



## MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST

### Board Clerk Use Only

Meeting Date: \_\_\_\_\_  
Agenda Item #: \_\_\_\_\_  
Est. Start Time: \_\_\_\_\_  
Date Submitted: \_\_\_\_\_

**BUDGET MODIFICATION:** -

**Agenda Title:** Off Premises and Limited On Premises Sales Liquor License Renewal for Big Bear's Crown Point Market, 31815 E. Columbia River Highway, Troutdale, OR

*Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.*

<b>Date Requested:</b>	<u>December 10, 2009</u>	<b>Time Requested:</b>	<u>N/A</u>
<b>Department:</b>	<u>Sheriff's Office</u>	<b>Division:</b>	<u>Enforcement</u>
<b>Contact(s):</b>	<u>Kimberly Walker-Norton</u>		
<b>Phone:</b>	<u>(503) 251-2520</u>	<b>Ext.</b>	<u>I/O Address: 313/122</u>
<b>Presenter(s):</b>	<u>Consent Calendar</u>		

### General Information

**1. What action are you requesting from the Board?**

Board approval of liquor license application

**2. Please provide sufficient background information for the Board and the public to understand this issue.**

The Multnomah County Sheriff's Office has completed its investigation for the above liquor license renewal. Assessment and Taxation reported that the address of 31815 E. Columbia River Hwy, Troutdale, Oregon, is in compliance with the Assessment and Taxation Office. The Land Use Planning Division reported that they have no objection to renewal of the liquor license. Multnomah County False Alarm Reduction Program has notified us of none compliance in payment for false alarm response and have revoked their permit. Nothing in the background check of owner/s raised any questions or concerns.

With the investigation completed the Multnomah County Sheriff's Office forwards a **FAVORABLE RECOMMENDATION** for the Liquor License Renewal.

3. Explain the fiscal impact (current year and ongoing).
4. Explain any legal and/or policy issues involved.
5. Explain any citizen and/or other government participation that has or will take place.

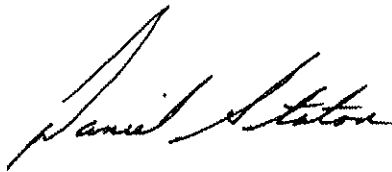
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### Required Signatures

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Department/  
Agency  
Director:

Date: 12/10/2009



Budget  
Analyst:

Date:

Department  
HR:

Date:

Countywide  
HR:

Date:



# Multnomah County Sheriff's Office

12240 NE Glisan St., • Portland, OR 97230

*Exemplary service for a safe, livable community*

DANIEL STATON  
SHERIFF

503 255-3600 PHONE  
503 251-2484 TTY  
[www.mcso.us](http://www.mcso.us)

December 10, 2009

Board of County Commissioners  
501 SE Hawthorne Boulevard, Suite 600  
Portland, OR 97214-3587

Oregon Liquor Control Commission  
9079 SE McLoughlin Boulevard  
Portland, OR 97222-7355

Regarding: Big Bear's Crown Point Market  
31815 E Columbia River Hwy  
Troutdale, OR 97060

Subject: Liquor License Applicant  
On and Off Premises Sales

Owner: Balwant Bhullar  
12/18/65  
21775 Palisade Place  
Fairview, OR 97024

The Multnomah County Sheriff's Office has completed its investigation for the above liquor license renewal. Assessment and Taxation reported that the address listed 31815 E Columbia River Hwy is in compliance with the Assessment and Taxation Office. The Land Use Planning Division has reported that they have no objection to the renewal of the liquor license. Multnomah County False Alarm Reduction Program notified us that their account has been cancelled and police response has been revoked due to none payment. Nothing in the background check of owner/s raised any questions or concerns.

With the investigation completed, the Multnomah County Sheriff's Office forwards a FAVORABLE RECOMMENDATION for the Liquor License Renewal.

Sincerely,

A handwritten signature in black ink, appearing to read "Daniel Staton". The signature is fluid and cursive, with a long, sweeping underline.

