

BEFORE THE BOARD OF COUNTY COMMISSIONERS
OF MARION COUNTY, STATE OF OREGON

Change in Ownership

NO. 20148

In the Matter of the Application of

For a recommendation regarding the
application to the Oregon Liquor
Control Commission for

24 SEP 13 P2 01

RECOMMENDATION

MARION COUNTY CLERK

This matter coming before the Board of County Commissioners on the application of

Wynona LLC - DBA Tiki Lounge for a recommendation to the Oregon
Liquor Control Commission under the provisions of ORS 471.166; and the Board having referred
said application to the Sheriff of Marion County, Oregon, and having the report of said Sheriff that
the applicant has not been convicted of a crime involving a violation of the liquor control laws, or
the gambling laws, or of crimes involving moral turpitude, and that the applicant is of good moral
character, a citizen of the United States of America, and otherwise qualified to be licensed under
the Oregon Liquor Control Act;

IT IS, THEREFORE RECOMMENDED TO THE OREGON LIQUOR CONTROL COMMISSION
that the application of the above be refused _____ granted _____.

Dated at Salem, Marion County, Oregon this _____ day of _____, 20_____.

_____ County Commissioner

_____ County Commissioner

_____ County Commissioner

Approved by _____

County Sheriff

9/19/24

REC'D SEP 25 2024

LIQUOR LICENSE APPLICATION

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Check the appropriate license request option:

☒ New Outlet | ☐ Change of Ownership | ☐ Greater Privilege | ☐ Additional Privilege

Select the license type you are applying for.

More information about all license types is available [online](#).

Full On-Premises

- ☒ Commercial
☐ Caterer
☐ Public Passenger Carrier
☐ Other Public Location
☐ For Profit Private Club
☐ Nonprofit Private Club

Winery

- ☐ Primary location
Additional locations: ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th

Brewery

- ☐ Primary location
Additional locations: ☐ 2nd ☐ 3rd

Brewery-Public House

- ☐ Primary location
Additional locations: ☐ 2nd ☐ 3rd

Grower Sales Privilege

- ☐ Primary location
Additional locations: ☐ 2nd ☐ 3rd

Distillery

- ☐ Primary location
Additional tasting locations: (Use the DISTT form HERE)

☐ Limited On-Premises

☐ Off Premises

☐ Warehouse

☐ Wholesale Malt Beverage and Wine

LOCAL GOVERNMENT USE ONLY

LOCAL GOVERNMENT
After providing your recommendation, return this form to the applicant **WITH** the recommendation marked below

Name of City OR County (not both)

Please make sure the name of the Local Government is printed legibly or stamped below

Date application received:

Optional: Date Stamp Received Below

- ☐ Recommend this license be granted
☐ Recommend this license be denied
☐ No Recommendation/Neutral

Printed Name

Date

Signature

Trade Name

LIQUOR LICENSE APPLICATION

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APPLICANT INFORMATION

Identify the applicants applying for the license. This is the entity (example: corporation or LLC) or individual(s) applying for the license. Please add an additional page if more space is needed.

Name of entity or individual applicant #1:

Wyman 2 LLC

Name of entity or individual applicant #2:

Name of entity or individual applicant #3:

Name of entity or individual applicant #4:

BUSINESS INFORMATION

Trade Name of the Business (name customers will see):

Tiki Lounge

Premises street address (The physical location of the business and where the liquor license will be posted):

165 Lancaster Dr SE, Salem, OR

City:

Salem

Zip Code:

97317

County:

Marion

Business phone number:

678-201-8828

Business email:

Waylon.Wyman@gmail.com

Business mailing address (where we will send any items by mail as described in OAR 845-004-0065[1]):

City:

State:

Zip Code:

Does the business address currently have an OLCC liquor license? ☒ Yes ☐ No

Does the business address currently have an OLCC marijuana license? ☐ Yes ☐ No

APPLICATION CONTACT INFORMATION – Provide the point of contact for this application. If this individual is not an applicant or licensee, the Authorized Representative Form must be completed and submitted with this application.

