



OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

DT

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 _____

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: 8-1-17

90-day authority: Yes No

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

- ① Get Your Wiggles Out LLC ③ _____
- ② _____ ④ _____

2. Trade Name (dba): the wiggle room

3. Business Location: 1925 NE 42nd Ave, Ste C Portland Multnomah OR 97213
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 2000 NE 42nd Ave, Ste 107 Portland OR 97213
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503-877-9233
(phone)

6. Is the business at this location currently licensed by OLCC? Yes No (fax) Rec'd by Portland Liquor Licenses

7. If yes to whom: _____ Type of License: _____ AUG 18 2017

8. Former Business Name: _____ PD 100^{ab} JW

9. Will you have a manager? Yes No Name: Christopher Wade # 228
(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: Christopher Wade 503-877-9233
(name) (phone number(s))
2000 NE 42nd Ave #107, Portland, OR 97213 chris@getyourwigglesout.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: [Signature] Get Your Wiggles Out, LLC Date 7/27/17 ③ _____ Date _____

② _____ Date _____ ④ _____

RECEIVED



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Get Your Wiggles Out LLC Phone: 503-877-9233

Trade Name (dba): the wiggle room

Business Location Address: 1925 NE 42nd Ave, Suite C

City: Portland ZIP Code: 97213

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 11am to 4pm
 Monday 9am to 6pm
 Tuesday 9am to 6pm
 Wednesday 9am to 6pm
 Thursday 9am to 6pm
 Friday 9am to 6pm
 Saturday 9am to 4pm

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:

- | | |
|--|---|
| <input type="checkbox"/> Live Music | <input type="checkbox"/> Karaoke |
| <input type="checkbox"/> Recorded Music | <input type="checkbox"/> Coin-operated Games |
| <input type="checkbox"/> DJ Music | <input type="checkbox"/> Video Lottery Machines |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Social Gaming |
| <input type="checkbox"/> Nude Entertainers | <input type="checkbox"/> Pool Tables |
| | <input type="checkbox"/> 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): 40, cafe seating for
 Banquet: _____ Total Seating: 40
parents

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: *Get Your Wiggles Out LLC* Date: 7/27/17



OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE

1304781-91

Please Print or Type

LLC Name: Get Your Wiggles Out LLC Year Filed: 2017 ✓

Trade Name (dba): the wiggle room

Business Location Address: 1925 NE 42nd Ave, Suite C

City: Portland ZIP Code: 97213

List Members of LLC:


Percentage of Membership Interest:

- | | |
|---|-----------|
| 1. <u>Christopher Wade</u>
(managing member) | <u>50</u> |
| 2. <u>Jessica Wade</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: Christopher Wade DOB: 10/08/1974

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

Signature:  Owner Date: Jun 6, 2017
(name) (title)

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.

Get Your Wiggles Out LLC

LEGAL NAME OF BUSINESS: _____

DBA OR TRADE NAME: The Wiggle Room PHONE: 503-877-9233 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 1925 NE 42nd Ave, Suite C, Portland, OR 97213

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

CONTACT PERSON: Christopher Wade PHONE: 503-877-9233 EMAIL: chris@getyourwigglesout.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY) SIZE OF SERVICE AREA: 548 SF

- | | | |
|--|---|--|
| <input type="checkbox"/> Food Cart | <input type="checkbox"/> Night Club | EXISTING BUILDING: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Sports Bar | ZONING: <u>CS Storefront Commercial</u> |
| <input type="checkbox"/> Convenience Store | <input checked="" type="checkbox"/> Other: <u>coffee shop</u> | STRUCTURAL CHANGES (DESCRIBE): <u>n/a</u> |

RESTAURANT SEATING CAPACITY: 41 LOUNGE SEATING CAPACITY: 0 OUTSIDE SEATING CAPACITY: 0

DESCRIBE SECURITY: Will be installing an ADT or similar svstem before opening

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: 9am CLOSE: 6pm FRIDAY & SATURDAY OPEN: 9am CLOSE: 6pm
HOW LATE WILL THERE BE OUTSIDE SEATING? never HOW LATE WILL THERE BE ENTERTAINMENT? never

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: The Cleanery (was a laundry mat)
NAME & ADDRESS OF PROPERTY OWNER: James Spivak, 4223 NE Broadway St, Portland, OR 97213

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 type="checkbox"/> Recorded Music | <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:  DATE: 8/17/17

Property Search

Owner: **Near SPYVAK, JAMES ET AL**
 Site Address: 1925 NE 42ND AVE
 State ID: **JMEE250D 500**
 Account #: R262731

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

Owner: **SPYVAK, JAMES ET AL**
 Site Address: 1925 NE 42ND AVE
 State: **OR**

CS zone allows for Retail Sales & Service Use.
J. Maria Slusarenko, City Planner

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

(503) 823-7353

Search Legend Add Data Sel

Taxlot Details

Lot Size: 15000 sqft
 Building Size: 7920 sqft
 Map Number: 2835
 Zoning Code: **CSD**
 Legal Description: ROSSMERE, BLOCK 33, LOT 6, LOT 11&12
 Lot & Block: 6, 11&12
 Historic District: 33
 Conservation District:
 Mailing Information: SPYVAK, JAMES ET AL
 1912 NE 27TH AVE
 Jurisdiction: Portland

1/4 Section:
 Tax Map:
 Zoning Map:
 Plan District: HOLLYWOOD
 Subdistrict: SUBDISTRICT A
 Subarea:
 LUR Case History:
 MRMP:
 Draw LURS:
 LUR:
 Scale 1 inch = 90 feet