Sheriff



# OREGON LIQUOR CONTROL COMMISSION LIQUOR LICENSE APPLICATION

PLEASE PRINT OR TYPE

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 \_\_\_\_\_

Applying as:

- ☐ Limited Partnership ☐ Corporation ☐ Limited Liability Company ☐ Individuals

FOR CITY AND COUNTY USE ONLY  
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: STEVE BRANKHOFF

Date: 10/12/09

90-day authority: ☒ Yes ☐ No

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

① BNT VANTURES, INC.

③ \_\_\_\_\_

② E

④ \_\_\_\_\_

2. Trade Name (dba): BIG BEAR CROWNPOINT COUNTRY MARKET + Deli

3. Business Location: 31815 E. HISTORICAL RIVER HWY TROUTDALE MULTH OR 97060  
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: 21775 PALISADE PL FAIRVIEW OR 97024  
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503-695-6255 503-669-1842  
(phone) (fax)

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

7. If yes to whom: PHILIP J. DU FRESNE Type of License: Limited + OFF PREM

8. Former Business Name: BIG BEAR CROWNPOINT COUNTRY MARKET + Deli

9. Will you have a manager? ☐ Yes ☒ No Name: BALWANT BHULLAR  
(manager must fill out an individual history form)

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

11. Contact person for this application: BALWANT BHULLAR 503-327-6756  
(name) (phone number(s))  
21775 PALISADE PL FAIRVIEW OR 503-669-1842 Bhull18@aol.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:

① Bhullar Date 10-1-09 ③ \_\_\_\_\_ Date \_\_\_\_\_

② Deep Bhullar Date 10-01-09 ④ \_\_\_\_\_ Date \_\_\_\_\_

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

(rev. 12/07)



OREGON LIQUOR CONTROL COMMISSION  
CORPORATION QUESTIONNAIRE

● See section 2 of Guide for help with this form

Please Print or Type

Corporation Name: BNT VENTURES INC Year Incorporated: \_\_\_\_\_

Trade Name (dba): BIG BEAR CROWNPOINT COUNTRY MARKET

Business Location Address: 31815 E. HISTORICAL RIVER HWY

City: TROUTDALE ZIP Code: 97060

List Corporate Officers:

(name)	(title)
<u>① BALWANT BHULLAR</u>	<u>MEMBER</u>
<u>② NAVKIRAN D. BHULLAR</u>	<u>PRESIDENT</u>
_____	_____
_____	_____

List Board of Directors:

(name)
<u>BALWANT BHULLAR</u>
<u>NAVKIRAN D BHULLAR</u>
_____
_____

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:	Number of Stock Shares:			
<u>BALWANT BHULLAR</u>	<u>50% 100</u>	<table border="1"><tr><td>Issued: <u>200</u></td></tr><tr><td>Unissued: <u>- 0 -</u></td></tr><tr><td>Total Shares Authorized to Issue: <u>200</u></td></tr></table>	Issued: <u>200</u>	Unissued: <u>- 0 -</u>	Total Shares Authorized to Issue: <u>200</u>
Issued: <u>200</u>					
Unissued: <u>- 0 -</u>					
Total Shares Authorized to Issue: <u>200</u>					
<u>NAVKIRAN D BHULLAR</u>	<u>50% 100</u>				
_____	_____				
_____	_____				

Server Education Designee: NAVKIRAN BHULLAR DOB: 6/18/71  
(See Liquor License Application Guide for more information) ASE CLASS DATE 5/12/08

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

Officer's Signature: Bhullar (name) member (title) Date: 10-1-09



# OREGON LIQUOR CONTROL COMMISSION INDIVIDUAL HISTORY

PLEASE PRINT OR TYPE

YOU MUST ANSWER ALL QUESTIONS ON THIS FORM. IF THE QUESTION DOES NOT APPLY, WRITE N/A IN THE SPACE.  
ATTACH ADDITIONAL SHEETS IF NECESSARY.

