



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

DT

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

MAR 14 2017

PD \$100 ck
513

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:

Date: 3-10-17

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 Salute Tap Room LLC

② _____ ④ _____

2. Trade Name (dba): Salute Tap Room

3. Business Location: 15710 NE Blizan St Portland OR 97230
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 5101 S.E 113th Ave Portland OR 97266
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 206-687-3655
(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: Sopath Yath
(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: Sopath Yath 206-687-3655
(name) (phone number(s))
5101 S.E 113th Ave Portland OR Sopath.Yath@yahoo.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. **RECEIVED**
Applicant(s) Signature(s) and Date:

① Date 3/3/17 ③ Date MAR 07 2017

② Khan Yath Date 3/3/17 ④ Date



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Salute Tap Room LLC Phone: 206-687-3655

Trade Name (dba): Salute Tap Room

Business Location Address: 15710 NE Glisan St

City: Portland ZIP Code: 97230

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>Close</u> to <u>Close</u>
Monday	<u>11 Am</u> to <u>11 Pm</u>
Tuesday	<u>11 Am</u> to <u>11 Pm</u>
Wednesday	<u>11 Am</u> to <u>11 Pm</u>
Thursday	<u>11 Am</u> to <u>11 Pm</u>
Friday	<u>11 Am</u> to <u>12 Am</u>
Saturday	<u>11 Am</u> to <u>12 Am</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: 11 Am to N/A
- 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: sun / football season

ENTERTAINMENT

Check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> Live Music | <input type="checkbox"/> Karaoke |
| <input type="checkbox"/> Recorded Music | <input checked="" type="checkbox"/> Coin-operated Games |
| <input type="checkbox"/> DJ Music | <input type="checkbox"/> Video Lottery Machines |
| <input type="checkbox"/> Dancing | <input checked="" type="checkbox"/> Social Gaming |
| <input type="checkbox"/> Nude Entertainers | <input checked="" 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: _____ Outdoor: _____

Lounge: _____ Other (explain): _____

Banquet: _____ Total Seating: 30-40

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: Kham Yath Date: 3/3/17

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1301320-95

Please Print or Type

LLC Name: Salute Tap Room LLC Year Filed: 2017 ✓

Trade Name (dba): Salute Tap Room

Business Location Address: 15710 NE Glisan St

City: Portland ZIP Code: 97230

List Members of LLC:

Percentage of Membership Interest:

1. Sopath Yath
(managing member)

50%

2. Kham Yath
(members)

50%

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: Sopath Yath DOB: 12/01/79

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

Signature: Kham Yath Date: 3/3/17
(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: Salute Tap Room

DBA OR TRADE NAME: Salute Tap Room PHONE: 206-687-3655 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 15710 N.E. Glisan St Portland OR 97230

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

CONTACT PERSON: Sopath Vath PHONE: 206-687-3655 EMAIL: Sopath.Vath@Yahoo

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- | | |
|--|--|
| <input type="checkbox"/> Food Cart | <input type="checkbox"/> Night Club |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store | <input checked="" type="checkbox"/> Other: <u>Tap Room</u> |

SIZE OF SERVICE AREA: 1500 sq ft

EXISTING BUILDING: Yes No

ZONING: _____

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: 34-40 OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: _____

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: 11am CLOSE: 11pm FRIDAY & SATURDAY OPEN: 11am CLOSE: 12am

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

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: USBCA

NAME & ADDRESS OF PROPERTY OWNER: Jim Greenfield 15710 NE Glisan St Portland OR

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Video Poker | <input type="checkbox"/> Live Music | <input type="checkbox"/> Nude Dancers |
| <input type="checkbox"/> Karaoke | <input type="checkbox"/> Video Games/Pinball | <input type="checkbox"/> Recorded Music | <input type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): _____ | <input type="checkbox"/> Events (Describe): _____ | <input checked="" type="checkbox"/> Other: <u>Tap Room</u> | |

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: 3/4/17

MapWorks - [\\cgisfile\BDS\MapWorks_ArcMap_Config\MXD\mapworks_lus.mxd]

File Edit View Drawing Help

BES Unit ID Scale: 1" = 167'

Property Search

Owner Name: GREENFIELD, JAMES R
 Site Address: 15710 NE GLISAN ST
 State ID: IN2E36DA 8200
 Account #: R217835

Search Clear PortlandMaps

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	Site Address	State
GREENFIELD, JA...	15710 NE GLISA...	IN2E3...

Search Legend Add Data Selection

Taxlot Details

Lot Size: 13132 sqft	Building Size: 2976 sqft	Map Number: 3046	Zoning Code(s): CSh
Legal Description: MEYERMEAD, BLOCK 1, N 86' OF LOT 1	Lot & Block: 1	Historic District:	Conservation District:
Mailing Information: GREENFIELD, JAMES R 15105 SW 119TH AVE TIGARD, OR 97224	Jurisdiction: Portland	Plan District: EAST CORRIDOR	SubArea: NRMP:

Scale 1 inch = 167 feet

Retail Sales and Service uses like restaurants, bars, or cafes are allowed outright on sites zoned CS, or Storefront Commercial, as this site is zoned, per Zoning Code Section 33.130.100.

City of Portland
 Bureau of Development Services
 Land Use Service Division
 1900 SW 4th Ave. Suite 500C
 Portland, OR 97201

Amanda Rhoads
 Amanda Rhoads, City Planner II

503-823-7837