

Council Communication

October 18, 2016, Business Meeting

Liquor License Application for Stoel Rives LLP dba ARCO AM/PM

FROM:

Barbara Christensen, City Recorder, christeb@ashland.or.us

SUMMARY

Approval of a Liquor License Application from Stoel Rives LLP dba ARCO AM/PM at 2380 Hwy 66

BACKGROUND AND POLICY IMPLICATIONS:

Application is for a new license

The City has determined that the license application review by the city is set forth in AMC Chapter 6.32 which requires that a determination be made to determine if the applicant complies with the city's land use, business license and restaurant registration requirements (AMC Chapter 6.32) and has been reviewed by the Police Department.

In May 1999, the council decided it would make the above recommendations on all liquor license applications.

COUNCIL GOALS SUPPORTED

N/A

FISCAL IMPLICATIONS:

N/A

STAFF RECOMMENDATION AND REQUESTED ACTION:

Endorse the application with the following:

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, if applicable. The city council recommends that the OLCC proceed with the processing of this application.

SUGGESTED MOTION:

Under Consent agenda item, a motion to approve liquor license for Stoel Rives LLP dba ARCO AM/PM

ATTACHMENTS:

Liquor License Application





OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

Application is being made for:

LICENSE TYPES

- Full On-Premises Sales (\$402.60/yr)
 - Commercial Establishment
 - Caterer
 - Passenger Carrier
 - Other Public Location
 - Private Club
- Limited On-Premises Sales (\$202.60/yr)
- Off-Premises Sales (\$100/yr)
 - with Fuel Pumps
- Brewery Public House (\$252.60)
- Winery (\$250/yr)
- Other: _____

ACTIONS

- Change Ownership
- New Outlet
- Greater Privilege
- Additional Privilege
- Other _____

90-DAY AUTHORITY

Check here if you are applying for a change of ownership at a business that has a current liquor license, or if you are applying for an Off-Premises Sales license and are requesting a 90-Day Temporary Authority

APPLYING AS:

- Limited Partnership
- Corporation
- Limited Liability Company
- Individuals

CITY AND COUNTY USE ONLY

Date application received: _____

The City Council or County Commission:

(name of city or county)

recommends that this license be:

- Granted
- Denied

By: _____
(signature) (date)

Name: _____

Title: _____

OLCC USE ONLY

Application Rec'd by: [Signature]

Date: 9-29-16

90-day authority: Yes No

1. Entity or Individuals applying for the license: [See SECTION 1 of the Guide]

① Convenience Management Services, Inc. ③ _____

② _____ ④ _____

2. Trade Name (dba): ARCO AM/PM CMSI #3552

3. Business Location: 2380 Hwy 66 Ashland Jackson OR 97520
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 7 North 5th Street Temple TX 75603
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 512-298-0778 _____
(phone) (fax)

6. Is the business at this location currently licensed by OLCC? Yes No

7. If yes to whom: _____ Type of License: _____

8. Former Business Name: _____

9. Will you have a manager? Yes No Name: Kanwarpal Singh
(manager must fill out an Individual History form)

10. What is the local governing body where your business is located? Ashland
(name of city or county)

11. Contact person for this application: Claire Mitchell, Stoel Rives LLP 206-386-7698
(name) (phone number(s))
600 University St, Suite 3600, Seattle, WA 98101 206-386-7698 claire.mitchell@stoel.com
(address) (fax number) (e-mail address)

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

Applicant(s) Signature(s) and Date:

[Signature] Date 9/13/16 ③ _____ Date _____

④ _____ Date _____

RECEIVED

SEP 27 2016 Date _____