

Council Business Meeting

May 5, 2020

Agenda Item	Approval of Liquor License Request for Masala Bistro & Bar	
From	Melissa Huhtala	City Recorder
Contact	Melissa.huhtala@ashland.or.us ; (541) 488-5307	

SUMMARY

This is a request for approval of a liquor license application from Masala Bistro & Bar located at 258 A. St. Suite #3B, Ashland, OR 97520.

POLICIES, PLANS & GOALS SUPPORTED

AMC Chapter 6.32 Liquor License Review

PREVIOUS COUNCIL ACTION

N/A

BACKGROUND AND ADDITIONAL INFORMATION

This is an application for an Off Premises Liquor License.

FISCAL IMPACTS

N/A

STAFF RECOMMENDATION

Staff recommends approval of the liquor license application. The City has determined that the location of this business complies with the City's land use requirements and that the applicant has a Business License and has registered as a restaurant.

ACTIONS, OPTIONS & POTENTIAL MOTIONS

I move to approve the liquor license for Masala Bistro & Bar.

REFERENCES & ATTACHMENTS

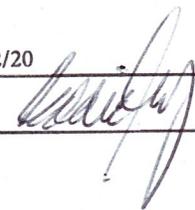
Attachment 1: Application



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

1. Application. **Do not include** any OLCC fees with your application packet (the license fee will be collected at a later time). Application is being made for:

License Applied For:	CITY AND COUNTY USE ONLY
<input type="checkbox"/> Brewery 1st Location	Date application received and/or date stamp:
<input type="checkbox"/> Brewery 2nd Location	Name of City or County:
<input type="checkbox"/> Brewery 3rd Location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 1st Location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Brewery-Public House 2nd Location	By: _____
<input type="checkbox"/> Brewery-Public House 3rd Location	Date: _____
<input type="checkbox"/> Distillery	OLCC USE ONLY
<input type="checkbox"/> Full On-Premises, Commercial	Date application received:
<input type="checkbox"/> Full On-Premises, Caterer	4/22/20
<input type="checkbox"/> Full On-Premises, Passenger Carrier	By: _____ SR 
<input type="checkbox"/> Full On-Premises, Other Public Location	License Action(s):
<input type="checkbox"/> Full On-Premises, For Profit Private Club	A/PRIV
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	
<input type="checkbox"/> Grower Sales Privilege 1st Location	
<input type="checkbox"/> Grower Sales Privilege 2nd Location	
<input type="checkbox"/> Grower Sales Privilege 3rd Location	
<input type="checkbox"/> Limited On-Premises	
<input checked="" type="checkbox"/> Off-Premises	
<input type="checkbox"/> Off-Premises with Fuel Pumps	
<input type="checkbox"/> Warehouse	
<input type="checkbox"/> Wholesale Malt Beverage & Wine	
<input type="checkbox"/> Winery 1st Location	
<input type="checkbox"/> Winery 2nd Location	
<input type="checkbox"/> Winery 3rd Location	
<input type="checkbox"/> Winery 4th Location	
<input type="checkbox"/> Winery 5th Location	

2. Identify the applicant(s) applying for the license(s). ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license(s):

Masala Mastee, LLC

(Applicant #1) _____ (Applicant #2) _____

(Applicant #3) _____ (Applicant #4) _____

3. Trade Name of the Business (Name Customers Will See)
Masala Bistro **AND BAR**

4. Business Address (Number and Street Address of the Location that will have the liquor license)
258 A St. Suite #3B

City	County	Zip Code
Ashland	Jackson	97520



OREGON LIQUOR CONTROL COMMISSION
LIQUOR LICENSE APPLICATION

5. Trade Name of the Business (Name Customers Will See) Masala Bistro AND BAR			
6. Does the business address currently have an OLCC liquor license? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
7. Does the business address currently have an OLCC marijuana license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your mail) 258 A St. Suite #3B			
City Ashland	State OR	Zip Code 97520	
9. Phone Number of the Business Location 541-708-0943		10. Email Contact for this Application sachtabakshi@gmail.com	
11. Contact Person for this Application Sachta Card		Phone Number 541-864-9093	
Contact Person's Mailing Address (if different)	City	State	Zip Code

Please note that liquor license applications are public records. A copy of the application will be posted on the OLCC website for a period of several weeks.

I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is **prohibited** on the licensed premises.

I attest that all answers on all forms, documents, and information provided to the OLCC are true and complete.

Applicant Signature(s)

- Each individual person listed as an applicant must sign the application.
- If an applicant is an entity, such as a corporation or LLC, at least one person who is authorized to sign for the entity must sign the application.
- A person with the authority to sign on behalf of the applicant (such as the applicant's attorney or a person with power of attorney) may sign the application. If a person other than an applicant signs the application, please provide proof of signature authority.

Sachta Card

(Applicant#1) (Applicant #2)

(Applicant#3) (Applicant #4)

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1451426-91
6/19/18-6/19/20

Please Print or Type

LLC Name: Masala Mastee Year Filed: 2018

Trade Name (dba): Masala Bistro AND BAR

Business Location Address: 258 A St. Suite #3B

City: Ashland ZIP Code: 97520

List Members of LLC:

Percentage of Membership Interest:

1. <u>Andrew Card</u> (managing member)	<u>25%</u>
2. <u>Sachta Card</u> (members)	<u>25%</u>
3. <u>Sumesh Bakshi</u>	<u>25%</u>
4. <u>Dimple Bakshi</u>	<u>25%</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: Andrew Card DOB: 01/05/1986

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

Signature: Sachta Card LLC Member Date: 4/21/2020
(name) (title)



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Masala Mastee, LLC Phone: 541-708-0943

Trade Name (dba): Masala Bistro AND BAR

Business Location Address: 258 A St. Suite #3B

City: Ashland ZIP Code: 97520

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 11:30am to 9pm
Monday 11:30am to 9pm
Tuesday 11:30am to 9pm
Wednesday 11:30am to 9pm
Thursday 11:30am to 9pm
Friday 11:30am to 9pm
Saturday 11:30am to 9pm

Outdoor Area Hours:

Sunday 11:30am to 9pm
Monday 11:30am to 9pm
Tuesday 11:30am to 9pm
Wednesday 11:30am to 9pm
Thursday 11:30am to 9pm
Friday 11:30am to 9pm
Saturday 11:30am to 9pm

The outdoor area is used for:

- Food service Hours: 11:30am to 9pm
- Alcohol service Hours: 11:30am to 9pm
- 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

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

SEATING COUNT

Restaurant: 52 Outdoor: 4
Lounge: _____ Other (explain): _____
Banquet: _____ Total Seating: 56

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: Sachta Card Date: 4/21/2020

1-800-452-OLCC (6522)
www.oregon.gov/olcc

(rev. 12/07)