



LIQUOR LICENSE APPLICATION

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 checked="" type="checkbox"/> Full On-Premises, Commercial	
<input type="checkbox"/> Full On-Premises, Caterer	
<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	Date application received: _____
<input type="checkbox"/> Winery 2 nd Location	By: <u>Jan Z.</u>
<input type="checkbox"/> Winery 3 rd Location	Date application accepted as initially complete: _____
	By: <u>Jan Z.</u>
	License Action(s): <u>G/Priv</u>

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

As Good As It Gets LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY



LIQUOR LICENSE APPLICATION

3. Applicant #1 As Good As It Gets LLC		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) Cheryl's on 12th			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 1135 SW Washington Street			
City Portland	County Multnomah	Zip Code 97205	
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) 18560 SW Parrett Mountain Road			
City Sherwood	State OR	Zip Code 97140	
9. Phone Number of the Business Location 503-595-2252		Email Contact for this Application camills2@msn.com	
Contact Person for this Application Cheryl Mills		Phone Number 503-475-0575	
Mailing Address 18560 SW Parrot Mountain Road	City Sherwood	State OR	Zip Code 97140

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: As Good As It Gets LLC Phone: 503-595-2252

Trade Name (dba): Cheryl's on 12th

Business Location Address: 1135 SW Washington Street

City: Portland, Oregon ZIP Code: 97205

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>7 am</u> to <u>9 pm</u>
Monday	<u>7 am</u> to <u>9 pm</u>
Tuesday	<u>7 am</u> to <u>9 pm</u>
Wednesday	<u>7 am</u> to <u>9 pm</u>
Thursday	<u>7 am</u> to <u>9 pm</u>
Friday	<u>7 am</u> to <u>9 pm</u>
Saturday	<u>7 am</u> to <u>9 pm</u>

Outdoor Area Hours:

Sunday	<u>11 am</u> to <u>7 pm</u>
Monday	<u>11 am</u> to <u>7 pm</u>
Tuesday	<u>11 am</u> to <u>7 pm</u>
Wednesday	<u>11 am</u> to <u>7 pm</u>
Thursday	<u>11 am</u> to <u>7 pm</u>
Friday	<u>11 am</u> to <u>7 pm</u>
Saturday	<u>11 am</u> to <u>7 pm</u>

The outdoor area is used for:

- Food service Hours: 11 am to 7 pm
- Alcohol service Hours: 11 am to 7 pm
- Enclosed, how Metal patio 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 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: 4370 Outdoor: 464

Lounge: _____ Other (explain): _____

Banquet: _____ Total Seating: 89

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: _____

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



SOS: 4290A3-91

Please Print or Type

LLC Name: As Good As It Gets, LLC Year Filed: 2007

Trade Name (dba): Cheryl's on 12th

Business Location Address: 1135 SW Washington Street

City: Portland ZIP Code: 97205

List Members of LLC:

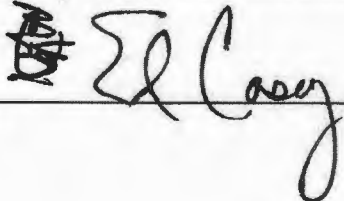
Percentage of Membership Interest:

- | | |
|---|------------|
| 1. <u>Edward M. Casey Revocable Trust</u>
<small>(managing member)</small> | <u>50%</u> |
| 2. <u>Cheryl A Krumlauf-Casey Revocable Trust</u>
<small>(members)</small> | <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: Cheryl Ann Casey DOB: 03/19/1957

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

Signature:  Managing Member Date: 3/19/18
(name) (title)

1-800-452-OLCC (6522)

www.olcc.state.or.us

(rev. 8/11)

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: As Good As It Gets LLC

DBA OR TRADE NAME: Cheryl's on 12th PHONE: 503-595-2252 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 1155 SW Washington Street, Portland, Oregon 97205

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): Greater Priveledge - FCOM Commercial

CONTACT PERSON: Cheryl Mills PHONE: 503-475-0575 EMAIL: camills2@msn.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: 2800 square foot

EXISTING BUILDING: Yes No

ZONING: Commercial

STRUCTURAL CHANGES (DESCRIBE): None

RESTAURANT SEATING CAPACITY: 43 LOUNGE SEATING CAPACITY: N/A OUTSIDE SEATING CAPACITY: 46

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? Renewal Applications
 Yes No I Don't Know

HOURS OF OPERATION

SUNDAY – THURSDAY OPEN: 7 am CLOSE: 9 pm FRIDAY & SATURDAY OPEN: 7 am CLOSE: 9 pm

HOW LATE WILL THERE BE OUTSIDE SEATING? 8 pm HOW LATE WILL THERE BE ENTERTAINMENT? N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Cheryl's on 12th

