



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

EH

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 VTN

*L241612
P 11983*

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: 3-16-17

90-day authority: Yes No

Rec'd by [Signature]
Liquor License:

MAR 22 2017

PD CC \$75
412294

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

① Cedar Mill Brewing, LLC ③ _____

② _____ ④ _____

2. Trade Name (dba): IBU Public House

3. Business Location: 4439 SW Beaverton-Hillsdale Hwy, Portland, Multnomah County, OR, 97221
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 515 NW Saltzman Rd #857, Portland, OR, 97229
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503-718-1894
(phone) (fax)

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

7. If yes to whom: IBUPUB, Inc Type of License: Full On-Premises Sales

8. Former Business Name: IBU Pub.

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, OR - Multnomah County
(name of city or county)

11. Contact person for this application: Jason L Cruse 503-718-1894
(name) (phone number(s))
12055 NW Sunningdale Dr., Portland, OR 97229 jason.cruse@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.

Applicant(s) Signature(s) and Date:

① [Signature] Date 03/02/2017 ③ _____ Date _____

② _____ Date _____ ④ _____ Date _____

RECEIVED _____

MAR 10 2017 [Signature]



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Cedar Mill Brewing, LLC Phone: 503-718-1894

Trade Name (dba): IBU Public House

Business Location Address: 4439 SW Beaverton-Hillsdale Hwy

City: Portland, OR ZIP Code: 97229

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>8:00am</u>	to	<u>12:00am</u>
Monday	<u>4:00pm</u>	to	<u>12:00am</u>
Tuesday	<u>4:00pm</u>	to	<u>12:00am</u>
Wednesday	<u>4:00pm</u>	to	<u>12:00am</u>
Thursday	<u>4:00pm</u>	to	<u>12:00am</u>
Friday	<u>12:00pm</u>	to	<u>12:00am</u>
Saturday	<u>8:00am</u>	to	<u>12:00am</u>

Outdoor Area Hours:

Sunday	<u>8:00am</u>	to	<u>10:00pm</u>
Monday	<u>4:00pm</u>	to	<u>10:00pm</u>
Tuesday	<u>4:00pm</u>	to	<u>10:00pm</u>
Wednesday	<u>4:00pm</u>	to	<u>10:00pm</u>
Thursday	<u>4:00pm</u>	to	<u>10:00pm</u>
Friday	<u>12:00pm</u>	to	<u>10:00pm</u>
Saturday	<u>8:00am</u>	to	<u>10:00pm</u>

The outdoor area is used for:

- Food service Hours: 8:00am to 10:00pm
- Alcohol service Hours: 8:00am to 10:00pm
- Enclosed, how Fence

The exterior area is adequately viewed and/or supervised by Service Permittees.
_____ (Investigator's Initials)

Seasonal Variations: Yes No If yes, explain: Outdoor area closed November through February

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: 100 Outdoor: 40
 Lounge: _____ Other (explain): 40 - Bar
 Banquet: 40 Total Seating: 220

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: *Jason L. Curran* Date: 03/02/2017



OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE

1288195-96

Please Print or Type

LLC Name: Cedar Mill Brewing, LLC Year Filed: 2017 ✓

Trade Name (dba): IBU Public House

Business Location Address: 4439 SW Beaverton-Hillsdale Hwy

City: Portland, OR ZIP Code: 97229

List Members of LLC:

Percentage of Membership Interest:

1. Jason L Cruse (managing member)	100%
2. Cameron Cruse (members)	0%
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: Jason L Cruse DOB: 03/28/1973

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

Signature: Jason L Cruse Member Date: 03/02/2017
(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: Cedar Mill Brewing, LLC

DBA OR TRADE NAME: IBU Publrz House PHONE: 503-718-1894 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 515 NW Soltzman Rd, #857, Portland, OR 97229

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

CONTACT PERSON: Jason Cruse PHONE: 503-718-1894 EMAIL: jason.cruse@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: 5,000 sq ft

EXISTING BUILDING: Yes No

ZONING: _____

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 140 LOUNGE SEATING CAPACITY: 40 OUTSIDE SEATING CAPACITY: 40

DESCRIBE SECURITY: Lockable liquor closet, lockable cold room, lockable entry doors, perimeter intrusion alarm

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: 12:00 pm CLOSE: 10:00 pm FRIDAY & SATURDAY OPEN: ~~8:00 am~~ 8:00 am CLOSE: 10:00 pm

HOW LATE WILL THERE BE OUTSIDE SEATING? 10:00 pm HOW LATE WILL THERE BE ENTERTAINMENT? 10:00 pm

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: IBU Publrz House / IBU Pub Inc.

