



OREGON LIQUOR CONTROL COMMISSION
LIQUOR LICENSE APPLICATION

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

APR 18 2017
PD OK \$100
119

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: _____

Date: 4/19/2017

90-day authority: Yes No

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

① Daily Wine Company, LLC ③ _____
② _____ ④ _____

2. Trade Name (dba): Daily Wine Company

3. Business Location: 215 SE Morrison #95 Portland Multnomah OR 97214
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 3603 SE 10th Ave Portland OR 97202
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503 989 1550
(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: _____
(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: Jane Averin 503 989 1550
(name) (phone number(s))
3603 SE 10th Ave _____
(address) (fax number) janehall23@gmail.com
(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 4/19/17 ③ _____ Date _____
② _____ Date _____ ④ _____ Date _____



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Daily Wine Company, LLC Phone: 503 989 1550
Trade Name (dba): Daily Wine Company
Business Location Address: 215 SE Morrison #95
City: Portland ZIP Code: 97214

DAYS AND HOURS OF OPERATION

Business Hours:

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

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: 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 Karaoke
Recorded Music Coin-operated Games
DJ Music Video Lottery Machines
Dancing Social Gaming
Nude Entertainers 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: Outdoor:
Lounge: Other (explain):
Banquet: Total Seating:

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: 4/17/17

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



Please Print or Type

LLC Name: Daily Wine Company, LLC Year Filed: 2017
Trade Name (dba): Daily Wine Company
Business Location Address: 215 SE Morrison #95
City: Portland ZIP Code: 97214

List Members of LLC:

Percentage of Membership Interest:

- 1. Jane Averin
(managing member)
- 2. _____
(members)
- 3. _____
- 4. _____
- 5. _____
- 6. _____

100%

(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: [Signature] DOB: 8/23/81

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

Signature: [Signature] (name) owner (title) Date: 4/17/17

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: Daily Wine Company, LLC

DBA OR TRADE NAME: Daily Wine Company PHONE: 503 989 1550 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 215 SE Morrison #95 Portland, OR 97214

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

CONTACT PERSON: Jane Averin PHONE: 503 989 1550 EMAIL: janeah23@gmail.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- Food Cart Night Club
 Restaurant Sports Bar
 Convenience Store Other: online wine sales

SIZE OF SERVICE AREA: _____

EXISTING BUILDING: Yes No

ZONING: _____

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 0 LOUNGE SEATING CAPACITY: 0 OUTSIDE SEATING CAPACITY: 0

DESCRIBE SECURITY: access only during business hours 9-6, plus access door with code

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: / CLOSE: / FRIDAY & SATURDAY OPEN: / 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: _____

NAME & ADDRESS OF PROPERTY OWNER: Eastbank Storage, LLC 14855 SE 82nd Clackamas, OR 97015

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

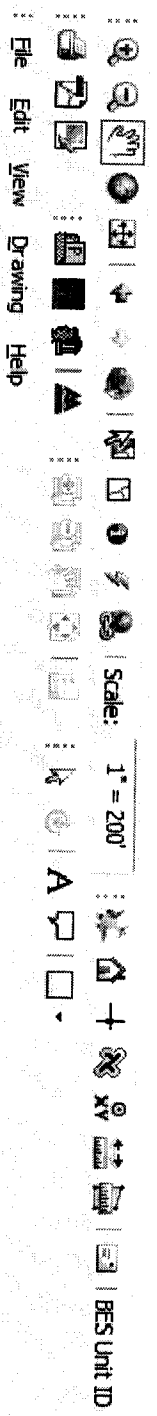
- Dancing Video Poker Live Music Nude Dancers
 Karaoke Video Games/Pinball Recorded Music DJ Entertainment
 Pool Tables (How Many): _____ Events (Describe): _____ Other: _____

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: 4/19/17



Property Search

Owner Name EAST BANK STORAGE LLC
 Site Address 215 SE MORRISON ST
 State ID 1S1E03AA 2900
 Account # R149972

