



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

DM

Application is being made for:

LICENSE TYPES

- Full On-Premises Sales (\$402.60/yr)
- Commercial Establishment
- Caterer
- Passenger Carrier
- Other Public Location
- Private Club
- Limited On-Premises Sales (\$202.60/yr)
- Off-Premises Sales (\$100/yr)
 - with Fuel Pumps
- Brewery Public House (\$252.60)
- Winery (\$250/yr)
- Other: _____

ACTIONS

- Change Ownership
- New Outlet
- Greater Privilege
- Additional Privilege
- Other C/UNIT

L 241365
P 54321

90-DAY AUTHORITY

Check here if you are applying for a change of ownership at a business that has a current liquor license, or if you are applying for an Off-Premises Sales license and are requesting a 90-Day Temporary Authority

APPLYING AS:

- Limited Partnership
- Corporation
- Limited Liability Company
- Individuals

CITY AND COUNTY USE ONLY

Date application received: _____

The City Council or County Commission:

(name of city or county)

recommends that this license be:

- Granted
- Denied

By: _____ (signature) _____ (date)

Name: _____

Title: _____

OLCC USE ONLY

Application Rec'd by: [Signature]

Date: 9-14-16

90-day authority: Yes No

1. Entity or Individuals applying for the license: [See SECTION 1 of the Guide]

① Healthy Cooking LLC ③ _____

Rec'd by Portland
Liquor Licenses

2. Trade Name (dba): Atlas Wine Sales #740 ④ _____

SEP 26 2016

3. Business Location: 111 SE Belmont St Portland OR 97214 PD 75° SW
(number, street, rural route) (city) (county) (state) (ZIP code) LL05003A

4. Business Mailing Address: 9555 SW Frewing St Tigard OR 97223
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: _____ (phone) _____ (fax)

6. Is the business at this location currently licensed by OLCC? Yes No

7. If yes to whom: Atlas Wine Sales Type of License: Off Premises Sales

8. Former Business Name: Atlas Wine Sales

9. Will you have a manager? Yes No Name: Karen Hopkins
(manager must fill out an Individual History form)

10. What is the local governing body where your business is located? Multnomah Portland
(name of city or county)

11. Contact person for this application: Karen Hopkins 541-992-1619
(name) (phone number(s))
9555 SW Frewing St Tigard OR 97223 info@atlaswinesales.com
(address) (fax number) (e-mail address)

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

Applicant(s) Signature(s) and Date:

① [Signature] Date 9-2-16 ③ _____

② _____ Date _____ ④ _____

RECEIVED

SEP 06 2016

Initials: [Signature]
Oregon Liquor Control Commission



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name:

Healthy Cooking LLC
Karen Hopkins

Phone:

541 992 1619

Trade Name (dba):

Atlas Wine Sales

Business Location Address:

111 SE Belmont St #740

City: Portland

ZIP Code:

97214

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	_____	to	_____
Monday	<u>9</u>	to	<u>5</u>
Tuesday	<u>9</u>	to	<u>5</u>
Wednesday	<u>9</u>	to	<u>5</u>
Thursday	<u>9</u>	to	<u>5</u>
Friday	<u>9</u>	to	<u>5</u>
Saturday	_____	to	_____

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)

N/A Online shopping

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: _____

Outdoor: _____

Lounge: _____

Other (explain): Off premise license

Banquet: _____

Total Seating: N/A

OLCC USE ONLY

Investigator Verified Sealing: _____ (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: 9-12-16

1-800-452-OLCC (6522)

www.oregon.gov/olcc

OREGON LIQUOR CONTROL COMMISSION LIMITED LIABILITY COMPANY QUESTIONNAIRE



1236592-94

Please Print or Type

LLC Name: Healthy Cooking LLC Year Filed: 2016 ✓

Trade Name (dba): Atlas Wine Sales

Business Location Address: 111 SE Belmont St #740

City: Portland ZIP Code: 97214

List Members of LLC:

List Members of LLC:	Percentage of Membership Interest:
1. <u>Karen Hopkins</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: _____ DOB: _____

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

Signature: [Signature] (name) owner (title) Date: 9/12/16

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: ~~Atlas~~ Healthy Cooking LLC

DBA OR TRADE NAME: Atlas Wine Sales PHONE: 541-992-1619 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 111 SE Belmont St #740 Portland OR 97214

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

CONTACT PERSON: Karen Hopkins PHONE: 541-992-1619 EMAIL: info@atlaswinesales.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

Food Cart Night Club

Restaurant Sports Bar

Convenience Store Other: Online Delivery Shipment

SIZE OF SERVICE AREA: N/A

EXISTING BUILDING: Yes No

ZONING: Rose City Wine Storage Locker

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: Security provided by Rose City Wine Storage

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: 9am CLOSE: 5pm FRIDAY & SATURDAY OPEN: N/A CLOSE: _____

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

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Atlas Wine Sales

NAME & ADDRESS OF PROPERTY OWNER: Camille Gonzalez / 111 SE Belmont St #772 Portland OR 97214

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

Purchasing a business that has been established OLCC approved for Online Wine sales. No retail location, just wine storage.

