



**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: _____

ACTIONS

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

*Rec'd by Portland
Liquor Licenses
AUG 16 2017
PD Colt 2/2 150
011232*

90-DAY AUTHORITY

Check here if you are applying for a change of ownership of 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: *6-28-17*

90-day authority: Yes No

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

- ① *Craig Peterson*
- ② *Scott Peterson*
- ③ *Jan Peterson*
- ④ *Ringside Fish House, Inc*

2. Trade Name (dba): *RingSide Fish House Inc*

3. Business Location: *838 SW Park Ave Portland (Multnomah) OR 97205*
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: *838 SW Park Ave Portland (Multnomah) OR 97205*
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: *503-227-3900* (phone) *503-406-4917* (fax)

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

7. If yes to whom: *Craig Peterson / Scott Peterson* Type of License: *Full On-Premise Sales*

8. Former Business Name: _____

9. Will you have a manager? Yes No Name: *Craig Peterson / Scott Peterson*
(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: *Emily Olsen* *503-345-9722*
(name) (phone number(s))
838 SW Park Ave *503-406-4917* *emily@ringsidehg.com*
(address) (fax number) (e-mail address)
Portland, OR 97205

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 *5-1-17*

② _____ Date _____

RECEIVED
Date

JUN 21 2017
Date



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type RingSide Fish House, Inc
 Applicant Name: Craig Peterson / Scott Peterson Phone: 503.227.3900
 Trade Name (dba): RingSide Fish House, Inc.
 Business Location Address: 838 NW Park Ave.
 City: Portland ZIP Code: 97205

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 3:00 pm to 11:00 pm
 Monday 11:00 am to 11:00 pm
 Tuesday 11:00 am to 11:00 pm
 Wednesday 11:00 am to 11:00 pm
 Thursday 11:00 am to 11:00 pm
 Friday 11:00 am to 11:00 pm
 Saturday 9:00 am to 11:00 pm

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: 126 Outdoor: X
 Lounge: 89 Other (explain): X
 Banquet: 32 Total Seating: 247

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: 5-6-17



OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE

753700-99

Please Print or Type

Corporation Name: RingSide Fish House, Inc. Year Incorporated: 2011 ✓

Trade Name (dba): RingSide Fish House

Business Location Address: 6390 SW Park Ave

City: Portland ZIP Code: 97205

List Corporate Officers:

<u>Craig Peterson</u>	<u>Owner</u>
(name) <u>Scott Peterson</u>	(title) <u>Owner</u>
<u>Jan Peterson</u>	<u>Owner</u>

List Board of Directors:

(name) _____

List Stockholders: (Note: If any stockholder is another legal entity, that entity may also need to complete another Corporation Questionnaire. See Liquor License Application Guide for more information.)

Stockholders:	Number of Shares Held:	Number of Stock Shares:
<u>Craig Peterson</u>	<u>33 1/3</u>	Issued: _____ Unissued: _____ Total Shares Authorized to Issue: _____
<u>Scott Peterson</u>	<u>33 1/3</u>	
<u>Jan Peterson</u>	<u>33 1/3</u>	

Server Education Designee: Jan Peterson DOB: 06.30.1967
(See Liquor License Application Guide for more information)

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

Officer's Signature: [Signature] (name) Pres. (title) Date 5-1-17

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: Ringside Fish House, Inc.

DBA OR TRADE NAME: Ringside Fish House PHONE: 503-227-3900 FAX: 503-406-4917

BUSINESS ADDRESS (Including ZIP Code): 838 SW Park Ave Portland, OR 97205

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

CONTACT PERSON: Emily Olsen PHONE: 503-345-9732 EMAIL: emily@ringsidehg.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Food Cart | <input type="checkbox"/> Night Club |
| <input checked="" type="checkbox"/> Restaurant | <input type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Other: _____ |

SIZE OF SERVICE AREA: seats ~ 247

EXISTING BUILDING: Yes No

ZONING: See zoning map

STRUCTURAL CHANGES (DESCRIBE): NA

RESTAURANT SEATING CAPACITY: 126 LOUNGE SEATING CAPACITY: 89 OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: on-site managers

HAS AN APPLICATION FOR A LIQUOR LICENSE AT THIS LOCATION BEEN RECEIVED BY THE CITY OF PORTLAND IN THE LAST TWO (2) YEARS?

catering license Yes No I Don't Know

HOURS OF OPERATION

SUNDAY - THURSDAY OPEN: 11:30am CLOSE: 11pm FRIDAY & SATURDAY OPEN: 11:30am CLOSE: 12am

HOW LATE WILL THERE BE OUTSIDE SEATING? NA HOW LATE WILL THERE BE ENTERTAINMENT? _____

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Harrison

NAME & ADDRESS OF PROPERTY OWNER: TMT Development Company Inc.
760 SW 9th Ave. #2250 Portland OR

