



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

Pending DT

1. Application. **Do not include** any OLCC fees with your application packet (the license fee will be collected at a later time). Application is being made for:

License Applied For:	CITY AND COUNTY USE ONLY
<input type="checkbox"/> Brewery 1 st Location	Date application received:
<input type="checkbox"/> Brewery 2 nd Location	Name of City or County:
<input type="checkbox"/> Brewery 3 rd Location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 1 st location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Brewery-Public House 2 nd location	By: _____
<input type="checkbox"/> Brewery-Public House 3 rd location	Date: _____
<input 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, For Profit Private Club	
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	
<input type="checkbox"/> Grower Sales Privilege 1 st location	
<input type="checkbox"/> Grower Sales Privilege 2 nd location	
<input type="checkbox"/> Grower Sales Privilege 3 rd location	
<input type="checkbox"/> Limited On-Premises	OLCC USE ONLY
<input type="checkbox"/> Off-Premises	Date application received:
<input type="checkbox"/> Off-Premises with Fuel Pumps	By: <i>[Signature]</i>
<input type="checkbox"/> Warehouse	Date application accepted as initially complete:
<input type="checkbox"/> Wholesale Malt Beverage & Wine	By: <i>[Signature]</i>
<input type="checkbox"/> Winery 1 st Location	License Action(s): <i>C/O</i>
<input type="checkbox"/> Winery 2 nd Location	
<input type="checkbox"/> Winery 3 rd Location	

2. Identify the applicant(s) applying for the license(s). ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license(s):

88 Badillo, Inc.
(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY
<i>[Signature]</i>	



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

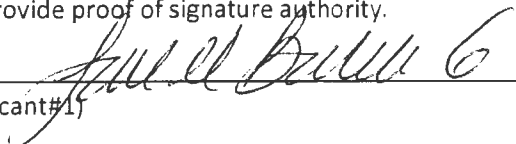
3. Applicant #1 ⁸⁸ Jose M. Badillo, Inc.		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) 82nd street bar and grill			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 5022 SE 82nd ave.			
City Portland, OR.	County Multnomah	Zip Code 97266	
6. Does the business address currently have an OLCC liquor license? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
7. Does the business address currently have an OLCC marijuana license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your mail) 13650 SE Sherman Dr.			
City Portland,	State OR	Zip Code 97233	
9. Phone Number of the Business Location 503 788 7196		Email Contact for this Application Josebadillo6003@gmail.com	
Contact Person for this Application Jose M Badillo		Phone Number 503 309 1088	
Mailing Address 13650 SE Sherman drive	City Portland	State OR	Zip Code 97233

I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is **prohibited** on the licensed premises.

I attest that all answers on all forms, documents, and information provided to the OLCC are true and complete.

Applicant Signature(s)

- Each individual person listed as an applicant must sign the application.
- If an applicant is an entity, such as a corporation or LLC, at least one person who is authorized to sign for the entity must sign the application.
- A person with the authority to sign on behalf of the applicant (such as the applicant's attorney or a person with power of attorney) may sign the application. If a person other than an applicant signs the application, please provide proof of signature authority.



 (Applicant #1)

 (Applicant #2)

 (Applicant #3)

 (Applicant #4)



OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE

1494869-95

Please Print or Type

Corporation Name: 88 Badillo, Inc. Year Incorporated: 2018 ✓

Trade Name (dba): 82nd street Bar and Grill

Business Location Address: 5028 SE 82nd ave.

City: Portland OR 97266 ZIP Code: _____

List Corporate Officers:

Jose M Badillo
(name)

President
(title)

List Board of Directors:

Jose M Badillo
(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:	Number of Shares Held:	Number of Stock Shares:
<u>Jose M Badillo</u>	<u>500</u>	Issued: _____ Unissued: _____ Total Shares Authorized to Issue: _____
_____	_____	
_____	_____	
_____	_____	

Server Education Designee: Jose M Badillo DOB: 08-14-1973
(See Liquor License Application Guide for more information) SE 12/19/14

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

Officer's Signature: Jose M Badillo (name) President (title) Date: 11/13/2018



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

788-7196

Applicant Name: 88 Badillo, Inc. Phone: 503 309 1088

Trade Name (dba): 82nd street Bar and Grill

Business Location Address: 5028 SE 82nd ave.

City: Portland OR ZIP Code: 97266

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 9am to 2:30am
Monday 9am to 2:30am
Tuesday 9am to 2:30am
Wednesday 9am to 2:30am
Thursday 9am to 2:30am
Friday 9am to 2:30am
Saturday 9am to 2:30am

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)

Seasonal Variations: Yes No If yes, explain: _____

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: 30 Outdoor: _____
Lounge: _____ Other (explain): 10 bar stools
Banquet: _____ Total Seating: 40

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: 11/13/2018

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: BB Badillo Inc.

