



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 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 type="checkbox"/> Full On-Premises, Commercial	
<input type="checkbox"/> Full On-Premises, Caterer	OLCC USE ONLY
<input type="checkbox"/> Full On-Premises, Passenger Carrier	Date application received: _____
<input type="checkbox"/> Full On-Premises, Other Public Location	By: <i>[Signature]</i> _____
<input type="checkbox"/> Full On-Premises, For Profit Private Club	Date application accepted as initially complete: _____
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	By: <i>[Signature]</i> _____
<input type="checkbox"/> Grower Sales Privilege 1 st location	License Action(s): <u>2nd Location</u>
<input type="checkbox"/> Grower Sales Privilege 2 nd location	
<input type="checkbox"/> Grower Sales Privilege 3 rd location	
<input type="checkbox"/> Limited On-Premises	
<input type="checkbox"/> Off-Premises	
<input type="checkbox"/> Off-Premises with Fuel Pumps	
<input type="checkbox"/> Warehouse	
<input type="checkbox"/> Wholesale Malt Beverage & Wine	
<input type="checkbox"/> Winery 1 st Location	
<input checked="" 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):

Swift Cider LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY
<p>RECEIVED</p> <p>DEC 14 2018</p> <p>Initials: <i>[Signature]</i></p> <p>Oregon Liquor Control Commission</p>	



LIQUOR LICENSE APPLICATION

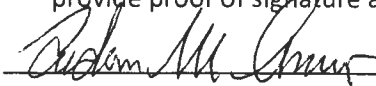
3. Applicant #1 Swift Cider LLC		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) Swift Cider			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 100 NE Farragut St, Suite 101			
City Portland	County Multnomah	Zip Code 97211	
6. Does the business address currently have an OLCC liquor license? <input type="checkbox"/> YES <input checked="" 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) 100 NE Farragut St, Unit 101			
City Portland	State OR	Zip Code 97211	
9. Phone Number of the Business Location 503-719-3402	Email Contact for this Application aidan@swiftcider.com		
Contact Person for this Application Aidan Currie		Phone Number 503-703-2994	
Mailing Address 6304 N Curtis Ave	City Portland	State OR	Zip Code 97211

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

Applicant Name: Swift Cider LLC Phone: 503-719-3402

Trade Name (dba): Swift Cider

Business Location Address: 100 NE Farragut St., Unit B Suite 101

City: Portland ZIP Code: 97217

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 9am to 11pm
 Monday 9am to 9pm
 Tuesday 9am to 9pm
 Wednesday 9am to 9pm
 Thursday 9am to 9pm
 Friday 9am to 11am
 Saturday 9am to 11pm

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 Karaoke
 Recorded Music Coin-operated Games
 DJ Music Video Lottery Machines
 Dancing Social Gaming
 Nude Entertainers 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: _____ Outdoor: _____
 Lounge: _____ Other (explain): 36, Tasting Room
 Banquet: _____ Total Seating: _____

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: 12-13-18

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)



OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE

795539-97

Please Print or Type

LLC Name: Swift Cider, LLC Year Filed: 2018 2011

Trade Name (dba): Swift Cider

Business Location Address: ~~1313 NE Lombard Place~~ 100 NE Farragut St.

City: Portland ZIP Code: OR 97211

List Members of LLC:

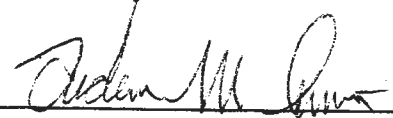
Percentage of Membership Interest:

1. <u>Aidan Currie</u> (managing member)	<u>55%</u>
2. <u>Jeremy Kwit</u> (members)	<u>45%</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: Aidan Currie DOB: 08/31/1985

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

Signature:  Date: 12-13-2018
(name) (title)

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: Swift Cider LLC
DBA OR TRADE NAME: Swift Cider PHONE: 503-719-3402 FAX: _____
BUSINESS ADDRESS (Including ZIP Code): 100 NE Fairway St Portland, OR 97211
WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): new outlet
CONTACT PERSON: Aidan Currie PHONE: 503-703-2994 EMAIL: aidan@swiftcider.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- Food Cart Night Club
 Restaurant Sports Bar
 Convenience Store Other: Tasting Room

SIZE OF SERVICE AREA: 500 sq. ft.
EXISTING BUILDING: Yes No
ZONING: _____
STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 36 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: Locking doors, cameras on exterior of building, security patrol
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: 9pm FRIDAY & SATURDAY OPEN: 9am CLOSE: 11pm
HOW LATE WILL THERE BE OUTSIDE SEATING? none HOW LATE WILL THERE BE ENTERTAINMENT? none

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Showtrans Trucking
NAME & ADDRESS OF PROPERTY OWNER: General Assembly LLC 36435 SE Gordon Creek Rd
Carbett, OR 97019

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): Cider tastings 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: Aidan Currie DATE: 12-13-18



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: 100 NE FARRAGUT ST

R#: R209174

State ID: 1N1E10DD 8000

Zone: EG2h

Plan District:

Proposed Use: MANUFACTURING AND PRODUCTION

MANUFACTURING AND PRODUCTION is an ALLOWED use in the EG2h zone

Additional Comments:

Per 33.140.100 and Table 140-1, Manufacturing and Production is an allowed use in the EG2 zone.

Chris Caruso

Name of City Official

City Planner

Title

503-823-7348

Contact Number

Signature of Official

1 / 7 / 2019

Date



0 100 200 400 600 800 Feet

1 inch = 200 feet

