

CITY of CASCADE LOCKS

AGENDA

CITY COUNCIL GOAL PLANNING SESSION Monday January 27, 2020 6PM

CITY COUNCIL MEETING, Monday, January 27, 2020, 7:00 PM, CITY HALL

Purpose: The City Council meets on the 2nd and 4th Mondays of each month to conduct city business.

1. **Call to Order/Pledge of Allegiance/Roll Call.**
2. **Additions or amendments to the Agenda.** (The Mayor may add items to the agenda after it is printed and distributed only when required by business necessity and only after an explanation has been given. The addition of agenda items after the agenda has been printed is otherwise discouraged.)
3. **Adoption of Consent Agenda.** (Consent Agenda may be approved in its entirety in a single motion. Items are considered to be routine. Any Councilor may make a motion to remove any item from the Consent Agenda for individual discussion.)
 - a. **Approval of January 9, 2020 Minutes.**
 - b. **Ratification of the Bills in the Amount of \$485,660.17**
4. **Public Hearing:**
5. **Action Items:**
 - a. **Appointment to Committees.**
 - b. **Approve Resolution No. 1427 Extending WSIP Interim Financing Due Date.**
 - c. **Approve 2020 Budget Calendar.**
 - d. **Approve OLCC License for Cascade Locks Ale House.**
6. **Appearance of Interested Citizens to Share a Variety of Perspectives on Issues Facing Our Community.** (Comments on matters not on the agenda or previously discussed.)
7. **Reports and Presentations.**
 - a. **City Committees.**
 - b. **City Administrator Zimmerman Report.**
8. **Mayor and City Council Comments.**
9. **Other matters.**
10. **Executive Session per ORS 192.660 (if required)**
11. **Adjournment.**

The meeting location is accessible to persons with disabilities. A request for an interpreter for the hearing impaired, or for other accommodations for person with disabilities, should be made at least 48 hours in advance of the meeting by contacting the City of Cascade Locks office at 541-374-8484.

1. **Call to Order/Pledge of Allegiance/Roll Call.** Mayor Cramblett called the meeting to order at 7PM. Present were CM's Julie Armstrong, Glenda Groves, Bruce Fitzpatrick (via phone), Richard Randall and Mayor Cramblett. CM's Sara Patrick and Bobby Walker were excused. Also present were CA Gordon Zimmerman, Camera Operator Marianne Bump, Station Captain John Logan, Deputy Recorder Marilyn Place, Brenda Wood, Ralph Hesgard, Carl Zerfing, Butch Miller, Todd Mohr, George Fischer, Vicki Jung and Patrese Evans.

2. **Additions or amendments to the Agenda.** None.

3. **Adoption of Consent Agenda.**

a. **Approval of December 9, 2019 City Council Minutes.**

b. **Ratification of the Bills in the Amount of \$413,639.13. Motion:** CM Randall moved to approve the consent agenda, seconded by CM Groves. The motion passed unanimously by CM's Armstrong, Groves, Fitzpatrick, Randall and Mayor Cramblett.

4. **Public Hearing.** None.

5. **Action Items:**

a. **Appointment to Committees.** None.

b. **Approve Res. No. 1426 Adopting New Harassment and Bullying Policies.** CA Zimmerman said local governments are required to adopt the new policy which also covers Council Members.

CM Randall said since Council and volunteers come under this new legislation which requires all employees to go through sensitivity training why don't Council Members and volunteers have to take the same training. CA Zimmerman said the Council Member position is a volunteer position even though they are elected. He added, however, if you would like to go through the training you are welcome to do so.

CM Randall said many have to abide by this resolution but it's their own responsibility to find out what the new policies are. He added there's nothing in the bill that warns anyone about False Accusations. CA Zimmerman said he recognizes it's not a perfect example of legislation but local government is required to adopt it as it is. Mayor Cramblett asked if the City can amend or add anything to it. CA Zimmerman said this policy is a baseline and the if City wants to enhance it they can do that.

Motion: CM Armstrong moved to adopt Res. No. 1426, seconded by CM Groves. The motion passed unanimously by CM's Armstrong, Groves, Fitzpatrick, Randall and Mayor Cramblett.

c. **Approve IGA with MCEDD for Grant and Labor Standard Administration. Motion:** CM Randall moved to approve the IGA, seconded by CM Groves. The motion passed unanimously by CM's Armstrong, Groves, Fitzpatrick, Randall and Mayor Cramblett.

d. **Review of CEDS Priorities.** CA Zimmerman said the Hood River Economic Development Group takes all the City's, county and sometimes the school districts priorities and prioritizes them on a county basis. He said the priorities are adopted by the Hood River County Commission and sent to MCEDD. He said MCEDD takes the priorities along with other counties and publishes them out to the federal and state funders. CA Zimmerman said the first three priorities on the list for Cascade Locks are funded or partially funded. He asked if Council agreed with the list or if there was anything they wanted to change regarding the order of the priorities on the list.

CM Groves said priorities number four and five, the plans for the two round-about, should be moved down to the bottom of the list. CM Randall said the congestion in town during the tourist months is terrible for the residents and the round-about would help that. He agreed priorities four and five should

be moved down the list but not to the bottom. There was consensus of Council to move priorities four and five down the list to positions nine and ten and priority twelve, refurbishing City Hall, will move up to the fourth position.

e. **Approve OLCC License for pFriem Brewing.** CA Zimmerman said even though pFriem isn't brewing beer at their new warehouse location at the Port Industrial Park they are aging it and the OLCC requires a license for that. **Motion:** CM Groves moved to approve the OLCC License for pFriem Brewing, seconded by CM Armstrong. The motion passed unanimously by CM's Armstrong, Groves, Fitzpatrick, Randall and Mayor Cramblett.

