



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 C/IN

L246870
P 27533

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: 3-3-17

90-day authority: Rec'd by Portland Liquor Licenses

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

① AMAAN PETRO, INC ③ PO #75-ck
② _____ ④ # 121

2. Trade Name (dba): Gateway Fast Service 76
3. Business Location: 515 NB 102nd Ave PORTLAND OR 97220
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 8990 SW MARSEILLES DR BEAVERTON OR 97007
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503 764-7940
(phone) (fax)

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

7. If yes to whom: Gateway Fast Service Inc type of License: OFF PREMISES sales

8. Former Business Name: Gateway FAST SERVICE 76

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? MULTNOMAH Portland
(name of city or county)

11. Contact person for this application: Reena Akcal 503 764-7940
(name) (phone number(s))
8990 SW Marselles Dr Beaverton OR 97007
(address) (fax number) (e-mail address) reena.akcal@gmail.com

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 2/16/17 ③ _____ Date _____

② _____ Date _____ ④ _____

RECEIVED

FEB 15 2017

Initials: [Signature]
Oregon Liquor Control Commission



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: AMAAN PETRO INC Phone: 503 764-7940

Trade Name (dba): GATEWAY FAST SERVICE TB

Business Location Address: 515 NE 102nd Ave

City: PORTLAND OR ZIP Code: 97220

DAYS AND HOURS OF OPERATION

Business Hours: 24 hours

Outdoor Area Hours: N/A

The outdoor area is used for: N/A

Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

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: N/A

- 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

N/A
Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

SEATING COUNT

N/A

Restaurant: _____ Outdoor: _____
Lounge: _____ Other (explain): _____
Banquet: _____ Total Seating: _____

OLCC USE ONLY

Investigator Verified Seating: _____ (Y) _____ (N)

Investigator Initials: _____

Date: _____

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Applicant Signature: [Signature] Date: 2/16/17



OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE

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Please Print or Type

Corporation Name: AMAAN PETRO, INC Year Incorporated: 2017 ✓

Trade Name (dba): GATEWAY FAST SERVE 76

Business Location Address: 515 NE 102nd AVENUE

City: PORTLAND OR ZIP Code: 97220

List Corporate Officers:

<u>HINDPREET SINGH</u> (name)	<u>SECRETARY</u> (title)
<u>COURTIS SINGH</u>	<u>President</u>
<u>HITPREET KAUR</u>	<u>officer</u>
<u>MANDPREET KAUR</u>	<u>officer</u>

List Board of Directors: SAME AS ABOVE

(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.)

Stockholders:	Number of Shares Held:
<u>Gurjit Singh</u>	<u>34%</u>
<u>Hindpreet SINGH</u>	<u>33%</u>
<u>JASSI ARORA</u>	<u>33%</u>
_____	_____

Number of Stock Shares:	
Issued:	_____
Unissued:	_____
Total Shares Authorized to Issue:	_____

Server Education Designee: Reem DOB: 12/22/1972
(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: Reem (name) officer (title) Date: 02/16/17

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: AMAAN PETRO INC

DBA OR TRADE NAME: GATEWAY FAST SERVICE 76 PHONE: 503 764-7940 FAX: -

BUSINESS ADDRESS (Including ZIP Code): SIS NE 102nd AVENUE PORTLAND OR 97220

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

CONTACT PERSON: REENA AKKAL PHONE: 503 764-7940 EMAIL: reena+akkal@gmail.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- Food Cart Night Club
 Restaurant Sports Bar
 Convenience Store Other: FUEL PUMPS

SIZE OF SERVICE AREA: _____

EXISTING BUILDING: Yes No

ZONING: COMMERCIAL

STRUCTURAL CHANGES (DESCRIBE): NONE

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: _____ 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 Don't Know

HOURS OF OPERATION

SUNDAY - THURSDAY OPEN: 24 HOURS CLOSE: _____ FRIDAY & SATURDAY OPEN: 24 HOURS 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: GATEWAY FAST SERVICE 76

NAME & ADDRESS OF PROPERTY OWNER: ROBERT JOSEPH BARNAM / ADDRESS: OAK TERRACE LAKE LAKE OSWEGO OR 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.

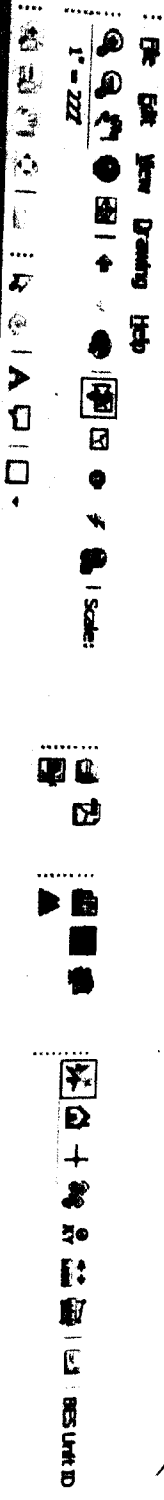
Use this area to provide any additional information that you wish to be considered on this liquor application

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

SIGNATURE: [Signature]

DATE: 3/6/17

17-126589 PR



Owner Name: LE METOUR, WES E & LE METOU
 Site Address: 3518 SW MALTHOUSE BLVD
 State ID: ESJEDCA 2300
 Account #: R237394

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

Owner: _____ Site Address: _____ State: _____

CG zone allows Retail Sales & Service Bureau of Development Services 1900 SW 4th Ave, Suite 5000 Portland, OR 97201

Montgomery's Sales & delivery to Retail Sales

and some use

Lot Size: 14922 sqft Building Size: 4716 sqft Map Number: 3025 Zoning Code(s): CG
 Legal Description: PARTITION PLAT 1992-25, LOT 2 Lot & Block: 2 Historic District: _____
 BXC PT 2M ST Conservation District: _____

Marketing Information:
 LE METOUR, WES E & LE METOUR, DEBRAH
 3203 SW MALTHOUSE ST
 PORTLAND, OR 97239-1913
 Jurisdiction: Portland

Plan District: _____ ULR Case File: 6430 R ULR 91-007
 SubDistrict: _____
 Subarea: _____
 NAPP: _____
 Show ULR

Scale 1 inch = 222 feet

Rodney Lanning City Planner II (503) 823-5089