



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

MAR 31 2017
PDC \$100
7220

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: 3-27-17

90-day authority: Yes No

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

① K-HILL & SUN LLC ③ _____
② _____ ④ _____

2. Trade Name (dba): BULLDOG DELI

3. Business Location: 7321 SW GARDEN HOME ROAD PORTLAND WASH OR 97223
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 8860 SW 69TH AVE PORTLAND OR 97223
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503-616-8772
(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: BAGAN & ROBERTS

9. Will you have a manager? Yes No Name: PAT CAHILL
(manager must fill out an Individual History form)

10. What is the local governing body where your business is located? CITY OF PORTLAND
(name of city or county)

11. Contact person for this application: PATRICK CAHILL 503-616-8772
(name) (phone number(s))
8860 SW 69TH AVE PORTLAND 97223 PCAHILL@EGGATHERSNA.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 3/25/17 ③ _____ Date _____
② _____ Date _____ ④ _____ Date _____

RECEIVED

MAR 27 2017



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: K-HILL + SUN LLC Phone: 971-255-1321

Trade Name (dba): BULLDOG DELI

Business Location Address: 7321 SW GARDEN HOME RD

City: PORTLAND ZIP Code: 97223

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 8 AM to 2 AM

Monday 11 to 11

Tuesday 11 to 11

Wednesday 11 to 11

Thursday 11 to 11

Friday 11 to 11

Saturday 11 to 11

Outdoor Area Hours: N/A

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:

- 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

Sunday _____ to _____

Monday _____ to _____

Tuesday _____ to _____

Wednesday _____ to _____

Thursday _____ to _____

Friday _____ to _____

Saturday _____ to _____

SEATING COUNT

Restaurant: 16 Outdoor: _____

Lounge: _____ Other (explain): LOTTERY 6

Banquet: _____ Total Seating: 22

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: _____ Date: 3/26/17

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



729617-91

Please Print or Type

LLC Name: K-HILL & SON LLC Year Filed: 2011 2010

Trade Name (dba): BULLDOG DEL

Business Location Address: 7321 SW GARDEN HOME RD. PORTLAND 97223

City: _____ ZIP Code: _____

List Members of LLC:

Percentage of Membership Interest:

1. PATRICK CANILL
(managing member)

100%

2. _____
(members)

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: PATRICK CANILL DOB: 4/18/56

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

Signature: [Signature] (name) OWNER (title) Date: 3/26/17

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: R-HILL & SON LLC

DBA OR TRADE NAME: BULLDOG DELI PHONE: 503-616-8772 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 7321 SW CARDON HOME ROAD PORTLAND 97223

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

CONTACT PERSON: DAVE CAHILL PHONE: 503-616-8772 EMAIL: PCAHILL@GODFATHERSUN.COM

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

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

SIZE OF SERVICE AREA: 1124 SF

EXISTING BUILDING: Yes No

ZONING: _____

STRUCTURAL CHANGES (DESCRIBE): MINOR TILES

RESTAURANT SEATING CAPACITY: 22 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: ALARM & 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: 8:00 AM CLOSE: 2:00 AM FRIDAY & SATURDAY OPEN: 8:00 AM CLOSE: 2:00 AM

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: BASKIN & ROBBINS

NAME & ADDRESS OF PROPERTY OWNER: COLIN LAMB 7410 SW OLESON ROAD PORTLAND 97223

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: 3/31/17



Scale: 1" = 258'

BES Unit ID

Property Search

Owner Name: GARDEN HOME ENTERPRISES INC

Site Address: 7321 sw Garden Home Rd

State ID: 1S124D801600

Account #: R219819

Buttons: 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: GARDEN HOME... State: 1S124D

Site Address: [Redacted]

CN2 zone allows for Retail Sales & Service Uses.

