



# MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST

(Revised: 8/18/11)

APPROVED: MULTNOMAH COUNTY  
BOARD OF COMMISSIONERS  
AGENDA # C.3 DATE 2/19/15  
LYNDA GROW, BOARD CLERK

### Board Clerk Use Only

Meeting Date: 2/19/15  
Agenda Item #: C.3  
Est. Start Time: 9:30 am  
Date Submitted: 2/6/15

**Agenda Title:** **New OLCC Application for Limited On-Premises Sales Liquor License for Big Bear's Crown Point Market, 31815 E Historic Columbia River Highway Troutdale, OR 97060**

*Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title sufficient to describe the action requested.*

**Requested Meeting Date:** \_\_\_\_\_ **Time Needed:** N/A  
**Department:** Sheriff's Office **Division:** Enforcement  
**Contact(s):** Rebecca Child  
**Phone:** 251-2520 **Ext.** \_\_\_\_\_ **I/O Address:** 313/123  
**Presenter Name(s) & Title(s):** Consent Calendar

## General Information

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

Board approval for the above liquor license application for an additional license for Limited On-Premises Sales at the Big Bear Market.

### 2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

The Multnomah County Sheriff's Office has completed its investigation for the above liquor license application.

- Sheriff's Office background is completed and satisfactory
  - Recommendation for Approval
- Assessment and Taxation
  - Recommendation for Approval
- Land Use Management
  - Recommendation for Approval
- Alarms
  - Recommendation for Approval

With the investigation completed, the Multnomah County Sheriff's Office forwards a **FAVORABLE RECOMMENDATION** for the Liquor License application for a Limited On-Premises Sales License.

During the Annual Renewal process the APR submitted by MCSO stated that the renewal application was for both an Off Premises license and a Limited On-Premises Sales license which was in error, it should have only stated the renewal of the Off Premises License. The Big Bear Market is now applying for the Limited On-Premises Sale License.

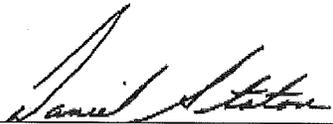
3. Explain the fiscal impact (current year and ongoing).
4. Explain any legal and/or policy issues involved.
5. Explain any citizen and/or other government participation that has or will take place.

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**Required Signature**

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Elected  
Official or  
Department  
Director:



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Date: February 6, 2015



## 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

February 6, 2015

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

Oregon Liquor Control Commission  
P.O. Box 22297  
Portland, OR 97269-2297

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

Subject: New Liquor License Application for  
Limited On-Premises Sales

Owner: Phillip DuFresne – Big Bear's Crown Point Market Inc.

The Multnomah County Sheriff's Office has completed its investigation for the above liquor license application.

- Sheriff's Office background is completed and satisfactory
  - Recommendation for Approval
- Assessment and Taxation records are in compliance
  - Recommendation for Approval
- Land Use Management
  - Recommendation for Approval
- Alarms
  - Recommendation for Approval

With the investigation completed, the Multnomah County Sheriff's Office forwards a **FAVORABLE RECOMMENDATION** for the approval of the Limited On-Premises Sales Liquor License application.

Sincerely,

Sheriff





OREGON LIQUOR CONTROL COMMISSION  
CORPORATION QUESTIONNAIRE

294185-81

5-15-92

Please Print or Type

Corporation Name: Big Bears Crown Point Market Inc. Year Incorporated: 6/1992

Trade Name (dba): Big Bears Crown Point Market Inc

Business Location Address: 31815 E Columbia River Hwy

City: Troutdale

ZIP Code: 97060

List Corporate Officers:

<u>Phillip J. DuFresne</u>	<u>President</u>
(name)	(title)
<u>Judy K. DuFresne</u>	<u>Secretary/Treasurer</u>
_____	_____
_____	_____

List Board of Directors:

<u>Phillip J. DuFresne</u>
(name)
<u>Judy K. DuFresne</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>Phillip J DuFresne</u>	<u>3.5</u>	<table border="1"> <tr><td>Issued: <u>7</u></td></tr> <tr><td>Unissued: <u>0</u></td></tr> <tr><td>Total Shares Authorized to Issue: <u>7</u></td></tr> </table>	Issued: <u>7</u>	Unissued: <u>0</u>	Total Shares Authorized to Issue: <u>7</u>
Issued: <u>7</u>					
Unissued: <u>0</u>					
Total Shares Authorized to Issue: <u>7</u>					
<u>Judy K. DuFresne</u>	<u>3.5</u>				
_____	_____				
_____	_____				

