



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

MO

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 _____

Rec'd by Portland
Liquor Licenses

FEB 28 2017

PD \$100 ck

#2089

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: OK

Date: 2-21-17

90-day authority: Yes No

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

① Cultured Caveman Corporation ③ _____

② _____ ④ _____

2. Trade Name (dba): Cultured Caveman

3. Business Location: 8233 N Denver Avenue Portland Multnomah OR 97217
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 6225 N Olympia Street Portland OR 97203
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 971-254-4948
(phone) (fax)

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

7. If yes to whom: _____ Type of License: _____

8. Former Business Name: _____

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: Heather Hunter 508-212-2225 and Joseph Ban 971-300-3454
(name) (phone number(s))
6225 N Olympia Street culturedcavemanpdx@gmail.c
(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 2/17/2017 ③ _____ Date _____
Initials: [Signature]
② [Signature] Date 2/17/2017 ④ _____ Date _____
Oregon Liquor Control Commission

RECEIVED
FEB 17 2017



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Cultured Caveman Corp. Phone: 971-254-4948

Trade Name (dba): Cultured Caveman

Business Location Address: 8233 N. Denver Ave.

City: Portland ZIP Code: 97217

DAYS AND HOURS OF OPERATION

Business Hours:

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

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)

Seasonal Variations: Yes No If yes, explain: _____

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: 45 Outdoor: _____

Lounge: _____ Other (explain): _____

Banquet: _____ Total Seating: 45

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: 2/17/17



OREGON LIQUOR CONTROL COMMISSION CORPORATION QUESTIONNAIRE

1120426-92

Please Print or Type

Corporation Name: Cultured Caveman Corporation Year Incorporated: 2015

Trade Name (dba): Cultured Caveman

Business Location Address: 8233 N Denver Avenue

City: Portland ZIP Code: 97217

List Corporate Officers:

<u>Heather Hunter</u>	<u>President</u>
(name)	(title)
<u>Joseph Ban</u>	<u>Co-President</u>
_____	_____
_____	_____

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: _____
_____	_____	

Number of Stock Shares:

Issued: _____

Unissued: _____

Total Shares Authorized to Issue: _____

Server Education Designee: Joseph Ban DOB: 10/05/1986
(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] president Date: 2/17/1017
(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: Cultured Caveman LLC

DBA OR TRADE NAME: Cultured Caveman PHONE: 503-212-2225 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 8233 N. Denver Ave Portland OR 97217

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

CONTACT PERSON: Joseph Ban PHONE: 971-300-3454 EMAIL: culturedcaveman@
gmail.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: 1200 sq ft

EXISTING BUILDING: Yes No

ZONING: commercial

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 47 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: security cameras

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: 11 CLOSE: 10 FRIDAY & SATURDAY OPEN: 11 CLOSE: 10

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

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: _____

NAME & ADDRESS OF PROPERTY OWNER: Rick Jacobson PO Box 818 Lake Oswego OR ~~97031~~
97034

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: [Signature] DATE: 2/24/17



Property Search

Owner Name: KING VIEW LLC
 Site Address: 8221-8237 N DENVER AVE
 State ID: IN1E0908
 Account #: R196150

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: KING VIEW LLC | Site Address: 8221-8237 N DENVER AVE | State: IN1E0908

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

Restaurant is a Retail Sales use. Retail Sales and Service is allowed in the CS zone.

Search Legend Add Data Selection

Taxlot Details

Lot Size: 15500 sqft | Building Size: 10350 sqft | Map Number: 2228
 Legal Description: KENTON, BLOCK 4, LOT 14-19 | Lot & Block: 14-19
 Mailing Information: KING VIEW LLC, P O BOX 818, LAKE OSWEGO, OR 97034

Zoning Code(s): CSd, R2a
 Historic District: Kenton Commercial
 Conservation District: Conservation District

Plan District: KENTON
 SubDistrict: NRMP

LUR Case History: LU 04-094487 HDZ

Scale 1 inch = 167 feet

Rodney Jennings (503) 823-5088
 City Planner II