

Council Business Meeting

June 16, 2020

Agenda Item	Approval of Liquor License Request for Ashland Independent Film Festival	
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 Ashland Independent Film Festival located at 389 East Main Street, 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 a Limited On-Premises and Off-Premises Commercial 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 Ashland Independent Film Festival.

REFERENCES & ATTACHMENTS

Attachment 1: Application



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: Name of City or County: _____ Recommends this license be: <input type="checkbox"/> Granted <input type="checkbox"/> Denied By: _____ Date: _____	
<input type="checkbox"/> Brewery 2nd Location		
<input type="checkbox"/> Brewery 3rd Location		
<input type="checkbox"/> Brewery-Public House 1st Location		
<input type="checkbox"/> Brewery-Public House 2nd Location		
<input type="checkbox"/> Brewery-Public House 3rd Location		
<input type="checkbox"/> Distillery		
<input type="checkbox"/> Full On-Premises, Commercial		
<input type="checkbox"/> Full On-Premises, Caterer		
<input type="checkbox"/> Full On-Premises, Passenger Carrier		
<input type="checkbox"/> Full On-Premises, Other Public Location		
<input type="checkbox"/> Full On-Premises, For Profit Private Club		
<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 checked="" type="checkbox"/> Limited On-Premises		OLCC USE ONLY Date application received: <u>4/21/20</u> By: <u>Ladie Guy</u> License Action(s): <u>N/O</u>
<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):

Southern Oregon Film Society _____
 (Applicant #1) (Applicant #2)

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

3. Trade Name of the Business (Name Customers Will See) Ashland Independent Film Festival		
4. Business Address (Number and Street Address of the Location that will have the liquor license) 389 East Main Street		
City Ashland	County Jackson	Zip Code 97520



LIQUOR LICENSE APPLICATION

5. Trade Name of the Business (Name Customers Will See) Ashland Independent Film Festival			
6. Does the business address currently have an OLCC liquor license? <input type="checkbox"/> YES <input checked="" 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) P. O. Box 218			
City Ashland	State OR	Zip Code 97520	
9. Phone Number of the Business Location 541-488-3823		10. Email Contact for this Application candace@ashlandfilm.org	
11. Contact Person for this Application Candace Turtle		Phone Number 541-488-3823 / Cell 510-697-7884	
Contact Person's Mailing Address (if different) N/A	City Ashland	State OR	Zip Code 97520

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.

x Richard Herzko _____
 (Applicant#1) **Richard Herzko** (Applicant#2)
Executive + Artistic Director, A.I.F.F.

 (Applicant#3) (Applicant#4)



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Southern Oregon Film Society Phone: 541-488-3823
Trade Name (dba): Ashland Independent Film Festival
Business Location Address: 389 East Main Street
City: Ashland ZIP Code: 97520

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday - to -
Monday 11 AM to 3 PM
Tuesday 11 AM to 3 PM
Wednesday 11 AM to 3 PM
Thursday 11 AM to 3 PM
Friday 11 AM to 3 PM
Saturday - to -

Outdoor Area Hours: N/A

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

The outdoor area is used for: N/A

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)

* Starting May 2020, the hours of the first Friday of the month will be 4:00 pm to 7:00 pm

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: _____ Outdoor: _____
Lounge: 60 Other (explain): _____
Banquet: _____ Total Seating: 60

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: 3/28/20

1-800-452-OLCC (6522)

