



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

*L/1260187
P57541*

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 1-16-18

License Action:

2/privilege

Rec'd by Portland

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

Applicant #1 Knockout Taco, LLC
Miguel Meza

Applicant #2 JAN 23 2018

Applicant #3

Applicant #4 PD 75th JW
CC 111798

2. Trade Name of the Business (the name customers will see):
Knockout Taco Mexican Grill

3. Business Location: Number and Street 445 NE Killingsworth St.
City Portland County Multnomah ZIP 97211

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
City _____ State _____ ZIP _____

6. Phone Number of the Business Location: 503.206.7274

7. Contact Person for this Application:

Name Miguel Meza Phone Number 503.310.7825

Mailing Address, City, State, ZIP
445 NE Killingsworth Portland OR 97211

Email knockouttaco@gmail.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]

Signature of Applicant #2

RECEIVED

Signature of Applicant #3

Signature of Applicant #4

JAN 03 2018



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Knockout Taco, LLC Phone: 206-7274
Urgoal Meza 503-310-7025
Trade Name (dba): Knockout Taco Mexican Grill
Business Location Address: 445 NE Killingsworth St.
City: Portland Oregon ZIP Code: 97211

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday _____ to _____
Monday 9:11 to 10
Tuesday 9:11 to 10
Wednesday 9:11 to 10
Thursday 9:11 to 10
Friday 9:11 to 11
Saturday 9:11 to 11

Outdoor Area Hours:

Sunday _____ to _____
Monday 9:11 to 9
Tuesday 9:11 to 9
Wednesday 9:11 to 9
Thursday 11 to 9
Friday 11 to 9
Saturday 11 to 9

The outdoor area is used for:

Food service Hours: 11 to 10
 Alcohol service Hours: 11 to 11
 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 4 to 10
Saturday 6 to 10

SEATING COUNT

Restaurant: Outdoor:
Lounge: _____ Other (explain): _____
Banquet: _____ Total Seating: 25

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: 01-03-2017

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1198014-96

Please Print or Type

LLC Name: Knockout Taco, LLC Year Filed: 2016
~~2018~~

Trade Name (dba): Knockout Taco Mexican Grill

Business Location Address: 445 NE Killingsworth St.

City: Portland ZIP Code: 97211

List Members of LLC:

Percentage of Membership Interest:

1. Miguel Meza
(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: _____ DOB: _____

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

Signature: [Signature] (name) Wong (title) Date: 01/03/2018

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: Knockout TACO

DBA OR TRADE NAME: _____ PHONE: _____ FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 445 NE KILLINGWORTH PORTLAND OR 97231

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

CONTACT PERSON: Miguel Ma29 PHONE: 503.310.7825 EMAIL: KnockoutTaco@gmail.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: 12 x 30 ft

EXISTING BUILDING: Yes No

ZONING: CGdH

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 20 LOUNGE SEATING CAPACITY: 7 OUTSIDE SEATING CAPACITY: 10

DESCRIBE SECURITY: Security Camera

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: 11pm FRIDAY & SATURDAY OPEN: 11AM CLOSE: 11pm

HOW LATE WILL THERE BE OUTSIDE SEATING? 10 pm HOW LATE WILL THERE BE ENTERTAINMENT? 11 pm

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Knockout TACO LLC

NAME & ADDRESS OF PROPERTY OWNER: Miguel Ma29 17800 SE STARK # 28 PORTLAND OR 97233

ENTERTAINMENT

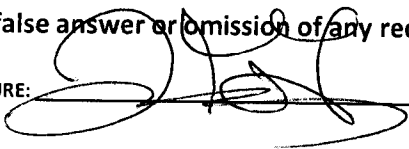
TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

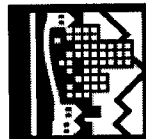
- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Video Poker | <input checked="" type="checkbox"/> Live Music | <input type="checkbox"/> Nude Dancers |
| <input type="checkbox"/> Karaoke | <input type="checkbox"/> Video Games/Pinball | <input type="checkbox"/> Recorded Music | <input checked="" 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: 01/22/2018



