



LIQUOR LICENSE APPLICATION

DT

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 1-22-18

License Action: N/O

Rec'd by Portland
Liquor Licenses
FEB 01 2018
PD # 100

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

Applicant #1 <u>FRA KEPLER</u>	Applicant #2
Applicant #3	Applicant #4

2. Trade Name of the Business (the name customers will see):
LENTS ALE HOUSE

3. Business Location: Number and Street 8530 SE FOSTER RD
 City PORTLAND County MULTNOMAH ZIP 97266

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 P.O. BOX 86135
 City PORTLAND State OR. ZIP 97286

6. Phone Number of the Business Location: 503-964-4728

7. Contact Person for this Application: FRA KEPLER

Name <u>FRA KEPLER</u>	Phone Number <u>503-964-4728</u>
Mailing Address, City, State, ZIP <u>P.O. BOX 86135 PORTLAND OR 97286</u>	
Email <u>FraKepler@gmail.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 <u>[Signature]</u>	Signature of Applicant #2
Signature of Applicant #3	Signature of Applicant #4

RECEIVED JAN 12 2018



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: FRA KEPLER Phone: 503-964-4728
Trade Name (dba): LENTS ALE HOUSE
Business Location Address: 8530 SE FOSTER RD.
City: PORTLAND ZIP Code: 97266

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 12 PM to 12 AM
Monday 3 PM to 12 AM
Tuesday 2 PM to 12 AM
Wednesday 3 PM to 12 AM
Thursday 3 PM to 12 AM
Friday 3 PM to 12 AM
Saturday 3 PM to 12 AM

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: WINTER HOURS 3PM-10PM

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

N/A
Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

SEATING COUNT

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

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: 01-11-18

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)

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: LENTS ALE HOUSE

DBA OR TRADE NAME: LENTS ALE HOUSE PHONE: 503-964-4728 FAX: N/A

BUSINESS ADDRESS (Including ZIP Code): P.O. BOX 86135 PORTLAND, OR 97286

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

CONTACT PERSON: FRA KEPLER PHONE: 503-964-4728 EMAIL: FraKepler@gmail.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: 500 SQFT

EXISTING BUILDING: Yes No

ZONING: EXD

STRUCTURAL CHANGES (DESCRIBE): NONE

RESTAURANT SEATING CAPACITY: 30 LOUNGE SEATING CAPACITY: N/A OUTSIDE SEATING CAPACITY: N/A

DESCRIBE SECURITY: camera security system

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: 15:00 CLOSE: 22:00 FRIDAY & SATURDAY OPEN: 15:00 CLOSE: 23:00

HOW LATE WILL THERE BE OUTSIDE SEATING? NONE N/A HOW LATE WILL THERE BE ENTERTAINMENT? NONE N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: UNKNOWN

NAME & ADDRESS OF PROPERTY OWNER: Shongda Investments, LLC - 8743 SE POWELL BLVD. PORTLAND, OR 97266

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

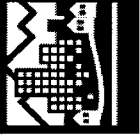
A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: [Signature] DATE: 1-30-18



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: 8530 SE FOSTER RD

R#: R159094

State ID: 1S2E16CB 11200

Zone: EXd

Plan District: NONE.

Proposed Use: RETAIL SALES AND SERVICE

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

Additional Comments:

Per 33.140 and Table 140-1, Retail Sales and Service is allowed by right in the EX Zone.

Keshia Owens

Name of City Official

City Planner

Title

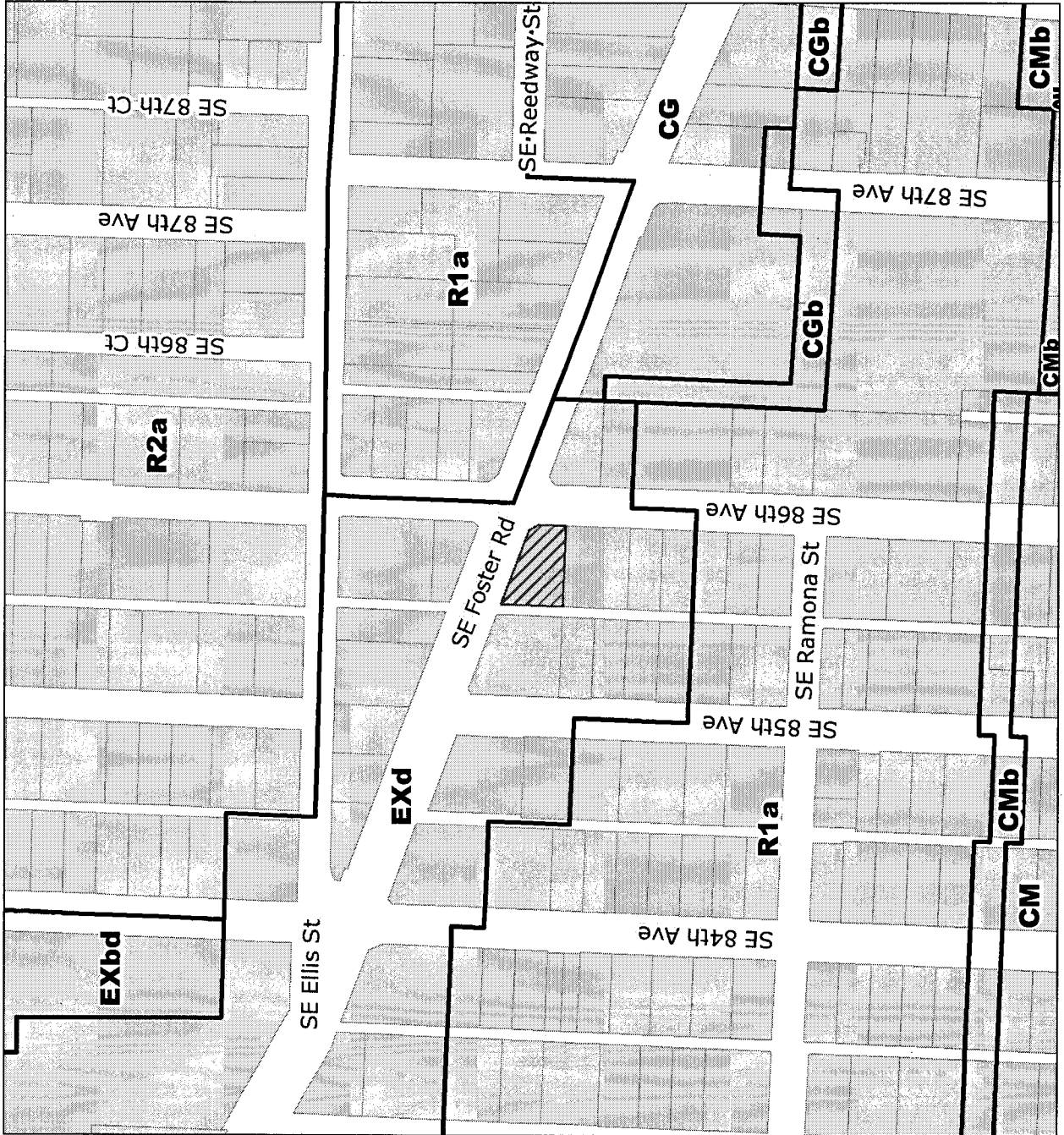
503-823-7028

Contact Number

Signature of Official

2 / 1 / 2018

Date



1 inch = 200 feet