A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: [Signature] DATE: 9/25/16

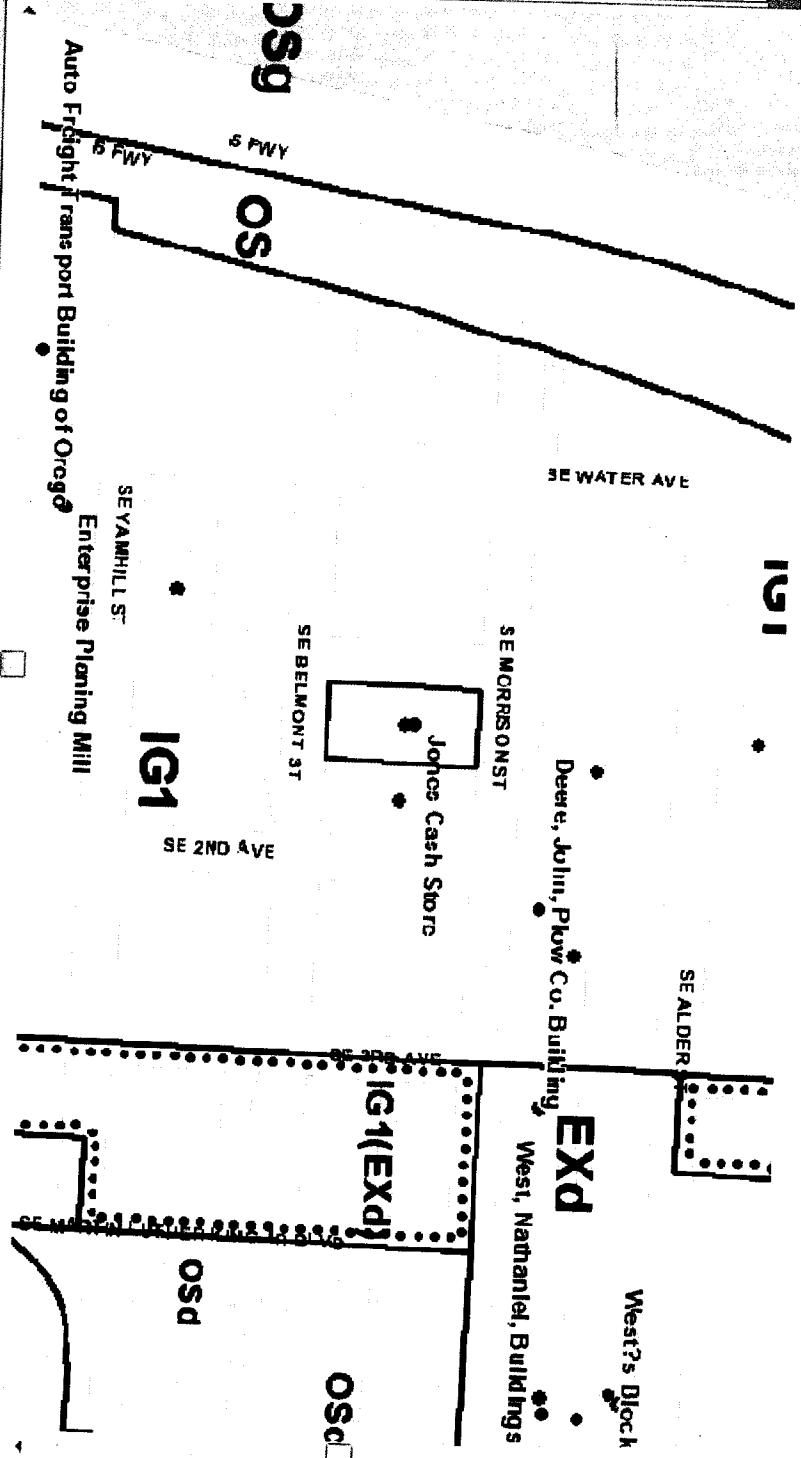
Owner Name: BELMONT & MORRISON LLC % WI
 Site Address: 111 SE BELMONT ST
 State ID: 151F03A2 437M
 Account #: R149933

Search:

Geocode Address When Taxlot Not Found
 Search is Based on Active Field Only
 Hide Personal Property Accounts
 Display Taxlot Detail Window

Navigate Query Results:

Owner: BELMONT & MORRISON LLC % WI
 Site Address: 111 SE BELMONT ST
 State: OR



Taxlot Details

Lot Size: 22000 sqft Building Size: 80000 sqft Map Number: 3130 Zoning Code(s): IG1

Legal Description: EAST PORTLAND, BLOCK 45, LOT -A, HISTORIC PROPERTY 15 YR 2006, POTENTIAL ADDITIONAL 45

Lot & Block: 1 1

Historic District: IG1

Current Value District: IG1

Subarea: CENTRAL EASTSIDE

Plan District: CENTRAL CTY

Tax Map: [Map Icon]

Zoning Map: [Map Icon]

ILR Case History: (6 Cases)

- LU 06-167709 CU
- 11109-14215R HDZ
- LU 09-172666 HDZ
- LU 14-155978 DZ
- PC 06-155715

Draw ILRS: ILR Search:

IG1 - Warehouse & freight movement allowed

1900 SW 4th Ave., Suite 5000
 Bureau of Development Services
 Portland, OR 97201

Thomas Soppe, City Planner I,
 BDS #22, 503-823-7908,
 Scale 1 inch = 228 feet

Thomas Soppe @ portlandoregon.gov