ZONING VERIFICATION

Address: 445 NE KILLINGSWORTH ST
 R#: R1366603
 State ID: 1N1E14CC 18300

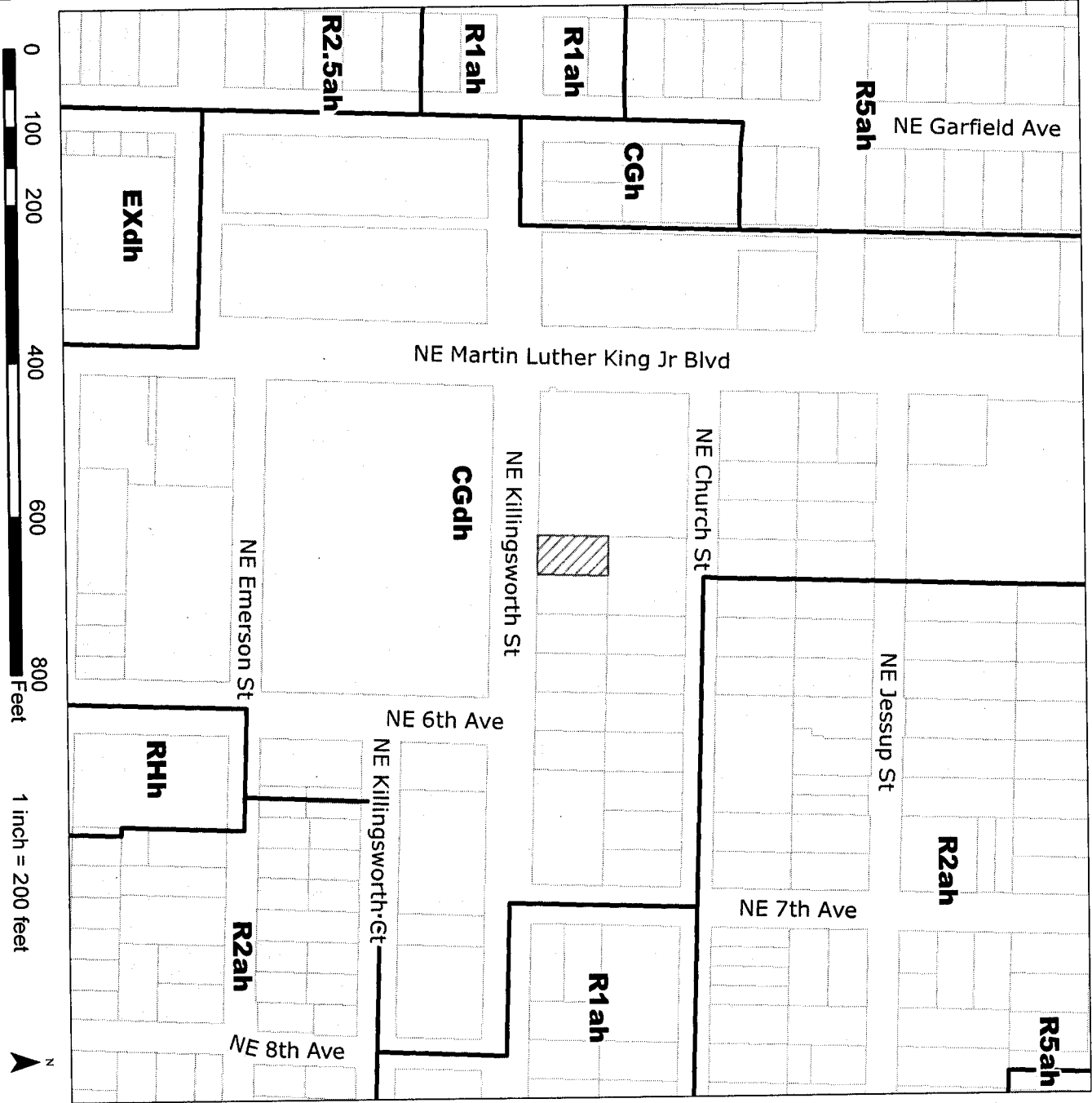
Zone: CGdh
 Plan District:

Proposed Use: **RETAIL SALES AND SERVICE**

RETAIL SALES AND SERVICE is an ALLOWED use in the CGdh zone

Additional Comments:

Retail Sales and Service Use allowed by right per 33.130.100 and Table 130-1.



Keshia Owens
 Name of City Official

City Planner
 Title

503-823-7028
 Contact Number

Signature of Official

1 /23 /2018
 Date