



# 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	_____
<input type="checkbox"/> Brewery 3 <sup>rd</sup> Location	Name of City or County:
<input type="checkbox"/> Brewery-Public House 1 <sup>st</sup> location	_____
<input type="checkbox"/> Brewery-Public House 2 <sup>nd</sup> location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 3 <sup>rd</sup> location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Distillery	By: _____
<input type="checkbox"/> Full On-Premises, Commercial	Rec'd by Portland Liquor Licenses
<input type="checkbox"/> Full On-Premises, Caterer	Date: _____
<input type="checkbox"/> Full On-Premises, Passenger Carrier	JUN 06 2019
<input checked="" type="checkbox"/> Full On-Premises, Other Public Location	PD 100.00
<input type="checkbox"/> Full On-Premises, For Profit Private Club	* CK 4625
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	<b>OLCC USE ONLY</b>
<input type="checkbox"/> Grower Sales Privilege 1 <sup>st</sup> location	Date application received:
<input type="checkbox"/> Grower Sales Privilege 2 <sup>nd</sup> location	5/24/19
<input type="checkbox"/> Grower Sales Privilege 3 <sup>rd</sup> location	By: Jon Z.
<input type="checkbox"/> Limited On-Premises	Date application accepted as initially complete:
<input type="checkbox"/> Off-Premises	5/24/19
<input type="checkbox"/> Off-Premises with Fuel Pumps	By: Jon Z.
<input type="checkbox"/> Warehouse	License Action(s): N/O
<input type="checkbox"/> Wholesale Malt Beverage & Wine	
<input type="checkbox"/> Winery 1 <sup>st</sup> Location	
<input type="checkbox"/> Winery 2 <sup>nd</sup> Location	
<input type="checkbox"/> Winery 3 <sup>rd</sup> Location	

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

Chayote 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 <i>Russell V. Kuhns</i>		Applicant #2 <i>Chayote LLC</i>	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) <i>Lobby by Lechon (Chayote LLC dba Lechon is legal entity)</i>			
5. Business Address (Number and Street Address of the Location that will have the liquor license) <i>50 Pine St, Suite 101</i>			
City <i>Portland</i>	County <i>Multnomah</i>	Zip Code <i>97204</i>	
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) <i>113 SW Naito Parkway</i>			
City <i>Portland</i>	State <i>OR</i>	Zip Code <i>97204</i>	
9. Phone Number of the Business Location <i>5032199000</i>		Email Contact for this Application <i>charlotte@lechonpdx.com</i>	
Contact Person for this Application <i>Charlotte Deyo</i>		Phone Number <i>5032199000</i>	
Mailing Address <i>113 SW Naito Parkway</i>	City <i>Portland</i>	State <i>OR</i>	Zip Code <i>97204</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.

*Russell V. Kuhns*

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE

SOS: 1026091-96

Please Print or Type

LLC Name: Chayote LLC Year Filed: 2015

Trade Name (dba): Lechon

Business Location Address: 113 S.W. Meito Parkway, Portland, OR

City: Portland ZIP Code: 97204

List Members of LLC:

Percentage of Membership Interest:

- 1. Russell Kuhns  
(managing member)
- 2. \_\_\_\_\_  
(members)
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_

100%

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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: Charlotte Deyo DOB: 09/28/1989

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

Signature: Russell V. Kuhns member Date: 5/20/2019  
(name) (title)