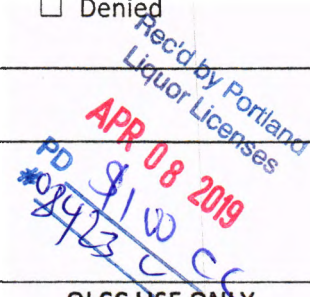




OREGON LIQUOR CONTROL COMMISSION

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	_____
<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	
<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:
	4/8/19
	By: <u>Jan Z.</u>
	Date application accepted as initially complete:
	4/8/19
	By: <u>Jan Z.</u>
	License Action(s): <u>N10</u>

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

The Butte LLC

(Applicant #1)

[Signature]
(Applicant #2)

[Signature]
(Applicant #3)

[Signature]
(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

3. Applicant #1 The Butte LLC		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) Rocky Butte Pub			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 8627 NE Sandy Blvd			
City Portland	County Multnomah	Zip Code 97220	
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) PO Box 87			
City Gladstone	State OR	Zip Code 97027	
9. Phone Number of the Business Location 503-255-1969		Email Contact for this Application rockybuttepub@yahoo.com	
Contact Person for this Application Ralph Tidwell		Phone Number 503-314-5394	
Mailing Address PO Box 87	City Gladstone	State OR	Zip Code 97027

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.

Ralph Tidwell
(Applicant #1)

[Signature]
(Applicant #2)

(Applicant #3)

[Signature]
(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: The Butte LLC Phone: 503-807-8662

Trade Name (dba): Rocky Butte LLC

Business Location Address: 8627 NE Sandy Blvd

City: Portland ZIP Code: 97220

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 10 am to 2:30 am
 Monday 10 am to 2:30 am
 Tuesday 10 am to 2:30 am
 Wednesday 10 am to 2:30 am
 Thursday 10 am to 2:30 am
 Friday 10 am to 2:30 am
 Saturday 10 am to 2:30 am

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: N/A

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
- 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 8 pm to 1 am
 Monday 8 pm to 1 am
 Tuesday 8 pm to 1 am
 Wednesday 8 pm to 1 am
 Thursday 8 pm to 1 am
 Friday 8 pm to 1 am
 Saturday 8 pm to 1 am

SEATING COUNT

Restaurant: 45 Outdoor: N/A
 Lounge: 19 Other (explain): _____
 Banquet: N/A Total Seating: 64

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: 4-8-79



OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE

SOS: 15A2655-90

Please Print or Type

LLC Name: The Butte LCC Year Filed: 2019

Trade Name (dba): Rocky Butte Pub

Business Location Address: 8627 N.E. Sandy Blvd.

City: Portland ZIP Code: 97220

List Members of LLC:

Percentage of Membership Interest:

1. <u>Hal Kearney</u> <small>(managing member)</small>	<u>25%</u>
2. <u>Janice Kearney</u> <small>(members)</small>	<u>25%</u>
3. <u>Ralph Tidwell</u>	<u>50%</u>
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: Hal Kearney DOB: 08/31/1948

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

Signature: [Signature] Date: 04/05/2019
(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: The Butte LLC

DBA OR TRADE NAME: Rocky Butte Pub PHONE: _____ FAX: 503-239-0029

BUSINESS ADDRESS (Including ZIP Code): 8627 NE Sandy Blvd, Portland, Or. 97220

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

CONTACT PERSON: Hal Kearney PHONE: 503-807-8662 EMAIL: halkearney@aol.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: 1800 square feet

EXISTING BUILDING: Yes No

ZONING: CM2h

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: N/A

DESCRIBE SECURITY: 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: 10 Am CLOSE: 2:30pm FRIDAY & SATURDAY OPEN: 10 Am CLOSE: 2:30 pm

HOW LATE WILL THERE BE OUTSIDE SEATING? N/A HOW LATE WILL THERE BE ENTERTAINMENT? 1 Am

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Rocky Butte Pub

NAME & ADDRESS OF PROPERTY OWNER: currently Larry ERICK (New operators are buying property)
8227 NE Sandy Blvd,
Portland, Or. 97220

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Dancing | <input checked="" type="checkbox"/> Video Poker | <input checked="" type="checkbox"/> Live Music | <input type="checkbox"/> Nude Dancers |
| <input checked="" type="checkbox"/> Karaoke | <input checked="" type="checkbox"/> Video Games/Pinball | <input checked="" type="checkbox"/> Recorded Music | <input type="checkbox"/> DJ Entertainment |
| <input checked="" type="checkbox"/> Pool Tables (How Many): <u>2</u> | <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 503-865-2433. 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: Ralph Lee Fedoroff DATE: 04-08-2019



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: 8627-8633 NE SANDY BLVD

R#: R261888

State ID: 1N2E21CB 300

Zone: CM2h

Plan District:

Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is an ALLOWED use in the CM2h zone

Additional Comments:

Retail sales and service use is allowed.

Sean Williams

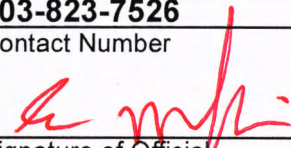
Name of City Official

City Planner

Title

503-823-7526

Contact Number


Signature of Official

4 / 8 / 2019

Date



1 inch = 200 feet

