



# LIQUOR LICENSE APPLICATION

*M*

*DM*

**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 \_\_\_\_\_

**OLOC USE**

Application received by [Signature]

Date 1-18-18

License Action: N/O

Rec'd by Portland  
Liquor Licenses  
**JAN 24 2018**  
PD / CCO [Signature]  
# 19363

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

Applicant #1 <u>NOISELAND LLC</u> <del>NOISELAND LLC</del>	Applicant #2
Applicant #3	Applicant #4

2. Trade Name of the Business (the name customers will see):  
HIGH SCORE

3. Business Location: Number and Street 617 SE MORRISON ST  
 City PORTLAND County MULTNOMAH ZIP 97214

4. Is the business at this location currently licensed by the OLOC?  Yes  No

5. Mailing Address (where the OLOC will send your mail):  
 PO Box, Number, Street, Rural Route 617 SE MORRISON ST  
 City PORTLAND State OR ZIP 97214

6. Phone Number of the Business Location: 503-888-7431

7. Contact Person for this Application: JASON PRICE  
 Name JASON PRICE Phone Number 503-888-7431

Mailing Address, City, State, ZIP  
4319 SE 59th AVE PORTLAND OREGON 97206  
 Email JASON.PRICE@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 <u>[Signature]</u>	Signature of Applicant #
Signature of Applicant #	Signature of Applicant #

**RECEIVED**  
**JAN 10 2018**  
Initials: [Signature]



# OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: noiseland LLC  
~~JASON PRICE~~ Phone: 503-888-7431

Trade Name (dba): HIGH SCORE

Business Location Address: 617 SE MORRISON ST

City: PORTLAND ZIP Code: 97214

### DAYS AND HOURS OF OPERATION

**Business Hours:**

Sunday	<u>2</u>	to	<u>10</u>
Monday	<u>2</u>	to	<u>10</u>
Tuesday	<u>2</u>	to	<u>10</u>
Wednesday	<u>2</u>	to	<u>10</u>
Thursday	<u>2</u>	to	<u>10</u>
Friday	<u>2</u>	to	<u>12</u>
Saturday	<u>2</u>	to	<u>12</u>

**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
  - 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	_____	to	_____
Saturday	_____	to	_____

### SEATING COUNT

Restaurant: 0 Outdoor: 0

Lounge: 0 Other (explain): 6 SEATS AT CENTRAL TABLE. NO "DINING ROOM"

Banquet: 0 Total Seating: 6

**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: \_\_\_\_\_

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1392839-98

Please Print or Type

LLC Name: NOISELAND LLC Year Filed: 2018 ✓

Trade Name (dba): HIGH SCORE

Business Location Address: 617 SE MORRISON ST

City: PORTLAND ZIP Code: 97214

List Members of LLC:

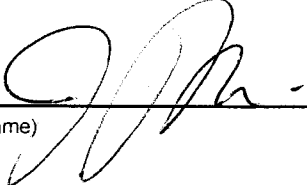
Percentage of Membership Interest:

- |  |            |
|--|------------|
| 1. <u>JASON PRICE</u><br>(managing member) | <u>100</u> |
| 2. _____<br>(members)                      | _____      |
| 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: JASON PRICE DOB: 2-14-71

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

Signature:  OWNER Date: 1-3-18  
(name) (title)

# CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

PLEASE SUBMIT TO: Liquor Licensing Notification Program, 1221 SW 4<sup>th</sup> 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: ~~XXXXXXXXXXXXXXXXXXXX~~ NOISELAND LLC

DBA OR TRADE NAME: HIGH SCORE PHONE: 503-888-7431 FAX: N/A

BUSINESS ADDRESS (Including ZIP Code): 617 SE MORRISON ST PORTLAND OREGON 97214

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

CONTACT PERSON: JASON PRICE PHONE: 503-888-7431 EMAIL: JASON.PRICE@GMAIL.COM

**DESCRIPTION OF OUTLET**

**TYPE OF OPERATION (CHECK ALL THAT APPLY)**

- Food Cart  Night Club  
 Restaurant  Sports Bar  
 Convenience Store  Other: ARCADE (AMUSEMENT)

SIZE OF SERVICE AREA: 500 SQUARE FEET

EXISTING BUILDING:  Yes  No

ZONING: EXD

STRUCTURAL CHANGES (DESCRIBE): NONE

RESTAURANT SEATING CAPACITY: 8 LOUNGE SEATING CAPACITY: 0 OUTSIDE SEATING CAPACITY: 8

DESCRIBE SECURITY: SMALL SPACE VISIBLE BY SERVER AT ALL TIMES.

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: 2:00 PM CLOSE: 11:00 PM FRIDAY & SATURDAY OPEN: 2:00 PM CLOSE: 11:00 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: ALL ELECTRIC REPAIR

NAME & ADDRESS OF PROPERTY OWNER: TAN VONKHT 1225 SE 60th AVE. PORTLAND OR 97215

**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.

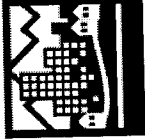
SIGNATURE: [Signature]

DATE: 1-22-18



# City of Portland, Oregon - Bureau of Development Services

1900 SW Fourth Avenue - Portland, Oregon 97201 | 503-823-7300 | [www.portlandoregon.gov/bds](http://www.portlandoregon.gov/bds)



## ZONING VERIFICATION

Address: 601-619 SE MORRISON ST

R#: R150229

State ID: 1S1E02BB 4500

Zone: EXd

Plan District: CENTRAL CITY, CENTRAL EASTSIDE

Proposed Use: RETAIL SALES AND SERVICE

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

### Additional Comments:

Per 33.140.100 and Table 140-1, Retail Sales and Service Uses are allowed in the EX zone. The Plan District does not further restrict the use at this site.

**Thomas Soppe**  
Name of City Official

**City Planner**  
Title

**503-823-7908**  
Contact Number

*Thomas Soppe*  
Signature of Official

**1** / **24** / **2018**  
Date

