



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

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: <input type="checkbox"/> Brewery <input checked="" type="checkbox"/> Brewery-Public House <u>3rd Location--No Manufacturing</u> <input type="checkbox"/> Distillery <input checked="" type="checkbox"/> Full On-Premises, Commercial <input type="checkbox"/> Full On-Premises, Caterer <input type="checkbox"/> Full On-Premises, Passenger Carrier <input type="checkbox"/> Full On-Premises, Other Public Location <input type="checkbox"/> Full On-Premises, Nonprofit Private Club <input type="checkbox"/> Full On-Premises, For-Profit Private Club <input type="checkbox"/> Grower Sales Privilege <input type="checkbox"/> Limited On-Premises <input type="checkbox"/> Off-Premises <input type="checkbox"/> Off-Premises with Fuel Pumps <input type="checkbox"/> Warehouse <input type="checkbox"/> Wholesale Malt Beverage & Wine (WMBW) <input type="checkbox"/> Winery	CITY AND COUNTY USE ONLY Date application received _____ Name of City or County _____ Recommends this license be ___ Granted ___ Denied By _____ Date _____
	Application received by <u>[Signature]</u> Date <u>3-27-18</u> License Action: <u>n/o</u>

1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license:		
Applicant #1 R. L. K. and Company	Applicant #2	Rec'd by Portland Liquor Licenses
Applicant #3	Applicant #4	MAR 29 2018 PD \$100 ck # 2070
2. Trade Name of the Business (the name customers will see): Mt. Hood Brewing Company at Tillikum Station		
3. Business Location: Number and Street 401 SE Caruthers Street, Suite 101		
City Portland	County Multnomah	ZIP 97202
4. Is the business at this location currently licensed by the OLCC? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
5. Mailing Address (where the OLCC will send your mail):		
PO Box, Number, Street, Rural Route PO Box 275		
City Government Camp	State OR	ZIP 97028
6. Phone Number of the Business Location: TBD		
7. Contact Person for this Application:		
Name Duke Tufty		Phone Number 503-718-2310
Mailing Address, City, State, ZIP		
7521 NE Sandy Blvd., Portland, OR 97213		
Email duke@nwalcoholaw.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 #2
Signature of Applicant #3		Signature of Applicant #4

RECEIVED

OLCC Liquor License Application (Rev. 09-2017) MAR 27 2018

Initials: [Signature]
Liquor Control Commission



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: R. L. K. and Company Phone: TBD

Trade Name (dba): Mt. Hood Brewing Company at Tilikum Station

Business Location Address: 401 SE Caruthers Street, Ste. 101

City: Portland ZIP Code: 97202

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 11am to 9pm
Monday 11am to 9pm
Tuesday 11am to 9pm
Wednesday 11am to 9pm
Thursday 11am to 9pm
Friday 11am to 10pm
Saturday 11am to 10pm

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:

- 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: 51 Outdoor:
Lounge: Other (explain): 6 (bar)
Banquet: Total Seating: 57

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: 3/13/18

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)



**OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE**

Please Print or Type

Corporation Name: R.L. K. and Company Year Incorporated: 1955

Trade Name (dba): Mt. Hood Brewery at Tilikum Station

Business Location Address: 401 SE Caruthers Street, Suite 101

City: Portland ZIP Code: 97202

List Corporate Officers:

<u>Jeff Kohnstamm</u> (name)	<u>President</u> (title)
<u>Molly Kohnstamm</u>	<u>Secretary/Treasurer</u>
_____	_____
_____	_____

List Board of Directors:

Jeff Kohnstamm, Molly Kohnstamm and Kevin Kohnstamm
(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>Kohnstamm Holding Company</u>	<u>1,251</u>	Issued: <u>1,251</u>
_____	_____	Unissued: _____
_____	_____	Total Shares Authorized to Issue: _____
_____	_____	

Server Education Designee: Laura Grimsley **DOB:** 09/11/1976
(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: [Signature] **(name)** PRESIDENT **(title)** **Date:** 3/13/18



OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE

Please Print or Type

Corporation Name: Kohnstamm Holding Company Year Incorporated: 1 99

Trade Name (dba): Mt. Hood Brewing Company at Tilikum Station

Business Location Address: 401 SE Caruthers Street, Suite 101

City: Portland ZIP Code: 97202

List Corporate Officers:

<u>Jeff Kohnstamm</u> (name)	<u>President</u> (title)
<u>Kevin Kohnstamm</u>	<u>Secretary/Treasurer</u>
_____	_____
_____	_____

List Board of Directors:

Jeff Kohnstamm, Molly Kohnstamm and Kevin Kohnstamm
(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>See Attached</u>	<u>9,120</u>	Issued: <u>9,120</u>
_____	_____	Unissued: <u>15,880</u>
_____	_____	Total Shares Authorized to Issue: <u>25,000</u>
_____	_____	

Server Education Designee: N/A DOB: N/A
(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: [Signature] President Date: 3/13/18
(name) (title)

CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

PLEASE SUBMIT TO: Mike Boyer, Office of Neighborhood Involvement, 1221 SW 4th Avenue, Suite #110, Portland OR 97204 - (503) 823-3092

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: R. L. K. and Company

DBA OR TRADE NAME: Mt. Hood Brewing Company at Tilikum Station PHONE: TBD FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 401 SE Caruthers Street, Suite 101

