



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

LICENSE FEE: Do not include the license fee with the application (the license fee will be collected at a later time).

APPLICATION: Application is being made for:

- Brewery
- Brewery-Public House
- Distillery
- Full On-Premises, Commercial
- Full On-Premises, Caterer
- Full On-Premises, Passenger Carrier
- Full On-Premises, Other Public Location
- Full On-Premises, Nonprofit Private Club
- Full On-Premises, For-Profit Private Club
- Grower Sales Privilege
- Limited On-Premises
- Off-Premises
- Off-Premises with Fuel Pumps
- Warehouse
- Wholesale Malt Beverage & Wine (WMBW)
- Winery

CITY AND COUNTY USE ONLY

Date application received _____

Name of City or County _____

Recommends this license be ___ Granted ___ Denied

By _____

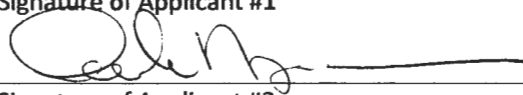
Date _____

OLCC USE

Application received by Jon Z.

Date 9/2/19

License Action: N/O

1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license:			
Applicant #1 <u>OLIA POKE + TEA, LLC.</u>	Applicant #2	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Rec'd by Portland Liquor Licenses APR 05 2019 PD \$100-CC- # 0422576 </div>	
Applicant #3	Applicant #4		
2. Trade Name of the Business (the name customers will see): <u>OLIA POKE + TEA</u>			
3. Business Location: Number and Street <u>2720 SW MOODY AVE.</u>			
City <u>PORTLAND</u>	County <u>MULTNOMAH</u>	ZIP <u>97201</u>	
4. Is the business at this location currently licensed by the OLCC? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
5. Mailing Address (where the OLCC will send your mail):			
PO Box, Number, Street, Rural Route <u>4432 NE 71ST AVE</u>			
City <u>PORTLAND</u>	State <u>OR</u>	ZIP <u>97218</u>	
6. Phone Number of the Business Location: <u>503-421-0560</u>			
7. Contact Person for this Application:			
Name <u>ANH TRAM NGUYEN</u>		Phone Number <u>503-421-0560</u>	
Mailing Address, City, State, ZIP <u>4432 NE 71ST AVE PORTLAND, OR 97218</u>			
Email <u>OLIAPOKETEAM@GMAIL.COM</u>			
I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is prohibited on the licensed premises.			
Signature of Applicant #1 		Signature of Applicant #2	
Signature of Applicant #3		Signature of Applicant #4	



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: OLIA POKE + TEA, LLC. Phone: 503-421-0560

Trade Name (dba): OLIA POKE + TEA

Business Location Address: 2720 SW MOODY AVE.

City: PORTLAND ZIP Code: 97201

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday CLOSE to CLOSE
 Monday 8:00 to 7:00
 Tuesday 8:00 to 7:00
 Wednesday 8:00 to 7:00
 Thursday 8:00 to 7:00
 Friday 8:00 to 7:00
 Saturday 8:00 to 7:00

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: 46 Outdoor: _____
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 46

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: 04/02/19



OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE

SOS: 1A11656-96

Please Print or Type

LLC Name: OLIA POKE + TEA, LLC Year Filed: 2018

Trade Name (dba): OLIA POKE + TEA

Business Location Address: 2720 SW MOODY AVE

City: PORTLAND ZIP Code: 97201

List Members of LLC:

Percentage of Membership Interest:

1. HALO, LLC
(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: ANH TRAM NGUYEN DOB: 04/13/76

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

Signature: [Signature] Date: 04/02/19
(name) (title)

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



SOS: 1336222-90

Please Print or Type

LLC Name: HALO LLC Year Filed: 2017

Trade Name (dba): HALO LLC.

Business Location Address: 4432 NE 71ST AVE

City: PORTLAND ZIP Code: 97218

List Members of LLC:

Percentage of Membership Interest:

1. ANH TRAM NGUYEN
(managing member)

95

2. HIEU VO
(members)

5

3. _____

4. _____

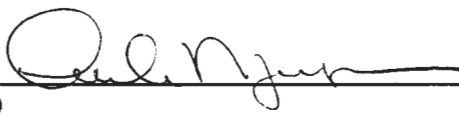
5. _____

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: ANH TRAM NGUYEN DOB: 04/13/76

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

Signature:  Date: 04/02/19
(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) - 823-7525 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: OLIA POKE + TEA, LLC.

DBA OR TRADE NAME: OLIA POKE + TEA PHONE: 503-421-0560 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 2720 SW MOODY AVE

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

CONTACT PERSON: ANH TRAM NGUYEN PHONE: 503-421-0560 EMAIL: OLIAPOKETEAM@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: 2,200 SQ. FT

EXISTING BUILDING: Yes No

ZONING: COMMERCIAL

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 50 LOUNGE SEATING CAPACITY: 30 OUTSIDE SEATING CAPACITY: _____

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: 8:00 CLOSE: 7:00 FRIDAY & SATURDAY OPEN: 8:00 CLOSE: 7:00

HOW LATE WILL THERE BE OUTSIDE SEATING? _____ HOW LATE WILL THERE BE ENTERTAINMENT? _____

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: _____

NAME & ADDRESS OF PROPERTY OWNER: _____

ENTERTAINMENT

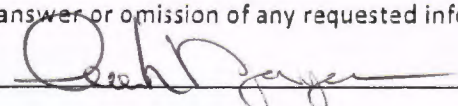
TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

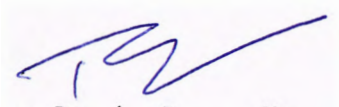
- Dancing Video Poker Live Music Nude Dancers
 Karaoke Video Games/Pinball Recorded Music DJ Entertainment
 Pool Tables (How Many): _____ Events (Describe): _____ Other: _____

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 503-855-2433. 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: 04/03/19



2720 SW Moody Ave is zoned CX (Central Commercial) with the "d" Design overlay zone. Retail sales and service uses are allowed in the CX Zone. Brandon Rogers, City Planner, City of Portland Oregon. 04/05/19. 503-823-7300

