



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

275108

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 *6-28-18*

License Action:

c/o

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

Applicant #1

POWELL 108 INC

Applicant #2

*Rec'd by Portland
Liquor Licenses*

Applicant #3

Applicant #4

*JUL 02 2018
PD \$7500 ADM
Cash*

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

BULLDOG DELI

3. Business Location: Number and Street **7321 SW GARDEN HOME RD**

City **PORTLAND**

County **WASHINGTON**

ZIP **97223**

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 **6035 SE SHERMAN ST**

City **PORTLAND**

State **OREGON**

ZIP **97215**

6. Phone Number of the Business Location: **503-869-0833**

7. Contact Person for this Application:

Name **Jessie Chen (United CPAs & Co., LLC)**

Phone Number **503-432-8839**

Mailing Address, City, State, ZIP

8733 SE Division St, Ste 207 Portland, OR 97266

Email **jessie@united-cpas.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]

Signature of Applicant #2

[Signature]

Signature of Applicant #3

Signature of Applicant #4

RECEIVED
JUN 13 2018



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: POWELL 108 INC Phone: 503-869-0833

Trade Name (dba): BULLDOG DELI

Business Location Address: 7321 SW GARDEN HOME RD

City: PORTLAND ZIP Code: 97223

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 9am to 10:00pm
 Monday 9am to 10:00pm
 Tuesday 9am to 10:00pm
 Wednesday 9am to 10:00pm
 Thursday 9am to 10:00pm
 Friday 9am to 11:00pm
 Saturday 9am to 11:00pm

Outdoor Area Hours: NA

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

The outdoor area is used for: NA

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: 8 Outdoor: —
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 8

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: 6/12/18



OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE

142956499

Please Print or Type

Corporation Name: POWELL 108 INC Year Incorporated: 2018

Trade Name (dba): BULLDOG DELI

Business Location Address: 7321 SW GARDEN HOME RD

City: PORTLAND ZIP Code: 97223

List Corporate Officers:

HUA KUANG YAN PRESIDENT
(name) (title)
YIM SUE CHAN TAI SECRETARY

List Board of Directors:

HUA KUANG YAN & YIM SUE CHAN TAI
(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.)

Table with columns: Stockholders, Number of Shares Held, and Number of Stock Shares (Issued, Unissued, Total Shares Authorized to Issue).

Server Education Designee: HUA KUANG YAN DOB: 11/12/1957
(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: 6/12/18
(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: Powell 108 Inc

DBA OR TRADE NAME: Bulldog Deli PHONE: 503-869-0833 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 7321 SW Garden Home Rd, Portland, OR 97223

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

CONTACT PERSON: Hua Kuang Yan PHONE: 503-869-0833 EMAIL: yanschineserestaurant@gmail.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- | | |
|--|--|
| <input type="checkbox"/> Food Cart | <input type="checkbox"/> Night Club |
| <input type="checkbox"/> Restaurant | <input checked="" type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Other: _____ |

SIZE OF SERVICE AREA: 1124 sq feet

EXISTING BUILDING: Yes No

ZONING: Commercial

STRUCTURAL CHANGES (DESCRIBE): None

RESTAURANT SEATING CAPACITY: 8 LOUNGE SEATING CAPACITY: 0 OUTSIDE SEATING CAPACITY: 0

DESCRIBE SECURITY: security Alarm System

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

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

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Bulldog Deli

NAME & ADDRESS OF PROPERTY OWNER: Colin Lamb - 7410 SW Oleson Rd. Portland, OR 97223

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Video Poker | <input type="checkbox"/> Live Music | <input type="checkbox"/> Nude Dancers |
| <input type="checkbox"/> Karaoke | <input checked="" type="checkbox"/> Video Games/Pinball | <input type="checkbox"/> Recorded Music | <input type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): _____ | <input type="checkbox"/> Events (Describe): _____ | <input type="checkbox"/> 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: 7/2/18



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: 7321 SW GARDEN HOME RD

R#: W280543

State ID: 1S124DB01600

Zone: CEd(MU-D),R1d

Plan District:

Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is an ALLOWED use in the CEd(MU-D),R1d zone

Additional Comments:

Per 33.130.100 and Table 130-1, Retail Sales and Service is an allowed use in the CE zone.