DBA OR TRADE NAME: 82nd street Bar and grill PHONE: 503 788 7196 FAX: 503 774 1014

BUSINESS ADDRESS (Including ZIP Code): 5028 SE 82nd avenue Portland OR 97266

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

CONTACT PERSON: Jose M Badillo PHONE: 503 309 1088 EMAIL: Josebadillo6003@gmail.com

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>Bar and grill</u> |

SIZE OF SERVICE AREA: building 1510 square feet

EXISTING BUILDING: Yes No

ZONING: commercial

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: N/A LOUNGE SEATING CAPACITY: 40 OUTSIDE SEATING CAPACITY: N/A

DESCRIBE SECURITY: None

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: 9am CLOSE: 2:30am FRIDAY & SATURDAY OPEN: 9am CLOSE: 2:30am

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

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Kim Heng Inc

NAME & ADDRESS OF PROPERTY OWNER: Donald C. Sloan 38 conejo circle Palm Desert CA 92260

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Dancing | <input checked="" 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): _____ | <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

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

SIGNATURE: Jose M Badillo DATE: 11/26/2018



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: 5028 SE 82ND AVE

R#: R211782

State ID: 1S2E16BC 3000

Zone: CE

Plan District:

Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is an ALLOWED use in the CE zone

Additional Comments:

Per 33.130.100 and Table 130-1, Retail Sales and Service is an allowed use in the CE zone.

Bureau of Development Services
1900 SW 4th Ave., Suite 5000
Portland, OR 97201

Breah Pike-Salas

Name of City Official

City Planner

Title

503.823.7389

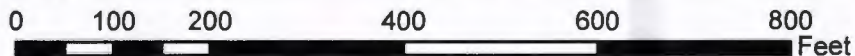
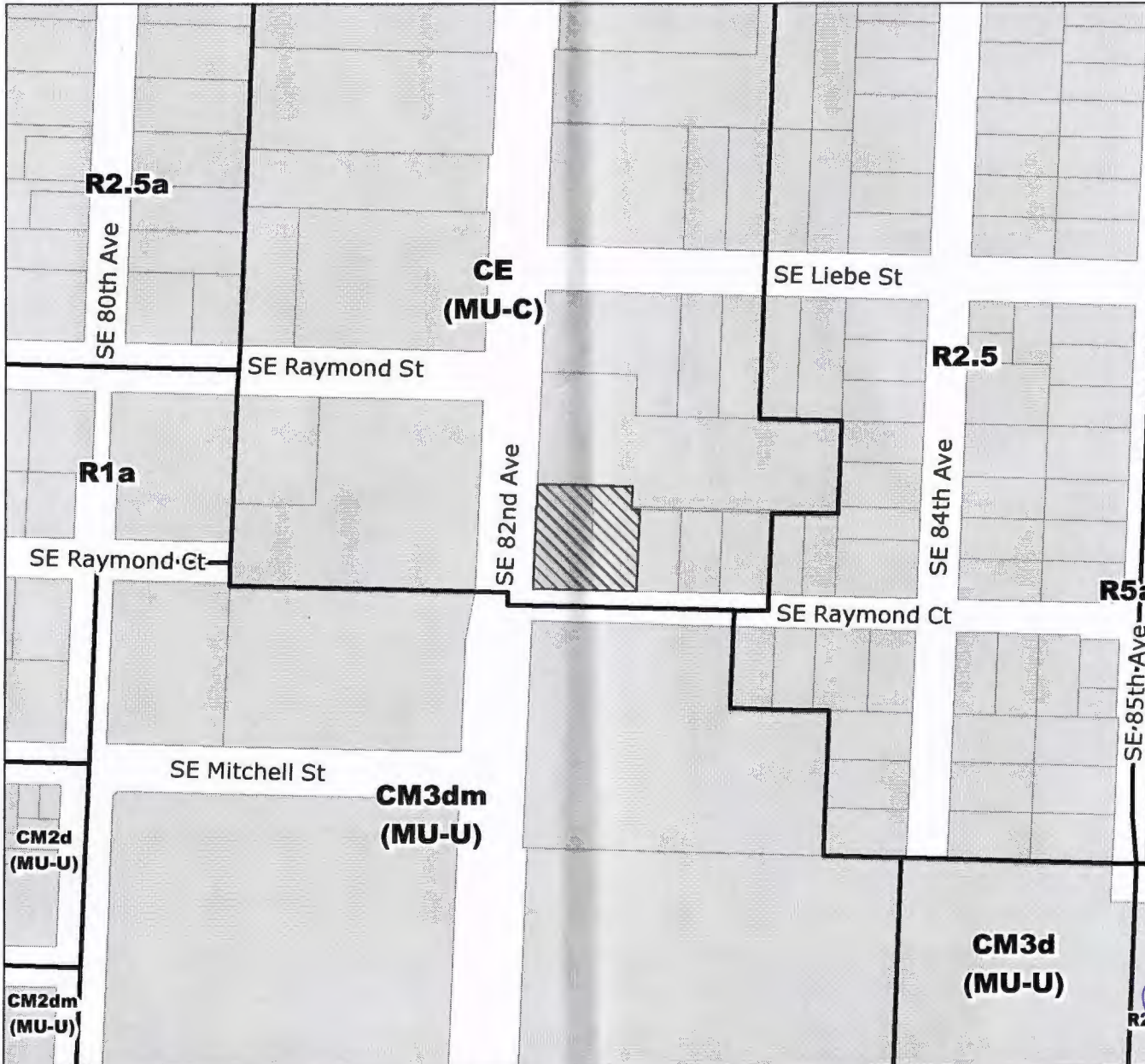
Contact Number

Breah Pike-Salas

Signature of Official

11 /26 /2018

Date



1 inch = 200 feet

