



OREGON LIQUOR CONTROL COMMISSION

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 checked="" type="checkbox"/> Full On-Premises, Commercial | Date: _____ |
| <input type="checkbox"/> Full On-Premises, Caterer | <div style="text-align: right;"> <p><i>Rec'd by Portland Liquor Licenses</i></p> <p>FEB 13 2019</p> <p>PD # <u> </u></p> <p><i>\$100 CASH</i></p> </div> |
| <input type="checkbox"/> Full On-Premises, Passenger Carrier | |
| <input type="checkbox"/> Full On-Premises, Other Public Location | |
| <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 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 type="checkbox"/> Winery 2 nd Location | |
| <input type="checkbox"/> Winery 3 rd Location | |
| | OLCC USE ONLY |
| | Date application received: |
| | <u>2/8/19</u> |
| | By: <u>Jon Z.</u> |
| | Date application accepted as initially complete: |
| | <u>2/8/19</u> |
| | By: <u>Jon Z.</u> |
| | License Action(s): <u>N/O</u> |

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

Mariah Picha Sack Gards LLC
(Applicant #1)

Thomas Duffly
(Applicant #2)

Toby Roberts
(Applicant #3)

(Applicant #4)

| OLCC USE ONLY | OLCC FINANCIAL SERVICES USE ONLY |
|---------------|----------------------------------|
| | |



LIQUOR LICENSE APPLICATION

| | | | |
|--|---------------------|--|-------------------|
| 3. Applicant #1 Mariah Pisha <i>Gado Gado LLC</i> | | Applicant #2 Thomas Duffy | |
| Applicant #3 Toby Roberts | | Applicant #4 | |
| 4. Trade Name of the Business (Name Customers Will See) Gado Gado | | | |
| 5. Business Address (Number and Street Address of the Location that will have the liquor license) 1801 NE Cesar E. Chavez Blvd | | | |
| City Portland | County Multnomah | Zip Code 97212 | |
| 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) 1801 NE Cesar E. Chavez Blvd | | | |
| City Portland | State OR | Zip Code 97212 | |
| 9. Phone Number of the Business Location | | Email Contact for this Application tobymroberts@gmail.com | |
| Contact Person for this Application Toby Roberts | | Phone Number 503-548-7082 | |
| Mailing Address 1801 NE Cesar E. Chavez Blvd | City Portland | State OR | Zip Code 97212 |

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.

Mariah Pisha

(Applicant #1)

[Signature]

(Applicant #2)

[Signature]

(Applicant #3)

[Signature]

(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Gado Gado, LLC Phone: 617-599-0120

Trade Name (dba): Gado Gado

Business Location Address: 1801 NE Cesar E. Chavez Blvd

City: Portland, OR ZIP Code: 97212

DAYS AND HOURS OF OPERATION

Business Hours:

| | |
|-----------|---------------------------|
| Sunday | <u>9am</u> to <u>11pm</u> |
| Monday | <u>9am</u> to <u>11pm</u> |
| Tuesday | <u>9am</u> to <u>11pm</u> |
| Wednesday | <u>9am</u> to <u>11pm</u> |
| Thursday | <u>9am</u> to <u>11pm</u> |
| Friday | <u>9am</u> to <u>11pm</u> |
| Saturday | <u>9am</u> to <u>11pm</u> |

Outdoor Area Hours:

| | |
|-----------|---------------------------|
| Sunday | <u>9am</u> to <u>10pm</u> |
| Monday | <u>9am</u> to <u>10pm</u> |
| Tuesday | <u>9am</u> to <u>10pm</u> |
| Wednesday | <u>9am</u> to <u>10pm</u> |
| Thursday | <u>9am</u> to <u>10pm</u> |
| Friday | <u>9am</u> to <u>10pm</u> |
| Saturday | <u>9am</u> to <u>10pm</u> |

The outdoor area is used for:

Food service Hours: 9am to 10pm
 Alcohol service Hours: 9am to 10pm
 Enclosed, how Partial wall, railing.