Application Contact Name:

Waylon Wyman

Phone number:

678-201-8828

Email:

Waylon.Wyman@gmail.com

LIQUOR LICENSE APPLICATION

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TERMS

- “Real property” means the real estate (land) and generally whatever is erected or affixed to the land (for example, the building) at the business address.
- “Common area” is a privately owned area where two or more parties (property tenants) have permission to use the area in common. Examples include the walking areas between stores at a shopping center, lobbies, hallways, patios, parking lots, etc. An area’s designation as a “common area” is typically identified in the lease or rental agreement.

ATTESTATION – OWNERSHIP AND CONTROL OF THE BUSINESS AND PREMISES

- Each applicant listed in the “Application Information” section of this form has read and understands OAR 845-005-0311 and attests that:
 1. At least one applicant listed in the “Application Information” section of this form has the legal right to occupy and control the real property proposed to be licensed as shown by a property deed, lease, rental agreement, or similar document.
 2. No person not listed as an applicant in the “Application Information” section of this form has an ownership interest in the business proposed to be licensed, unless the person qualifies to have that ownership interest waived under OAR 845-005-0311.
 3. The licensed premises at the premises street address proposed to be licensed either:
 - a. Does not include any common areas; or
 - b. Does include one or more common areas; however, only the applicant(s) have the exclusive right to engage in alcohol sales and service in the area to be included as part of the licensed premises.
 - In this circumstance, the applicant(s) acknowledges responsibility for ensuring compliance with liquor laws within and in the immediate vicinity of the licensed premises, including in portions of the premises that are situated in “common areas” and that this requirement applies at all times, even when the business is closed.
 4. The licensed premises at the premises street address either:
 - a. Has no area on property controlled by a public entity (like a city, county, or state); or
 - b. Has one or more areas on property controlled by a public entity (like a city, county, or state) and the public entity has given at least one of the applicant(s) permission to exercise the privileges of the license in the area.

LIQUOR LICENSE APPLICATION

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Applicant Signature(s): Each individual listed in the applicant information box on page 2 (entity or individuals applying for the license) must sign the application.

If an applicant listed in the applicant information box on page 2 is an entity (such as a corporation or limited liability company), at least one member or officer of the entity must sign the application.

- Each applicant listed in the "Application Information" section of this form has read and understands OAR 845-006-0362 and attests that:

1. Upon licensure, each licensee is responsible for the conduct of others on the licensed premises, including in outdoor areas.
2. The licensed premises will be controlled to promote public safety and prevent problems and violations, with particular emphasis on preventing minors from obtaining or consuming alcoholic beverages, preventing over-service of alcoholic beverages, preventing open containers of alcoholic beverages from leaving the licensed premises unless allowed by OLCC rules, and preventing noisy, disorderly, and unlawful activity on the licensed premises.

I attest that all answers on all forms and documents, and all information provided to the OLCC as a part of this application, are true and complete.

| | | |
|----------------------|--------------------|----------------|
| <u>Waylon Wymore</u> | <u>[Signature]</u> | <u>9/13/24</u> |
| Applicant name | Signature | Date |
| <hr/> | <hr/> | <hr/> |
| Applicant name | Signature | Date |
| <hr/> | <hr/> | <hr/> |
| Applicant name | Signature | Date |
| <hr/> | <hr/> | <hr/> |
| Applicant name | Signature | Date |
| <hr/> | <hr/> | <hr/> |
| Applicant name | Signature | Date |

Applicant/Licensee Representative(s): If you would like to designate a person/entity to act on your behalf you must complete the Authorized Representative Form. You may submit the form with the application or anytime thereafter. The form must be received by the OLCC before the representative can receive or submit information for the applicant.

Please note that applicants/licensees are responsible for all information provided, even if an authorized representative submits additional forms on behalf of the applicant.



OREGON LIQUOR & CANNABIS COMMISSION
ENTITY STRUCTURE REQUEST FORM

Application Information:

| | |
|-------------------------|----------------------------------|
| Applicant Name (Entity) | Entity Type (LLC, Corp, LP, LLP) |
| Wyman 2 LLC | Choose One LLC |
| Business Tradename | |
| Tiki Lounge | |

Limited Liability Company: Please list contact information for all 20% or more members and any managers of the entity below.

