



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

DW

LICENSE FEE: Do not include the license fee with the application (the license fee will be collected at a later time).

APPLICATION: Application is being made for:

- Brewery
- Brewery-Public House
- Distillery
- Full On-Premises, Commercial
- Full On-Premises, Caterer
- Full On-Premises, Passenger Carrier
- Full On-Premises, Other Public Location
- Full On-Premises, Nonprofit Private Club
- Full On-Premises, For-Profit Private Club
- Grower Sales Privilege
- Limited On-Premises
- Off-Premises
- Off-Premises with Fuel Pumps
- Warehouse
- Wholesale Malt Beverage & Wine (WMBW)
- Winery

CITY AND COUNTY USE ONLY

Date application received _____


Name of City or County _____

Recommends this license be Granted Denied

By _____

Date _____

OLCC USE

Application received by 

Date 11-8-17

License Action:
40 4/tn a/priv

1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license

Applicant #1 Team Ron Inc	Applicant #2	Applicant #3	Applicant #4
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Rec'd by Portland Liquor Licenses
NOV 08 2017
PD 100
824398
+ \$25 refund

2. Trade Name of the Business (the name customers will see):
Shalom Y'all

3. Business Location: Number and Street 117 SE Taylor St Suite 101

City Portland	County Multnomah	ZIP 97214
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4. Is the business at this location currently licensed by the OLCC? Yes No

5. Mailing Address (where the OLCC will send your mail):
PO Box, Number, Street, Rural Route **105 Se Taylor St**


City Portland	State OR	ZIP 97214
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6. Phone Number of the Business Location: 971-404-8369

7. Contact Person for this Application:

Name Renee Gorham	Phone Number 971-404-8369
Mailing Address, City, State, ZIP 4322 NE 12th Ave Portland OR 97211	
Email renee@torobravopdx.com	

I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is prohibited on the licensed premises.

Signature of Applicant #1 	Signature of Applicant #2
Signature of Applicant #3	Signature of Applicant #4



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Team Ron Inc Phone: 9714048369

Trade Name (dba): Shalom Y'all

Business Location Address: 117 SE Taylor Suite 101

City: Portland OR ZIP Code: 97214

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>11am</u> to <u>10pm</u>
Monday	_____ to _____
Tuesday	_____ to _____
Wednesday	_____ to _____
Thursday	_____ to _____
Friday	_____ to _____
Saturday	_____ to _____

Outdoor Area Hours: NA

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
- 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

NA

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

SEATING COUNT

Restaurant: ~~31~~ 45 Outdoor: 0

Lounge: 9 Bartop Other (explain): 4 Chefs Counter

Banquet: 15 Total Seating: 93 Total

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: _____ Date: 11/2/17



**OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE**

Please Print or Type

Corporation Name: Team Ron Inc Year Incorporated: 2013

Trade Name (dba): Shalom Y'all

Business Location Address: 117 SE Taylor St suit 101

City: Portland OR ZIP Code: 97214

List Corporate Officers:

<u>John Gorham</u>	<u>President</u>
(name)	(title)
<u>Renee Gorham</u>	<u>Secretary</u>
<u>Ron & Jane Avni Avni</u>	<u>members</u>
<u>Kasey Mills</u>	<u>Vice President</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.)

<u>Stockholders:</u>	<u>Number of Shares Held:</u>	Number of Stock Shares: Issued: _____ Unissued: _____ Total Shares Authorized to Issue: _____
<u>John Gorham</u>	<u>34%</u>	
<u>Kasey Mills</u>	<u>33%</u>	
<u>Ron Avni</u>	<u>17%</u>	
<u>Jane Avni</u>	<u>16%</u>	

Server Education Designee: Renee Gorham **DOB:** 04/21/1981
 (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: **Date:** 11/2/19
 (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.

LEGAL NAME OF BUSINESS: Team Ron Inc.
DBA OR TRADE NAME: Shalom Yall PHONE: 9714048369 FAX: 503 206 4302
BUSINESS ADDRESS (Including ZIP Code): 117 SE Taylor Suite 101 Portland OR 97214
WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): new outlet
CONTACT PERSON: Renee Gorman PHONE: 9714048369 EMAIL: renee@torobrowpdx.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: 1500 sq feet Dining Room
2100 sq feet including kitchen
EXISTING BUILDING: Yes No
ZONING: _____
STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: 9 OUTSIDE SEATING CAPACITY: 0

DESCRIBE SECURITY: ADT Security System, entrance through lobby of building, locked
HAS AN APPLICATION FOR A LIQUOR LICENSE AT THIS LOCATION BEEN RECEIVED BY THE CITY OF PORTLAND IN THE LAST TWO (2) YEARS? during closed hours
 Yes No I Don't Know