Katie Moore

Name of City Official

City Planner

Title

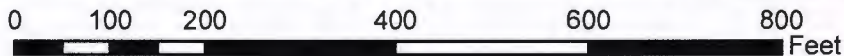
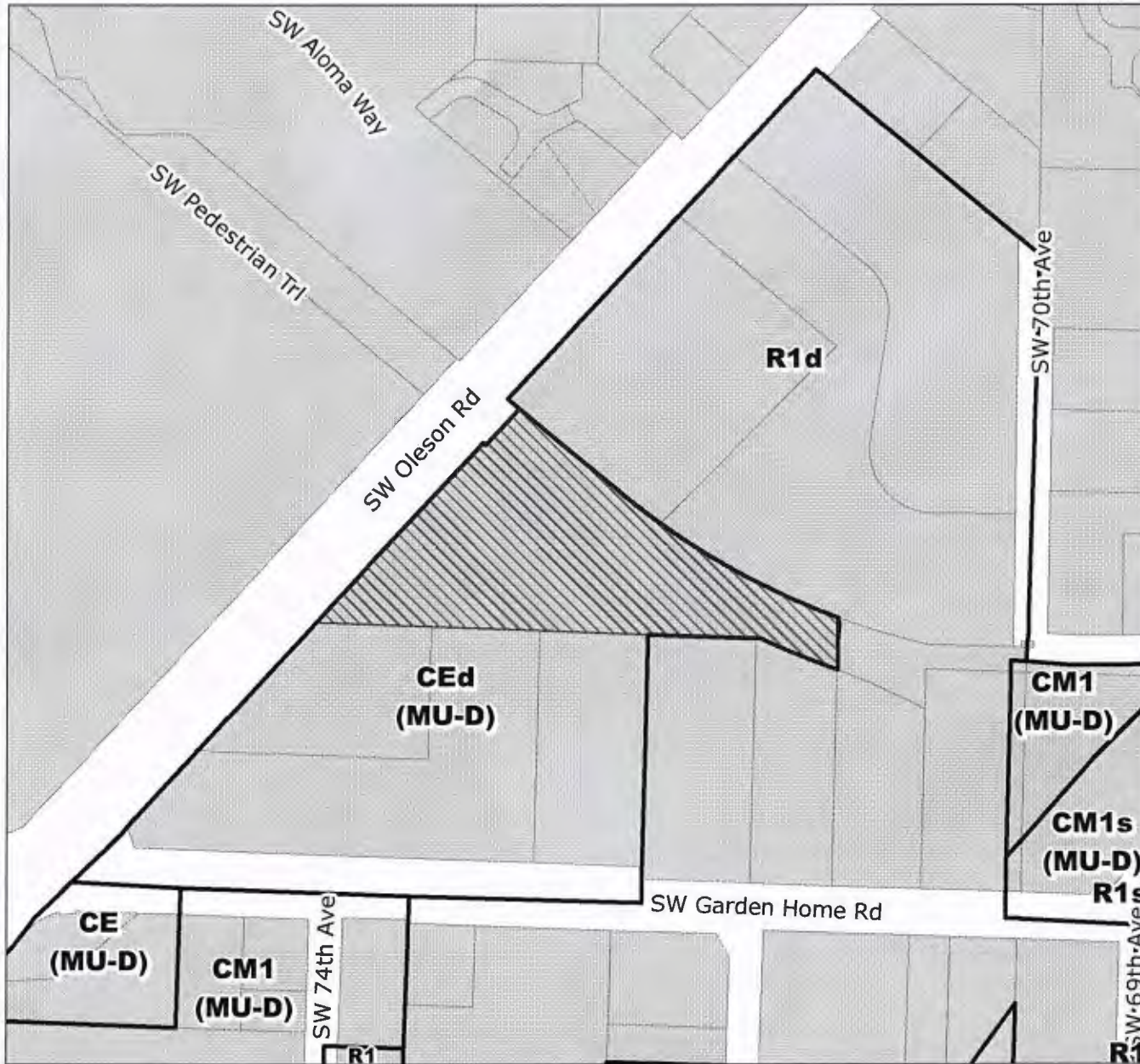
503-823-7344

Contact Number

Signature of Official

7 / 2 / 2018

Date



1 inch = 200 feet

