



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Mystery Shack LLC Phone: 503 889 0185

Trade Name (dba): Creepy's

Business Location Address: 627 SE Morrison St.

City: Portland ZIP Code: 97214

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>3pm</u>	to	<u>2:30am</u>
Monday	<u>3pm</u>	to	<u>2:30am</u>
Tuesday	<u>3pm</u>	to	<u>2:30am</u>
Wednesday	<u>3pm</u>	to	<u>2:30am</u>
Thursday	<u>3pm</u>	to	<u>2:30am</u>
Friday	<u>3pm</u>	to	<u>2:30am</u>
Saturday	<u>3pm</u>	to	<u>2:30am</u>

Outdoor Area Hours:

Sunday	<u>3pm</u>	to	<u>2:30am</u>
Monday	<u>3pm</u>	to	<u>2:30am</u>
Tuesday	<u>3pm</u>	to	<u>2:30am</u>
Wednesday	<u>3pm</u>	to	<u>2:30am</u>
Thursday	<u>3pm</u>	to	<u>2:30am</u>
Friday	<u>3pm</u>	to	<u>2:30am</u>
Saturday	<u>3pm</u>	to	<u>2:30am</u>

The outdoor area is used for:

Food service Hours: 3pm to 2:30am

Alcohol service Hours: 3pm to 2:00am

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 checked="" type="checkbox"/> Coin-operated Games |
| <input checked="" 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	<u>9pm</u>	to	<u>2:00am</u>
Saturday	<u>9pm</u>	to	<u>2:00am</u>

SEATING COUNT

Restaurant: _____ Outdoor: 12

Lounge: 80 Other (explain): _____

Banquet: _____ Total Seating: 92

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: 2/27/17

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



128376498

Please Print or Type

LLC Name: Mystery Shack LLC. Year Filed: 2017 ✓

Trade Name (dba): CREEPY'S

Business Location Address: 627 SE Morrison St.

City: Portland ZIP Code: 97214

List Members of LLC:


Percentage of Membership Interest:

List Members of LLC:	Percentage of Membership Interest:
1. <u>Mathew Relkin</u> <u>(managing member)</u>	<u>40%</u>
2. <u>Jason Radich</u> <u>(members)</u>	<u>22.5%</u>
3. <u>Andrew Fosik</u>	<u>22.5%</u>
4. <u>Eugene Doherty</u>	<u>15%</u>
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: Mathew Relkin DOB: 05/03/1975

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

Signature:  (name) Member (title) Date: 2/27/17

1-800-452-OLCC (6522)

www.olcc.state.or.us

(rev.)

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: Mystery Shack LLC

DBA OR TRADE NAME: Creepy's PHONE: 503-889-0185 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 627 SE Morrison St. Pdx, OR 97214

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

CONTACT PERSON: Matt Relkin PHONE: 917-658-2779 EMAIL: Mysteryshackllc@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: 1628

EXISTING BUILDING: Yes No

ZONING: _____

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: 80 OUTSIDE SEATING CAPACITY: 12

DESCRIBE SECURITY: DPSST Licensed Door Man.

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: 3 pm CLOSE: 2:30 am FRIDAY & SATURDAY OPEN: 3 pm CLOSE: 2:30 am

HOW LATE WILL THERE BE OUTSIDE SEATING? 2:30 am HOW LATE WILL THERE BE ENTERTAINMENT? None

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Charlie Horse Saloon

NAME & ADDRESS OF PROPERTY OWNER: Mitchell Apartments TIC 537 SE Ash St #101 Pdx, OR 97214