6. **Appearance of Interested Citizens to Share a Variety of Perspectives on Issues Facing Our Community.** Butch Miller said since Council Member Sara Patrick was elected there have been nineteen council meetings and she has only attended nine. He said there were two budget meetings scheduled and she did not attend either one. He said her attendance is below 50% and she has not been in council since October 2019. He added the City of Cascade Locks is not being represented by this person and he would like to know what can be done. CA Zimmerman said she is not in violation of Council rules because she has called in for most of the occurrences. He said one option is the Mayor could speak to her about her attendance. He added another option is to begin a recall because she has served longer than six months.

Mayor Cramblett said he appreciated Mr. Miller bringing it up. He added it's up to Council what to do next.

7. **Reports and Presentations.**

a. **City Committees.** None.

b. **Hesgard Family Presentation.** Mayor Cramblett presented Ralph Hesgard with an award for his and his families commitment and contributions to the City of Cascade Locks Fire Department.

c. **Carl Zerfing Presentation.** Mayor Cramblett presented Carl Zerfing with an award for his many years of commitment and contributions to the City of Cascade Locks Fire Department. Mr. Zerfing said he wanted to add that he hopes the Stubbs' be included in the award because both Vern and Joe had 30 years in the department and they were both fire chiefs at one time or another. Mr. Zerfing said his son Jess is coming up on 30 years with the department as well.

d. **City Administrator Zimmerman Report.** CA Zimmerman asked if Council would like to meet prior to the next Council meeting for a goal setting session at 6PM on January 27. There was consensus of Council to meet at 6PM on the 27th.

CA Zimmerman said the Fire Department has hired their fourth fulltime employee. He said Teresa Adams started Monday, January 13.

CA Zimmerman said the Museum Board would like a joint meeting with the Port and City Council to discuss direction. He said they asked for the meeting to take place February 18 or 25, 2020. There was consensus of Council either day would be fine.

CA Zimmerman said Larry Cramblett and Gary Munkoff have both resigned from the Planning Commission. He said the Planning Commission is now down to three members with Todd Bouchard being appointed Chair.

CA Zimmerman said all the job orders for 2018/19 have been entered into the system and the info will assist the auditors substantially.

8. **Mayor and City Council Comments.** CM Fitzpatrick said he appreciated the Mayor honoring Ralph Hesgard and Carl Zerfing for all they have done for the community. He welcomed Teresa Adams to

the Fire Department. He thanked Larry Cramblett and Gary Munkoff for their service to the Planning Commission.

CM Armstrong said it was good to see the Hesgards and Carl Zerfing be recognized for their contributions. She said she hopes the snow falls so she can see the new snowplow at work. She welcomed Teresa Adams to the Fire Department.

CM Randall thanked Mr. Zerfing and Mr. Hesgard for all they've done for this community. He said it's amazing how the community can benefit when there's opposition to what you're trying to achieve and you believe it's the right thing for the community so you continue to persevere. He thanked Deputy Recorder Marilyn Place for the efforts working on the Job Order process and the importance of the system for transparency.

CM Groves thanked Mayor Cramblett for honoring the Hesgards and Carl Zerfing. She said it's important to show people we recognize the good things people do for the community. She thanked Marilyn for getting the Job Order process moving forward and it's been a long time goal for Council.

Mayor Cramblett said the staff has held up well and moved things ahead and auditors appreciate it and Council appreciates it. He said he was happy to honor Carl and Ralph and was happy that Carl recognized the Stubbs family for their contributions as well.

9. **Other matters.** None.

10. **Executive Session.** None.

11. **Adjournment. Motion:** CM Groves moved to adjourn, seconded by CM Randall. The motion passed unanimously by CM Armstrong, Groves, Fitzpatrick, Randall and Mayor Cramblett. The meeting adjourned at 8:19PM.

Prepared by,
Deputy Recorder, Marilyn Place

APPROVED:

Mayor Tom Cramblett

BLANKET VOUCHER APPROVAL

PAGE NO.

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DEPARTMENT: CITY OF CASCADE LOCKS
COVER SHEET AND SUMMARY

DATE:	DESCRIPTION:	AMOUNT:
12/12/2019	A/P	\$ 69,147.12
12/20/2019	Payroll	\$ 59,970.45
12/27/2019	A/P	\$ 232,701.71
12/31/2019	A/P	\$ 51,819.85
1/3/2020	Payroll	\$ 43,608.61
1/10/2020	A/P	\$28,412.43

GRAND TOTAL \$ 485,660.17

APPROVAL:

Mayor

Report Criteria:

