



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	_____
<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	<i>FEB 07 2019</i>
<input type="checkbox"/> Full On-Premises, Other Public Location	<i>PD # 125 1937 ck</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 st location	
<input type="checkbox"/> Grower Sales Privilege 2 nd location	
<input type="checkbox"/> Grower Sales Privilege 3 rd location	
<input checked="" type="checkbox"/> Limited On-Premises	OLCC USE ONLY
<input type="checkbox"/> Off-Premises	Date application received:
<input type="checkbox"/> Off-Premises with Fuel Pumps	<i>12-20-18</i>
<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 st Location	<i>12-27-18</i>
<input type="checkbox"/> Winery 2 nd Location	By: <i>[Signature]</i>
<input type="checkbox"/> Winery 3 rd Location	License Action(s): <i>C/O</i>

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

LLOYD ATHLETIC CORP

NICK DAVIDSON

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY
<p>RECEIVED</p> <p>DEC 19 2018</p> <p><i>[Signature]</i></p>	



LIQUOR LICENSE APPLICATION

3. Applicant #1 LLOYD ATHLETIC CORP		Applicant #2 NICK DAVIDSON	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) LLOYD ATHLETIC CLUB			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 815 NE HALSEY ST			
City PORTLAND	County MULTNOMAH	Zip Code 97232	
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) 6315 N LOVELY ST			
City PORTLAND	State OR	Zip Code 97203	
9. Phone Number of the Business Location (503) 287-4594		Email Contact for this Application nicholasdavidson99@gmail.COM	
Contact Person for this Application NICK DAVIDSON		Phone Number (503) 4039040	
Mailing Address 6315 N LOVELY ST	City PORTLAND	State OR	Zip Code 97203

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.

Nicholas Davidson Digitally signed by Nicholas Davidson
Date: 2018.12.26 19:12:44 -08'00'

(Applicant#1)

(Applicant #2)

(Applicant#3)

(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: LLOYD ATHLETIC CORP Phone: 503-403-9040

Trade Name (dba): LLOYD ATHLETIC CLUB

Business Location Address: 815 NE HALSEY ST

City: PORTLAND ZIP Code: 97232

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>7a</u> to <u>7 pm</u>
Monday	<u>5a</u> to <u>10 pm</u>
Tuesday	<u>5a</u> to <u>10 pm</u>
Wednesday	<u>5a</u> to <u>10 pm</u>
Thursday	<u>5a</u> to <u>10 pm</u>
Friday	<u>5a</u> to <u>10 pm</u>
Saturday	<u>7a</u> to <u>7 pm</u>

Outdoor Area Hours: n/a

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: n/a

- | | |
|--|---|
| <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

n/a

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

SEATING COUNT

Restaurant: _____ Outdoor: _____
 Lounge: 40 Other (explain): _____
 Banquet: _____ Total Seating: 40

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: Nicholas A. Dowson Date: 12-20-18

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)



OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE

Please Print or Type

Corporation Name: Lloyd Athletic Corp. Year Incorporated: 2018

Trade Name (dba): Lloyd Athletic Club

Business Location Address: 815 ne Halsey

City: Portland ZIP Code: 97232

List Corporate Officers:

Nicholas Davidson
(name) Nicholas Davidson

President
(title) Secretary

List Board of Directors:

Nicholas Davidson
(name)

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:
<u>Nicholas Davidson</u>	<u>100</u>
_____	_____
_____	_____
_____	_____

Number of Stock Shares:	
Issued:	<u>100</u>
Unissued:	<u>0</u>
Total Shares Authorized to Issue:	<u>100</u>

Server Education Designee: Jill Davidson DOB: 5-11-71
(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: Nicholas A. Davidson President Date: 12-20-18
(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: LLOYD ATHLETIC CORP

DBA OR TRADE NAME: LLOYD ATHLETIC CLUB PHONE: 503-287-4594 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 815 NE HALSEY ST PORTLAND OR 97232

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): CHANGE OF OWNER; BEER

CONTACT PERSON: NICK DAVIDSON PHONE: 503-403-9040 EMAIL: nicholasdavidson99@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: 12 ft x 3 ft

EXISTING BUILDING: Yes No

ZONING: R182322 CENTRAL COMMERCIAL (CX)

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: n/a LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: n/a

DESCRIBE SECURITY: _____

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: S: 6am M-R 5am CLOSE: S: 8pm M-R 10pm FRIDAY & SATURDAY OPEN: 5am FRI; 6am SAT CLOSE: 10pm FRI; 8pm SAT

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: LLOYD ATHLETIC CLUB

NAME & ADDRESS OF PROPERTY OWNER: WESTON INVESTMENT CO 2154 NE BROADWAY STE 200 PORTLAND OR 97232

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: ATHLETIC CLUB

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: Nicholas A. Davidson DATE: 2-6-19