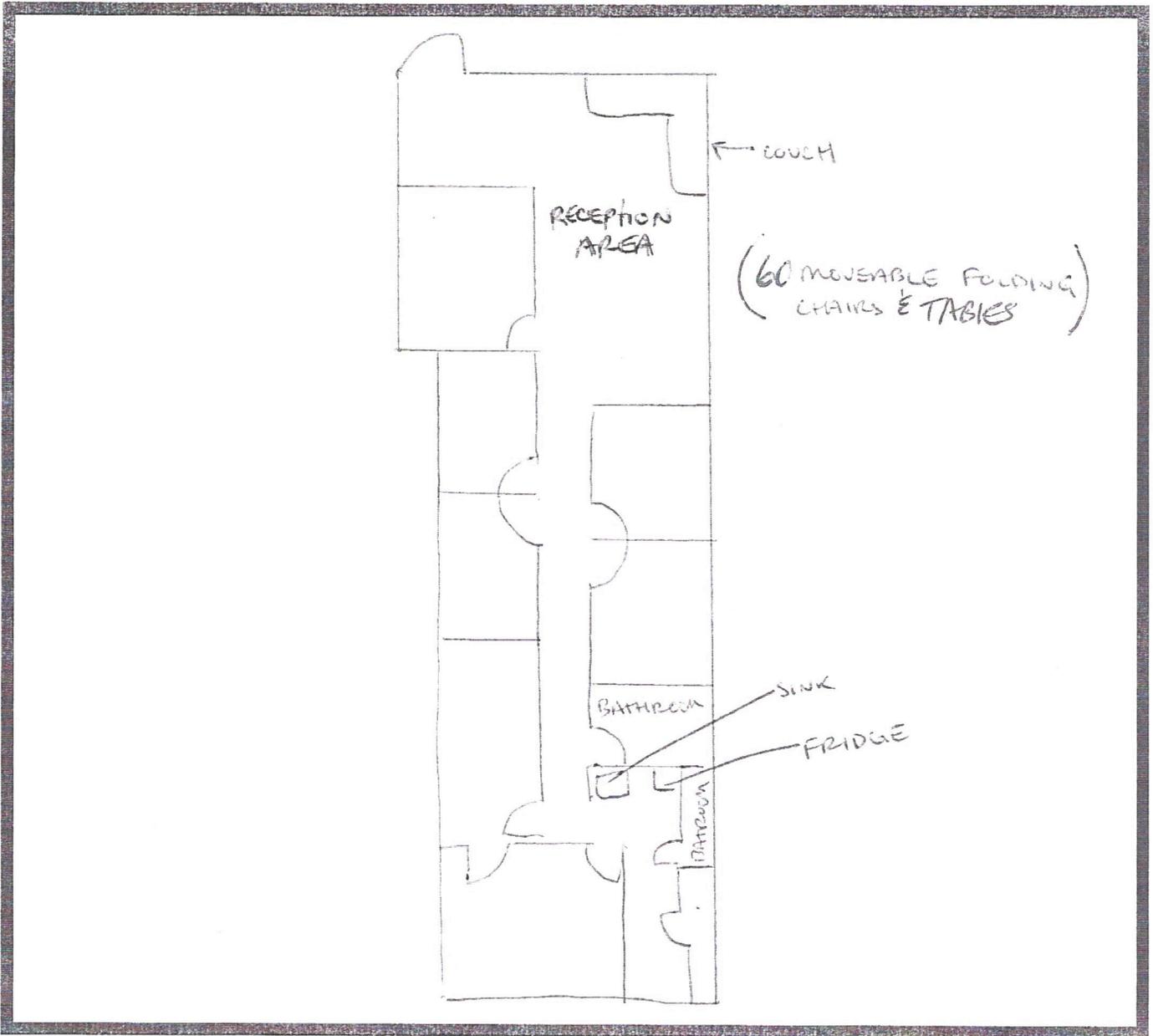
www.oregon.gov/olcc

(rev. 12/07)



OREGON LIQUOR CONTROL COMMISSION FLOOR PLAN

- Your floor plan must be submitted on this form.
- Use a separate Floor Plan Form for each level or floor of the building.
- The floor plan(s) must show the specific areas of your premises (e.g. dining area, bar, lounge, dance floor, video lottery room, kitchen, restrooms, outside patio and sidewalk cafe areas.)
- Include all tables and chairs (see example on back of this form). Include dimensions for each table if you are applying for a Full On-Premises Sales license.



Southern Oregon Film Society
 Applicant Name
 Ashland Independent Film Festival
 Trade Name (dba):
 Ashland 97520
 City and ZIP Code

.....OLCC USE ONLY.....
 MINOR POSTING ASSIGNMENT(S)
 # III - ENTIRE PREMISES
 Date: 4/24/20 Initials: [Signature]

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