



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).

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

CITY AND COUNTY USE ONLY

Date application received _____


Name of City or County _____

Recommends this license be ___ Granted ___ Denied

By _____

Date _____

OLCC USE

Application received by 

Date 11-25-18

License Action:
n/o

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

Applicant #1 Livingworth LLC	Applicant #2 Rec'd by Portland Liquor Licenses
Applicant #3	Applicant #4 DEC 21 2018 PD CK \$100.00 # 1008

2. Trade Name of the Business (the name customers will see):
Brewery Not To Scale

3. Business Location: Number and Street 7319 N. John Ave, #B30

City Portland	County Multnomah	ZIP 97203
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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 25 NW 23rd Place, #6-433

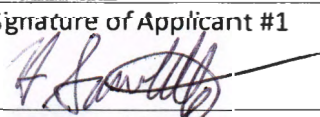
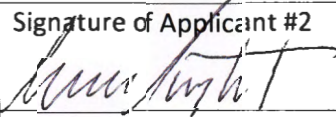
City Portland	State OR	ZIP 97210
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6. Phone Number of the Business Location: 7074090609

7. Contact Person for this Application:

Name Henry Sawtelle	Phone Number 5034676612
Mailing Address, City, State, ZIP 25 NW 23rd Place, #6-433	
Email henry@livingworth.com	

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  Henry Sawtelle Member	Signature of Applicant #2  Lucius Knight member
Signature of Applicant #3	Signature of Applicant #4

RECEIVED
NOV 15 2018



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Livingworth LLC Phone: 7074090609

Trade Name (dba): Brewery Not To Scale

Business Location Address: 7319 N. John Ave, #B30

City: Portland ZIP Code: 97203

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>10</u>	to	<u>8</u>
Monday	<u>10</u>	to	<u>8</u>
Tuesday	<u>10</u>	to	<u>8</u>
Wednesday	<u>10</u>	to	<u>8</u>
Thursday	<u>10</u>	to	<u>8</u>
Friday	<u>10</u>	to	<u>8</u>
Saturday	<u>10</u>	to	<u>8</u>

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)

NOT OPEN TO PUBLIC

Seasonal Variations: Yes No If yes, explain: _____

ENTERTAINMENT

Check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> Live Music | <input type="checkbox"/> Karaoke |
| <input type="checkbox"/> Recorded Music | <input type="checkbox"/> Coin-operated Games |
| <input type="checkbox"/> DJ Music | <input type="checkbox"/> Video Lottery Machines |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Social Gaming |
| <input type="checkbox"/> Nude Entertainers | <input type="checkbox"/> Pool Tables |
| | <input type="checkbox"/> 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: 0 Outdoor: 0

Lounge: 0 Other (explain): _____

Banquet: 0 Total Seating: 0

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: 11/12/18

Member **1-800-452-OLCC (6522)**
 Livingworth www.oregon.gov/olcc
 L.L.C.



OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE

140461393

Please Print or Type

LLC Name: Livingsworth LLC Year Filed: 2018 ✓

Trade Name (dba): Brewery Not To Scale

Business Location Address: 7319 N. John Ave #B30

City: Portland ZIP Code: 97203

List Members of LLC:

Percentage of Membership Interest:

1. <u>Henry Sawtelle</u> (managing member)	<u>50</u>
2. <u>Lucius Knight</u> (members)	<u>50</u>
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: Henry Sawtelle DOB: 2/16/71

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

Signature: [Signature] (name) Member (title) Date: 11/12/18

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: LIVINGSWORTH LLC

DBA OR TRADE NAME: BREWERY NOT TO SCALE PHONE: 707.409.0609 FAX: N/A

BUSINESS ADDRESS (Including ZIP Code): 7319 N. JOHN AVE #B30, PORTLAND, OR 97203

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): NEW OUTLET - BREWERY PUBLIC HOUSE

CONTACT PERSON: HENRY SAWTELLE PHONE: 503.467.6612 EMAIL: HSAWTELLE@GMAIL.COM

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- Food Cart Night Club
 Restaurant Sports Bar
 Convenience Store Other: BREWERY - DOCK SALES ONLY

SIZE OF SERVICE AREA: N/A

EXISTING BUILDING: Yes No

ZONING: CM2dm

STRUCTURAL CHANGES (DESCRIBE): _____

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

DESCRIBE SECURITY: BUILDING EXTERIOR IS LOCKED AND ALARMED AT NIGHT; INTERNAL DOORS TO OUR PREMISE ARE LOCKED AND ALARMED AT ALL TIMES

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: 10AM CLOSE: 8PM FRIDAY & SATURDAY OPEN: 10AM CLOSE: 8PM

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: SYMPLE FOODS LLC DBA SOMA KOMBUCHA

NAME & ADDRESS OF PROPERTY OWNER: NORTHWEST ST. JOHNS LLC, PO BOX 625, WILSONVILLE, OR 97070-0625

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

- Not serving public at this location. -

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

SIGNATURE: H. Sawtelle

DATE: 12/10/18



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: 8401 N IVANHOE ST

R#: R232264

State ID: 1N1W12AB 8000

Zone: CM2dm

Plan District: ST. JOHNS

Proposed Use: WHOLESALE

WHOLESALE is a LIMITED use in the CM2dm zone

Additional Comments:

In the CM2 zone, each individual industrial use is limited to 15,000 SF and exterior development is prohibited. Manufacturing and production is an industrial use.

Brandon Rogers

Name of City Official

City Planner

Title

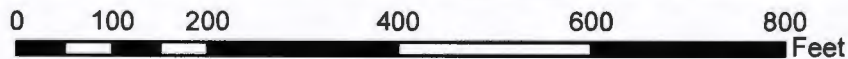
503-823-7300

Contact Number

Signature of Official

12 / 10 / 2018

Date



1 inch = 200 feet