Trade Name (d.b.a.): BIG BEAR CROWN POINT COUNTRY MARK City: TROUTDALE

1. Name: BHULLAR NAVKIRAN D  
(last) (first) (middle)

2. Other names used (maiden, other): N/A

3. Residence Address: 21775 PALISADE PL FAIRVIEW OR 97024  
(number and street) (city) (state) (ZIP code)

4. Home Phone: (503) 498-3006 Business Phone: (503) 695-6255

5. \*SSN: 625-04-5086 Place of Birth: PUNJAB INDIA DOB: 06/18/1971 Sex: M F ☒  
(State/Country) (mm) (dd) (yyyy)

6. Driver License or State ID #: 9759718 State: OREGON Spouse's name: BALWANT BHULLAR

7. List all states, other than Oregon, where you have lived during the past ten years: CALIFORNIA

8. Do you currently hold, or have you ever held a liquor license in this or any other state? ☒ Yes ☐ No  
If yes, when, where and name of premises: CURRENTLY BHULLAR & BHULLAR LLC and FAIRVIEW SOBS

9. In the past twelve years, have you been convicted of any violation, misdemeanor or felony? ☐ Yes ☒ No  
If yes, what, when and where: N/A

10. Have you ever entered into a diversion agreement? ☐ Yes ☒ No  
If yes, when and where: N/A

11. Do you have any arrests or citations that have not been resolved? ☐ Yes ☒ No  
If yes, arrested/cited for: N/A Date: N/A County/City/State/ N/A

12. If you are applying for a retail liquor license:  
a. Do you have any financial interest, direct or indirect, in any manufacturer or distributor of alcohol? ☐ Yes ☒ No If yes, what and where: N/A  
b. Does any person having a financial or ownership interest in a manufacturer or distributor have an interest in, or potential claim upon your business or premises, for instance through investment, a loan, lease or contract? ☐ Yes ☒ No If yes, who: N/A

13. Have you ever had a warning, violation, suspension, fine, cancellation or refusal as a licensee or service permittee, in Oregon or any other state? ☐ Yes ☒ No If yes, when: N/A where: N/A

I UNDERSTAND THE OLCC WILL USE THE ABOVE INFORMATION TO CHECK FOR CRIMINAL RECORDS. I UNDERSTAND IF MY ANSWERS ARE NOT TRUE AND COMPLETE, THE OLCC MAY DENY MY LICENSE APPLICATION.

Applicant Signature: [Signature] Date: 10-01-09

**\*SOCIAL SECURITY NUMBER DISCLOSURE** As part of your application for an initial or renewal license, Federal and State laws require you to provide your Social Security Number (SSN) to the Oregon Liquor Control Commission (OLCC) for child support enforcement purposes (42 USC § 666(a)(13) & ORS 25.785). The OLCC will refuse a license to any applicant or licensee who fails to provide his/her SSN. Your SSN will be used only for child support enforcement purposes unless you sign below.

Based on our authority under ORS 471.311 and OAR 845-005-0312(6), we are requesting your voluntary consent to use your SSN for the following administrative purposes only: to match your license application to your Alcohol Server Education records (where applicable), and to ensure your identity for criminal records checks. OLCC will not deny you any rights, benefits or privileges otherwise provided by law if you do not consent to use of your SSN for these administrative purposes (5 USC § 552(a)). If you consent to these uses, please sign here:

Applicant Signature: [Signature] Date: 10-1-09



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(rev. 12/07)



# OREGON LIQUOR CONTROL COMMISSION INDIVIDUAL HISTORY

PLEASE PRINT OR TYPE

YOU MUST ANSWER ALL QUESTIONS ON THIS FORM. IF THE QUESTION DOES NOT APPLY, WRITE N/A IN THE SPACE. ATTACH ADDITIONAL SHEETS IF NECESSARY.

