



LIQUOR LICENSE APPLICATION

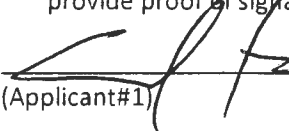
3. Applicant #1 <i>RIP CITY GRILL LLC</i>		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) <i>RIP CITY GRILL</i>			
5. Business Address (Number and Street Address of the Location that will have the liquor license) <i>6036 SE. DIVISION ST.</i>			
City <i>PORTLAND</i>	County <i>MULT</i>	Zip Code <i>97206</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>6036 SE. DIVISION</i>			
City <i>PORTLAND</i>	State <i>OR</i>	Zip Code <i>97206</i>	
9. Phone Number of the Business Location <i>503 477 5335</i>		Email Contact for this Application <i>RIPCITYGRILL@GMAIL.COM</i>	
Contact Person for this Application <i>CLINT MARVILLE</i>		Phone Number <i>503 544 2374</i>	
Mailing Address <i>14200 S. LIVEOAK RD</i>	City <i>OREGON CITY</i>	State <i>OR</i>	Zip Code <i>97045</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.



(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type Rip City Grill LLC
Applicant Name: CLINT MELVILLE Phone: 503 477 5335
Trade Name (dba): RIP CITY GRILL LLC
Business Location Address: 10036 SE DIVISION
City: PORTLAND ZIP Code: 97206

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 11 to 9
Monday ↓ to ↓
Tuesday ↓ to ↓
Wednesday ↓ to ↓
Thursday ↓ to ↓
Friday ↓ to ↓
Saturday ↓ to ↓

Outdoor Area Hours:

Sunday 11 to 9
Monday ↓ to ↓
Tuesday ↓ to ↓
Wednesday ↓ to ↓
Thursday ↓ to ↓
Friday ↓ to ↓
Saturday ↓ to ↓

The outdoor area is used for:

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

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

(Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: WEATHER PERMITTING

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

N/A
Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

SEATING COUNT

Restaurant: 36 Outdoor: 8
Lounge: _____ Other (explain): _____
Banquet: _____ Total Seating: 42

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: 11/14/18

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1012197-98

Please Print or Type

LLC Name: RIP CITY GRILL LLL Year Filed: 2014 ✓

Trade Name (dba): RIP CITY GRILL

Business Location Address: 6036 SE DIVISION ST.

City: PORTLAND ZIP Code: 97206

List Members of LLC:

Percentage of Membership Interest:

1. CLINT MELVILLE
(managing member)

80%

2. JULIUS RIVERA
(members)

20%

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: JULIUS RIVERA DOB: 7/9/84
SE 4/14/15

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

Signature: [Signature] (name) OWNER (title) Date: 11.8.18

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: RIP CITY GRILL LLC

DBA OR TRADE NAME: RIP CITY GRILL PHONE: 503 477 5335 FAX: N/A

BUSINESS ADDRESS (Including ZIP Code): 6036 SE DIVISION

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

CONTACT PERSON: CLINT MELVILLE PHONE: 503 477 5335 EMAIL: RIP CITY GRILL@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: 600 SQ FT

EXISTING BUILDING: Yes No

ZONING: COMMERCIAL

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 35 LOUNGE SEATING CAPACITY: N/A OUTSIDE SEATING CAPACITY: 10

DESCRIBE SECURITY: CAMERAS ALL OVER

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: 9pm FRIDAY & SATURDAY OPEN: 11 CLOSE: 9

HOW LATE WILL THERE BE OUTSIDE SEATING? 9 HOW LATE WILL THERE BE ENTERTAINMENT? N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: RIP CITY GRILL (LAST 2 YEARS)

NAME & ADDRESS OF PROPERTY OWNER: NATE CELKO 2022 NE ALBERTA PORTLAND OR 97211

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: 11.29.18