Corporation: Please list contact information for all officers, directors with 3% or more voting stock and individuals or entities holding 20% or more of the issued stock below.

*If an entity has 20% or more membership, or owns 20% or more stock in an entity applicant, they must submit an additional form with their entity structure information.

Entity Structure & Contact Information:

| | | |
|---|--------------------------------------|-------------|
| Name of Member/Manager, or Officer/Director/Stockholder * | Title | Ownership % |
| Waylon Wyman | Choose One or Type Multiple Title(s) | |
| | | |
| Email: Waylon.Wyman@gmail.com | Phone: 678-201-8828 | |

| | | |
|---|--------------------------------------|-------------|
| Name of Member/Manager, or Officer/Director/Stockholder * | Title | Ownership % |
| | Choose One or Type Multiple Title(s) | |
| Mailing Address: | City: | State: Zip: |
| Email: | Phone: | |

| | | |
|---|------------------------------------|-------------|
| Name of Member/Manager, or Officer/Director/Stockholder * | Title | Ownership % |
| | Choose One or Type Multiple Titles | |
| Mailing Address: | City: | State: Zip: |
| Email: | Phone: | |

| | | |
|---|------------------------------------|-------------|
| Name of Member/Manager, or Officer/Director/Stockholder * | Title | Ownership % |
| | Choose One or Type Multiple Titles | |
| Mailing Address: | City: | State: Zip: |
| Email: | Phone: | |

| | | |
|---|------------------------------------|-------------|
| Name of Member/Manager, or Officer/Director/Stockholder * | Title | Ownership % |
| | Choose One or Type Multiple Titles | |
| Mailing Address: | City: | State: Zip: |
| Email: | Phone: | |

| | | |
|---|------------------------------------|-------------|
| Name of Member/Manager, or Officer/Director/Stockholder * | Title | Ownership % |
| | Choose One or Type Multiple Titles | |
| Mailing Address: | City: | State: Zip: |
| Email: | Phone: | |

If you need additional space for your entity structure, please attach additional documentation with the membership and contact information of the persons/entities we are requesting.

