



# MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST

(Revised: 8/18/11)

APPROVED: MULTNOMAH COUNTY  
BOARD OF COMMISSIONERS  
AGENDA # C-6 DATE 4/3/14  
MARINA BAKER, ASST BOARD CLERK

### Board Clerk Use Only

Meeting Date: 4/3/14  
Agenda Item #: C.6  
Est. Start Time: 9:30 am  
Date Submitted: 3/21/14

Agenda Title: **MCSO Requests New OLCC Grower's Special Privilege – No Consumption License Application for Seven Sails, 13285 NW Germantown Rd. Port., OR 97231**

*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: Next Available 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 new liquor license request.

### 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 new liquor license request.

- Sheriff's Office background is completed and satisfactory
  - Recommendation for issuing a new license.
- Assessment and Taxation records are in compliance
  - Recommendation for issuing a new license.
- Land Use Management
  - Recommendation for issuing a new license.

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

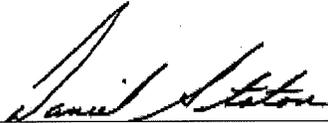
3. Explain the fiscal impact (current year and ongoing).
4. Explain any legal and/or policy issues involved.
5. Explain any citizen and/or other government participation that has or will take place.

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**Required Signature**

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Elected  
Official or  
Department  
Director:



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Date:

March 21, 2014

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OREGON LIQUOR CONTROL COMMISSION  
LIQUOR LICENSE APPLICATION



Application is being made for:

<p><b>LICENSE TYPES</b></p> <input type="checkbox"/> Full On-Premises Sales (\$402.60/yr) <ul style="list-style-type: none"> <li><input type="checkbox"/> Commercial Establishment</li> <li><input type="checkbox"/> Caterer</li> <li><input type="checkbox"/> Passenger Carrier</li> <li><input type="checkbox"/> Other Public Location</li> <li><input type="checkbox"/> Private Club</li> </ul> <input type="checkbox"/> Limited On-Premises Sales (\$202.60/yr) <input type="checkbox"/> Off-Premises Sales (\$100/yr) <ul style="list-style-type: none"> <li><input type="checkbox"/> with Fuel Pumps</li> </ul> <input type="checkbox"/> Brewery Public House (\$252.60) <input type="checkbox"/> Winery (\$250/yr) <input checked="" type="checkbox"/> Other: <u>GSPNC</u>	<p><b>ACTIONS</b></p> <input type="checkbox"/> Change Ownership <input checked="" type="checkbox"/> New Outlet <input type="checkbox"/> Greater Privilege <input type="checkbox"/> Additional Privilege <input type="checkbox"/> Other _____
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**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: \_\_\_\_\_

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**OLCC USE ONLY**

Application Rec'd by: JP

Date: 2-11-14

90-day authority:  Yes     No

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

① Margit Production = LLC ③ \_\_\_\_\_

② \_\_\_\_\_ ④ \_\_\_\_\_

2. Trade Name (dba): Seven Sails

3. Business Location: 13285 NW GERMAINTOWN RD, PORTLAND, OR 97231  
(number, street, rural route) (city) (county) (state) (ZIP code)

4. Business Mailing Address: // // // //  
(PO box, number, street, rural route) (city) (state) (ZIP code)

5. Business Numbers: 503-292-3418 503-292-3418  
(phone) (fax)

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

7. If yes to whom: N/A Type of License: N/A

8. Former Business Name: N/A

9. Will you have a manager?  Yes  No Name: Katherine S. Larsen (Me)  
(manager must fill out an Individual History form)

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

11. Contact person for this application: Katherine S. Larsen 503-292-3418  
(name) (phone number(s))  
13285 NW Germaintown Rd, PORTLAND, OR 97231 Kate@ensemble-loupen.com  
(address) (fax number) 503-292-3418 (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 Katherine S. Larsen Date 1/20/14 ③ \_\_\_\_\_ Date \_\_\_\_\_

② \_\_\_\_\_ Date \_\_\_\_\_ ④ \_\_\_\_\_ Date FEB 03 2014

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



Please Print or Type

LLC Name: Margot Productions LLC Year Filed: 2006  
Trade Name (dba): Seven Sails  
Business Location Address: 13285 NW Germantown Rd.  
City: Portland, OR ZIP Code: 97231

List Members of LLC:

Percentage of Membership Interest:

- |   |             |
|---|-------------|
| 1. <u>Katherine S. Larsen</u><br><small>(managing member)</small> | <u>100%</u> |
| 2. _____<br><small>(members)</small>                              | _____       |
| 3. _____  | _____       |
| 4. _____  | _____       |
| 5. _____  | _____       |
| 6. _____  | _____       |

(Note: If any LLC member is another legal entity, that entity must also complete an LLC, Limited Partnership or Corporation Questionnaire. If the LLC has officers, please list them on a separate sheet of paper with their titles.)

Server Education Designee: N/A (not on premises) DOB: SEE EXEMPTION REQUEST

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

Signature: Katherine S. Larsen OWNER Date: 1/30/17  
(name) (title)



OREGON LIQUOR CONTROL COMMISSION  
BUSINESS INFORMATION

Please Print or Type

Applicant Name: ~~Katherine S. Larsen~~ Margat Productions LLC Phone: 503-292-3418

Trade Name (dba): Seven Seils

Business Location Address: 13285 NW Germantown Rd.

City: Portland ZIP Code: 97231

DAYS AND HOURS OF OPERATION

Business Hours:

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

Outdoor Area Hours:

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

N/A

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:

- Live Music
- Recorded Music
- DJ Music
- Dancing
- Nude Entertainers
- Karaoke
- Coin-operated Games
- Video Lottery Machines
- Social Gaming
- Pool Tables
- Other: \_\_\_\_\_

N/A

DAYS & HOURS OF LIVE OR DJ MUSIC

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

N/A

SEATING COUNT

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

N/A

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: Katherine S. Larsen Date: 1/22/14

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)



## 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

March 21, 2014

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: Seven Sails  
13285 NW Germantown Rd.  
Portland, OR 97231

Subject: Grower's Special Privilege – No Consumption Liquor License Application

Owners: Margot Productions LLC – Katherine Larsen

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- Sheriff's Office background is completed and satisfactory
  - Recommendation for issuing a new license
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Sincerely,

A handwritten signature in cursive script that reads "Daniel Staton".

Sheriff