



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:

- 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

257412

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 3-28-18

License Action: No chn Apprv.

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

Applicant #1 Deadfast LLC	Applicant #2	Rec'd by Portland Liquor Licenses
Applicant #3	Applicant #4	APR 03 2018 PD <u>C75.00</u> # <u>1003</u>

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

Holdfast / Deadshot

3. Business Location: Number and Street 2131-2139 SE 11th Ave

City Portland	County Multnomah	ZIP 97214
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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 819 SE Grant St		
City Portland	State OR	ZIP 97214

6. Phone Number of the Business Location: 503-222-0600

7. Contact Person for this Application:

Name Jessica Silverman	Phone Number 714-743-3417
Mailing Address, City, State, ZIP 819 SE Grant St, Portland OR 97214	
Email jessica@chefstablegroup.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	RECEIVED MAR 19 2018 Initials: <u>[Signature]</u>
Signature of Applicant #3	Signature of Applicant #4	



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Deadfast LLC Phone: (503) 222-0600

Trade Name (dba): Holdfast / Deadshot

Business Location Address: 2131-2139 SE 11th Ave

City: Portland ZIP Code: 97214

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>4pm</u>	to	<u>1am</u>
Monday	<u>4pm</u>	to	<u>1am</u>
Tuesday	<u>4pm</u>	to	<u>1am</u>
Wednesday	<u>4pm</u>	to	<u>1am</u>
Thursday	<u>4pm</u>	to	<u>1am</u>
Friday	<u>4pm</u>	to	<u>1am</u>
Saturday	<u>4pm</u>	to	<u>1am</u>

Outdoor Area Hours:

Sunday	<u>4pm</u>	to	<u>12am</u>
Monday	<u>4pm</u>	to	<u>12am</u>
Tuesday	<u>4pm</u>	to	<u>12am</u>
Wednesday	<u>4pm</u>	to	<u>12am</u>
Thursday	<u>4pm</u>	to	<u>12am</u>
Friday	<u>4pm</u>	to	<u>12am</u>
Saturday	<u>4pm</u>	to	<u>12am</u>

The outdoor area is used for:

Food service Hours: 4pm to 12am

Alcohol service Hours: 4pm to 12am

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: 76 Outdoor: 22

Lounge: _____ Other (explain): _____

Banquet: _____ Total Seating: 98

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: March 14, 2018

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1417406-96

Please Print or Type

LLC Name: Deadfast LLC Year Filed: 2018

Trade Name (dba): Holdfast / Deadshot

Business Location Address: 2131-2139 SE 11th Ave

City: Portland ZIP Code: 97214

List Members of LLC:

Percentage of Membership Interest:

- | | |
|--|--------------|
| 1. <u>William Preisch</u>
(managing member) | <u>26.7%</u> |
| 2. <u>Joel Stocks</u>
(members) | <u>26.7%</u> |
| 3. <u>Adam Robinson</u> | <u>26.7%</u> |
| 4. <u>Kurt Huffman</u> | <u>19.9%</u> |
| 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: Kurt Huffman DOB: 12/12/69

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

Signature:  Member Date: Mar 14, 2018
(name) (title)

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: Deadfast LLC

DBA OR TRADE NAME: Holdfast / Deadshot

PHONE: 503-222-0600

FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 2131-2139 SE 11th Ave, Portland OR 97214

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): F-COM, O - change of owner

CONTACT PERSON: Jessica Silverman

PHONE: 714-743-3417

EMAIL: jessica@chefstablegroup.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

Food Cart

Night Club

SIZE OF SERVICE AREA: 1700 SF

Restaurant

Sports Bar

EXISTING BUILDING:

Yes

No

Convenience Store

Other: _____

ZONING: Retail

STRUCTURAL CHANGES (DESCRIBE): N/A

RESTAURANT SEATING CAPACITY: 76

LOUNGE SEATING CAPACITY: N/A

OUTSIDE SEATING CAPACITY: 22

DESCRIBE SECURITY: _____

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: 4pm

CLOSE: 1am

FRIDAY & SATURDAY OPEN: 4pm

CLOSE: 1am

HOW LATE WILL THERE BE OUTSIDE SEATING? 12am

HOW LATE WILL THERE BE ENTERTAINMENT? N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Associated

NAME & ADDRESS OF PROPERTY OWNER: Ralph Tidwell, PO Box 87, Gladstone OR 97027

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.