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Video Poker | <input type="checkbox"/> Live Music | <input type="checkbox"/> Nude Dancers |
| <input type="checkbox"/> Karaoke | <input type="checkbox"/> Video Games/Pinball | <input checked="" type="checkbox"/> Recorded Music <u>Satellite</u> | <input type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): _____ | <input type="checkbox"/> Events (Describe): _____ | <input type="checkbox"/> 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

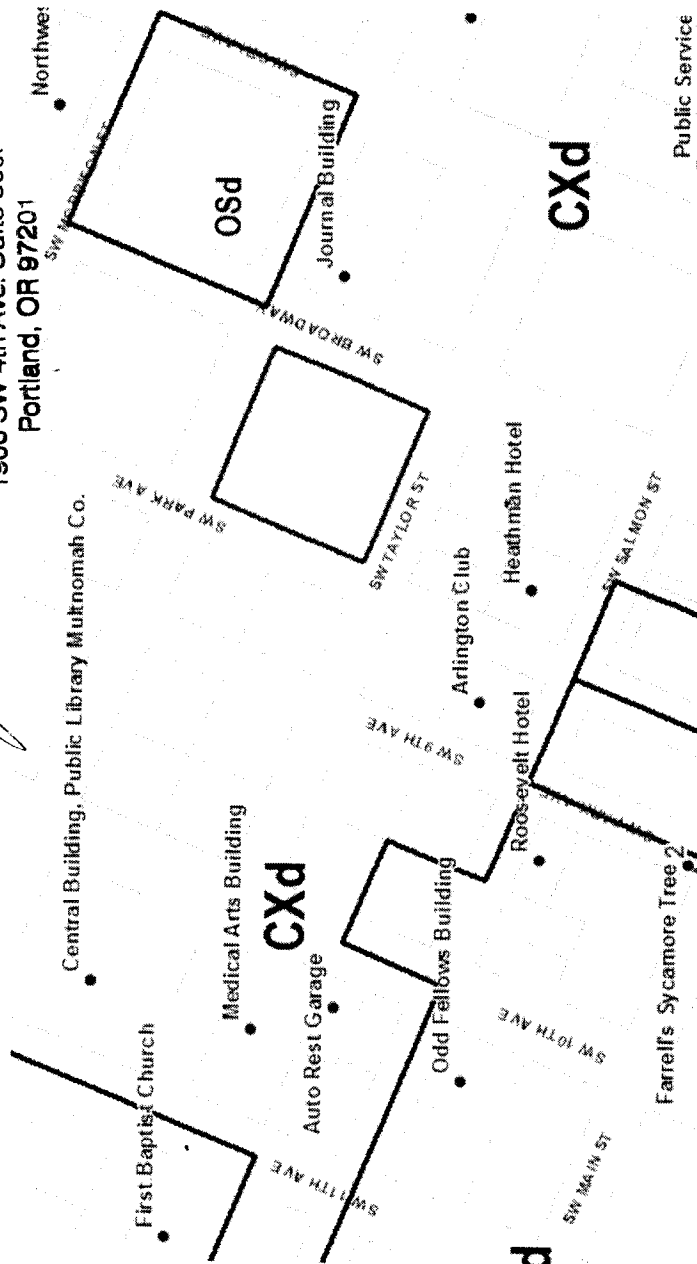
A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: [Signature] DATE: 7.13.17

CXd Central City Plan District, Downtown Subdistrict; Retail Sales and Service uses are permitted outright (33.130.100 and Table 130-1 with no limitations in 33.510.116).

Suzan Poisner, Planner II, City of Portland OR, 503-823-5804

City of Portland
 Bureau of Development Services
 Land Use Service Division
 1900 SW 4th Ave. Suite 500C
 Portland, OR 97201



Property Search

Owner Name: FOX TOWER LLC %TMT DEVELOP
 Site Address: 805 SW BROADWAY
 State ID: 1S1E038B 4400
 Account #: R2-46433

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: FOX TOWER LLC, 805 SW BROADWAY, PORTLAND, OR 97205-2584
 Site Address: State

Taxlot Details

Lot Size: 40000 sqft Building Size: 559646 sqft Map Number: 3129 Zoning Code(s): CXD
 Legal Description: PORTLAND, BLOCK 210, LOT 1-8 Lot & Block: 1-8
 Historic District: Conservation District: Jurisdiction: Portland
 Mailing Information: FOX TOWER LLC %TMT DEVELOPMENT
 760 SW 11TH AVE #2250
 PORTLAND, OR 97205-2584

1/4 Section Map Tax Map Zoning Map
 Plan District: CENTRAL CITY
 SubDistrict: DOWNTOWN
 SubArea:
 LUR Case History: (26 Cases)
 CU 009-66
 CU 037-66
 DZ 30-88
 DZ 83-87
 DZ 121-84

Draw LURS LUR Search