



OREGON LIQUOR CONTROL COMMISSION

# 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

### 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 

Date 5-11-18

License Action:

n/o

Rec'd by Portland  
Liquor Licenses

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

Applicant #1

~~KAREN~~ HINDSIGHT, LLC

Applicant #2

MAY 15 2018

PD \$100<sup>00</sup> ADM  
# 1081

Applicant #3

Applicant #4

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

HINDSIGHT TAP CART

### 3. Business Location: Number and Street

8926 N. LOMBARD ST - LOT B, SPACE 3

City PORTLAND OR

County MULTNOMAH

ZIP 97203

### 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 2401 NW ELEVENMILE AVE

City GRESHAM State OR

ZIP 97030

### 6. Phone Number of the Business Location: 267-474-2022

### 7. Contact Person for this Application:

Name KARYN WISNIEWSKI

Phone Number 267-474-2022

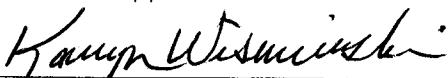
Mailing Address, City, State, ZIP

2401 NW ELEVENMILE AVE, GRESHAM OR 97030

Email JUSTNOTKARYN@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 of Applicant #2

Signature of Applicant #3

Signature of Applicant #4

RECEIVED MAY 10 2018



OREGON LIQUOR CONTROL COMMISSION  
BUSINESS INFORMATION

Please Print or Type

Hindsight, LLC

Applicant Name: ~~KARYN WISNIEWSKI~~ Phone: 267-474-2022

Trade Name (dba): HINDSIGHT Tap Cart

Business Location Address: 8926 N. LOMBARD ST. LOT B, SPACE 3

City: PORTLAND OR ZIP Code: 97203

**DAYS AND HOURS OF OPERATION**

Business Hours:

Sunday	<u>12</u>	to	<u>8</u>
Monday	<u>12</u>	to	<u>8</u>
Tuesday	<u>12</u>	to	<u>8</u>
Wednesday	<u>12</u>	to	<u>8</u>
Thursday	<u>12</u>	to	<u>8</u>
Friday	<u>12</u>	to	<u>8</u>
Saturday	<u>12</u>	to	<u>8</u>

Outdoor Area Hours:

Sunday	<u>12</u>	to	<u>8</u>
Monday	<u>12</u>	to	<u>8</u>
Tuesday	<u>12</u>	to	<u>8</u>
Wednesday	<u>12</u>	to	<u>8</u>
Thursday	<u>12</u>	to	<u>8</u>
Friday	<u>12</u>	to	<u>8</u>
Saturday	<u>12</u>	to	<u>8</u>

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: POSSIBLY OPEN UNTIL ON NICE WEATHER SEASONS.

**ENTERTAINMENT**

Check all that apply:

N/A

- 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: \_\_\_\_\_ Outdoor: PICNIC TABLES

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: Karyn Wisniewski Date: 5/9/18

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1130939-91

Please Print or Type

LLC Name: HINDSIGHT, LLC Year Filed: 2015

Trade Name (dba): HINDSIGHT TAP CART

Business Location Address: 8926 N. LOMBARD ST, LOT B, SPACE 3

City: PORTLAND OR ZIP Code: 97203

List Members of LLC:

Percentage of Membership Interest:

1. KARYN WISNIEWSKI  
(managing member)

100%

2. \_\_\_\_\_  
(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: Karyn Wisniewski DOB: 5/25/71

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

Signature: Karyn Wisniewski Date: 5/10/18  
(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: HINDSIGHT, LLC

DBA OR TRADE NAME: HINDSIGHT PHONE: 267.474-2022 FAX: \_\_\_\_\_

BUSINESS ADDRESS (Including ZIP Code): 8926 N. LOMBARD ST. LOT B, SPACE 3 PORTLAND 97203

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

CONTACT PERSON: KARYN WISNIEWSKI PHONE: 267.474.2022 EMAIL: JUSTNOTKARYN@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: 5000 SQ FT OUTDOOR FOOD CART POD

EXISTING BUILDING:  Yes       No

ZONING: \_\_\_\_\_

STRUCTURAL CHANGES (DESCRIBE): \_\_\_\_\_

RESTAURANT SEATING CAPACITY: N/A      LOUNGE SEATING CAPACITY: N/A      OUTSIDE SEATING CAPACITY: \_\_\_\_\_

DESCRIBE SECURITY: CAMERAS

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       Don't Know

## HOURS OF OPERATION

SUNDAY - THURSDAY OPEN: 12 PM CLOSE: 9 PM      FRIDAY & SATURDAY OPEN: 12 PM CLOSE: 10 PM

HOW LATE WILL THERE BE OUTSIDE SEATING? \_\_\_\_\_      HOW LATE WILL THERE BE ENTERTAINMENT? \_\_\_\_\_

## HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: ? CURRENTLY TWO STROKE COFFEE & 3 OTHER FOOD CARTS

NAME & ADDRESS OF PROPERTY OWNER: AUGUSTINE L CALCAGNO, 7509 N. EDGEWATER AVE PORTLAND 97203

## ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY) N/A

- 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.

