



# LIQUOR LICENSE APPLICATION

*Pending*

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 <sup>st</sup> Location	Date application received:
<input type="checkbox"/> Brewery 2 <sup>nd</sup> Location	_____
<input type="checkbox"/> Brewery 3 <sup>rd</sup> Location	Name of City or County:
<input type="checkbox"/> Brewery-Public House 1 <sup>st</sup> location	_____
<input type="checkbox"/> Brewery-Public House 2 <sup>nd</sup> location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 3 <sup>rd</sup> location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Distillery	By: _____
<input checked="" 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	<b>DEC 28 2018</b>
<input checked="" type="checkbox"/> Full On-Premises, Other Public Location	<i>PD Ce 75.00 # 835964</i>
<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 <sup>st</sup> location	
<input type="checkbox"/> Grower Sales Privilege 2 <sup>nd</sup> location	
<input type="checkbox"/> Grower Sales Privilege 3 <sup>rd</sup> location	
<input type="checkbox"/> Limited On-Premises	<b>OLCC USE ONLY</b>
<input type="checkbox"/> Off-Premises	Date application received:
<input type="checkbox"/> Off-Premises with Fuel Pumps	<u>12-17-18</u>
<input type="checkbox"/> Warehouse	By: <i>[Signature]</i>
<input type="checkbox"/> Wholesale Malt Beverage & Wine	Date application accepted as initially complete:
<input type="checkbox"/> Winery 1 <sup>st</sup> Location	<u>12-27-18</u>
<input type="checkbox"/> Winery 2 <sup>nd</sup> Location	By: <i>[Signature]</i>
<input type="checkbox"/> Winery 3 <sup>rd</sup> Location	License Action(s): <u>90</u>

*OK  
12-27-18*

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

PDX White House, LLC  
(Applicant #1)

~~Mezzaluna Fine Catering, LLC~~  
(Applicant #2)

(Applicant #3)

(Applicant #4)

**OLCC USE ONLY**

RECEIVED

DEC 17 2018

Initials: [Signature]

Oregon Liquor Control Commission

**OLCC FINANCIAL SERVICES USE ONLY**



OREGON LIQUOR CONTROL COMMISSION

# LIQUOR LICENSE APPLICATION

3. Applicant #1 PDX White House, LLC		Applicant #2 Mezzaluna Fine Catering LLC	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) Portland's White House			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 1914 NE 22nd Ave			
City Portland	County Multnomah	Zip Code 97212	
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) 2897 SW Rutland Ter			
City Portland	State OR	Zip Code 97205	
9. Phone Number of the Business Location 503-287-7131		Email Contact for this Application pdxwhitehouse@gmail.com	
Contact Person for this Application David Krause		Phone Number 503-481-4771	
Mailing Address 2897 SW Rutland Ter	City Portland	State OR	Zip Code 97205

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)

Frank Goff

(Applicant #2)

*[Signature]*

(Applicant #3)

(Applicant #4)

RECEIVED

DEC 17 2018



# OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: PDX White House LLC Phone: 503-287-7131

Trade Name (dba): Portland's White House

Business Location Address: 1914 NE 22<sup>nd</sup> Ave

City: Portland ZIP Code: 97212

## DAYS AND HOURS OF OPERATION

### Business Hours:

Sunday	<u>8 am</u> to <u>9:30 am</u>
Monday	<u>8 am</u> to <u>9:30 am</u>
Tuesday	<u>8 am</u> to <u>9:20 am</u>
Wednesday	<u>8 am</u> to <u>9:30 am</u>
Thursday	<u>8 am</u> to <u>9:30 am</u>
Friday	<u>8 am</u> to <u>9:30 am</u>
Saturday	<u>8 am</u> to <u>9:30 am</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: special events

Alcohol service Hours: " " to "

Enclosed, how \_\_\_\_\_

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

\_\_\_\_\_ (Investigator's Initials)