Report type: GL detail

Check Number	GL Period	Check Issue Date	Vendor Number	Invoice No.	Payee	Description	GL Account	Amount
11181	01/20	01/10/2020	5966	01410018UA	American Messaging	Paging Service	5140562110	7.50
Total 11181:								
11182	01/20	01/10/2020	6820	67682	Anderson Perry & Associates Inc	Cultural Resources	3141562030	255.00
11182	01/20	01/10/2020	6820	67683	Anderson Perry & Associates Inc	PRELIMINARY AND FINAL DESIGN EN	3141562030	4,000.00
Total 11182:								
11183	01/20	01/10/2020	7100	20CACL_01	Annie Van Domelen	Tourism Staff Support	0840562110	305.00
11183	01/20	01/10/2020	7100	20CACL_02	Annie Van Domelen	Design services	0840562114	250.00
Total 11183:								
11184	01/20	01/10/2020	6839	83456564	Bound Tree Medical LLC	BTM LICENSE & REGISTRATION	0540562351	57.25
11184	01/20	01/10/2020	6839	83458222	Bound Tree Medical LLC	ATROPINE	0540562351	118.50
Total 11184:								
11185	01/20	01/10/2020	4910	600146818	Brenda Bruso	Refund Deposit Balance	5121130	287.34
Total 11185:								
11186	01/20	01/10/2020	6900	V904273	BSK Associates	BACTERIA ONLY 22 RUCKLE, 140 WA	2140562150	60.00
Total 11186:								
11187	01/20	01/10/2020	6879	12312019	Cartomation Inc	GIS Service for City	5140562190	1,000.00
Total 11187:								
11188	01/20	01/10/2020	670	1000015001	Cascade Locks Light Co	New Fire Station	0540562439	917.82
11188	01/20	01/10/2020	670	1000035001	Cascade Locks Light Co	Res no2	2140562070	39.45
11188	01/20	01/10/2020	670	1000302001	Cascade Locks Light Co	Pump Lift Station	3140562070	28.37
11188	01/20	01/10/2020	670	1003791001	Cascade Locks Light Co	treatment plant	3140562070	2,505.86
11188	01/20	01/10/2020	670	1003813001	Cascade Locks Light Co	Warehouse	2140562070	32.52
11188	01/20	01/10/2020	670	1037427001	Cascade Locks Light Co	Wasco Crk Lift Station	3140562070	88.56

Check Number	GL Period	Vendor	Check Issue Date	Invoice No.	Payee	Description	GL Account	Amount
11188	01/20	670	01/10/2020	1038140001	Cascade Locks Light Co	Corrosion Control	2140562070	136.98
11188	01/20	670	01/10/2020	2001200001	Cascade Locks Light Co	Cemetery Water	1740562551	199.77
11188	01/20	670	01/10/2020	3001551001	Cascade Locks Light Co	main lift station	3140562070	690.88
11188	01/20	670	01/10/2020	3001559001	Cascade Locks Light Co	museum	0140762630	295.63
11188	01/20	670	01/10/2020	3001718001	Cascade Locks Light Co	Mail Lighting	5140562800	61.68
11188	01/20	670	01/10/2020	3001839001	Cascade Locks Light Co	moody lift station	2140562070	46.57
11188	01/20	670	01/10/2020	3019612001	Cascade Locks Light Co	Bike Path	0140162552	33.38
11188	01/20	670	01/10/2020	6001350001	Cascade Locks Light Co	City Hall Utilities	0140162552	1,732.93
11188	01/20	670	01/10/2020	6001357001	Cascade Locks Light Co	Pump Lift Station	3140562070	18.86
11188	01/20	670	01/10/2020	6001369001	Cascade Locks Light Co	87 Ruckel	3140562070	35.45
11188	01/20	670	01/10/2020	6001498001	Cascade Locks Light Co	City Hall Irrigation	0140162552	241.91
11188	01/20	670	01/10/2020	6013688001	Cascade Locks Light Co	radio tower	0540562439	64.68
Total 11188: 7,172.30								
11189	01/20	900	01/10/2020	1000389031	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
11189	01/20	900	01/10/2020	10003980112	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
11189	01/20	900	01/10/2020	10024731011	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
11189	01/20	900	01/10/2020	2001036001	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
11189	01/20	900	01/10/2020	2001038021	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
11189	01/20	900	01/10/2020	20011140012	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
11189	01/20	900	01/10/2020	2010630001	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
11189	01/20	900	01/10/2020	3001866001	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
11189	01/20	900	01/10/2020	3001923001	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
11189	01/20	900	01/10/2020	6001496101	City of Cascade Locks	Senior Sewer Subsidy	0140862025	22.70
Total 11189: 227.00								
11190	01/20	940	01/10/2020	01082020	City of Springfield	Patients billed for Oct 2019	0540562111	208.00
Total 11190: 208.00								
11191	01/20	1120	01/10/2020	B260888	Columbia Hardware LLC	COMBO SHOVEL 18 "	0140462520	60.53
11191	01/20	1120	01/10/2020	B260888	Columbia Hardware LLC	SNOWBRUSH QUANT 2	2140562560	21.95
Total 11191: 82.48								
11192	01/20	1620	01/10/2020	2569	Efficiency Services Group LLC	BPA Program Services	5140562139	800.00

Check Number	GL Period	Check Issue Date	Vendor Number	Invoice No.	Payee	Description	GL Account	Amount
Total 11192:								
11193	01/20	01/10/2020	1760	ORHOD6689	Fastenal Company	XL BLUE GLOVES 8 MIL	3140562560	800.00
11193	01/20	01/10/2020	1760	ORHOD6681	Fastenal Company	FITTINGS	5140562560	20.03
11193	01/20	01/10/2020	1760	ORHOD6681	Fastenal Company	FITTINGS	5140662560	81.89
11193	01/20	01/10/2020	1760	ORHOD6759	Fastenal Company	XLG GRIP KNIT GLOVES	2140562560	20.48
11193	01/20	01/10/2020	1760	ORHOD6759	Fastenal Company	ECONPALLETTRUCK	2140562560	84.38
11193	01/20	01/10/2020	1760	ORHOD6759	Fastenal Company	L TPR GLOVES 6	3140562560	379.99
11193	01/20	01/10/2020	1760	ORHOD6759	Fastenal Company	L TPR GLOVES 6	3140562560	84.37
Total 11193:								
11194	01/20	01/10/2020	2450	10372	Hood River County	Deputy Services	0141962250	671.14
Total 11194:								
11195	01/20	01/10/2020	2570	35420	Hood River News	Notice of Public Hearing	0140262037	7,600.00
Total 11195:								
11196	01/20	01/10/2020	4910	300186306	Josh Evans	Refund Deposit Balance	5121130	104.00
Total 11196:								
11197	01/20	01/10/2020	4910	100371201	Laura Tils	Refund Deposit Balance	5121130	59.38
Total 11197:								
11198	01/20	01/10/2020	7014	964234	Life-Assist Inc	Medical Supplies	0540562351	24.08
Total 11198:								
11199	01/20	01/10/2020	3150	01032020	Marianne Bump	Reimburse Mileage - Banking	0140162020	270.00
Total 11199:								
11200	01/20	01/10/2020	3770	22-201912	Net Assets	Title Search	0140162110	23.20
Total 11200:								