Server Education Designee: Phillip J DuFresne DOB: 11-28-44  
(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: Phillip J DuFresne (name) President (title) Date: 1-19-15



OREGON LIQUOR CONTROL COMMISSION  
INDIVIDUAL HISTORY

1. Trade Name Big Bears Crown Point Market Inc 2. City Troutdale
3. Name DuFresne Phillip J  
(Last) (First) (Middle)
4. Other names used (maiden, other) \_\_\_\_\_
5. \*SSN 543 - 48 - 9303 6. Place of Birth Portland, OR 7. DOB 11 /28 /1944 8. Sex M  F   
(State or Country) (mm) (dd) (yyyy)

\*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). If you are an applicant or licensee and fail to provide your SSN, the OLCC may refuse to process your application. 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: \_\_\_\_\_

9. Driver License or State ID # 1052172 10. State OR
11. Residence Address 31804 NE Wand Rd Troutdale OR 97060  
(number and street) (city) (state) (zip code)
12. Mailing Address (if different) \_\_\_\_\_  
(number and street) (city) (state) (zip code)
13. Contact Phone 503-695-2255 14. E-Mail address (optional) bigbearmarket77@gmail.com
15. Do you have a spouse or domestic partner?  Yes  No  
If yes, list his/her full name: Judy K. DuFresne
16. If yes to #15, will this person work at or be involved in the operation or management of the business?  
 Yes  No
17. List all states, other than Oregon, where you have lived during the past ten years:  
N/A
18. In the past 12 years, have you been **convicted** ("convicted" includes paying a fine) in Oregon or any other state of driving a car with a suspended driver's license or driving a car with no insurance?  
 Yes  No  Unsure If yes, list the date(s), or approximate dates, and type(s) of convictions.  
If unsure, explain. You may include the information on a separate sheet.  
N/A
19. In the past 12 years, have you been **convicted** ("convicted" includes paying a fine) in Oregon or any other state of a misdemeanor or a felony ?  Yes  No  Unsure  
If yes, list the date(s), or approximate dates, and type(s) of convictions. If unsure, explain. You may include the information on a separate sheet.  
N/A

20. Trade Name Big Bear Crown Point Market Inc 21. City Troutdale

22. Do you have any arrests or citations that have not been resolved?  Yes  No  Unsure  
If yes or unsure, explain here or include the information on a separate sheet.

23. Have you ever been in a drug or alcohol **diversion program** in Oregon or any other state? (A diversion program is where you are required, usually by the court or another government agency, to complete certain requirements in place of being convicted of a drug or alcohol-related offense.)  Yes  No  Unsure  
If yes, list the date(s), or approximate dates. If unsure, explain. You may include the information on a separate sheet.

24. Do you, or any legal entity that you are a part of, **currently hold** or **have previously held** a liquor license in Oregon or another US state? (Note: a service permit is not a liquor license.)  Yes  No  Unsure  
If yes, list the name(s) of the business, the city (or cities) and state (or states) where located, and the date(s) of the license(s). If unsure, explain. You may include the information on a separate sheet.  
Previously owned and operated Big Bear Crown Point Market Inc - tried to sell and had to retake

25. Have you, or any legal entity that you are a part of, ever had an application for a license, permit, or certificate **denied or cancelled** by the OLCC or any other governmental agency in the US?  
 Yes  No  Unsure If yes, list the date(s), or approximate dates. If unsure, explain. You may include the information on a separate sheet.  
Not sure if this 1st refusal counts

**Questions 26 and 27 apply if you, or any legal entity that you are part of, are applying for a Full On-Premises, Limited On-Premises, Off-Premises, or Brewery-Public House license. If you are not applying for one of those licenses, mark "N/A" on Questions 26 & 27.**

26. Do you have any ownership interest in any other business that makes, wholesales, or distributes alcohol?  N/A  Yes  No  Unsure If yes, list the date(s), or approximate dates. If unsure, explain. You may include the information on a separate sheet.