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): New Outlet F-Com & BPH (3rd location)

CONTACT PERSON: Duke Tufty (No Solicitation) PHONE: 503-718-2310 EMAIL: duke@nwalcoholaw.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: ~1000 square feet

EXISTING BUILDING: Yes No

ZONING: IG1

STRUCTURAL CHANGES (DESCRIBE): New construction

RESTAURANT SEATING CAPACITY: 51 LOUNGE SEATING CAPACITY: 6 (bar) OUTSIDE SEATING CAPACITY: 0

DESCRIBE SECURITY: On-site management and staffing

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: 11:00am CLOSE: 9:00pm FRIDAY & SATURDAY OPEN: 11:00am CLOSE: 10:00pm

HOW LATE WILL THERE BE OUTSIDE SEATING? Until close HOW LATE WILL THERE BE ENTERTAINMENT? Until close

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: N/A

NAME & ADDRESS OF PROPERTY OWNER: KELLY C BRUUN, c/o Wyse Investment Services Company 810 SE Belmont Street, Suite 100 Portland, OR 97214

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

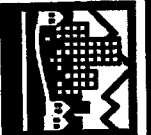
A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: [Signature] DATE: 3/13/18



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: 411 SE CARUTHERS ST.

R#: R275817

State ID: 1S1E02CC 5700

Zone: IG1

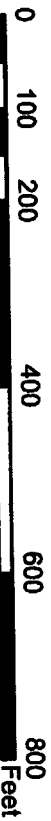
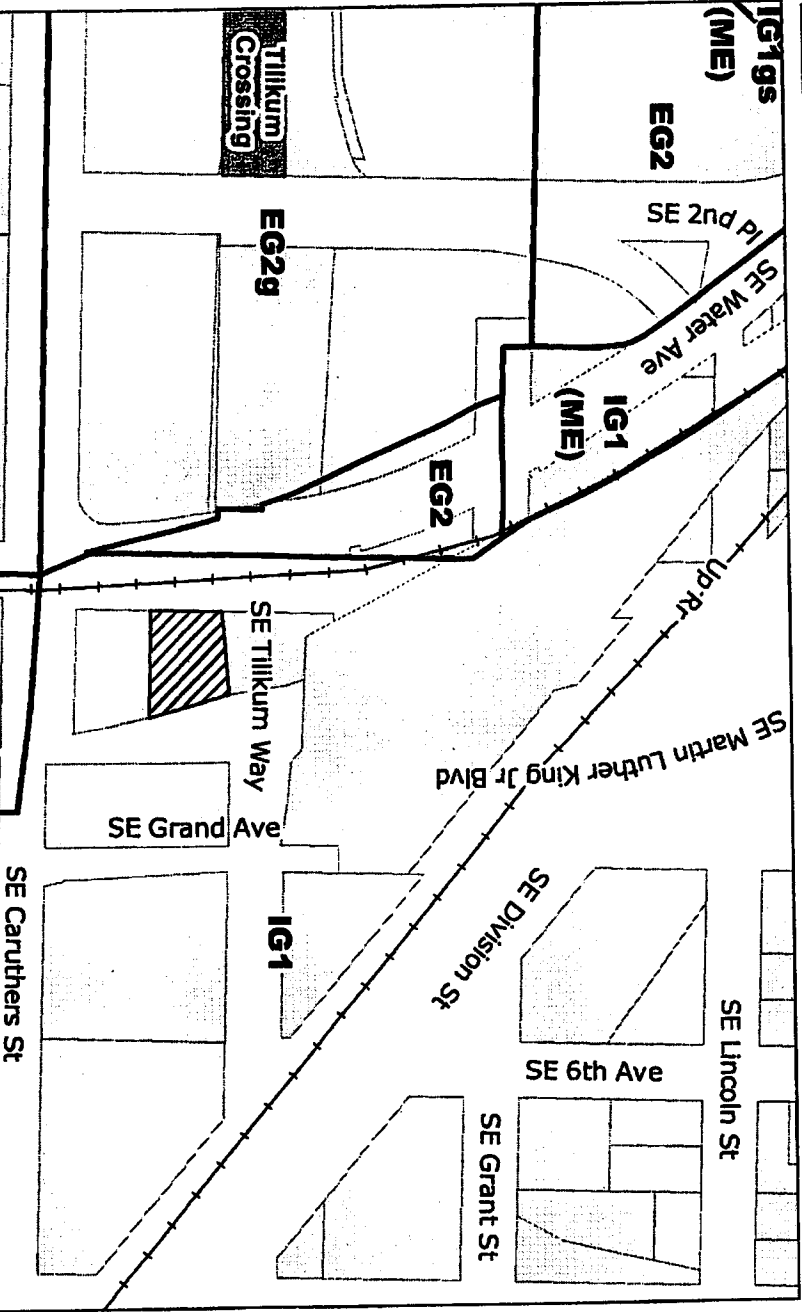
Plan District: CENTRAL CITY, CENTRAL EASTSIDE, EMPLOYMENT OPPORTUNITY

Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is a LIMITED use in the IG1 zone

Additional Comments:

Up to 5,000 sf of net building area, plus outdoor storage, display of retail sales and services use is allowed in the IG1 in the employment subarea.



1 inch = 200 feet



Tyler Mann
Name of City Official

City Planner
Title

503-823-5062
Contact Number

Signature of Official

Date

1 /22 /2018