Check Number	GL Period	Check Issue Date	Vendor Number	Invoice No.	Payee	Description	GL Account	Amount
11201	01/20	01/10/2020	4040	020199552	OLDCASTLE Infrastructure	7272-1542 transpad pge	5141562009	731.00
Total 11201:								
11202	01/20	01/10/2020	4070	9120335	One Call Concepts Inc	Regular Tickets 19	5140562110	731.00
Total 11202:								
11203	01/20	01/10/2020	7090	9631	Onsite Supply House, LLC	LENOX HAND SAW	2140562560	22.80
Total 11203:								
11204	01/20	01/10/2020	7110	D08791	Oregon Health Authority	operational class certification water	2140562020	23.86
Total 11204:								
11205	01/20	01/10/2020	7055	940	Pixel Dust Studio	Redesign website updates, copy writing	0840562114	140.00
Total 11205:								
11206	01/20	01/10/2020	6780	5058465036	Ricoh USA Inc	Copies	0140162110	750.00
Total 11206:								
11207	01/20	01/10/2020	5210	20182019	Secretary of State	2018-2019 audit filing fee	0140162080	71.50
Total 11207:								
11208	01/20	01/10/2020	5510	7302920465-	Staples Contract & Commercial Inc	Office Supplies	0140162010	250.00
11208	01/20	01/10/2020	5510	7302920465-	Staples Contract & Commercial Inc	yellow toner cartridge	0140162010	290.28
11208	01/20	01/10/2020	5510	7303398413-	Staples Contract & Commercial Inc	Toner and Supplies	0140162010	102.66
11208	01/20	01/10/2020	5510	7303398413-	Staples Contract & Commercial Inc	Credit no reship	0140162010	228.58
Total 11208:								
11209	01/20	01/10/2020	5960	INVO22156	Traffic Safety Supply Co	STREET SIGNS NE WHEELER. FOR	0340562560	613.73
Total 11209:								
11210	01/20	01/10/2020	7092	10999	VanKoten & Cleaveland LLC	General Attorney's Fees	0140162100	135.84
Total 11210:								
								1,200.00

Check Number	GL Period	Check Issue Date	Vendor Number	Invoice No.	Payee	Description	GL Account	Amount
Total 11210:								
11211	01/20	01/10/2020	7111	PDX1-00117	Western First Aid & Safety	SUPPLIES FOR THE FIRST AID KITS	0140162010	1,200.00
Total 11211:								
11212	01/20	01/10/2020	4910	300190512	Willis Boyer	Refund Deposit Balance	5121130	145.29
Total 11212:								
11213	01/20	01/10/2020	7098	918563	WSP USA Inc	Professional Planning Services	0140262090	118.02
Total 11213:								
Grand Totals:								
								586.64
								586.64
								28,396.85

Summary by General Ledger Account Number

GL Account	Debit	Credit	Proof
01-21010	7.79	13,219.53-	13,211.74-
01-401-62010	766.81	7.79-	759.02
01-401-62020	23.20	.00	23.20
01-401-62080	250.00	.00	250.00
01-401-62100	1,200.00	.00	1,200.00
01-401-62110	97.50	.00	97.50
01-401-62552	2,008.22	.00	2,008.22
01-402-62037	104.00	.00	104.00
01-402-62060	586.64	.00	586.64
01-404-62520	60.53	.00	60.53
01-407-62630	295.63	.00	295.63
01-408-62025	227.00	.00	227.00
01-419-62250	7,600.00	.00	7,600.00
03-21010	.00	135.84-	135.84-
03-405-62560	135.84	.00	135.84
05-21010	.00	1,636.25-	1,636.25-
05-405-62111	208.00	.00	208.00
05-405-62351	445.75	.00	445.75
05-405-62439	982.50	.00	982.50
08-21010	.00	1,305.00-	1,305.00-
08-405-62110	305.00	.00	305.00
08-405-62114	1,000.00	.00	1,000.00
17-21010	.00	199.77-	199.77-
17-405-62551	199.77	.00	199.77
21-21010	.00	965.70-	965.70-
21-405-62020	140.00	.00	140.00
21-405-62070	255.52	.00	255.52
21-405-62150	60.00	.00	60.00
21-405-62560	510.18	.00	510.18
31-21010	.00	7,728.38-	7,728.38-
31-405-62070	3,368.98	.00	3,368.98
31-405-62560	104.40	.00	104.40
31-415-62030	4,255.00	.00	4,255.00
51-21010	.00	3,214.17-	3,214.17-
51-21130	488.82	.00	488.82
51-405-62110	30.30	.00	30.30
51-405-62139	800.00	.00	800.00
51-405-62190	1,000.00	.00	1,000.00