Trade Name (d.b.a.): BIG BEAR CROWN POINT COUNTRY MARKET City: TROUTDAL

1. Name: BHULLAR BALWANT  
(last) (first) (middle)
2. Other names used (maiden, other): N/A
3. Residence Address: 21775 PALISADE PL FAIRVIEW OR 97024  
(number and street) (city) (state) (ZIP code)
4. Home Phone: (503) 492-3006 Business Phone: (503) 695-6255
5. \*SSN: 610-32-8091 Place of Birth: PUNJAB INDIA DOB: 12 / 18 / 1965 Sex: M ☒ F  
(State/Country) (mm) (dd) (yyyy)
6. Driver License or State ID #: 9759713 State: OREGON Spouse's name: NAVKIRAN D. BHULLAR
7. List all states, other than Oregon, where you have lived during the past ten years:  
CALIFORNIA
8. Do you currently hold, or have you ever held a liquor license in this or any other state? ☒ Yes ☐ No  
If yes, when, where and name of premises? CURRENTLY BHULLAR & BHULLAR LLC
9. In the past twelve years, have you been convicted of any violation, misdemeanor or felony? ☐ Yes ☒ No  
If yes, what, when and where? N/A
10. Have you ever entered into a diversion agreement? ☐ Yes ☒ No  
If yes, when and where? N/A
11. Do you have any arrests or citations that have not been resolved? ☐ Yes ☒ No  
If yes, arrested/cited for: N/A Date N/A County/City/State/ N/A
12. If you are applying for a retail liquor license:
  - a. Do you have any financial interest, direct or indirect, in any manufacturer or distributor of alcohol? ☐ Yes ☒ No If yes, what and where: N/A
  - b. Does any person having a financial or ownership interest in a manufacturer or distributor have an interest in, or potential claim upon your business or premises, for instance through investment, a loan, lease or contract? ☐ Yes ☒ No If yes, who? N/A
13. Have you ever had a warning, violation, suspension, fine, cancellation or refusal as a licensee or service permittee, in Oregon or any other state? ☐ Yes ☒ No If yes, when: N/A where: N/A

I UNDERSTAND THE OLCC WILL USE THE ABOVE INFORMATION TO CHECK FOR CRIMINAL RECORDS. I UNDERSTAND IF MY ANSWERS ARE NOT TRUE AND COMPLETE, THE OLCC MAY DENY MY LICENSE APPLICATION.

Applicant Signature: Bhullar Date: 10-01-09

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Based on our authority under ORS 471.311 and OAR 845-005-0312(6), we are requesting your voluntary consent to use your SSN for the following administrative purposes only: to match your license application to your Alcohol Server Education records (where applicable), and to ensure your identity for criminal records checks. OLCC will not deny you any rights, benefits or privileges otherwise provided by law if you do not consent to use of your SSN for these administrative purposes (5 USC § 552(a)). If you consent to these uses, please sign here:

Applicant Signature: Bhullar Date: 10-01-09



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OREGON LIQUOR CONTROL COMMISSION

## STATEMENT OF FUNDING SOURCES

**Please Print or Type**

Each individual who invests money in this licensed business must complete this form fully and accurately. This form will become part of your permanent file record. Information must be printed legibly in dark ink, or typed.

Most people use some cash money to start or buy a business. Cash is used for things such as:

- Advance rent payment; down payment on contracts
- Buying inventory; putting cash into a corporation or LLC

You must disclose how much money you are using, and where you are getting the money.

What is the approximate total cash amount you will put into this business to buy it or start it up? Do not include amounts you will owe on contracts.

Cash total: \$ 965,000/-

Now, you must exactly identify each separate money source. For instance if a source is your bank account you must state the bank and the amount of money to be used from the account. If the source is a loan you must state the amount of the loan and identify the lender.

Money Sources:	<u>Seller Carried</u>	\$ <u>854,000.00</u>
	<u>Down Payment</u>	\$ <u>111,000.80</u>
		\$ _____

**SWORN STATEMENT:** I understand the above information is material to my license application. I swear the above information is true, accurate and complete. I understand that the Oregon Liquor Control Commission may require me to give proof of the above information. I understand that if the above information is not true, is not accurate or is not complete the liquor commission may prosecute me criminally for False Swearing under ORS 162.075, and may refuse to grant my license application or if the license is granted may act to revoke my license based on false sworn statement.

