



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

Pending

<p>LICENSE FEE: Do not include the license fee with the application (the license fee will be collected at a later time).</p> <p>APPLICATION: Application is being made for:</p> <p><input type="checkbox"/> Brewery</p> <p><input type="checkbox"/> Brewery-Public House</p> <p><input type="checkbox"/> Distillery</p> <p><input checked="" type="checkbox"/> Full On-Premises, Commercial</p> <p><input type="checkbox"/> Full On-Premises, Caterer</p> <p><input type="checkbox"/> Full On-Premises, Passenger Carrier</p> <p><input type="checkbox"/> Full On-Premises, Other Public Location</p> <p><input type="checkbox"/> Full On-Premises, Nonprofit Private Club</p> <p><input type="checkbox"/> Full On-Premises, For-Profit Private Club</p> <p><input type="checkbox"/> Grower Sales Privilege</p> <p><input checked="" type="checkbox"/> Limited On-Premises</p> <p><input type="checkbox"/> Off-Premises</p> <p><input type="checkbox"/> Off-Premises with Fuel Pumps</p> <p><input type="checkbox"/> Warehouse</p> <p><input type="checkbox"/> Wholesale Malt Beverage & Wine (WMBW)</p> <p><input type="checkbox"/> Winery</p>	<p align="center">CITY AND COUNTY USE ONLY</p> <p>Date application received _____</p> <p>Name of City or County _____</p> <p>Recommends this license be ___ Granted ___ Denied</p> <p>By _____</p> <p>Date _____</p> <hr/> <p align="center">OLCC USE</p> <p>Application received by <u>Amfarb</u></p> <p>Date <u>5/3/18</u></p> <p>License Action: <u>N/O</u> Rec'd by Portland Liquor Licenses</p>
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1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license:		MAY 16 2018
Applicant #1 <u>Gracie's Apizza LLC</u>	Applicant #2	PD \$100 ⁰⁰ ADM # <u>152</u>
Applicant #3 <u>(Gracie's Apizza LLC)</u>	Applicant #4	
2. Trade Name of the Business (the name customers will see): <u>Gracie's Apizza</u>		
3. Business Location: Number and Street <u>8355 N Interstate Blvd</u>		
City <u>Portland</u>	County <u>OR Multnomah</u>	ZIP <u>97217</u>
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): <u>7936 N Peninsula Ave</u>		
PO Box, Number, Street, Rural Route	City <u>Portland</u>	State <u>OR</u> ZIP <u>97217</u>
6. Phone Number of the Business Location: <u>703-901-5818</u>		
7. Contact Person for this Application:		
Name <u>Craig Melillo</u>	Phone Number <u>703-901-5818</u>	
Mailing Address, City, State, ZIP <u>7936 N Peninsula Ave Portland OR 97217</u>		
Email <u>hello@graciesapizza.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>Gracie's Apizza LLC</u> By: <u>Craig Melillo</u> its member	Signature of Applicant #2	<p align="center">RECEIVED</p> <p align="center">APR 30 2018</p> <p align="center"><i>[Signature]</i></p>
Signature of Applicant #3	Signature of Applicant #4	



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Gracie's Apizza LLC Phone: 203-901-5818

Trade Name (dba): Gracie's Apizza

Business Location Address: 8355 N Interstate Blvd

City: Portland ZIP Code: 97217

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>5</u>	to	<u>10</u>
Monday	<u>5</u>	to	<u>10</u>
Tuesday	<u>5</u>	to	<u>10</u>
Wednesday	<u>5</u>	to	<u>10</u>
Thursday	<u>5</u>	to	<u>10</u>
Friday	<u>5</u>	to	<u>10</u>
Saturday	<u>5</u>	to	<u>10</u>

Outdoor Area Hours:

Sunday	<u>5</u>	to	<u>10</u>
Monday	<u>5</u>	to	<u>10</u>
Tuesday	<u>5</u>	to	<u>10</u>
Wednesday	<u>5</u>	to	<u>10</u>
Thursday	<u>5</u>	to	<u>10</u>
Friday	<u>5</u>	to	<u>10</u>
Saturday	<u>5</u>	to	<u>10</u>

The outdoor area is used for:

- Food service Hours: _____ to _____
- Alcohol service Hours: _____ to _____
- Enclosed, how fence

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 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: _____ Outdoor: 50

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: Craig Mann ^{by Gracie's Apizza LLC} its member Date: 4/24/18



OREGON LIQUOR CONTROL COMMISSION LIMITED LIABILITY COMPANY QUESTIONNAIRE

Reg # 1389055-91

Please Print or Type

LLC Name: Gracie's Pizzeria LLC Year Filed: 1

Trade Name (dba): Gracie's Pizzeria

Business Location Address: 7856 N Peninsula Ave

City: Portland ZIP Code: 97217

List Members of LLC:

Percentage of Membership Interest:

1. Gray Melillo
(managing member)
2. _____
(members)
3. _____
4. _____
5. _____
6. _____

- 100
- _____
- _____
- _____
- _____
- _____

(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: Gray Melillo DOB: 2/6/1987

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

Signature: Gray Melillo member Date: 4/23/18
(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: Gracie's Apizza LLC

DBA OR TRADE NAME: Gracie's Apizza PHONE: 203-901-5818 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 8355 N Interstate blvd 97217

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

CONTACT PERSON: Craig Melillo PHONE: 203-901-5818 EMAIL: hello@graciesapizza.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: 1500 sqft

EXISTING BUILDING: Yes No

ZONING: Commercial designation that allows retail + hobby - CS storage

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: _____ LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: 40-50

DESCRIBE SECURITY: Fenced in, alarm, front desk

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: 8 AM CLOSE: 10 PM FRIDAY & SATURDAY OPEN: 5 PM CLOSE: 10 PM

HOW LATE WILL THERE BE OUTSIDE SEATING? 10 PM HOW LATE WILL THERE BE ENTERTAINMENT? N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Comfy Inn Suites

NAME & ADDRESS OF PROPERTY OWNER: _____

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: Craig Melillo DATE: 5.13.18



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: 8355 N INTERSTATE AVE

R#: R196158

State ID: 1N1E09DA 2800

Zone: CSD

Plan District: KENTON

Proposed Use: **RETAIL SALES AND SERVICE**

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

Additional Comments:

CS- Commercial Storefront Zone
33,130,100- retail sales & Service Use is allowed in this zone

Sean Williams
Name of City Official

City Planner
Title

503-823-7526
Contact Number

Signature of Official

5 / **16** / **2018**
Date