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: [Signature] DATE: 3/24/17

Owner Name GRAY, TIMOTHY R ET AL %

Site Address 621-635 SE MORRISON ST

State ID 1S1E028B 44C0

Account # R15C0230

Search Clear PortlandMaps

Geocode Address When Taxot Not

Search is Based on Active Field Only

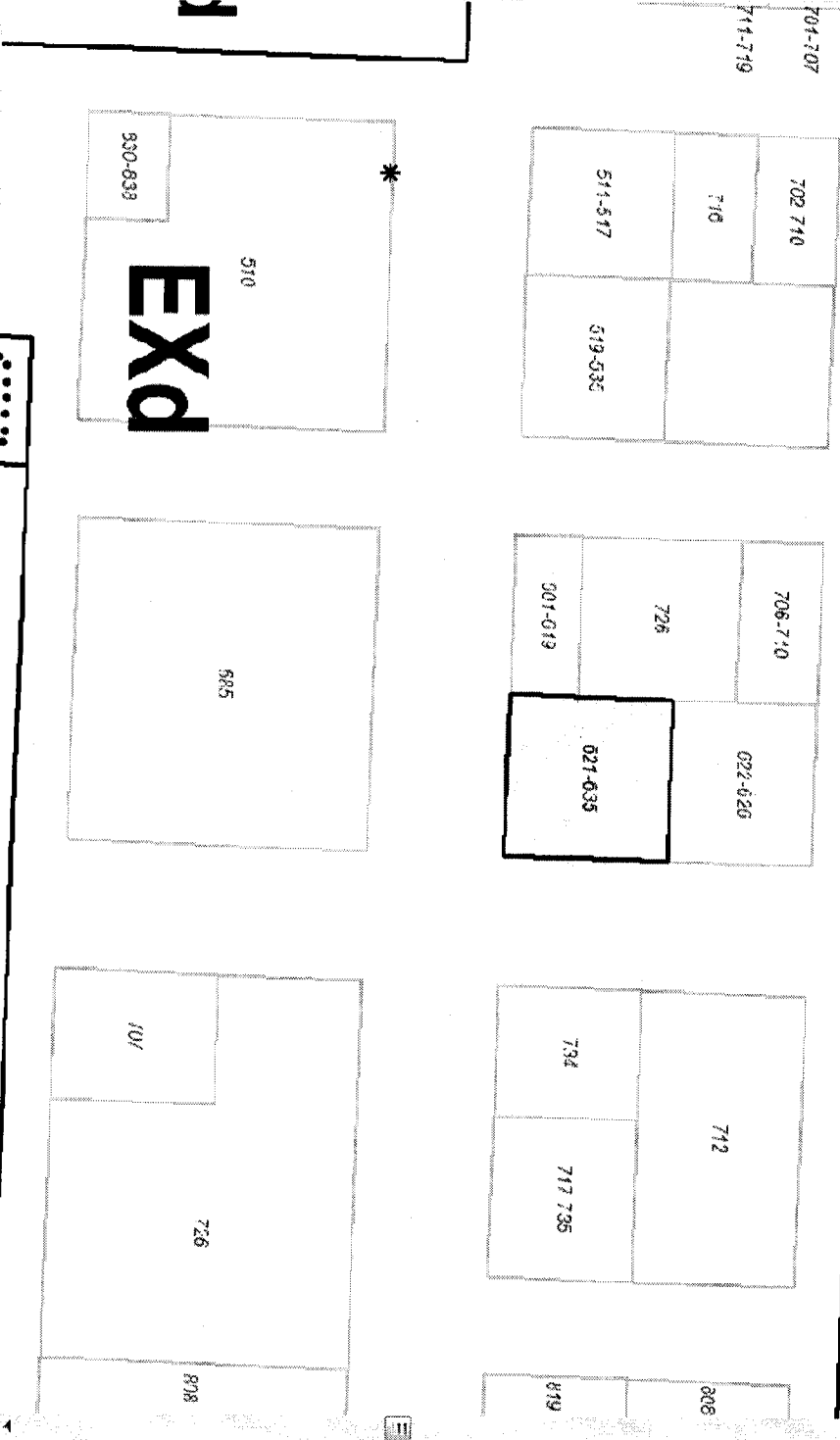
Hide Personal Property Accounts

Display Taxlot Detail Window

Navigate Query Rel

Owner Site Address State

GRAY, TIMOT... 621 635 SE 1S1E



Taxlot Details

Lot Size: 10000 sqft Building Size: 27216 sqft Map Number: 3131 Zoning Code(s): EXD

Legal Description: FAST PORTLAND, BLOCK 139, LOT 5 EXC PT IN ST, 5.6,7 139

Historic District: East Portland / Grand Conservation District

Planning Information: GRAY, TIMOTHY R ET AL % MUNCHIEFF, JEFF A

Jurisdiction: Portland

1/4 Section Tax Map Zoning Map

Plan Detail: CENTRAL CITY Subdistrict: CENTRAL EASTSIDE Subarea: NRMPE

LUR Case Hist (5 Cases): DZ 051-9C HLDZ 47-50 LU 04-00133C HLDZ LUR 97 00096 DZ

Draw LURS LUR

Retail Sales & Service allowed in EXD zoning in Central City Plan Dist, Central Eastside Subarea

3-24-17