



LIQUOR LICENSE APPLICATION

pending

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 *[Signature]*

Date 1-12-18 Rec'd by Portland Liquor Licenses

License Action: n/o **JAN 22 2018**

PD 100 *[Signature]*

084366

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

| | |
|---|--------------|
| Applicant #1 <u>FRANK AND ROSE INC</u> | Applicant #2 |
| Applicant #3 | Applicant #4 |

2. Trade Name of the Business (the name customers will see):
PORTLAND MONGOLIAN GRILL & HOT POT

3. Business Location: Number and Street 210 SW YAMHILL ST

| | | |
|----------------------|-------------------------|------------------|
| City <u>PORTLAND</u> | County <u>MULTNOMAH</u> | ZIP <u>97204</u> |
|----------------------|-------------------------|------------------|

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 15527 SW BRISTLECONE WAY

| | | |
|--------------------|-----------------|------------------|
| City <u>TIGARD</u> | State <u>OR</u> | ZIP <u>97223</u> |
|--------------------|-----------------|------------------|

6. Phone Number of the Business Location: 503-477-5123

7. Contact Person for this Application:

| | |
|---|----------------------------------|
| Name <u>ANGELA CHENG</u> | Phone Number <u>503-590-9323</u> |
| Mailing Address, City, State, ZIP <u>15527 SW BRISTLECONE WAY TIGARD, OR 97223</u> | |
| Email <u>angelascheng@hotmail.com</u> | |

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 <i>[Signature]</i> | Signature of Applicant #2 |
| Signature of Applicant #3 | Signature of Applicant #4 |

RECEIVED

JAN 08 2018



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Frank And Rose Inc ~~ANGELA CHENG~~ Phone: 477-5123 ~~503-590-9323~~

Trade Name (dba): PORTLAND MONGOLIAN GRILL & HOT POT

Business Location Address: 210 SW YAMHILL ST

City: PORTLAND ZIP Code: 97204

DAYS AND HOURS OF OPERATION

Business Hours:

| | |
|-----------|-----------------------------|
| Sunday | <u>12 pm</u> to <u>9 pm</u> |
| Monday | <u>11 am</u> to <u>9 pm</u> |
| Tuesday | <u>11 am</u> to <u>9 pm</u> |
| Wednesday | <u>11 am</u> to <u>9 pm</u> |
| Thursday | <u>11 am</u> to <u>9 pm</u> |
| Friday | <u>11 am</u> to <u>9 pm</u> |
| Saturday | <u>12 am</u> to <u>9 pm</u> |

Outdoor Area Hours: n/a

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

The outdoor area is used for: n/a

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 checked="" 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: 110 Outdoor: _____

Lounge: _____ Other (explain): _____

Banquet: _____ Total Seating: 110

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: Angela Cheng Date: 2/3/18

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)



OREGON LIQUOR CONTROL COMMISSION CORPORATION QUESTIONNAIRE

138482492

Please Print or Type

Corporation Name: FRANK AND ROSE INC Year Incorporated: 2017 ✓
Trade Name (dba): PORTLAND MONGOLIAN GRILL & HOTPOT
Business Location Address: 210 SW YAMHILL ST
City: PORTLAND ZIP Code: 97204

List Corporate Officers:

| | |
|-------------------------------|-----------------------------|
| <u>ANGELA CHENG</u> (name) | <u>PRESIDENT</u> (title) |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

List Board of Directors:

| |
|----------------------|
| <u>n/a</u> (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: |
|----------------------|-------------------------------|---|
| <u>n/a</u> | _____ | Issued: _____ |
| _____ | _____ | Unissued: _____ |
| _____ | _____ | Total Shares Authorized to Issue: _____ |
| _____ | _____ | |

Server Education Designee: ANGELA CHENG DOB: 4/5/1954
(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: Angela Cheng (name) PRESIDENT (title) Date: 1/3/18

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: FRANK AND ROSE INC

DBA OR TRADE NAME: PORTLAND MONGOLIAN GRILL ^{HOTPOT} PHONE: 503-477-5123 FAX: n/a

BUSINESS ADDRESS (Including ZIP Code): 210 SW YAMHILL ST PORTLAND, OR 97204

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

CONTACT PERSON: ANGELA CHENG PHONE: 503-590-9323 EMAIL: angela.cheng@hotmail.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: 399 SQ FT

EXISTING BUILDING: Yes No

ZONING: CXd

STRUCTURAL CHANGES (DESCRIBE): n/a

RESTAURANT SEATING CAPACITY: 110 LOUNGE SEATING CAPACITY: n/a OUTSIDE SEATING CAPACITY: n/a

DESCRIBE SECURITY: GOOD

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: 11 AM CLOSE: 9 PM FRIDAY & SATURDAY OPEN: 11 AM CLOSE: 9 PM
(12 pm) (12 pm)
HOW LATE WILL THERE BE OUTSIDE SEATING? n/a HOW LATE WILL THERE BE ENTERTAINMENT? n/a

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: MONGOLIAN GRILL PDX INC

NAME & ADDRESS OF PROPERTY OWNER: NORRIS & STEVENS 900 SW 5TH AVE 17th FLOOR
PORTLAND, OR 97204

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

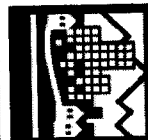
A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: Angela Cheng DATE: 1/21/18



City of Portland, Oregon - Bureau of Development Services

1900 SW Fourth Avenue · Portland, Oregon 97201 | 503-823-7300 | www.portlandoregon.gov/bds



ZONING VERIFICATION

Address: 815 SW 2ND AVE

R#: R245982

State ID: 1S1E03BA 4500

Zone: CXd, CXd

Plan District: CENTRAL CITY

Proposed Use: **RETAIL SALES AND SERVICE**

RETAIL SALES AND SERVICE is an ALLOWED use in the CXd, CXd zone

Additional Comments:

Property at 815 SW 2nd has multiple addresses including 210 SW Yamhill St. 210 SW Yamhill St. is zoned Central Commercial which allows Retail Sales and Service uses by right per 33.130.100 and Table 130-1.

Tammy Boren-King
Name of City Official

City Planner
Title

503-823-5765
Contact Number

Contact Number

Signature of Official

1 /22 /2018

Date