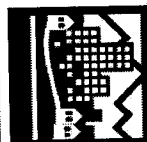
Use this area to provide any additional information that you wish to be considered on this liquor application

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

SIGNATURE: Karyn Wisniewski      DATE: 5/15/18



**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: 8926-8928 N LOMBARD ST

R#: R192009

State ID: 1N1W01CD 10900

Zone: Csd

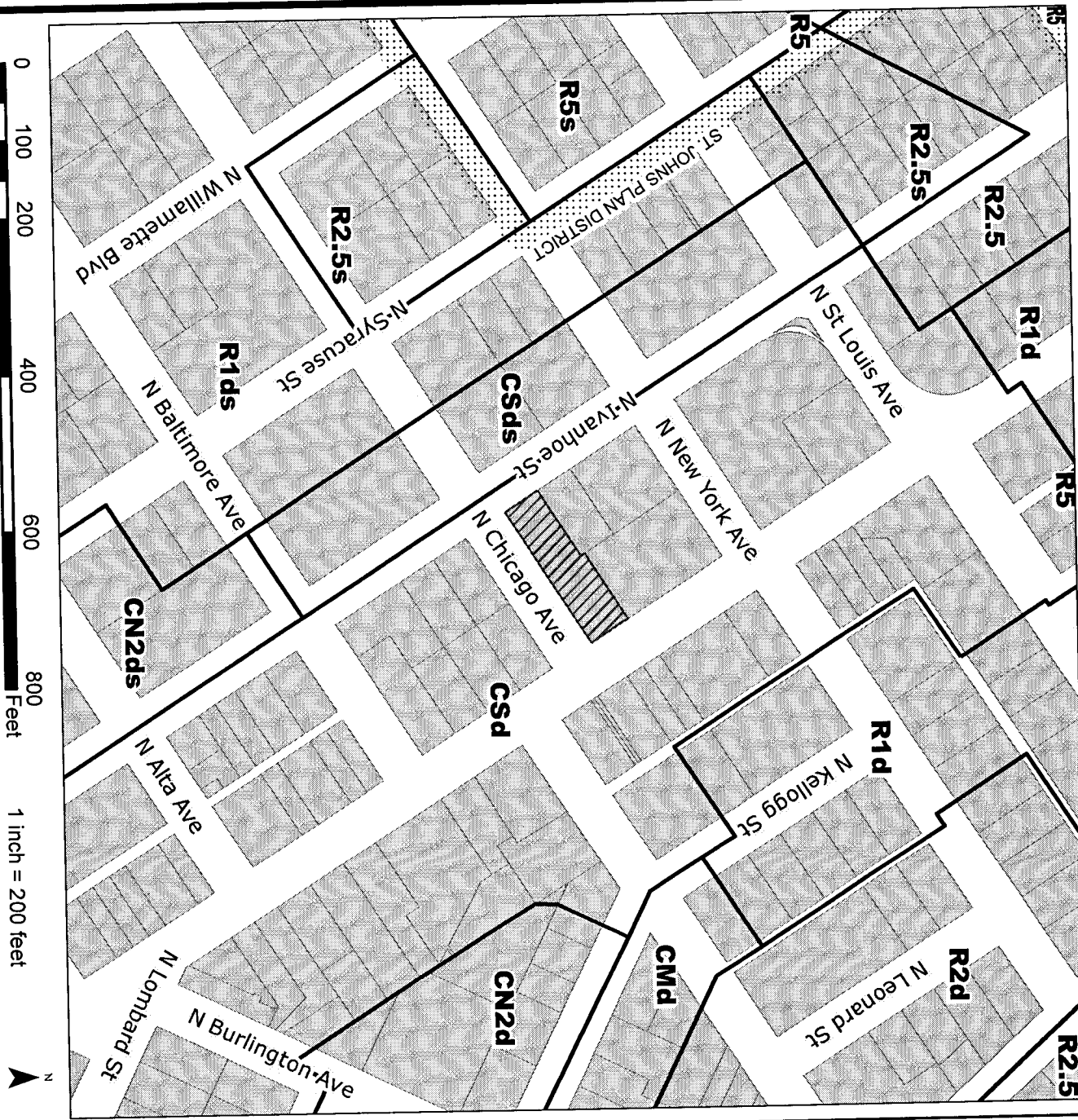
Plan District: ST. JOHNS

**Proposed Use: RETAIL SALES AND SERVICE**

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

**Additional Comments:**

Per 33.130.100 and Table 130-1, Retail Sales and Service Uses are allowed by right. The use is not restricted by the Plan District.



**Parish Burns**  
 Name of City Official

**City Planner**  
 Title

**503-823-7348**  
 Contact Number

*Parish Burns*  
 Signature of Official

**5** / **15** / **2018**  
 Date