NAME & ADDRESS OF PROPERTY OWNER: Terwilliger Center Limited Partnership, 9069 SW 35th Ave, Portland, OR 97219

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: 3/22/17



File Edit View Drawing Help

Property Search

Owner Name TERWILLIGER CENTER LP %R&HC
 Site Address 4439 SW BEAVERTON HILLSDALE
 State ID 151E178C 4000
 Account # R169293

Search Clear PortlandMaps

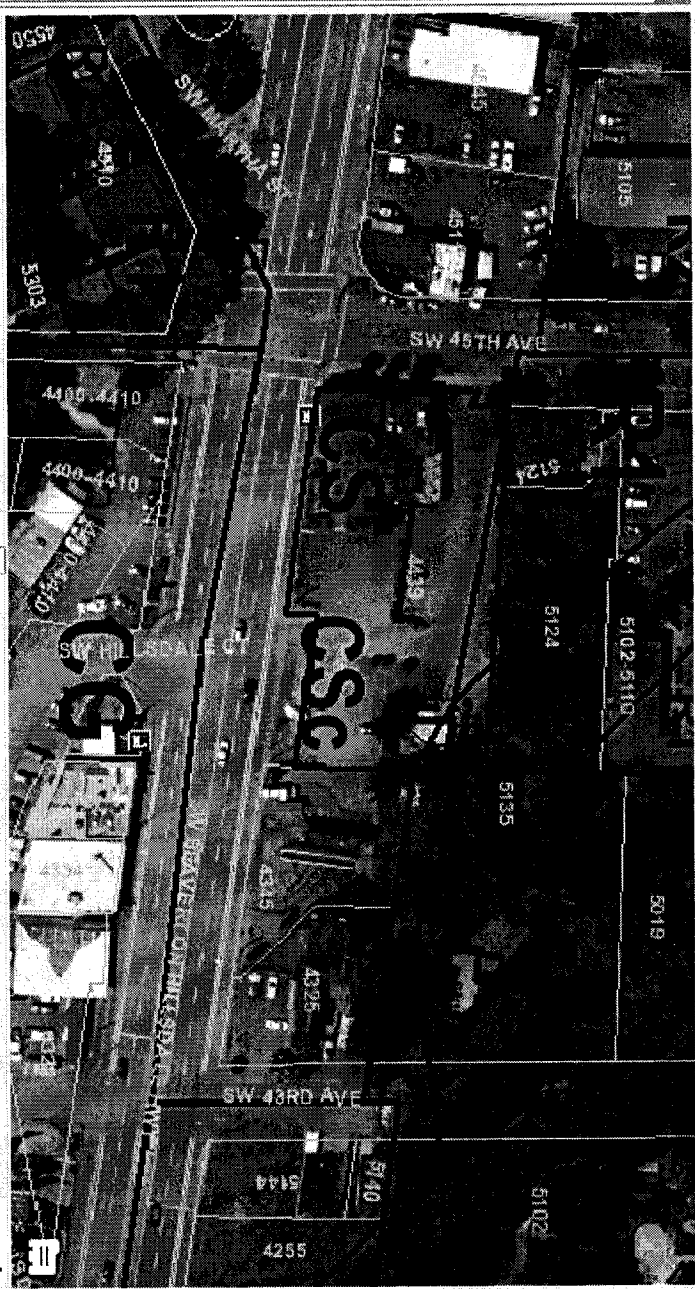
- Geocode Address When Taxlot Not Found
- Search is Based on Active Field Only
- Hide Personal Property Accounts
- Display Taxlot Detail Window

Navigate Query Results

Owner Site Address State
 TERWILLIGER C... 4439 SW BEAVE... 151E17

Search Legend Add Data Selection

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



Taxlot Details

Lot Size: 31550 sqft Building Size: 5624 sqft Map Number: 3525 Zoning Code(s): R1 CS
 Legal Description: GLEN CULLEN, BLOCK 1 TL 4000 Lot & Block: 1 TL 4000
 Mailing Information: TERWILLIGER CENTER LP %R&HC CAPITAL MGMT 9069 SW 35TH AVE
 Jurisdiction: Portland
 Subdistrict: 4405 7438 R 7485 7991 R EA 15-2051
 NRMMP: Draw LUR

1/4 Section Map Tax Map Zon

LUR Case His

See map 3/22/17

Scale 1 inch = 125 feet