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:

- | | |
|--|---|
| <input type="checkbox"/> Live Music | <input type="checkbox"/> Karaoke |
| <input checked="" type="checkbox"/> Recorded Music | <input type="checkbox"/> Coin-operated Games |
| <input checked="" 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 | <u>9am</u> to <u>11pm</u> |
| Monday | <u>9am</u> to <u>11pm</u> |
| Tuesday | <u>9am</u> to <u>11pm</u> |
| Wednesday | <u>9am</u> to <u>11pm</u> |
| Thursday | <u>9am</u> to <u>11pm</u> |
| Friday | <u>9am</u> to <u>11pm</u> |
| Saturday | <u>9am</u> to <u>11pm</u> |

SEATING COUNT

Restaurant: 70 Outdoor: 24
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 94

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: Manohar Dula Date: 2/2/19

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



SOS: 1459920-95

Please Print or Type

LLC Name: Gado Gado, LLC Year Filed: 2018

Trade Name (dba): Gado Gado

Business Location Address: 1801 NE Cesar E. Chavez Blvd

City: Portland ZIP Code: 97212

| List Members of LLC: | Percentage of Membership Interest: |
|---|------------------------------------|
| 1. <u>Thomas Duffly</u> <small>(managing member)</small> | <u>30.43</u> |
| 2. <u>Mariah Pisha</u> <small>(members)</small> | <u>30.43</u> |
| 3. <u>Toby Roberts</u> | <u>20.51</u> |
| 4. <u>Fernande Duffly</u> | <u>3.73</u> |
| 5. <u>Mary & Paul Lee / Rachel & Brian Gardner</u> | <u>6.21 / 6.21</u> |
| 6. <u>Patrick Criteser / Frank Reppenhagen</u> | <u>1.24 / 1.24</u> |

(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: Mariah Pisha DOB: 12/09/1984

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

Signature: Mariah Pisha (name) (title) Date: 2/7/19

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) - 323-7525 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: Grado Grado, LLC

DBA OR TRADE NAME: Grado Grado PHONE: 503-548-7082 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 1801 NE Cesar Chavez Blvd, Portland 97212

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): New outlet, Full on-premise

CONTACT PERSON: Toby Roberts PHONE: 503-548-7082 EMAIL: toby@gradogrado.pdx.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Food Cart | <input type="checkbox"/> Night Club |
| <input checked="" type="checkbox"/> Restaurant | <input type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Other: _____ |

SIZE OF SERVICE AREA: 1700 sq ft

EXISTING BUILDING: Yes No

ZONING: CM2d

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 70 LOUNGE SEATING CAPACITY: 12 OUTSIDE SEATING CAPACITY: 24

DESCRIBE SECURITY: central alarm service, cameras

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

HOW LATE WILL THERE BE OUTSIDE SEATING? 10 pm HOW LATE WILL THERE BE ENTERTAINMENT? N/A 11pm

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: My Canh

NAME & ADDRESS OF PROPERTY OWNER: Wayne Stoll 4101 NE Tillamook ST, Portland 97213

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Video Poker | <input type="checkbox"/> Live Music | <input type="checkbox"/> Nude Dancers |
| <input type="checkbox"/> Karaoke | <input type="checkbox"/> Video Games/Pinball | <input checked="" type="checkbox"/> Recorded Music | <input type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): _____ | <input type="checkbox"/> Events (Describe): _____ | <input type="checkbox"/> 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 503-855-2433. 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:  DATE: 2/12/19



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: 1801 NE CESAR E CHAVEZ BLVD

R#: R262759

State ID: 1N1E25DD 8200

Zone: **CM2d**

Plan District: **HOLLYWOOD,
SUBDISTRICT B**

Proposed Use: **RETAIL SALES AND
SERVICE**

RETAIL SALES AND SERVICE is an
ALLOWED use in the CM2d zone

Additional Comments:

Retail Sales and Service is an allowed use in the CM2 zone per 33.130.100 and Table 130-1. The overlay zones place no extra restrictions on this use.