Trade Name (d.b.a.) BIG BEAR CROWNPOINT MARKET City TROUTDALE

Printed Name BALLWANT BHULLAR / NAVKIRAN D BHULLAR

Signature B Bhullar Navkiran D Bhullar Date: 10-01-09

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(rev. 12/07)





# OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

BNT Ventures Inc

Applicant Name: BALLOANT BHILLAR/NAVEKIRAND BHILLAR Phone: 503-327-6756

Trade Name (dba): BIG BEAR CROWN POINT COUNTRY MARKET & Deli

Business Location Address: 31815 E. HISTORICAL RIVER HWY

City: TROUTDALE

ZIP Code: 97060

## DAYS AND HOURS OF OPERATION

### Business Hours:

Sunday 7:AM to 9:PM  
Monday 6:AM to 10:PM  
Tuesday 6:AM to 10:PM  
Wednesday 6:AM to 10:PM  
Thursday 6:AM to 10:PM  
Friday 6:AM to 10:PM  
Saturday 7:AM to 10:PM

### Outdoor Area Hours:

Sunday \_\_\_\_\_ to \_\_\_\_\_  
Monday \_\_\_\_\_ to \_\_\_\_\_  
Tuesday \_\_\_\_\_ to \_\_\_\_\_  
Wednesday \_\_\_\_\_ to \_\_\_\_\_  
Thursday \_\_\_\_\_ to \_\_\_\_\_  
Friday \_\_\_\_\_ to \_\_\_\_\_  
Saturday \_\_\_\_\_ to \_\_\_\_\_

The outdoor area is used for:

☐ 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:

- |  |  |
|--|--|
| <input type="checkbox"/> Live Music        | <input type="checkbox"/> Karaoke                           |
| <input type="checkbox"/> Recorded Music    | <input type="checkbox"/> Coin-operated Games               |
| <input type="checkbox"/> DJ Music          | <input checked="" type="checkbox"/> Video Lottery Machines |
| <input type="checkbox"/> Dancing           | <input type="checkbox"/> Social Gaming                     |
| <input type="checkbox"/> Nude Entertainers | <input type="checkbox"/> Pool Tables                       |
|  | <input type="checkbox"/> 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: 35

Outdoor: \_\_\_\_\_

Lounge: \_\_\_\_\_

Other (explain): (LOTTERY) 5

Banquet: \_\_\_\_\_

Total Seating: 40

### OLCC USE ONLY

Investigator Verified Seating: (Y) X (N)

Investigator Initials: AD

Date: 10/13/09

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

Applicant Signature: B. Bhillar

[Signature]

Date: 10-1-09

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(rev. 12/07)

# Multnomah County False Alarm Reduction Program

P.O. Box 92153 - Portland OR 97292-2153

Phone (503) 251-2411 - Fax (503) 251-2454 - Email: [alarms@mcso.us](mailto:alarms@mcso.us) - Internet: [www.mcso.us](http://www.mcso.us)

## ACCOUNT INFORMATION

BIG BEARS  
CROWN POINT COUNTRY MARKET  
31815 E COLUMBIA RIVER HY  
TROUTDALE, OR 97060

Date: 11/18/2009  
Customer: 500623  
Permit Nbr: 4649  
Premise: 31815 E COLUMBIA RIVER

The following account information has been created for you:

<u>Date</u>	<u>Reference</u>	<u>Description</u>	<u>Due Date</u>	<u>Amount</u>
08/13/2008	90011869	Renewal	09/12/2008	25.00
08/13/2008	90011878	False Alarm Fee	09/12/2008	50.00
09/16/2008	700020482	Payment		50.00-
10/16/2008	200000000851	Late Fees Multnomah	10/16/2008	25.00
		<b>TOTAL</b>		<b>50.00</b>

*Police Response Revoked*

Return this portion of this notice with your check or money order payable to Multnomah County to:  
**Multnomah County False Alarm Reduction Program, PO Box 92153, Portland, OR 97292**

BIG BEARS  
CROWN POINT COUNTRY MARKET  
31815 E COLUMBIA RIVER HY  
TROUTDALE, OR 97060

Customer: 500623  
Permit Nbr: 4649  
Account Balance: 50.00

*plus new  
permit(s)*