



OREGON LIQUOR CONTROL COMMISSION
LIQUOR LICENSE APPLICATION

MLO

Application is being made for:

LICENSE TYPES

Full On-Premises Sales (\$402.60/yr) *mlo*

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 chg 7/11

Need by Portland Liquor Licenses

FEB 28 2017

PD \$75 CC # 024115

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: *2-14-17*

90-day authority: Yes No

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

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

① *Robert M Stickney* ③ *R+J Homevestors, LLC*

② *Jeanne Stickney* ④ _____

2. Trade Name (dba): *FOUNDERS GRESHAM*

3. Business Location: *8036 N Fessenden St Mult. Portland OR 97203*

(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: *23044 SE MERCER CT DENGISUS OR 97089*

(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: *503-658 3669*

(phone) (fax)

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

7. If yes to whom: *7 Stars LLC* Type of License: *OFF Premise*

8. Former Business Name: *Portland Mart*

9. Will you have a manager? Yes No Name: _____

(manager must fill out an Individual History form)

10. What is the local governing body where your business is located? *Portland*

(name of city or county)

11. Contact person for this application: *Robert M Stickney* *503-730-6178*

(name) (phone number(s))

(address) (fax number) *foundersgresham@yahoo.com*

(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 *2/5/17* ③

② *Jeanne Stickney* Date *2/9/17* ④

RECEIVED

Date

FEB 10 2017

(rev. 06/20)

Initials: *[Signature]*

Oregon Liquor Control Commission



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

New

Please Print or Type

Applicant Name: Rob Stickney Phone: 503 730-6174

Trade Name (dba): Rounders Gresham

Business Location Address: 8036 N Fessenden

City: Portland ZIP Code: 97203

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>8:30</u> to <u>10:30</u>
Monday	<u>8:30</u> to <u>10:30</u>
Tuesday	<u>8:30</u> to <u>10:30</u>
Wednesday	<u>8:30</u> to <u>10:30</u>
Thursday	<u>8:30</u> to <u>10:30</u>
Friday	<u>9-</u> to <u>12-</u>
Saturday	<u>9-</u> to <u>12-</u>

Outdoor Area Hours:

Sunday	<u>10:00</u> to <u>10:00</u>
Monday	<u>9:00</u> to <u>10:00</u>
Tuesday	<u>9:00</u> to <u>10:00</u>
Wednesday	<u>9:00</u> to <u>10:00</u>
Thursday	<u>9:00</u> to <u>10:00</u>
Friday	<u>9:00</u> to <u>11:00</u>
Saturday	<u>9:00</u> to <u>11:00</u>

The outdoor area is used for:

- Food service Hours: 10:00 to 10:00
- Alcohol service Hours: 10:00 to 10:00
- 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: 31 Outdoor: 4

Lounge: _____ Other (explain): _____

Banquet: _____ Total Seating: 35

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: 2/24/17

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1100519-92

Please Print or Type

LLC Name: RJT Homevestors, LLC Year Filed: 2015

Trade Name (dba): Roundtree Grocers

Business Location Address: 8036 N Fessenden St.

City: Portland ZIP Code: 97203

List Members of LLC:

Percentage of Membership Interest:

- | | |
|--|------------|
| 1. <u>Robert Stacey</u>
(managing member) | <u>51%</u> |
| 2. <u>Jeanne Stacey</u>
(members) | <u>49%</u> |
| 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: Robert Stacey DOB: 09/14/1968

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

Signature: [Signature] (name) member (title) Date: 2/9/17

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: R + J Homevestors LLC

DBA OR TRADE NAME: Rounders Grestham PHONE: 5037306178 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 8036 N Fessenden Portland 97203

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

CONTACT PERSON: Robert Stikney PHONE: 5037306178 EMAIL: roundersgrestham@yahoo.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: 1,600 sq ft.

EXISTING BUILDING: Yes No

ZONING: Commercial

STRUCTURAL CHANGES (DESCRIBE): N/A

RESTAURANT SEATING CAPACITY: 40 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: Security cameras, Alarm Monitoring

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: 8:30 AM CLOSE: 10:00 PM FRIDAY & SATURDAY OPEN: 8:30 AM CLOSE: 12:00

HOW LATE WILL THERE BE OUTSIDE SEATING? _____ HOW LATE WILL THERE BE ENTERTAINMENT? _____

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Portland Mart

NAME & ADDRESS OF PROPERTY OWNER: _____

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): 1 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: _____

Property Search

Owner Name AMERICAN ENERGY INVESTMENTS

Site Address 8036 N FESSENDEN ST

State ID IN1W01DA 19500

Account # R245246

Search Clear PortlandMaps

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

Navigate Query Results

Owner Site Address State

AMERICAN EN... 8036 N FESSEN... IN1W01

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

*CN2, Neighborhood Commercial
 Open hours less than 15 hours
 per day - not a convenience
 store.*

*Retail Sales & Service is
 an allowed use.
 2/28/17 Katie Malinowski*

Search Legend Add Data Selection



2 Zone
 Taxlot Details

Lot Size: 9000 sqft Building Size: 1800 sqft Map Number: 2022 Zoning Code(s): CN2

Legal Description: POINT VIEW, BLOCK 9, LOT 1 EXC PT IN ST, LOT 2-4 Lot & Block: 1, 2-4 9

Mailing Information: AMERICAN ENERGY INVESTMENTS LLC 3435 NE M L KING BLVD PORTLAND, OR 97212

Jurisdiction: Portland Conservation District: NRMP: Subarea: Subdistrict: Plan District: Tax Map: Zon LUR Case His Draw LUR

Scale 1 inch = 125 feet

*City Planner
 503-823-7344*