Laura Lehman

Name of City Official

City Planner

Title

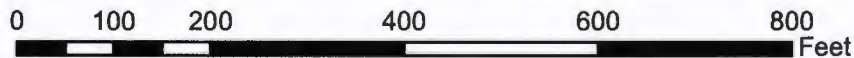
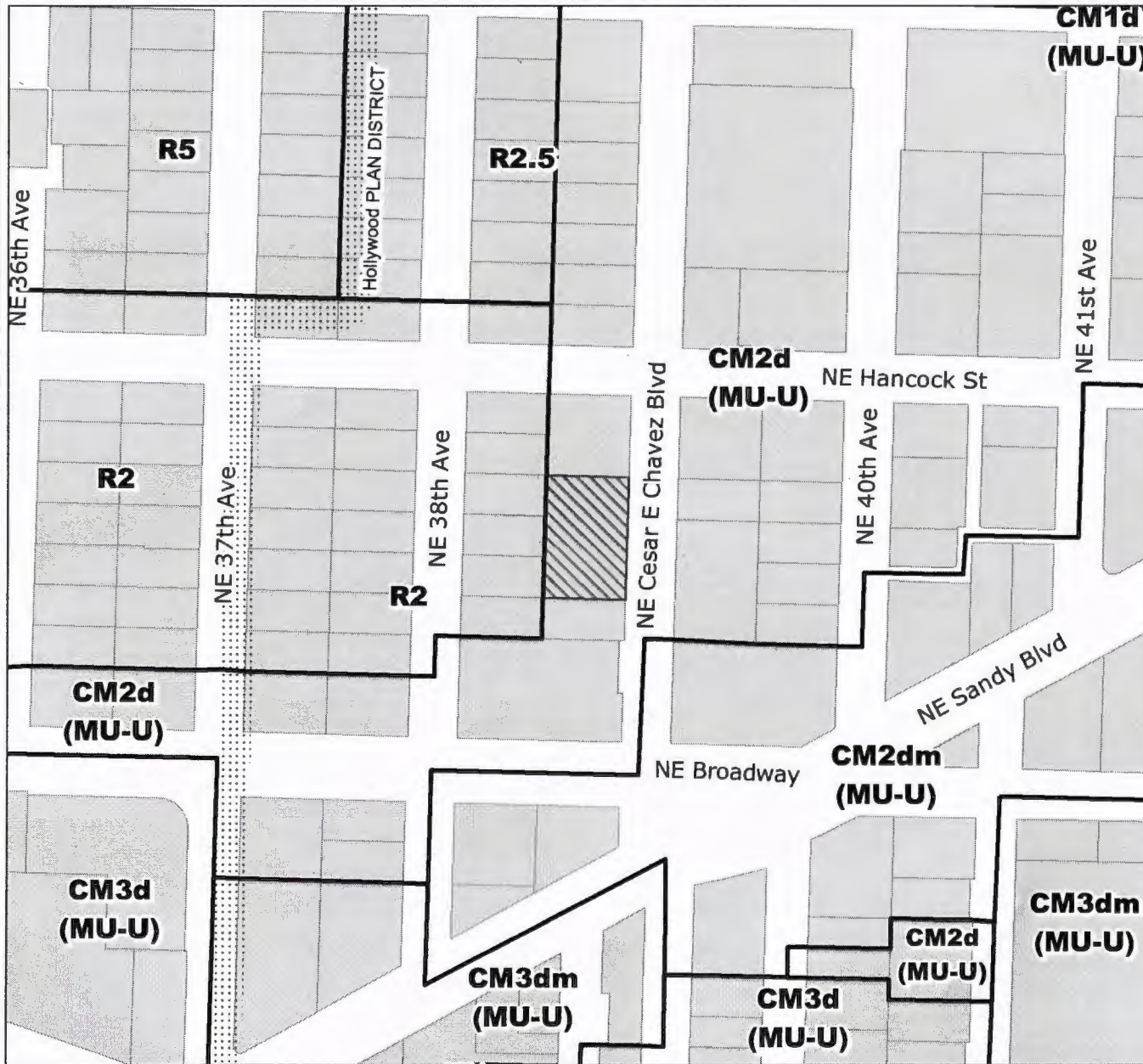
503-823-7391

Contact Number

Signature of Official

2 / 11 / 2019

Date



1 inch = 200 feet

