



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

Pending

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: Distillery

ACTIONS

- Change Ownership
- New Outlet
- Greater Privilege
- Additional Privilege
- Other _____

Rec'd by Portland
Liquor Licenses

MAY 03 2017

PD CK \$100
1009

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: 4-20-17

90-day authority: Yes No

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

① Freeland Spirits LLC ③ _____

② _____ ④ _____

2. Trade Name (dba): Freeland Spirits

3. Business Location: 2671 NW Vaughn Portland Multnomah OR 97210
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 4830 NE 13th Ave Portland OR 97211
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503.621.7655
(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: Athletes lounge

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: Jill Kuehler 503.621.7655
(name) (phone number(s))
4830 NE 13th Ave Portland OR 97211 jill@freelandspirits.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 3.26.17 ③

② _____ Date _____ ④

RECEIVED

Date

APR 13 2017

Date

Initials: *[Signature]*
Oregon Liquor Control Commission (10/2011)



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Freeland Spirits LLC Phone: 503 621 7655

Trade Name (dba): Freeland Spirits

Business Location Address: 2671 NW Vaughn

City: Portland ZIP Code: 97210

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday _____ to _____
 Monday _____ to _____
 Tuesday 2pm to 12am
 Wednesday 2pm to 12am
 Thursday 2pm to 12am
 Friday 2pm to 1am
 Saturday 2pm to 1am

Outdoor Area Hours:

Sunday _____ to _____
 Monday _____ to _____
 Tuesday 2pm to 10pm
 Wednesday 2pm to 10pm
 Thursday 2pm to 10pm
 Friday 2pm to 10pm
 Saturday 2pm to 10pm

The outdoor area is used for:

- Food service Hours: 2pm to 9pm
- Alcohol service Hours: 2pm to 9pm
- 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: 5045 Outdoor: 1812
 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: 3.26.17



OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE

1122099-94

Please Print or Type

LLC Name: Freeland Spirits LLC Year Filed: 2015 ✓

Trade Name (dba): Freeland Spirits

Business Location Address: 2671 NW Vaughn

City: Portland ZIP Code: 97210

List Members of LLC:

Percentage of Membership Interest:

- 1. Jill Kochler
(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: Jill Kochler DOB: 11-14-1978

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

Signature: [Signature] (name) CEO (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: Freeland Spirits

DBA OR TRADE NAME: Freeland Spirits PHONE: 503 621 7655 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 226 2671 NW Vaughn Portland OR 97210

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

CONTACT PERSON: Jill Kuehler PHONE: 503 621 7655 EMAIL: jillkuehler@gmail.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

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

SIZE OF SERVICE AREA: 1,000 sq ft

EXISTING BUILDING: Yes No

ZONING: 161

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 45 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: 12

DESCRIBE SECURITY: Sanitrol security system

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: 2pm CLOSE: 12am FRIDAY & SATURDAY OPEN: 2pm CLOSE: 12am

HOW LATE WILL THERE BE OUTSIDE SEATING? 10pm HOW LATE WILL THERE BE ENTERTAINMENT? N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Athletes lounge

NAME & ADDRESS OF PROPERTY OWNER: Peter Voorhies PO Box 11140 Bainbridge Island, WA 98110