J. Maha Susarenty, City Planner

J. Maha Susarenty

(503) 823-7323

City of Portland

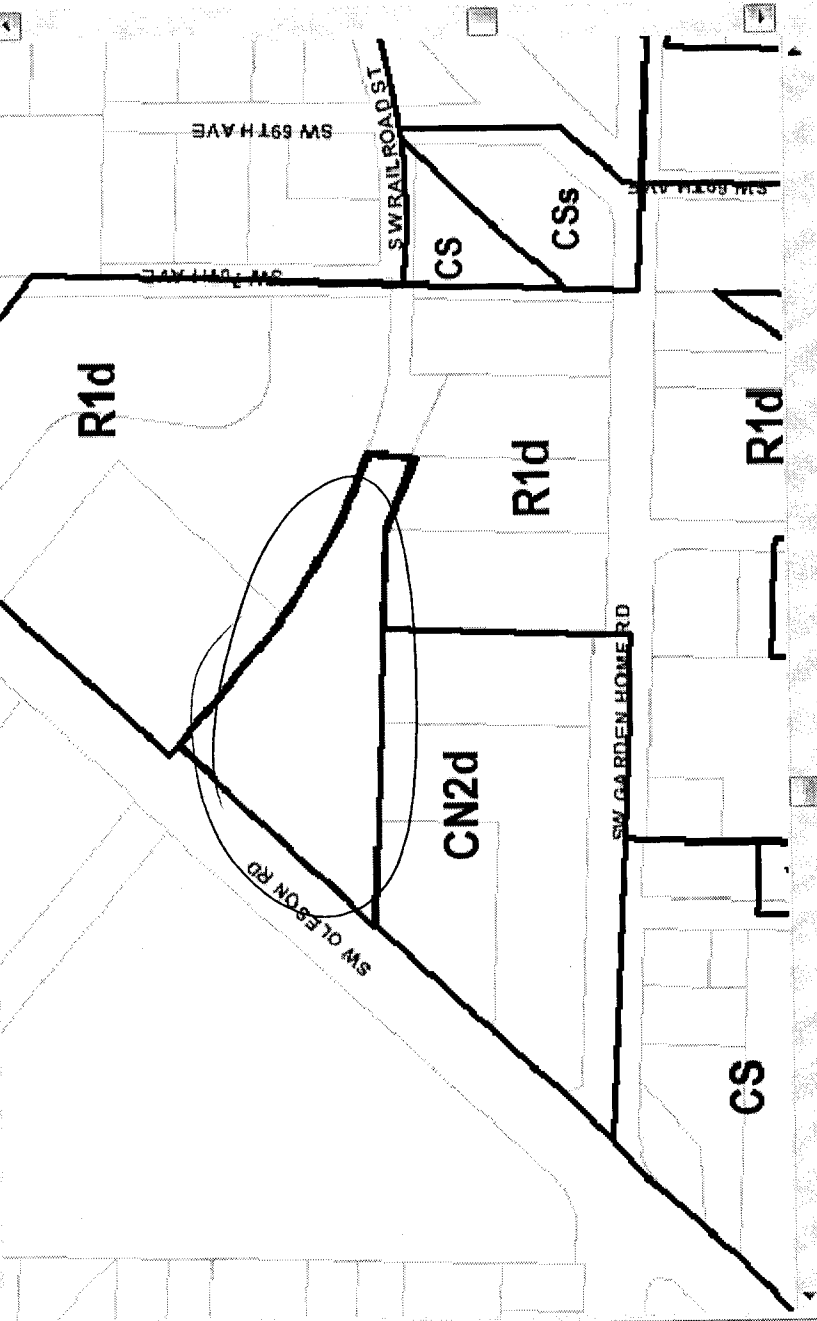
Bureau of Development Services

Land Use Service Division

1900 SW 4th Ave, Suite 5000

Portland, OR 97201

Search Legend Add Data Selection



Taxlot Details

Lot Size: 87438 sqft Building Size: 0 sqft

Map Number: 3822 Zoning Code(s): CN2d

Lot & Block: [Redacted] Historic District: [Redacted]

Legal Description: [Redacted] Conservation District: [Redacted]

Mailing Information: GARDEN HOME ENTERPRISES INC, 7410 SW OLESON ROAD, PORTLAND, 97223-7475

Plan District: [Redacted] SubDistrict: [Redacted] SubArea: [Redacted] NRMP: [Redacted]

Section Map Tax Map LUR Case His: LUR 01-005, PC 00-230

Scale 1 inch = 258 feet