GL Account	Debit	Credit	Proof
51-405-62560	81.89	.00	81.89
51-405-62800	61.68	.00	61.68
51-406-62560	20.48	.00	20.48
51-415-62009	731.00	.00	731.00
Grand Totals:	28,412.43	28,412.43-	.00

Report Criteria:

Report type: GL detail

5a

RECEIVED
JAN 21 2020

BY: K. Koben 8:30AM

City of Cascade Locks, Oregon

DATE AND TIME RECEIVED:

Application for City Boards, Commissions, Task Forces and Committees
(Check one below)

Budget Committee _____ Planning Commission Tourism Committee _____ Other _____

NAME: Rachel Najjar

HOME PHONE _____

MAILING ADDRESS: _____

CELL PHONE: same #

EMAIL ADDRESS: _____

Do you live within the city limits? Yes No _____

How long have you lived in the City? 10 months

1. Why are you interest in serving?

Cascade locks has been the town we have been looking for. I want to help preserve it's goodness and help it to be the best that it can be.

2. Do you feel that you can meet the schedule required by the City Council?

Yes

3. What experiences have you had with City Committees, Boards, or Commissions?

I have worked with The Dalles city officials + state representatives to address pollution in the town.

4. What special skills or interests do you think you bring to this effort?

I have a degree in Public Health and I believe I can help to address some needs that have not been noticed. I also helped develop clean water + a non-profit school while living in Tanzania.

APPLICANT SIGNATURE

Rachel Najjar

DATE:

1/20/20

Thank you. We appreciate your willingness to serve.

CASCADE LOCKS STAFF REPORT

Date Prepared: January 21, 2020

For City Council Meeting on: January 27, 2020

TO: Honorable Mayor and City Council

PREPARED BY: Gordon Zimmerman, City Administrator

SUBJECT: Approve Resolution No. 1427 Extending WSIP Interim Financing Due Date

SYNOPSIS: Because it has taken longer than planned to complete the Water System Improvement Plan, the City must extend the due date for the interim financing with Cashmere Valley Bank. The attached resolution provides for an addition a year to complete the project.

We have finally received permission for the third phase of the project, the development of Well #3. When that project is completed by the end of this fiscal year, we can then proceed to complete the project with both the USDA and Cashmere Valley Bank.

CITY COUNCIL OPTIONS: Approve or reject Res. No. 1427 extending the interim financing agreement with the USDA and Cashmere Valley Bank.

RECOMMENDED MOTION: "I move to approve Resolution No. 1427 which extends the due date of the interim financing for the City's Water System Improvement Project."

RESOLUTION NO. 1427

A RESOLUTION AUTHORIZING BOND ANTICIPATION NOTE AMENDMENT NO. 1 TO THE CITY'S OUTSTANDING BOND ANTICIPATION NOTE, SERIES 2018 IN THE AMOUNT OF \$3,764,515 WHICH EXTENDS THE FINAL MATURITY OF INTERIM FINANCING FOR IMPROVEMENTS TO THE CITY'S FACILITIES AND RELATED MATTERS

WHEREAS, the City Council of City of Cascade Locks, Hood River County, Oregon (the "City") finds:

A. The City submitted an application to Rural Development of the United States Department of Agriculture ("USDA") for USDA to provide a loan to the City to finance improvements to the City's water system including, but not limited to: (1) drilling a new well adjacent to existing wells, (2) constructing an above ground 480,000 gallon storage tank, (3) installing 1,000 linear-feet of transmission main, (4) installing 3,900 linear-feet of distribution line, (5) abandoning/replacing approximately 23,500 linear-feet of existing pipe to improve the distribution and fire flow throughout the City's service area, (6) funding of a reserve account, if any and (7) paying the costs of issuance of the Bond. (the "Project"); and

B. USDA has provided its Letter of Conditions dated July 31, 2015, indicating its intent to provide a loan to the City in an amount not to exceed \$3,764,515 (the "USDA Loan"), upon completion of construction of the Project; and

C. ORS 287A.180(1)(b) and (4) authorize the issuance of obligations to provide interim financing for capital projects to be undertaken by the City, provided that the final maturity date of the interim financing may not be later than five years after the interim financing is issued; and

D. On February 15, 2018 the City issued its Bond Anticipation Note, Series 2018 in the principal amount of \$3,764,515 (the "Bond Anticipation Note") to provide interim financing for the Project to Cashmere Valley Bank (the "Bank"), which matures February 14, 2020; and

E. The City desires to extend the final maturity of the Bond Anticipation Note to February 15, 2021; and

F. It is in the best interest of the City to approve of and authorize the extension of the final maturity of the Bond Anticipation Note to February 15, 2021.

NOW, THEREFORE, THE CITY COUNCIL OF THE CITY OF CASCADE LOCKS, HOOD RIVER COUNTY, OREGON RESOLVES AS FOLLOWS:

Section 1. Approval and Authorization. The City Council hereby approves of and

authorizes the extension of the final maturity of the Bond Anticipation Note to February 15, 2021 and authorizes the City Manager or the Mayor (the “Authorized Representative”) to act on behalf of the City to execute the documents the Authorized Representative deems necessary or desirable to extend the final maturity of the Bond Anticipation Note to February 15, 2021.

Section 2. Appointment of Special Counsel. The City does appoint the law firm of Mersereau Shannon LLP of Portland, Oregon as Special Counsel to the City for the extension of the Bond Anticipation Note.

Section 3. Ratification. All other terms and provisions of the Bond Anticipation Note shall remain unchanged and are hereby ratified and confirmed.