NAME & ADDRESS OF PROPERTY OWNER: Washington Plaza Investment LLC - 2455 NW Marshall Suite 1, Portland, Oregon 97210

ENTERTAINMENT

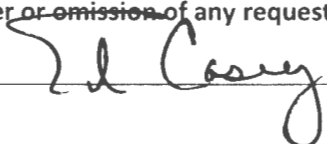
TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- 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

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

SIGNATURE:  DATE: 3/18/19

Taxlot Selection

Map Detail

GARTH 2.9.2

Owner: WASHINGTON PLAZA INVEST L

Site Address: 1129 SW WASHINGTON ST

State-ID: 1N1E33DD 1800

Tax Account: R246596

Search

Geocode

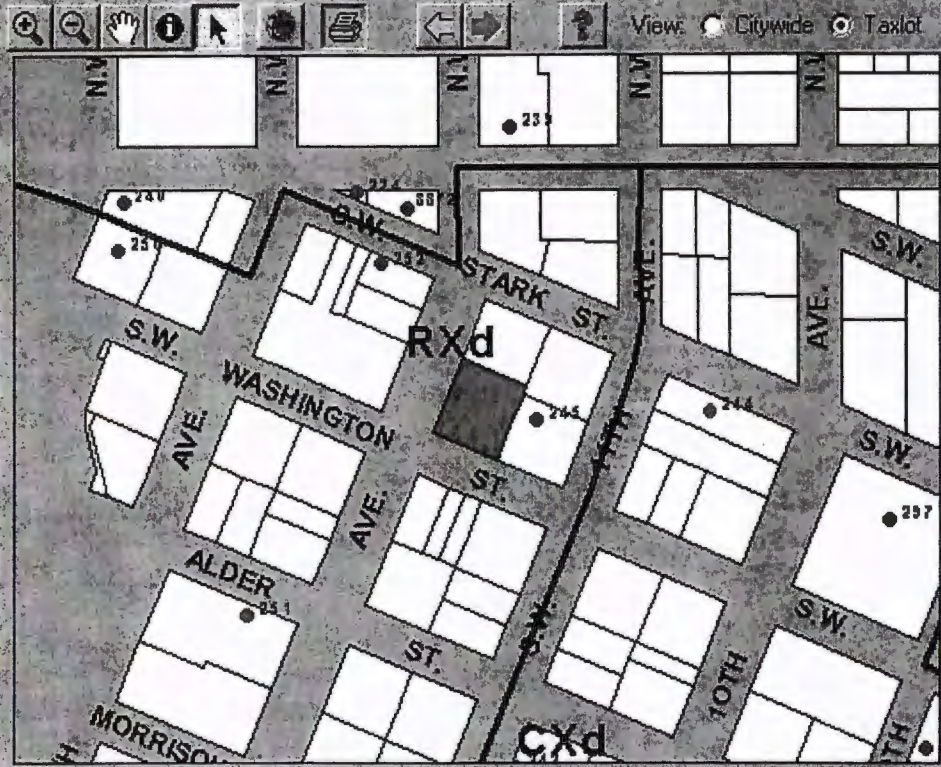
Clear

Help

Database Navigation:



State-ID	Account	Owner Name
▶ 1N1E33DD 1800	R246596	WASHINGTON PLAZA
1N1E33DD 1800	P633781	GENESIS INVESTMEN
1N1E33DD 1800	P579107	POWER TOOL LLC



Alternate Account: R667728290
 Lot Size: 11000
 Building SQFT: 48304

Legal Description: PORTLAND, BLOCK 255, LOT 5&6, S 10' OF LOT 7
 Block #: 255
 Lot #: 5&6

Mailing Information:
 WASHINGTON PLAZA INVEST LLC
 2455 NW MARSHALL ST #1
 PORTLAND OR 97210

Zoning Code(s):

RXd

Historic District:

Conservation District:

Jurisdiction:

Portland

QTR SEC

Tax Map

Zone Map

PortlandMaps

bing aeriels

Plan District:

CENTRAL CITY

Map No:

3028

SubDistrict:

DOWNTOWN

SubArea:

WEST END

NRMP:

LUR Case History:

(6 cases)

- LU 02-103133 DZ
- LU 11-114237 DZ
- LUR 91-00634 DZ
- LUR 98-00714 DZ
- PR 08-182738 ZCL

Draw LURs

LUR Search

Successfully Located Taxlot Number 1N1E33DD 1800 in the GIS database.

City of Portland Development Services

Scale 1"=200' X:7,642,081 Y:684,465

3:09 PM

3/28/2012

MAR 28 2012
COMMERCIAL ALLOWED
 Permit Number
 DOWNTOWN

By TDH Date 3/28/12
 Approved by
 Planning and Zoning Review