



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

Rec'd by Portland
Liquor Licenses
APR 26 2019
PD \$75.00 cl
* 2310

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

Microwave 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 Microwave LLC		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) Mikkeller Portland			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 701 E. Burnside Street			
City Portland	County Multnomah	Zip Code 97214	
6. Does the business address currently have an OLCC liquor license? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO The licensee is Alchemy Brewing Company LLC, dba Burnside Brewing Company.			
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) 819 SE Grant St.			
City Portland	State OR	Zip Code 97214	
9. Phone Number of the Business Location TBD	Email Contact for this Application duke@nwalcoholaw.com		
Contact Person for this Application DUKE TUFTY		Phone Number (503) 718-2310 (NO SOLICITATION)	
Mailing Address 7521 NE SANDY BLVD.	City PORTLAND	State OR	Zip Code 97213

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: Microwave LLC Phone: TBD

Trade Name (dba): Mikkeller Portland

Business Location Address: 701 E. Burnside Street

City: Portland ZIP Code: 97214

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 12pm to 12am
 Monday 5pm to 12am
 Tuesday 5pm to 12am
 Wednesday 5pm to 12am
 Thursday 6pm to 12am
 Friday 5pm to 1am
 Saturday 12pm to 1am

Outdoor Area Hours:

Sunday 12pm to 10pm
 Monday 5pm to 10pm
 Tuesday 5pm to 10pm
 Wednesday 5pm to 10pm
 Thursday 5pm to 10pm
 Friday 5pm to 10pm
 Saturday 12pm to 10pm

The outdoor area is used for:

Food service Hours: 12pm to 10pm
 Alcohol service Hours: 12pm to 10pm
 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 _____ to _____
 Monday _____ to _____
 Tuesday _____ to _____
 Wednesday _____ to _____
 Thursday _____ to _____
 Friday _____ to _____
 Saturday _____ to _____

SEATING COUNT

Restaurant: 80 Outdoor: 64
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 144

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: 4/16/19

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

(rev. 12/07)

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



Please Print or Type

LLC Name: Microwave LLC Year Filed: 2019

Trade Name (dba): Mikkeller Portland

Business Location Address: 701 E. Burnside Street

City: Portland ZIP Code: 97214

List Members of LLC:


Percentage of Membership Interest:

List Members of LLC:	Percentage of Membership Interest:
1. <u>Kurt Huffman</u> (managing member)	<u>100%</u>
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: Kurt Huffman DOB: 12/12/1969

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

Signature:  OWNER Date: Apr 16, 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) - 823-7526 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: Microwave LLC

DBA OR TRADE NAME: Mikkeller Portland

PHONE: _____

FAX: _____

BUSINESS ADDRESS (including ZIP Code): 701 E. Burnside Street, Portland, OR 97214

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

CONTACT PERSON: Duke Tufty

PHONE: (503) 780-2311

EMAIL: duke@nwalcoholaw.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: _____

EXISTING BUILDING: Yes No

ZONING: Ex--Central Employment

STRUCTURAL CHANGES (DESCRIBE): Cosmetic Remodel

RESTAURANT SEATING CAPACITY: 80

LOUNGE SEATING CAPACITY: 0

OUTSIDE SEATING CAPACITY: 64

DESCRIBE SECURITY: On-site manager

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: 5pm CLOSE: 12am FRIDAY & SATURDAY OPEN: 12pm CLOSE: 1am

HOW LATE WILL THERE BE OUTSIDE SEATING? 10pm HOW LATE WILL THERE BE ENTERTAINMENT? N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Alchemy Brewing Company LLC, dba Burnside Brewing Company

NAME & ADDRESS OF PROPERTY OWNER: Some Knucklehead, Inc., 2500 NE Sandy Blvd., Ste C, Portland, OR 97232

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: 4/16/2019



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: 701 E BURNSIDE ST

R#: R150296

State ID: 1N1E35CB 7300

Zone: EXd

Plan District: CENTRAL CITY, CENTRAL EASTSIDE

Proposed Use: RETAIL SALES AND SERVICE

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

Additional Comments:

Per 33.140.100 and Table 140-1, Retail Sales and Service use is allowed in the EX zone. The Central City Plan District does not limit the use at this site.

Lois Jennings

Name of City Official

City Planner

Title

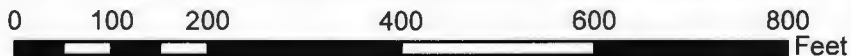
503-823-2877

Contact Number

Signature of Official

4 / 18 / 2019

Date



1 inch = 200 feet