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

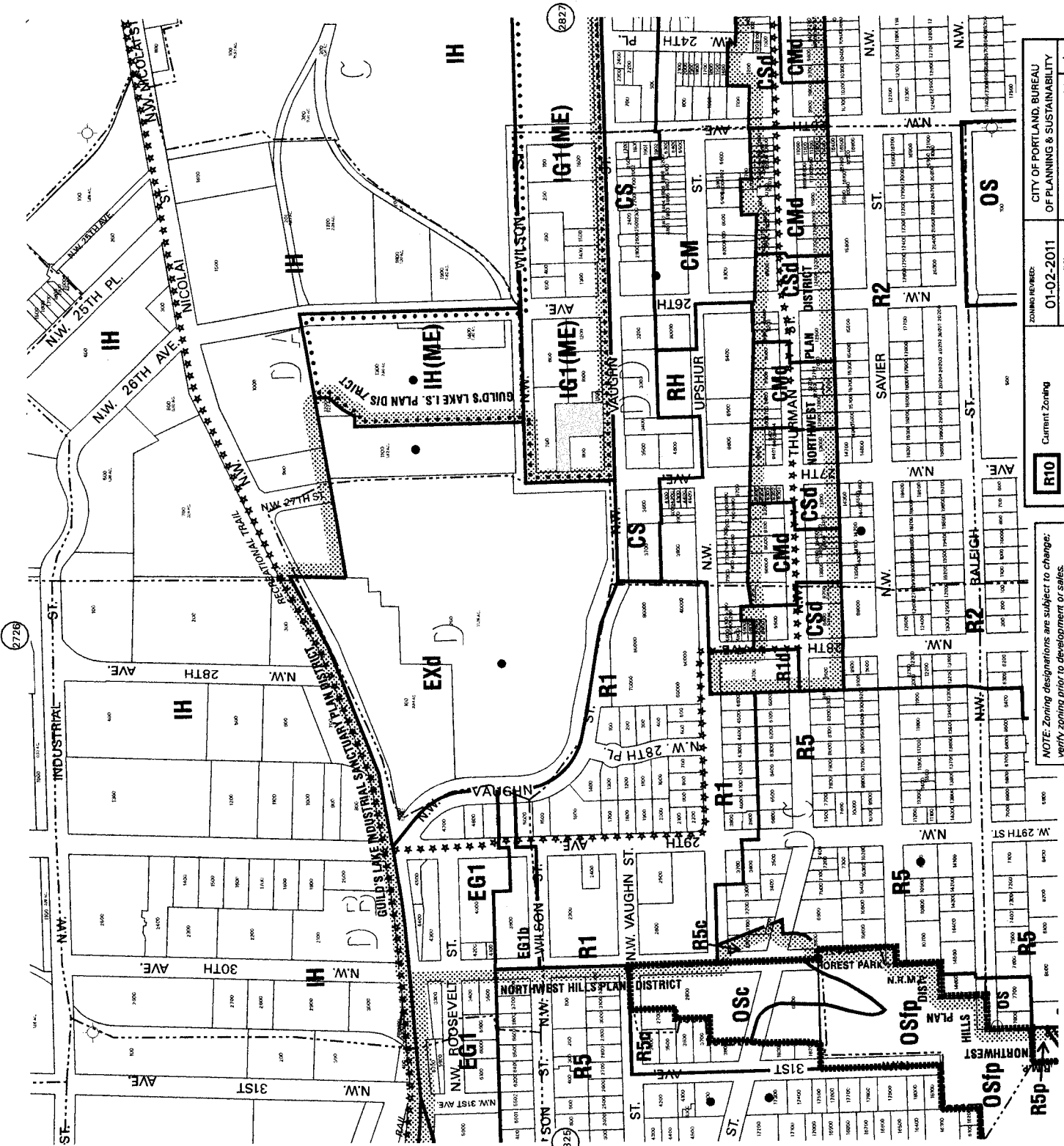
- Dancing Video Poker Live Music Nude Dancers
 Karaoke Video Games/Pinball Recorded Music DJ Entertainment
 Pool Tables (How Many): _____ Events (Describe): _____ Other: _____

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: 4.30.17



2826

CITY OF PORTLAND, BUREAU OF PLANNING & SUSTAINABILITY	
ZONING REVIEWED: 01-02-2011	DATE: 01-02-2011
BASE MAP ACQUIRED: 07 - 2010	DATE: 07 - 2010
LEGAL DESCRIPTION: Comprehensive Plan SE 1/4 SEC. 29 - 1N - 1E	DATE: 07 - 2010
SCALE: 1" = 500'	SCALE: 1" = 500'

NOTE: Zoning designations are subject to change; verify zoning prior to development or sales.

- HISTORIC LANDMARK
- Plan District Boundary
- - - - - Historic or Conservation District or N.R.M.P. Boundary
- Zoning Line