HOURS OF OPERATION

SUNDAY - THURSDAY OPEN: 11am CLOSE: 10pm FRIDAY & SATURDAY OPEN: 11am CLOSE: 10pm
HOW LATE WILL THERE BE OUTSIDE SEATING? NA HOW LATE WILL THERE BE ENTERTAINMENT? NA

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Taylor Railworks
NAME & ADDRESS OF PROPERTY OWNER: Gabriella Ramos, Erik Van Kley

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: 

DATE: 11/2/17

Property Search

Owner Narr CEID HOLDINGS LLC
 Site Address 105 SE TAYLOR ST
 State ID 151E03AD 800
 Account # R149940

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

Navigate Query Rel

Owner Site Address State
 CEID HOLDINGS LLC 105 SE TAYLOR ST

*SITE IS ZONED
 IG1. USE IS
 ALLOWED AS A
 CONDITIONAL USE.
 REPLACING FORMER
 RESTAURANT (RETAIL
 SALES AND SERVICES.)*

*Looky by Strick
 CITY PLANNER
 503-823.7919*

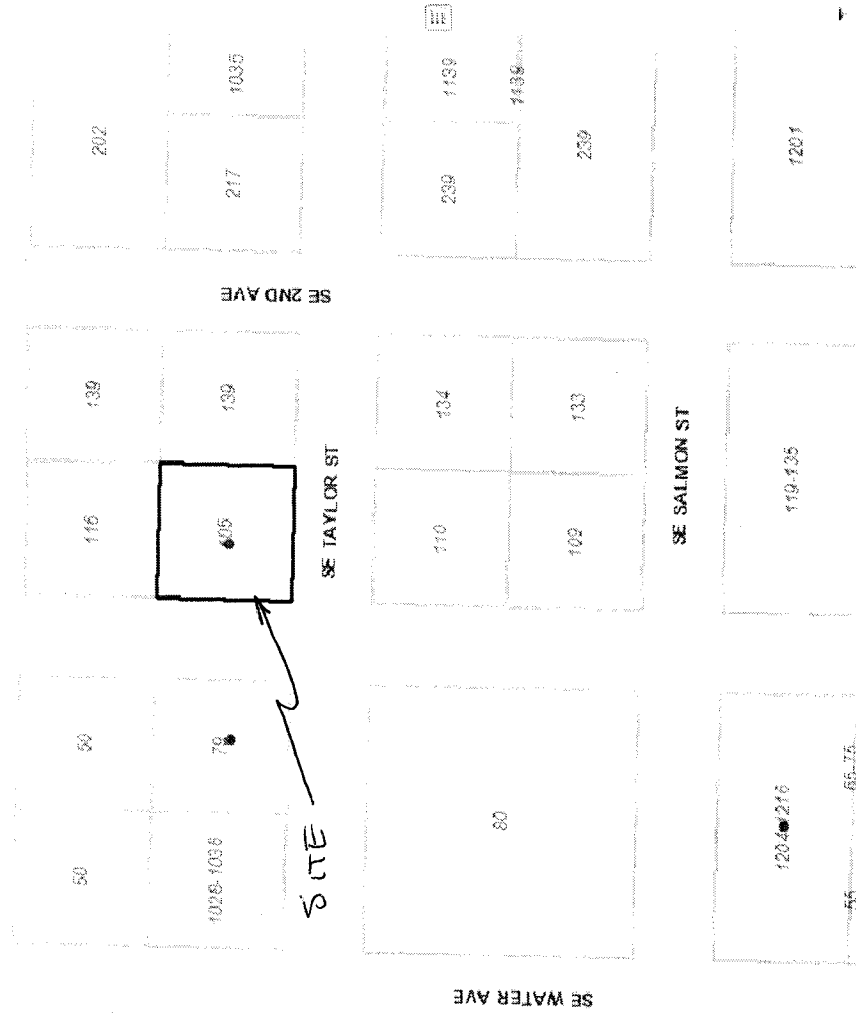
City of Portland
 Bureau of Development Services
 Land Use Service Division
 1900 SW 4th Ave. Suite 5000
 Portland, OR 97201

11/6/2017

Search Legend Add Data Sel

Scale: 1" = 125'

SE YAMHILL ST



Taxlot Details

Lot Size: 10000 sqft
 Building Size: 26862 sqft
 Legal Description: EAST PORTLAND, BLOCK 47, LOT 3&4

1/4 Section: 120.4216
 Tax Map: 65-75
 Zoning Map: LUR Case Histo (1 Case) LUR 94-00133

Plan District: CENTRAL CITY
 Subdistrict: CENTRAL EASTSIDE
 Subarea: EMPLOYMENT OPPOR
 NRMIP: PORTLAND

Mailing Information:
 CEID HOLDINGS LLC
 PO BOX 12145

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