*X only for special events*

Seasonal Variations:  Yes  No If yes, explain: special events

## 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: \_\_\_\_\_

*X only for special events*

## DAYS & HOURS OF LIVE OR DJ MUSIC

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

*X only for special events*

## SEATING COUNT

Restaurant: \_\_\_\_\_ Outdoor: 65 (wedding ceremony)

Lounge: \_\_\_\_\_ Other (explain): ballroom - 85

Banquet: \_\_\_\_\_ Total Seating: 150 (although special events max at 85 people)

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: \_\_\_\_\_ Date: 12/17/18

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1380932-99

Please Print or Type

LLC Name: PDX White House LLC Year Filed: 11/20/17 ✓

Trade Name (dba): Portland's White House

Business Location Address: 1914 NE 22nd Ave

City: Portland ZIP Code: 97212

List Members of LLC:

Percentage of Membership Interest:

- |   |             |
|---|-------------|
| 1. <u>Frank Groff</u><br><small>(managing member)</small>                               | <u>100%</u> |
| 2. <u>Frank Groff Property Holding Company LLC</u><br><small>(members: manager)</small> |             |
| 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: David Krause DOB: 4-21-75

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

Signature: [Signature] managing member Date: 12/17/18  
(name) Frank Groff (title)

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1466862-90

Please Print or Type

LLC Name: Frank Groff Property Holding Company, LLC Year Filed: 2018  
1999

Trade Name (dba): PDX White House LLC Portland's White House

Business Location Address: 1914 NE 22nd Ave

City: Portland ZIP Code: 97212

List Members of LLC:

- 1. Frank Groff  
(managing member)
- 2. \_\_\_\_\_  
(members)
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_

Percentage of Membership Interest:

100%

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(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: David Krause DOB: 4-21-75

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

Signature: [Signature] managing member Date: 12/19/18  
(name) Frank Groff (title)

# CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

PLEASE SUBMIT TO: Liquor Licensing Notification Program, 1221 SW 4<sup>th</sup> 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: PDX White House, LLC  
DBA OR TRADE NAME: Portland's White House PHONE: 503-287-7131 FAX: N/A  
BUSINESS ADDRESS (Including ZIP Code): 1914 NE 22nd Ave, Portland, OR 97212  
WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): change of owner  
CONTACT PERSON: David Franse PHONE: 503-287-7131 EMAIL: pdxwhitehouse@gmail.com

**DESCRIPTION OF OUTLET**

TYPE OF OPERATION (CHECK ALL THAT APPLY)  
 Food Cart  Night Club  
 Restaurant  Sports Bar  
 Convenience Store  Other: special events  
SIZE OF SERVICE AREA: 4,000 sq. ft  
EXISTING BUILDING:  Yes  No  
ZONING: R2  
STRUCTURAL CHANGES (DESCRIBE): NO  
RESTAURANT SEATING CAPACITY: \* only special events LOUNGE SEATING CAPACITY: \_\_\_\_\_ OUTSIDE SEATING CAPACITY: 65  
DESCRIBE SECURITY: house manager manager house daily (lives on site)

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** \* only for special events  
SUNDAY - THURSDAY OPEN: \_\_\_\_\_ CLOSE: \_\_\_\_\_ FRIDAY & SATURDAY OPEN: \_\_\_\_\_ CLOSE: \_\_\_\_\_  
HOW LATE WILL THERE BE OUTSIDE SEATING? 9pm HOW LATE WILL THERE BE ENTERTAINMENT? 9pm

**HISTORY OF LOCATION**

PREVIOUS BUSINESS NAME OF THIS LOCATION: Portland's White House - Bed + Breakfast  
NAME & ADDRESS OF PROPERTY OWNER: Frank Groff, 2897 SW Rutland Ter, Portland, OR 97205

**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): wedding, dinners  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  
None

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

SIGNATURE: \_\_\_\_\_ DATE: 12/27/18