



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 mfab

Date 5/7/18

License Action: n/o

Rec'd by Portland  
Liquor Licenses

**1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license:** JUN 12 2018

Applicant #1  
**MOONSTRUCK CHOCOLATE COMPANY**

Applicant #2

PD CC \$ 100<sup>00</sup>  
# 026159

Applicant #3

Applicant #4

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

**MOONSTRUCK CHOCOLATE COMPANY**

**3. Business Location: Number and Street 526 NW 23RD AVE**

City **PORTLAND**

County **MULTNOMAH**

ZIP **97210**

**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 **6600 N BALTIMORE AVE**

City **PORTLAND**

State **OR**

ZIP **97203**

**6. Phone Number of the Business Location: 503-247-3448**

**7. Contact Person for this Application:**

Name **JAMES EWING**

Phone Number **503-247-3448**

Mailing Address, City, State, ZIP

**6600 N BALTIMORE AVE, PORTLAND OR 97203**

Email **JEWING@MOONSTRUCKCHOCOLATE.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

APR 06 2018



OREGON LIQUOR CONTROL COMMISSION  
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Woodstock Chocolate Co. Phone: 503-247-3448

Trade Name (dba): Woodstock Chocolate Cafe

Business Location Address: 526 NW 23rd Ave

City: Portland ZIP Code: 97210

**DAYS AND HOURS OF OPERATION**

<b>Business Hours:</b>	<b>Outdoor Area Hours:</b>	The outdoor area is used for:
Sunday <u>9 AM</u> to <u>9 PM</u>	Sunday _____ to _____	<input type="checkbox"/> Food service Hours: _____ to _____
Monday <u>8 AM</u> to <u>10 PM</u>	Monday _____ to _____	<input type="checkbox"/> Alcohol service Hours: _____ to _____
Tuesday <u>8 AM</u> to <u>10 PM</u>	Tuesday _____ to _____	<input type="checkbox"/> Enclosed, how _____
Wednesday <u>8 AM</u> to <u>10 PM</u>	Wednesday _____ to _____	The exterior area is adequately viewed and/or supervised by Service Permittees.
Thursday <u>8 AM</u> to <u>10 PM</u>	Thursday _____ to _____	_____ (Investigator's Initials)
Friday <u>8 AM</u> to <u>10 PM</u>	Friday _____ to _____	
Saturday <u>8 AM</u> to <u>10 PM</u>	Saturday _____ to _____	

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**

NA

Sunday	_____ to _____
Monday	_____ to _____
Tuesday	_____ to _____
Wednesday	_____ to _____
Thursday	_____ to _____
Friday	_____ to _____
Saturday	_____ to _____

**SEATING COUNT**

Restaurant: \_\_\_\_\_ Outdoor: \_\_\_\_\_

Lounge: \_\_\_\_\_ Other (explain): \_\_\_\_\_

Banquet: \_\_\_\_\_ Total Seating: 15

**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: 5.1.18



# OREGON LIQUOR CONTROL COMMISSION CORPORATION QUESTIONNAIRE

Reg # 041839-92

Please Print or Type

Corporation Name: Moonstruck Chocolate Company Year Incorporated: 1993

Trade Name (dba): same

Business Location Address: 526 NW 23rd Ave

City: Portland ZIP Code: 97210

### List Corporate Officers:

Russell Sneddon President & CEO

(name) Rebekah Garringer (title) Corporate Controller

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### List Board of Directors:

Sally Bany, Rachael Sneddon, Russell Sneddon

(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.)

#### Stockholders:

#### Number of Shares Held:

Sarah Bany (sally) 50%

Rachael Sneddon 25%

Russell Sneddon 25%

\_\_\_\_\_  
\_\_\_\_\_

#### Number of Stock Shares:

Issued: 10 million

Unissued: 0

Total Shares Authorized to Issue: 10 million

Server Education Designee: \_\_\_\_\_ DOB: \_\_\_\_\_  
(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: RUSSELL SNEDDON President & CEO Date: 4.30.18  
(name) (title)

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 08/11)

# 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: Moonstruck Chocolate Company

DBA OR TRADE NAME: Moonstruck Chocolate Company PHONE: 503.247.3448 FAX: N/A

BUSINESS ADDRESS (Including ZIP Code): 526 NW 23rd Ave Portland OR 97210

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): Limited On-Premise Sales License

CONTACT PERSON: Russell Sneddon PHONE: 905.680.9011 EMAIL: rsneddon@moonstruckchocolate.com

**DESCRIPTION OF OUTLET**

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- Food Cart
- Night Club
- Restaurant
- Sports Bar
- Convenience Store
- Other: Cafe

SIZE OF SERVICE AREA: Retail Space - 759 sq.ft  
Behind counter - 318 sq.ft = 1077 sq.ft.

EXISTING BUILDING:  Yes  No

ZONING: Commercial

STRUCTURAL CHANGES (DESCRIBE): N/A

RESTAURANT SEATING CAPACITY: 14 LOUNGE SEATING CAPACITY: N/A OUTSIDE SEATING CAPACITY: 4

DESCRIBE SECURITY: Control Security System & 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  I Don't Know

**HOURS OF OPERATION**

~~SUNDAY - THURSDAY~~ OPEN: 8:00am CLOSE: 10:00pm ~~FRIDAY & SATURDAY~~ OPEN: 9:00am CLOSE: 9:00pm  
Mon - Saturday Sunday

HOW LATE WILL THERE BE OUTSIDE SEATING? until close HOW LATE WILL THERE BE ENTERTAINMENT? N/A

**HISTORY OF LOCATION**

PREVIOUS BUSINESS NAME OF THIS LOCATION: N/A  
NAME & ADDRESS OF PROPERTY OWNER: Sarah Ann Bany - 6600 N. Baltimore Ave Portland OR 97203

**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

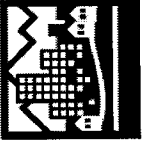
A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: [Signature] DATE: 6/7/18



# City of Portland, Oregon - Bureau of Development Services

1900 SW Fourth Avenue • Portland, Oregon 97201 | 503-823-7300 | [www.portlandoregon.gov/bds](http://www.portlandoregon.gov/bds)



## ZONING VERIFICATION

Address: 520-526 NW 23RD AVE

R#: R198575

State ID: 1N1E33CB 200

Zone: **CM2m**

Plan District: **NORTHWEST**

**Proposed Use: RETAIL SALES AND SERVICE**

RETAIL SALES AND SERVICE is an ALLOWED use in the CM2m zone

### Additional Comments:

Per 33.130.100 and Table 130-1, Retail Sales and Service uses allowed by right.

**Laura Lehman**

Name of City Official

**City Planner**

Title

**503-823-7391**

Contact Number

Signature of Official

**6 / 12 / 2018**

Date

