to _____
 Monday _____ to _____
 Tuesday _____ to _____
 Wednesday _____ to _____
 Thursday _____ to _____
 Friday _____ to _____
 Saturday _____ to _____

The outdoor area is used for:

- Food service Hours: _____ to _____
 Alcohol service Hours: _____ to _____
 Enclosed, how _____

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

(Investigator's Initials)

later on special event nights, Fridays until 10:00 pm.

Seasonal Variations: Yes No If yes, explain: shorter winter hours

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 _____ to _____
 Monday _____ to _____
 Tuesday _____ to _____
 Wednesday _____ to _____
 Thursday _____ to _____
 Friday _____ to _____
 Saturday _____ to _____

special events/openings

SEATING COUNT

Restaurant: _____ Outdoor: seats + benches
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 15 app.

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: Michel Reverts Date: Sept. 15, 2018

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1052565-98

Please Print or Type

LLC Name: Alberta Street Gallery LLC Year Filed: ~~2013~~ 2014
Trade Name (dba): same Alberta Street Gallery
Business Location Address: 1829 NE 19th Ave. Unit B
City: Portland OR ZIP Code: 97211

List Members of LLC: Board Members:

1. Kim Nickens
(managing member)
2. Brian Echerer
(members)
3. Michel Reverts
4. Mandy Allen
5. _____
6. _____

Percentage of Membership Interest:

co-op

(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: Katrina Zarate DOB: 09/05/1984

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

Signature: [Signature] Board Member Date: Sept. 15, 2018
(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: Alberta Street Gallery LLC

DBA OR TRADE NAME: Alberta Street Gallery PHONE: 503-954-3314 FAX: NA

BUSINESS ADDRESS (Including ZIP Code): 1829 NE 19th Avenue Unit B, Portland, OR 97211

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

CONTACT PERSON: Michel Reverts PHONE: 503 867-3599 EMAIL: magvette@

Alberta Art Works.org

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- | | |
|--|--|
| <input type="checkbox"/> Food Cart | <input type="checkbox"/> Night Club |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store | <input checked="" type="checkbox"/> Other: <u>Gallery</u>
<u>(Fine Art)</u> |

SIZE OF SERVICE AREA: 1,400 SF

EXISTING BUILDING: Yes No

ZONING: CM2dhm (MU-U)

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: NA LOUNGE SEATING CAPACITY: app 15 OUTSIDE SEATING CAPACITY: NA

DESCRIBE SECURITY: One door access and extra staff will be present and aware.

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 Don't Know

HOURS OF OPERATION

SUNDAY - THURSDAY OPEN: 11:00 am CLOSE: 8:00 pm FRIDAY & SATURDAY OPEN: 11:00 am CLOSE: 10:00 pm

HOW LATE WILL THERE BE OUTSIDE SEATING? NA HOW LATE WILL THERE BE ENTERTAINMENT? 10:00 pm

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Digs

NAME & ADDRESS OF PROPERTY OWNER: Alberta Station LLC, 2301 NW Thurman Suite R, Portland OR, 97210

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 checked="" type="checkbox"/> Recorded Music | <input type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): _____ | <input checked="" type="checkbox"/> Events (Describe): <u>Gallery Openings/Talks</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: Michel Reverts DATE: 11.7.18



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: 1823-1837 NE ALBERTA ST

R#: R295208

State ID: 1N1E23AB 17500

Zone: **CM2dhm(MU-U)**

Plan District:

Proposed Use: **RETAIL SALES AND SERVICE**

RETAIL SALES AND SERVICE is an ALLOWED use in the CM2dhm(MU-U) zone

Additional Comments:

Retail Sales and Service is an allowed use in the CM2 zone per 33.130.100 and Table 130-1. The overlay zones place no extra restrictions on this use.

Gina Tynan

Name of City Official

City Planner

Title

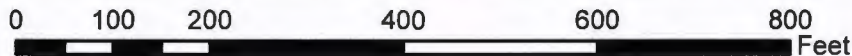
503-823-7271

Contact Number

Signature of Official

11 /13 /2018

Date



1 inch = 200 feet