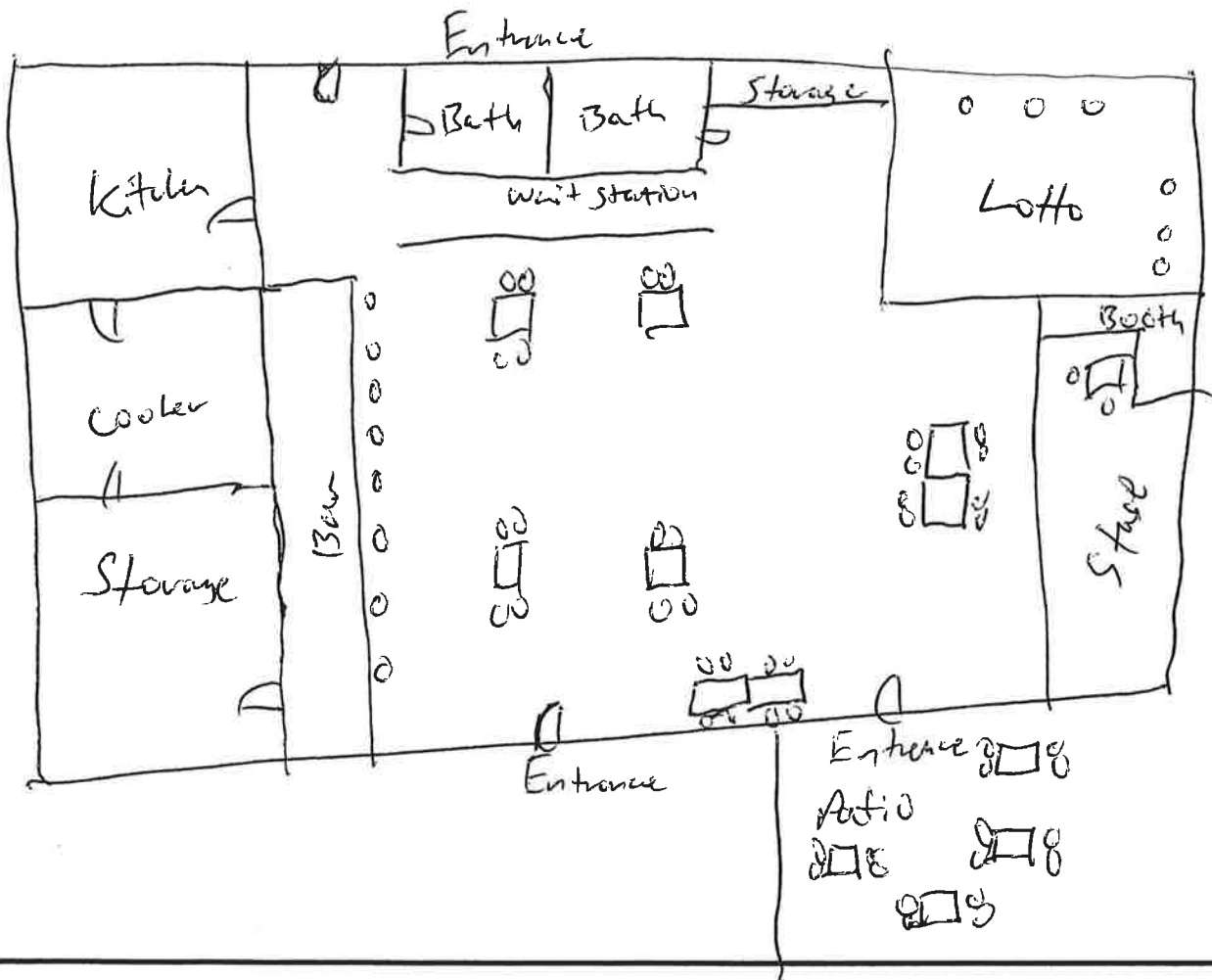


FLOOR PLAN FORM

Your floor plan must be submitted on this form

Waylon Wymer
Applicant Name

Tiki Lunge
Trade Name (dba)



.....OLCC USE ONLY.....
MINOR POSTING ASSIGNMENT(S)

Date: _____ Initials: _____



OREGON LIQUOR & CANNABIS COMMISSION BUSINESS INFORMATION – LIQUOR LICENSE

| | |
|-------------------------|---------------------|
| Applicant Name | Waylon Wymore |
| Trade Name | Tiki Lounge |
| Premises Street Address | 165 Lancaster Dr SE |
| License Type | Full On Premise |

| | |
|------------------|-------------------------|
| Business Contact | Waylon Wymore |
| Mailing Address | [REDACTED] |
| Phone Number | 678-201-8828 |
| Email Address | Waylon.Wymore@gmail.com |

Operating Hours

| Day of Week | Open Time | Closed Time | Seasonal Variation | Explanation |
|-------------|-----------|-------------|------------------------------|---|
| Monday | 11 AM | 12 AM | Yes <input type="checkbox"/> | |
| Tuesday | | | | |
| Wednesday | | | | |
| Thursday | | | <input type="checkbox"/> | Not open to the public or by appointment only |
| Friday | | 2 AM | | |
| Saturday | | 2 AM | | |
| Sunday | | 12 AM | | |

Seating

Restaurant Seating: 40 Outdoor Seating: 20 Other Seating: N/A

☐ No On-Premises Consumption

ENTERTAINMENT

Check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> Live Music | <input checked="" type="checkbox"/> Video Lottery Machines |
| <input type="checkbox"/> Recorded Music | <input type="checkbox"/> Nude Dancing |
| <input checked="" type="checkbox"/> DJ Music | <input type="checkbox"/> Live Entertainment |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Minor Entertainers |
| <input checked="" type="checkbox"/> Karaoke | <input type="checkbox"/> Minor Entertainers in an Area Prohibited to Minors |
| <input checked="" type="checkbox"/> Coin-operated Games | <small>**Need prior OLCC approval</small> |
| <input type="checkbox"/> Social Gaming | |
| <input checked="" type="checkbox"/> Pool Tables | <input type="checkbox"/> Other: |