This resolution shall take effect immediately upon its adoption by the City Council.

DATED this 27th day of January, 2020.

Tom Cramblett, Mayor

Attest:

Kathy Woosley, City Recorder

AGENDA ITEM NO: 50

CASCADE LOCKS STAFF REPORT

Date Prepared: January 21, 2020

For City Council Meeting on: January 27, 2020

TO: Honorable Mayor and City Council

PREPARED BY: Gordon Zimmerman, City Administrator

SUBJECT: Approve 2020/2021 Budget Process

SYNOPSIS: Each year the City Council adopts a time line for the budget process for the upcoming fiscal budget. The proposed timeline is attached for your approval.

CITY COUNCIL OPTIONS: Approve, modify, or reject the proposed time line.

RECOMMENDED MOTION: "I recommend adoption of the proposed budget process for fiscal year 2020-2021."

Adopted FY20/21 Budget Process Schedule

1. **CITY COUNCIL:** Adopt Budget Process Schedule 1/27/20
2. **CITY COUNCIL:** Begin budget development process by setting goals 1/27/20
3. **FINANCE:** Send priorities to Department Heads 1/28/20
 - A. Review format of budget document
 - B. Set up Department Head/CA/Finance Officer work session to assist
4. **CITY DEPARTMENT HEADS AND STAFF:** Begin development of departmental budget. 2/03/20
5. **DEPARTMENT PROGRAMS:** Turn in proposed budget to Finance 3/02/20
6. **CA and FINANCE:** Compile proposed budget document 3/03/20-4/03/20
7. **STAFF:** Publish Notice of Budget Committee Meeting 4/08/20
(State required time line not more than 30 days prior to Budget meeting)
8. **STAFF:** Publish **Second Notice of Budget Committee Meetings** (no less than 5 days prior) 4/24/20
 - A. **Publish on City website**
9. Send Budget Meeting Training notice to Budget Committee 4/24/20
10. **BUDGET COMMITTEE:**
 - A. Conduct Budget Committee Workshop 4/29/20
 1. Review budget process and Budget Structure
 2. Deliver Proposed Budget to Committee members

Budget meetings will start at 6:30 PM and end at 9:00 PM (unless Committee votes to continue).

11. **Budget Meeting:** 5/06/20
 - A. Elect Budget Committee Chair and Vice Chair
 - B. Set meeting rules, adopt timeline schedule
 - C. Deliver Budget Message
 - D. 6:45PM – Budget Committee Hearing on Possible Uses of State Revenue Sharing
 - E. Formal Approval of Property Tax Rate \$2.7050 per \$1,000 for FY 18/19

Meeting #1

ADMINISTRATION:

General Fund (1)

SDC Fund (2)

Grant Fund (7)

Tourism Fund (8)

Cemetery Fund (17)

Cemetery Trust Fund (25)

Capital Reserve Fund (56)

EMERGENCY SERVICES DEPARTMENT:

Emergency Services Fund (5)

Meeting #2	
<p>PUBLIC WORKS: Street Fund (3) Water Fund (21) Water System Improvement Fund (22) Corrosion Control Treatment Fund (23) Sewer Fund (31) Sewer Bond 2018 Refinance Fund (32) Sewer Facilities Project Fund (33) Sewer Bond Fund (40)</p>	<p>ELECTRIC DEPARTMENT: Electrical Fund (51)</p>

*** BUDGET MEETING DATES ARE TENTATIVE AND MAY BE ADJUSTED BY BUDGET COMMITTEE.**

- 13. **STAFF:** Publish Notice of Public Hearing on Proposed Uses of State Revenue Sharing to bring before council. 5/27/20
- 14. **STAFF:** Publish Notice of Budget Hearing & Financial Summary (City) 5/27/20
 (Required lead time – not more than 30 days or less than 5 days before hearings)
- 15. **City Council Meeting Public Hearing** on Proposed Uses of State Revenue Sharing 6/08/20
- 16. **Budget Hearing – Council Meeting to adopt proposed budget** 6/08/20
 Public Hearing on Proposed Municipal Corporate Budget
 Pass Resolutions Adopting Budget, Making Appropriations and Levying Taxes (City)
- 17. **STAFF:** Submit Budget and forms to Assessor as required 7/10/20

AGENDA ITEM NO 5d

STAFF REPORT

Date Prepared: 01/21/2020

For City Council Meeting on: January 27, 2020

TO: Honorable Mayor and City Council

PREPARED BY: Marilyn Place, Deputy Recorder

APPROVED BY: CA G. Zimmerman

SUBJECT: Approval of new license for Cascade Locks Ale House.

SYNOPSIS: Owners of Cascade Ale House have applied for their liquor license. OLCC requires the local governing body approval.

CITY COUNCIL OPTIONS:

1. Approve new license application for Cascade Locks Ale House.
2. Do not approve new license application for Cascade Locks Ale House.

RECOMMENDATION: That City Council, by motion, approve new liquor license application for Cascade Locks Ale House.

Legal Review and Opinion: None required for this action.

Financial review and status: None at this time.

BACKGROUND INFORMATION:

1. An application was submitted to OLCC on January 7, 2020.
2. A copy of the license application is included.



Oregon

Kate Brown, Governor

Liquor Control Commission

PO Box 22297

Portland, OR 97269-2297

(503) 872-5000

(800) 452-6522

1/14/2020

US4J'S LLC
dba **CASCADE LOCKS ALE HOUSE**
PO BOX 388
Cascade Locks, OR 97014

Dear Applicant:

We have received your liquor license application for a Full On-Premises sales license. Before we can begin processing your application, you must submit a copy of your liquor license application to your local governing body and pay any required fees.