27. Does, or will, a maker, wholesaler, or distributor of alcohol have any ownership interest in your business?  
 N/A  Yes  No  Unsure If yes or unsure, explain:

**Question 28 applies if you, or any legal entity that you are part of, are applying for a Brewery, Brewery-Public House, Distillery, Grower Sales Privilege, Warehouse, Wholesale Malt Beverage & Wine, or Winery license. If you are not applying for one of those licenses, mark "N/A" on Question 28.**

28. Do you, or any legal entity that you are part of, have any ownership interest in any other business that sells alcohol at retail in Oregon?  N/A  Yes  No  Unsure If yes or unsure, explain:  
N/A

You must sign your own form (you can't have your attorney or a person with power of attorney sign your form).

I affirm that my answers are true and complete. I understand the OLCC will use the above information to check my records, including but not limited to, criminal history. I understand that if my answers are not true and complete, the OLCC may deny my license application.

Applicant Signature: [Handwritten Signature] Date: 1-19-15



OREGON LIQUOR CONTROL COMMISSION  
INDIVIDUAL HISTORY

1. Trade Name Big Bears Crown Point Market Inc 2. City Troutdale  
 3. Name DuFresne Judy K  
 (Last) (First) (Middle)  
 4. Other names used (maiden, other) \_\_\_\_\_  
 5. \*SSN 543 - 54 - 1223 6. Place of Birth Clairinda, Iowa 7. DOB 08 / 18 / 1946 8. Sex M  F   
 (State or Country) (mm) (dd) (yyyy)

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 11. Residence Address 31804 NE Wand Rd Troutdale OR 97060  
 (number and street) (city) (state) (zip code)  
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 13. Contact Phone 503-695-2255 14. E-Mail address (optional) bigbearmarket77@gmail.com

15. Do you have a spouse or domestic partner?  Yes  No  
 If yes, list his/her full name: Phillip J. DuFresne

16. If yes to #15, will this person work at or be involved in the operation or management of the business?  
 Yes  No

17. List all states, other than Oregon, where you have lived during the past ten years:  
N/A

18. In the past 12 years, have you been **convicted** ("convicted" includes paying a fine) in Oregon or any other state of driving a car with a suspended driver's license or driving a car with no insurance?  
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19. In the past 12 years, have you been **convicted** ("convicted" includes paying a fine) in Oregon or any other state of a misdemeanor or a felony ?  Yes  No  Unsure  
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You must sign your own form (you can't have your attorney or a person with power of attorney sign your form).

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Applicant Signature: John Kay Distane Date: 1/19/15



OREGON LIQUOR CONTROL COMMISSION  
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Phillip J. Dufresne Phone: 503-695 2255

Trade Name (dba): Big Bears Crown Point Market Inc

Business Location Address: 31815 E. Columbia River Hwy

City: Troutdale, OR ZIP Code: 97060

**DAYS AND HOURS OF OPERATION**

Business Hours:

Sunday 8:00 to 7:00  
Monday 8:00 to 9:00  
Tuesday 8:00 to 9:00  
Wednesday 8:00 to 9:00  
Thursday 8:00 to 9:00  
Friday 8:00 to 9:00  
Saturday 8:00 to 9:00

Outdoor Area Hours:

Sunday \_\_\_\_\_ to \_\_\_\_\_  
Monday \_\_\_\_\_ to \_\_\_\_\_  
Tuesday N/A 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: N/A

- 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**

N/A  
Sunday \_\_\_\_\_ to \_\_\_\_\_  
Monday \_\_\_\_\_ to \_\_\_\_\_  
Tuesday \_\_\_\_\_ to \_\_\_\_\_  
Wednesday \_\_\_\_\_ to \_\_\_\_\_  
Thursday \_\_\_\_\_ to \_\_\_\_\_  
Friday \_\_\_\_\_ to \_\_\_\_\_  
Saturday \_\_\_\_\_ to \_\_\_\_\_

**SEATING COUNT**

Restaurant: 30 Outdoor: 0  
Lounge: 0 Other (explain): \_\_\_\_\_  
Banquet: 0 Total Seating: 30

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: Phillip J. Dufresne Date: 1-15-19