

Council Business Meeting

February 4, 2020

Agenda Item	Approval of Liquor License Request For Oregon Cabaret Theatre, Inc.	
From	Melissa Huhtala	City Recorder
Contact	Melissa.huhtala@ashland.or.us ; (541) 488-2307	

SUMMARY

This is a request for approval of a Liquor License Application from Oregon Cabaret Theatre, Inc. Located at 241 Hargadine St., 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 Full On-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 Oregon Cabaret Theatre.

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 1 st Location	Date application received and/or date stamp:
<input type="checkbox"/> Brewery 2 nd Location	
<input type="checkbox"/> Brewery 3 rd Location	
<input type="checkbox"/> Brewery-Public House 1 st location	Name of City or County:
<input type="checkbox"/> Brewery-Public House 2 nd location	
<input type="checkbox"/> Brewery-Public House 3 rd location	
<input type="checkbox"/> Distillery	Recommends this license be:
<input checked="" type="checkbox"/> Full On-Premises, Commercial	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Full On-Premises, Caterer	
<input type="checkbox"/> Full On-Premises, Passenger Carrier	By: _____
<input type="checkbox"/> Full On-Premises, Other Public Location	Date: _____
<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 1 st location	
<input type="checkbox"/> Grower Sales Privilege 2 nd location	
<input type="checkbox"/> Grower Sales Privilege 3 rd location	
<input type="checkbox"/> Limited On-Premises	OLCC USE ONLY
<input type="checkbox"/> Off-Premises	Date application received:
<input type="checkbox"/> Off-Premises with Fuel Pumps	10-14-19
<input type="checkbox"/> Warehouse	By: <i>Nisa Welch, Medford OLCC</i>
<input type="checkbox"/> Wholesale Malt Beverage & Wine	by <i>M. McClain</i>
<input type="checkbox"/> Winery 1 st Location	License Action(s):
<input type="checkbox"/> Winery 2 nd Location	G/Priv.
<input type="checkbox"/> Winery 3 rd Location	

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

Oregon Cabaret Theatre, Inc. _____
(Applicant #1) (Applicant #2)

(Applicant #3) (Applicant #4)

3. Trade Name of the Business (Name Customers Will See)		
<i>Oregon Cabaret Theatre</i>		
4. Business Address (Number and Street Address of the Location that will have the liquor license)		
<i>241 Hurgadine St.</i>		
City	County	Zip Code
<i>Ashland</i>	<i>Tackson</i>	<i>97520</i>



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

5. Trade Name of the Business (Name Customers Will See) <i>Oregon Cabaret Theatre, Inc.</i>			
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) <i>PO Box 1149</i>			
City <i>Ashland</i>		State <i>OR</i>	Zip Code <i>97520</i>
9. Phone Number of the Business Location <i>541 488 2902</i>		10. Email Contact for this Application <i>rick @ oregon cabaret . com</i>	
11. Contact Person for this Application <i>Rick Robinson / Harlan Ward</i>		Phone Number <i>541 488 8349 #2</i>	
Contact Person's Mailing Address (if different)	City	State	Zip Code

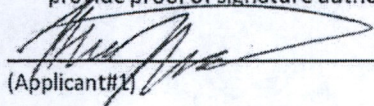
Please note that liquor license applications are public records. A copy of the application will be posted on the OLCC website for a period of several weeks.

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.


(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION
CORPORATION QUESTIONNAIRE

Please Print or Type

038694-84
7/7/86 - 7/7/20

Corporation Name: Oregon Cabaret Theatre, Inc.

Year Incorporated: 1986

Trade Name (dba): Oregon Cabaret Theatre

Business Location Address: 241 Hargadine St.

City: Ashland

ZIP Code: 97520

List Corporate Officers:

Valerie Robinson

President of the Board / Artistic Director

(name)

(title)

Richard Robinson

Secretary of the Board / Managing Director

List Board of Directors:

Richard Robinson, Valerie Robinson

(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:

Valerie Robinson

50

Richard Robinson

50

Number of Stock Shares:

Issued: 100

Unissued: 0

Total Shares Authorized
to Issue: 100

Server Education Designee: Richard Robinson

DOB: 11/05/1973

(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]

(name)

(title)

Date: 10/14/19

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 08/11)