



# 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 <sup>st</sup> Location	Date application received: _____
<input type="checkbox"/> Brewery 2 <sup>nd</sup> Location	Name of City or County: _____
<input type="checkbox"/> Brewery 3 <sup>rd</sup> Location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 1 <sup>st</sup> location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Brewery-Public House 2 <sup>nd</sup> location	By: _____
<input type="checkbox"/> Brewery-Public House 3 <sup>rd</sup> location	Date: _____
<input type="checkbox"/> Distillery	<div style="text-align: center;"> <p><b>Rec'd by Portland Liquor Licenses</b></p> <p><b>APR 01 2019</b></p> <p>PD # 975001 CC</p> </div>
<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 <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	
<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 <sup>st</sup> Location	Date application received: <u>3/25/19</u>
<input type="checkbox"/> Winery 2 <sup>nd</sup> Location	By: <u>Jan Z.</u>
<input type="checkbox"/> Winery 3 <sup>rd</sup> Location	Date application accepted as initially complete: <u>3/25/19</u>
	By: <u>Jan Z.</u>
	License Action(s): <u>C/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):

Wyd Rice LLC  
James D Rice  
(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY



OREGON LIQUOR CONTROL COMMISSION

# LIQUOR LICENSE APPLICATION

3. Applicant #1 <i>James D Rice</i>		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) <i>The Fields Bar &amp; Grill</i>			
5. Business Address (Number and Street Address of the Location that will have the liquor license) <i>1139 NW 11th Ave</i>			
City <i>Portland</i>	County <i>multnomah</i>	Zip Code <i>97209</i>	
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) <i>same as above</i>			
City	State	Zip Code	
9. Phone Number of the Business Location <i>503.841.6601</i>		Email Contact for this Application <i>jimdanielrice@gmail.com</i>	
Contact Person for this Application <i>James D Rice</i>		Phone Number <i>360.216.9151</i>	
Mailing Address <i>1401 SE 120th Ave</i>	City <i>Vancouver</i>	State <i>WA</i>	Zip Code <i>98683</i>

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.

*James D Rice*  
 \_\_\_\_\_  
 (Applicant #1)

\_\_\_\_\_  
 (Applicant #2)

\_\_\_\_\_  
 (Applicant #3)

\_\_\_\_\_  
 (Applicant #4)



OREGON LIQUOR CONTROL COMMISSION  
BUSINESS INFORMATION

Please Print or Type

Applicant Name: James D Rice Phone: 360.216.9151

Trade Name (dba): The Fields Bar & Grill

Business Location Address: 1139 NW 11<sup>th</sup> Ave

City: Portland ZIP Code: 97209

**DAYS AND HOURS OF OPERATION**

**Business Hours:**

Sunday 10 to 10  
Monday 11 to 10  
Tuesday 11 to 11  
Wednesday 11 to 11  
Thursday 11 to 11  
Friday 11 to 12  
Saturday 10 to 12

**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: Outdoor area only available weather permitting (summer months)

**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: \_\_\_\_\_

**DAYS & HOURS OF LIVE OR DJ MUSIC**

Sunday \_\_\_\_\_ to \_\_\_\_\_  
Monday \_\_\_\_\_ to \_\_\_\_\_  
Tuesday \_\_\_\_\_ to \_\_\_\_\_  
Wednesday \_\_\_\_\_ to \_\_\_\_\_  
Thursday \_\_\_\_\_ to \_\_\_\_\_  
Friday \_\_\_\_\_ to \_\_\_\_\_  
Saturday \_\_\_\_\_ to \_\_\_\_\_

**SEATING COUNT**

Restaurant: 69 Outdoor: 20  
Lounge: 10 Other (explain): \_\_\_\_\_  
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: James D Rice Date: 3-23-19

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



505:1530230-99

Please Print or Type

LLC Name: wyldRice Year Filed: 2019

Trade Name (dba): The Fields Bar & Grill

Business Location Address: 1139 NW 11th Ave

City: Portland ZIP Code: 97209

List Members of LLC:

Percentage of Membership Interest:

1. James D Rice  
(managing member)

100%

2. \_\_\_\_\_  
(members)

\_\_\_\_\_

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: Justin B marcellay DOB: 05.03.1986

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

Signature: James D Rice (Name) Managing Member (title) Date: 3-23-19

# 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) 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: wyldRice LLC

DBA OR TRADE NAME: The Fields Bar & Grill PHONE: 503.841.6601 FAX: \_\_\_\_\_

BUSINESS ADDRESS (Including ZIP Code): 1139 NW 11<sup>th</sup> Ave, Portland OR 97209

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

CONTACT PERSON: James Rice PHONE: 360.216.9151 EMAIL: jimdanierice@gmail.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 checked="" type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store     | <input type="checkbox"/> Other: _____          |

SIZE OF SERVICE AREA: 2100 sq ft

EXISTING BUILDING:  Yes  No

ZONING: Commercial

STRUCTURAL CHANGES (DESCRIBE): n/a

RESTAURANT SEATING CAPACITY: 89 LOUNGE SEATING CAPACITY: 10 (Bar) OUTSIDE SEATING CAPACITY: 20

DESCRIBE SECURITY: n/a

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: Sun-10:00 CLOSE: Sun 10, Mon 11 FRIDAY & SATURDAY OPEN: Fri 11 CLOSE: Fri 12

HOW LATE WILL THERE BE OUTSIDE SEATING? Closing (summer only) HOW LATE WILL THERE BE ENTERTAINMENT? n/a

## HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: The Fields Bar & Grill

NAME & ADDRESS OF PROPERTY OWNER: \_\_\_\_\_

## ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Dancing                      | <input checked="" 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"/> Streamed 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 503-355-2433. 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: [Signature] DATE: 3-31-19