



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 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 checked="" type="checkbox"/> Limited On-Premises	OLCC USE ONLY
<input type="checkbox"/> Off-Premises	Date application received:
<input type="checkbox"/> Off-Premises with Fuel Pumps	4/5/19
<input type="checkbox"/> Warehouse	By: JanZ.
<input type="checkbox"/> Wholesale Malt Beverage & Wine	Date application accepted as initially complete:
<input type="checkbox"/> Winery 1 st Location	4/9/19
<input type="checkbox"/> Winery 2 nd Location	By: JanZ.
<input type="checkbox"/> Winery 3 rd Location	License Action(s): N/O

Rec'd by Portland
Liquor Licenses
APR 10 2019
PD \$100 cc
228001

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

Bernstein's Bagels LLC

(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 Bernstein's Bagels LLC		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) Bernstein's Bagels			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 816 N Russell St			
City Portland	County OR	Zip Code 97227	
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) 816 N Russell St			
City Portland	State OR	Zip Code 97227	
9. Phone Number of the Business Location 503.875.9437		Email Contact for this Application bernsteinsbagels@gmail.com	
Contact Person for this Application Peter Hurteau		Phone Number 503.875.9437	
Mailing Address 816 N Russell St	City Portland	State OR	Zip Code 97227

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: Bernstein's Bagels Phone: 503.875.9437

Trade Name (dba): _____

Business Location Address: 816 N Russell St

City: Portland ZIP Code: 97227

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>8:30am</u>	to	<u>1:30pm</u>
Monday	<u>7:30</u>	to	<u>1:30</u>
Tuesday	<u>7:30</u>	to	<u>1:30</u>
Wednesday	<u>7:30</u>	to	<u>1:30</u>
Thursday	<u>7:30</u>	to	<u>1:30</u>
Friday	<u>7:30</u>	to	<u>1:30</u>
Saturday	<u>8:30</u>	to	<u>1:30</u>

Outdoor Area Hours:

Sunday	<u>8:30am</u>	to	<u>1:30pm</u>
Monday	<u>7:30am</u>	to	<u>1:30pm</u>
Tuesday	<u>7:30am</u>	to	<u>1:30pm</u>
Wednesday	<u>7:30am</u>	to	<u>1:30pm</u>
Thursday	<u>7:30am</u>	to	<u>1:30pm</u>
Friday	<u>7:30am</u>	to	<u>1:30pm</u>
Saturday	<u>8:30am</u>	to	<u>1:30pm</u>

The outdoor area is used for:

- Food service Hours: all hours to _____
- Alcohol service Hours: all hours to _____
- Enclosed, how _____ fenced

The exterior area is adequately viewed and/or supervised by Service Permittees.

_____ (Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: _____

Patio closed during winter and looking to potentially expand hours during summer weekends

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: <u>24</u>	Outdoor: <u>24</u>
Lounge: _____	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:  Date: 4/3/19

1-800-452-OLCC (6522)
www.oregon.gov/olcc



OREGON LIQUOR CONTROL COMMISSION CORPORATION QUESTIONNAIRE

SOS: 1281575-91

Please Print or Type

Corporation Name: Berntein's Bagels LLC Year Incorporated: 2019

Trade Name (dba): Bernstein's Bagels

Business Location Address: 816 N Russell St

City: Portland ZIP Code: 97227

List Corporate Officers:

Noah Bernstein-Hanley Owner
(name) (title)

Peter Hurteau Owner

List Board of Directors:

(name)

List Stockholders: (Note: If any stockholder is another legal entity, that entity may also need to complete another Corporation Questionnaire. See Liquor License Application Guide for more information.)

<u>Stockholders:</u>	<u>Number of Shares Held:</u>	Number of Stock Shares:
_____	_____	Issued: _____
_____	_____	Unissued: _____
_____	_____	Total Shares Authorized to Issue: _____
_____	_____	

Server Education Designee: Peter Hurteau **DOB:** 10/20/79
(See Liquor License Application Guide for more information)

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

Officer's Signature: [Signature] **Date:** 4/3/19
(name) (title) Owner

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: Bernstein's Bagels

DBA OR TRADE NAME: Bernstein's Bagels PHONE: 503-875-9437 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 816 N Russell St. Portland, OR 97227

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

CONTACT PERSON: Peter Hurtzcu PHONE: 503-875-9437 EMAIL: bernsteinsbagels@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 type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Other: _____ |

SIZE OF SERVICE AREA: 1200 sq feet

EXISTING BUILDING: Yes No

ZONING: EX

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 35 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: 24

DESCRIBE SECURITY: one entrance, open floor plan

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: 7:30 am CLOSE: 1:30 pm FRIDAY & SATURDAY OPEN: 7:30 am CLOSE: 1:30 pm (7 pm) ^{secondarily}

HOW LATE WILL THERE BE OUTSIDE SEATING? 1:30, 7 pm on weekend HOW LATE WILL THERE BE ENTERTAINMENT? 7 pm

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Local Celebrity, Mint

NAME & ADDRESS OF PROPERTY OWNER: Wright Commercial LLC 809 N Russell St 1201 97227

ENTERTAINMENT

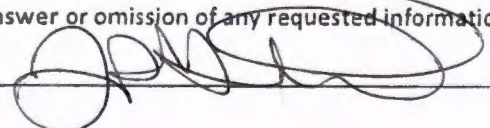
TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|--|--|---|
| <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 checked="" type="checkbox"/> Events (Describe): <u>occasional afternoon outdoor music</u> | | <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:  DATE: 4/10/19



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: 816-820 N RUSSELL ST

R#: R102637

State ID: 1N1E27CA 2800

Zone: EXd

Plan District: CENTRAL CITY, LOWER ALBINA

Proposed Use: RETAIL SALES AND SERVICE

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

Additional Comments:

Retail Sales and Service is an allowed use in the EXd zone. The Plan District has no additional limitations.

Timothy Novak

Name of City Official

City Planner

Title

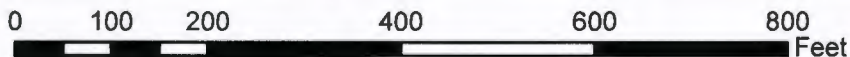
503-823-5395

Contact Number

Signature of Official

4 / 10 / 2019

Date



1 inch = 200 feet