Please mail or deliver the attached documents and any fee to your government office listed below as soon as possible.

If you have questions please contact us at the email below.

Liquor License Application Coordinator
olcc.liquorlicenseapplication@oregon.gov
503-872-5217

Your Local Governing Body

City of Cascade Locks
140 Wanapa St.
Cascade Locks, OR 97014
541-374-8484





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	Name of City or County:
<input type="checkbox"/> Brewery-Public House 1 st location	
<input type="checkbox"/> Brewery-Public House 2 nd location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 3 rd location	
<input type="checkbox"/> Distillery	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input checked="" type="checkbox"/> Full On-Premises, Commercial	By: _____
<input type="checkbox"/> Full On-Premises, Caterer	Date: _____
<input type="checkbox"/> Full On-Premises, Passenger Carrier	OLCC USE ONLY
<input type="checkbox"/> Full On-Premises, Other Public Location	
<input type="checkbox"/> Full On-Premises, For Profit Private Club	Date application received:
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	1/7/19
<input type="checkbox"/> Grower Sales Privilege 1 st location	By: <u>Jan Z.</u>
<input type="checkbox"/> Grower Sales Privilege 2 nd location	License Action(s):
<input type="checkbox"/> Grower Sales Privilege 3 rd location	G/PRIV
<input type="checkbox"/> Limited On-Premises	
<input type="checkbox"/> Off-Premises	
<input type="checkbox"/> Off-Premises with Fuel Pumps	
<input type="checkbox"/> Warehouse	
<input type="checkbox"/> Wholesale Malt Beverage & Wine	
<input type="checkbox"/> Winery 1 st Location	
<input type="checkbox"/> Winery 2 nd Location	
<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):

[Signature] USAJS, LLC (Applicant #1) _____ (Applicant #2)

_____ (Applicant #3) _____ (Applicant #4)

3. Trade Name of the Business (Name Customers Will See)
Cascade Locks Ale House

4. Business Address (Number and Street Address of the Location that will have the liquor license)
500 WaNaPa st

City Cascade Locks	County Hood River	Zip Code 97014
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OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

5. Trade Name of the Business (Name Customers Will See) Cascade Locks Ale House			
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) po box 388			
City Cascade Locks	State OR	Zip Code 97014	
9. Phone Number of the Business Location 5413749310		10. Email Contact for this Application alehouseshelleyj@gmail.com	
11. Contact Person for this Application Shelley James			Phone Number
Contact Person's Mailing Address (if different)	City	State	Zip Code

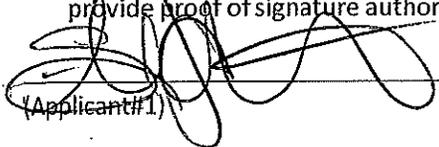
Please note that liquor license applications are public records. A copy of the application will be posted on the OLCC website for a period of several weeks.

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
LIMITED LIABILITY COMPANY QUESTIONNAIRE

Please Print or Type

LLC Name: US4J'S LLC Year Filed: 2012

Trade Name (dba): Cascade Locks Ale House

Business Location Address: 500 Wanapa St

City: Cascade Locks ZIP Code: 97014

List Members of LLC:

Percentage of Membership Interest:

1. Shelley James
(managing member)

90%

2. Michael James
(members)

10%

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: Shelley James DOB: _____

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

Signature: [Signature] (name) owner (title) Date: 1/7/2020



OREGON LIQUOR CONTROL COMMISSION
INDIVIDUAL HISTORY FORM

1. Name: (LAST) <u>James</u>	(FIRST) <u>Shelley</u>	(MIDDLE) <u>Marie</u>
2. Other Names Used (Maiden, Etc.):		
3. Do you have a Social Security Number (SSN) issued by the U.S. Social Security Administrator? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide your SSN: _____		
<p>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 indicate below.</p> <p>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)).</p> <p>Do you voluntarily consent to the OLCC's use of your SSN as just described? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		
4. Date of Birth (MM/DD/YYYY):		Contact Phone:
6. Driver License or State ID #:		7. State:
8. Residence Address:		
9. Mailing Address (if different): <u>PO Box</u>		
10. E-Mail (optional):		
11. Do you have a spouse or domestic partner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list his/her full name: <u>Michael K. James</u>		
12. If yes to #11, will this person be involved in the management of, or have control over the business? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
13. In the past 10 years, have you been convicted ("convicted" includes paying a fine) in Oregon or another U.S. state of driving a car with a suspended driver license or driving a car with no insurance? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Please include explanation below) <input type="checkbox"/> Unsure (Please include explanation below)		
14. In the past 10 years, have you been convicted ("convicted" includes paying a fine) in Oregon or another U.S. state of a FELONY ? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Please include explanation below) <input type="checkbox"/> Unsure (Please include explanation below)		
15. Have you ever been in a drug or alcohol diversion program in Oregon or another U.S. 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. <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Please include explanation below) <input type="checkbox"/> Unsure (Please include explanation below)		

16. Do you, or any legal entity that you are a part of, currently hold or have previously held a liquor license or a recreational marijuana license in Oregon or another U.S. state? (Note: alcohol service permits and marijuana worker permits are not liquor licenses).

No Yes (Please include explanation below) Unsure (Please include explanation below)

I currently have LIMITED ON PREMISE and off Premise

17. 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 U.S.?

