



LIQUOR LICENSE APPLICATION

Portland

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	_____
<input type="checkbox"/> Brewery 3 rd Location	Name of City or County:
<input type="checkbox"/> Brewery-Public House 1 st location	_____
<input type="checkbox"/> Brewery-Public House 2 nd location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 3 rd location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Distillery	By: _____
<input type="checkbox"/> Full On-Premises, Commercial	Date: _____
<input type="checkbox"/> Full On-Premises, Caterer	<i>Rec'd by Portland Liquor Licenses</i>
<input type="checkbox"/> Full On-Premises, Passenger Carrier	DEC 06 2018
<input type="checkbox"/> Full On-Premises, Other Public Location	PD \$75 ck
<input type="checkbox"/> Full On-Premises, For Profit Private Club	# 26194
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	OLCC USE ONLY
<input type="checkbox"/> Grower Sales Privilege 1 st location	Date application received:
<input type="checkbox"/> Grower Sales Privilege 2 nd location	11-6-18
<input type="checkbox"/> Grower Sales Privilege 3 rd location	By: <i>JA</i>
<input type="checkbox"/> Limited On-Premises	Date application accepted as initially complete:
<input checked="" type="checkbox"/> Off-Premises	11-13-18
<input type="checkbox"/> Off-Premises with Fuel Pumps	By: <i>JA</i>
<input type="checkbox"/> Warehouse	License Action(s): <i>A/privilege</i>
<input type="checkbox"/> Wholesale Malt Beverage & Wine	
<input type="checkbox"/> Winery 1 st Location	
<input type="checkbox"/> Winery 2 nd Location	
<input type="checkbox"/> Winery 3 rd Location	

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

Paley's Inc.

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY
<p>RECEIVED</p> <p>NOV 06 2018</p> <p>Initials: <i>JA</i></p> <p>Oregon Liquor Control Commission</p>	



LIQUOR LICENSE APPLICATION

3. Applicant #1 <i>Paley's Inc.</i>		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) <i>Paley's Place</i>			
5. Business Address (Number and Street Address of the Location that will have the liquor license) <i>1204 NW 21st Ave.</i>			
City <i>Portland</i>	County <i>Multnomah</i>	Zip Code <i>97209</i>	
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) <i>1204 NW 21st Ave.</i>			
City <i>Portland</i>	State <i>OR</i>	Zip Code <i>97209</i>	
9. Phone Number of the Business Location <i>503-243-2403</i>		Email Contact for this Application <i>Paleys.reservations@gmail.com</i>	
Contact Person for this Application <i>Kimberly Paley</i>		Phone Number <i>503-243-2403</i>	
Mailing Address <i>1204 NW 21st Ave.</i>	City <i>Portland</i>	State <i>OR</i>	Zip Code <i>97209</i>

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.

Kimberly Paley

 (Applicant #1)

 (Applicant #2)

 (Applicant #3)

 (Applicant #4)



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Paley's Inc. Phone: 503-243-2403
Trade Name (dba): Paley's Place Bistro & Bar
Business Location Address: 1204 NW 21st Ave.
City: Portland ZIP Code: 97209

DAYS AND HOURS OF OPERATION

(8 seats)

Business Hours:

Sunday 5:00 PM to 10:00 PM
Monday 5:30 PM to 10:00 PM
Tuesday 5:30 PM to 10:00 PM
Wednesday 5:30 PM to 10:00 PM
Thursday 5:30 PM to 10:00 PM
Friday 5:00 PM to 11:00 PM
Saturday 5:00 PM to 11:00 PM

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 small porch

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: _____
- None

DAYS & HOURS OF LIVE OR DJ MUSIC

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

SEATING COUNT

Restaurant: 52 plus Outdoor: 8 seats
Lounge: _____ Other (explain): 7 Bar stools
Banquet: _____ Total Seating: 67

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: 11/2/2018



OREGON LIQUOR CONTROL COMMISSION CORPORATION QUESTIONNAIRE

Please Print or Type

Corporation Name: Palms Inc (S-corp) Year Incorporated: 1995

Trade Name (dba): Palms Place

Business Location Address: 1204 N.W. 21st Ave

City: Portland, Oregon ZIP Code: 97209

List Corporate Officers:

(name) <u>Kimberly Poley</u>	(title) <u>President</u>
<u>Vitaliy Poley</u>	<u>Sec, Treasurer</u>
_____	_____
_____	_____

List Board of Directors:

(name) <u>Kimberly Poley</u>	_____
<u>Vitaliy Poley</u>	_____
_____	_____
_____	_____

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>Kimberly Poley</u>	<u>49</u>	Issued: _____ Unissued: _____ Total Shares Authorized to Issue: _____
<u>Vitaliy Poley</u>	<u>51</u>	
_____	_____	
_____	_____	

Server Education Designee: Kimberly Poley DOB: 12-29-54
(See Liquor License Application Guide for more information)

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

Officer's Signature: Kimberly Poley (name) President (title) Date: 11-9-18
11-9-18

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: Paley's Inc.

DBA OR TRADE NAME: Paley's Place Bistro & Bar PHONE: 503-243-2403 FAX: 503-223-8041

BUSINESS ADDRESS (Including ZIP Code): 1204 NW 21st Ave. Portland, OR 97209

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

CONTACT PERSON: Ethan Mann PHONE: 503-243-2403 EMAIL: paleys.reservations@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: Approx 1,900 sq feet

EXISTING BUILDING: Yes No

ZONING: Commercial

STRUCTURAL CHANGES (DESCRIBE): N/A

RESTAURANT SEATING CAPACITY: 67 (52+8 outside + 7 Bar stools) LOUNGE SEATING CAPACITY: N/A OUTSIDE SEATING CAPACITY: 8

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 SUN 5-10
MON-THUR 5:30-10

SUNDAY - THURSDAY OPEN: _____ CLOSE: _____ FRIDAY & SATURDAY OPEN: 5-11 CLOSE: _____

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

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: N/A

NAME & ADDRESS OF PROPERTY OWNER: Kimberly & Vitaly Paley 8711 NW Wood Ave

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: Kimberly Paley DATE: 12/6/19