



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

15T

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/TN

L 241704
P 241585
Rec'd by Portland
Liquor Licenses

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: CA

Date: 4-10-17

90-day authority: Yes No

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

① DC Vegetarian LLC ③ _____

② _____ ④ _____

2. Trade Name (dba): DC Vegetarian

3. Business Location: 5026 SE Division St. Portland, OR 97206
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 735 SE 19th Avenue Portland, OR 97214
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: (503) 3174448
(phone) (fax)

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

7. If yes to whom El Gringo Dorado LLC Type of License: Full-On Premises Sales

8. Former Business Name: Mi Mero Mole

9. Will you have a manager? Yes No Name: Rebecca Leonard
(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: Rebecca Leonard (202) 299-6592
(name) (phone number(s))
735 SE 19th Ave. Portland, OR 97214 dcvegetarian@gmail.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], member Date 04-02-17 ③ _____ Date _____

② [Signature], member Date 4-2-17 ④ _____ Date _____

RECEIVED

APR 03 2017

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1280989-93

Please Print or Type

LLC Name: DC Vegetarian LLC Year Filed: 2017 ✓

Trade Name (dba): DC Vegetarian

Business Location Address: 5026 SE Division Street

City: Portland ZIP Code: 97206

List Members of LLC:

Percentage of Membership Interest:

1. <u>Damien Gill</u> (managing member)	<u>50</u>
2. <u>Rebecca Leonard</u> (members)	<u>50</u>
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: Rebecca Leonard DOB: 07-28-1982

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

Signature: [Signature] (name) Member (title) Date: 04-02-2017



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: DC Vegetarian LLC Phone: (202) 299-6592

Trade Name (dba): DC Vegetarian

Business Location Address: 5026 SE Division

City: Portland ZIP Code: 97206

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 8am to 2pm
 Monday _____ to _____
 Tuesday _____ to _____
 Wednesday 8am to 2pm
 Thursday 8am to 2pm
 Friday 8am to 2pm
 Saturday 8am to 2pm

Outdoor Area Hours:

Sunday 8am to 2pm
 Monday _____ to _____
 Tuesday _____ to _____
 Wednesday _____ to 2pm
 Thursday 8am to 2pm
 Friday 8am to 2pm
 Saturday 8am to 2pm

The outdoor area is used for:

Food service Hours: 8am to 2pm
 Alcohol service Hours: 8am to 2pm
 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: 40 Outdoor: 10
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 50

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: 04-02-2017

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: DC Vegetarian LLC

DBA OR TRADE NAME: DC Vegetarian PHONE: 202 299 6592 FAX: N/A

BUSINESS ADDRESS (Including ZIP Code): 5020 SE Division St. Portland, OR 97206

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

CONTACT PERSON: Rebecca Leonard PHONE: 202 299 6592 EMAIL: dvegetarian@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: 1,500 square feet (total restaurant)

EXISTING BUILDING: Yes No

ZONING: _____

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 40 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: 10

DESCRIBE SECURITY: security 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: 8am CLOSE: 2pm FRIDAY & SATURDAY OPEN: 8am CLOSE: 2pm

HOW LATE WILL THERE BE OUTSIDE SEATING? all hours HOW LATE WILL THERE BE ENTERTAINMENT? _____

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Mi Mao Nole

NAME & ADDRESS OF PROPERTY OWNER: River Preservation LLC, PO Box 513 Wilsonville, OR 97070

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: April 24, 2017

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

Lehman 4-24-17

5026 SE Division is located in the CS zone. Retail sales and service is an allowed use in the CS zone. Laura Lehman, City Planner, 503-823-7391

MapWorks - \negs\file\BDS\MapWorks_ArcMap_Config\MXD\mapworks_lus.mxd

File Edit View Drawing Help

Scale: 1" = 123'

Property Search

Owner Name MAZZOCCO, DAVID E % RIVER PR
 Site Address 5008-5022 SE DIVISION ST
 State ID 1S2E06CD 14200
 Account # R241352

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 MAZZOCCO, DAVID E
 Site Address 5008-5022 SE DIVISION ST
 State 1S2E06CD

Taxlot Details

Lot Size: 10000 sqft
 Building Size: 10000 sqft
 Map Number: 3235
 Zoning Code(s): CSm

Legal Description: PECKS ADD, BLOCK 2, LOT 1&2
 Lot & Block: 182
 Conservation District: 2

Mailing Information: MAZZOCCO, DAVID E % RIVER PRESERVATION
 LL
 P O BOX 513

Plan District: _____
 SubDistrict: _____
 SubArea: _____
 NRMP: _____

Draw LURs

LUR Case History:

Search Legend Add Data Selection

Scale Monday, April 24, 2017