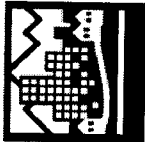
SIGNATURE: _____

DATE: 3/14/18



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: 2131-2139 SE 11TH AVE

R#: R276073

State ID: 1S1E02CD 15400

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:

Up to 40,000 sf of net building area of Retail Sales & Service use is allowed in the Central Eastside sub-district of the Central City Plan District (per use); 33.510.116.C.

J Malia Slusasrenko

Name of City Official

City Planner

Title

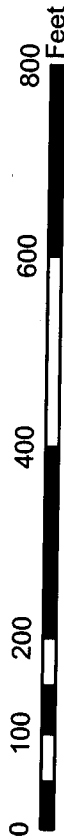
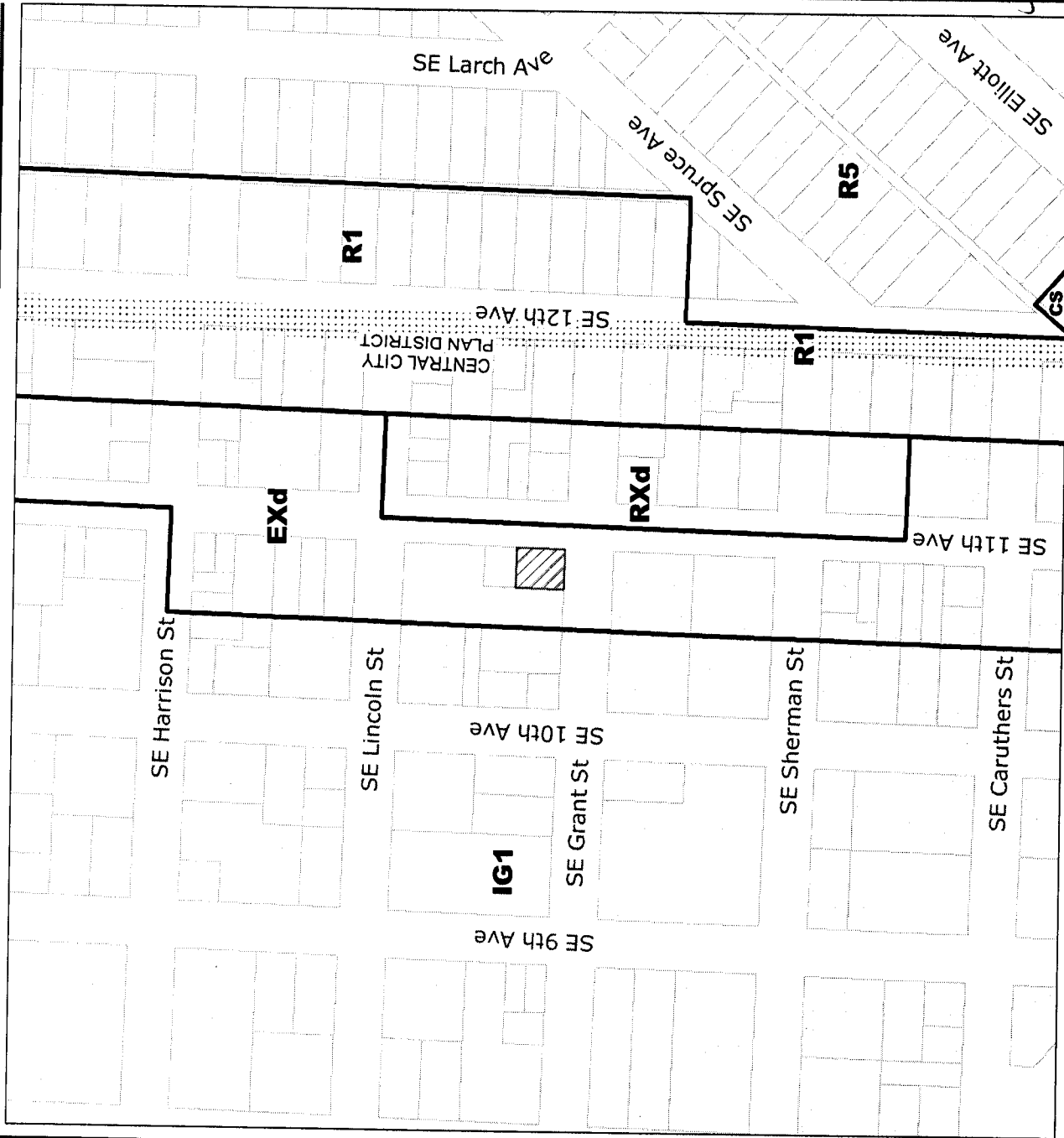
503-823-7353

Contact Number

J Malia Slusasrenko
Signature of Official

4 / 3 / 2018

Date



1 inch = 200 feet