No Yes (Please include explanation below) Unsure (Please include explanation below)

18. Are you applying for a Full On-Premises, Limited On-Premises, Off-Premises, or Brewery-Public House license?

No Please skip questions 19 & 20. Go directly to question 21.

Yes Please answer questions 19, 20, and 21.

19. Do you or will you have any ownership interest in a business that manufactures, wholesales, or distributes alcohol in Oregon or another U.S. state?

No Yes (Please include explanation below) Unsure (Please include explanation below)

20. Does or will an alcohol manufacturer, wholesaler, or distributor in Oregon or another U.S. state have any ownership interest in your business?

No Yes (Please include explanation below) Unsure (Please include explanation below)

21. Do you currently have, or will you have, any ownership interest in any business in Oregon with a Full On-Premises, Limited On-Premises, Off-Premises, or Brewery-Public House license?

No Yes (Please include explanation below) Unsure (Please include explanation below)

You must sign your own form. Another person, like your attorney or a person with power of attorney, may not 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.

Name: (LAST)

James

(FIRST)

Shelley

(MIDDLE)

Marie

Signature:

Date:

1/3/2020



OREGON LIQUOR CONTROL COMMISSION
INDIVIDUAL HISTORY FORM

1. Name: (LAST) <u>James</u> (FIRST) <u>Michael</u> (MIDDLE) <u>Kent</u>
2. Other Names Used (Maiden, Etc.):
3. Do you have a Social Security Number (SSN) issued by the U.S. Social Security Administration? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide your SSN: _____
<p>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 indicate below.</p> <p>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)).</p> <p>Do you voluntarily consent to the OLCC's use of your SSN as just described? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
4. Date of Birth (MM/DD/YYYY): _____ Contact Phone: _____
6. Driver License or State ID #: _____ 7. State: <u>OR.</u>
8. Residence Address: _____
9. Mailing Address (if different): _____
10. E-Mail (optional): _____
11. Do you have a spouse or domestic partner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list his/her full name: <u>Shelley M. James</u>
12. If yes to #11, will this person be involved in the management of, or have control over the business? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
13. In the past 10 years, have you been convicted ("convicted" includes paying a fine) in Oregon or another U.S. state of driving a car with a suspended driver license or driving a car with no insurance? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Please include explanation below) <input type="checkbox"/> Unsure (Please include explanation below)
14. In the past 10 years, have you been convicted ("convicted" includes paying a fine) in Oregon or another U.S. state of a FELONY ? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Please include explanation below) <input type="checkbox"/> Unsure (Please include explanation below)
15. Have you ever been in a drug or alcohol diversion program in Oregon or another U.S. 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. <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Please include explanation below) <input type="checkbox"/> Unsure (Please include explanation below)

16. Do you, or any legal entity that you are a part of, currently hold or have previously held a liquor license or a recreational marijuana license in Oregon or another U.S. state? (Note: alcohol service permits and marijuana worker permits are not liquor licenses).

No Yes (Please include explanation below) Unsure (Please include explanation below)

17. 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 U.S.?

No Yes (Please include explanation below) Unsure (Please include explanation below)

18. Are you applying for a Full On-Premises, Limited On-Premises, Off-Premises, or Brewery-Public House license?

No Please skip questions 19 & 20. Go directly to question 21.
 Yes Please answer questions 19, 20, and 21.

19. Do you or will you have any ownership interest in a business that manufactures, wholesales, or distributes alcohol in Oregon or another U.S. state?

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20. Does or will an alcohol manufacturer, wholesaler, or distributor in Oregon or another U.S. state have any ownership interest in your business?

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21. Do you currently have, or will you have, any ownership interest in any business in Oregon with a Full On-Premises, Limited On-Premises, Off-Premises, or Brewery-Public House license?

No Yes (Please include explanation below) Unsure (Please include explanation below)

You must sign your own form. Another person, like your attorney or a person with power of attorney, may not 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.

Name: (LAST)

James

(FIRST)

Michael

(MIDDLE)

Kent

Signature:

Michael James

Date:

11/7/2020



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: US 4's LLC Shelley M James Phone: 541-374-9310

Trade Name (dba): Cascade Locks Alo House

Business Location Address: 500 WaNa Pa St.

City: Cascade Locks ZIP Code: 97044

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>12</u> to <u>9</u>
Monday	<u>12</u> to <u>9</u>
Tuesday	<u>CLOSED</u>
Wednesday	<u>12</u> to <u>9</u>
Thursday	<u>12</u> to <u>9</u>
Friday	<u>12</u> to <u>9</u>
Saturday	<u>12</u> to <u>9</u>

Outdoor Area Hours:

Sunday	<u>12</u> to <u>9</u>
Monday	<u>12</u> to <u>9</u>
Tuesday	<u>CLOSED</u>
Wednesday	<u>12</u> to <u>9</u>
Thursday	<u>12</u> to <u>9</u>
Friday	<u>12</u> to <u>9</u>
Saturday	<u>12</u> to <u>9</u>

The outdoor area is used for:

Food service Hours: 12 to 9

Alcohol service Hours: 12 to 9

Enclosed, how CAMERA ESERVE

FENCED

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: _____

DAYS & HOURS OF LIVE OR DJ MUSIC

Sunday	_____ to _____
Monday	_____ to _____
Tuesday	_____ to _____
Wednesday	_____ to _____
Thursday	_____ to _____
Friday	_____ to _____
Saturday	_____ to _____

SEATING COUNT

Restaurant: 60 Outdoor: 40

Lounge: _____ Other (explain): _____

Banquet: _____ Total Seating: _____

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: [Signature] Date: 1/3/2020