Search Clear PortlandMaps

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

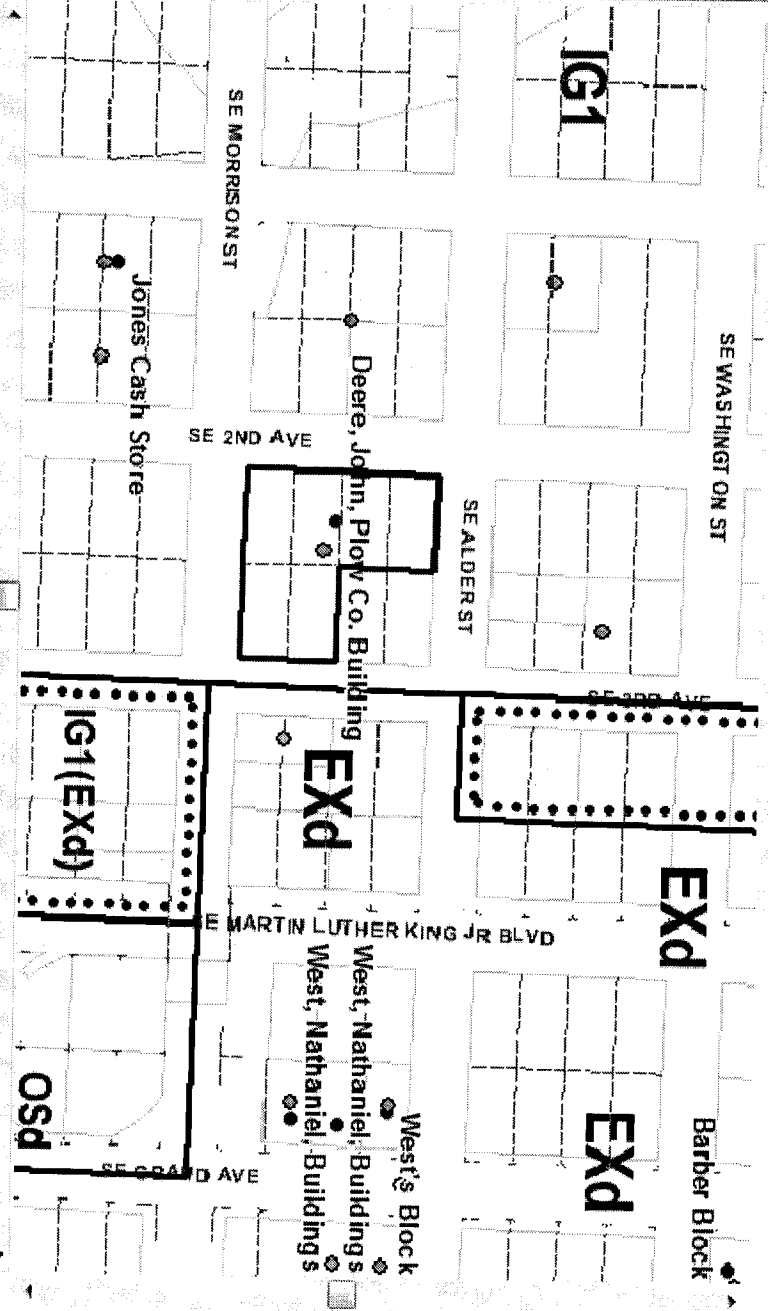
Navigate Query Results

Owner EAST BANK STO... 215 SE MORRIS... 1S1E03AA 2900

IG1 ZONE, Warehousing and Freight movement allowed by right per 33.140.100 and Table 140-1.

J. Green-King, City Planner, 503-873-5765

Search Legend Add Data Selection



Taxlot Details

Lot Size: 30000 sqft Building Size: 160000 sqft Map Number: 3130 Zoning Code(s): IG1
 Legal Description: EAST PORTLAND, BLOCK 59, LOT 1-6, HISTORIC PROPERTY 15 YR 2006, POTENTIAL ADDITIONAL 59
 Mailing Information: EAST BANK STORAGE LLC 14855 SE 82ND DR CLACKAMAS, OR 97015-7624
 Jurisdiction: Portland

Plan District: CENTRAL CITY Subdistrict: CENTRAL EASTSIDE
 SubArea: EMPLOYMENT OPPORTUNIT NRRMP:
 LUR Case His: HL 113-89 LU 05-1365 LU 06-1353 LU 07-1296 LU 13-1059

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