



# HERMISTON POLICE DEPARTMENT



330 S. First Street  
Hermiston, Oregon 97838  
[www.hermiston.or.us/police/home](http://www.hermiston.or.us/police/home)  
*Sine Metu Sine Gratia*

Phone: 541-567-5519  
Fax: 541-567-8469  
Email: [records@hermiston.or.us](mailto:records@hermiston.or.us)  
*Without Fear Without Favor*

TO: City Manager Byron Smith  
FROM: Chief Jason Edmiston   
DATE: July 7<sup>th</sup>, 2020  
SUBJECT: Liquor License Application – Delish Bistro

After review of the liquor license application for "Full On-Premises, Commercial" for Delish Bistro located at 1619 N 1<sup>st</sup> Street, Hermiston, I find nothing of substance after performing a criminal history check consistent with established parameters utilized by the city, to deny the application submitted by Carol Hull, La Nae Hull, and Herman Hull.

It is my recommendation this information/request be presented to the City Council.

CC: City Recorder Lilly Alarcon-Strong

From: lhull@delishbistro.com  
Subject: Re: Automatic reply: Delish Bistro OLCC Application  
Date: June 22, 2020 at 11:39 AM  
To: HILDEBRAND Eric \* OLCC Eric.Hildebrand@oregon.gov



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 1st Location	Date application received and/or date stamp:
<input type="checkbox"/> Brewery 2nd Location	07 02 2020
<input type="checkbox"/> Brewery 3rd Location	Name of City or County:
<input type="checkbox"/> Brewery-Public House 1st Location	Hermiston
<input type="checkbox"/> Brewery-Public House 2nd Location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 3rd Location	<input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Distillery	By: _____
<input checked="" type="checkbox"/> Full On-Premises, Commercial	Date: _____
<input type="checkbox"/> Full On-Premises, Caterer	
<input type="checkbox"/> Full On-Premises, Passenger Carrier	
<input type="checkbox"/> Full On-Premises, Other Public Location	
<input type="checkbox"/> Full On-Premises, For Profit Private Club	
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	
<input type="checkbox"/> Grower Sales Privilege 1st Location	
<input type="checkbox"/> Grower Sales Privilege 2nd Location	
<input type="checkbox"/> Grower Sales Privilege 3rd Location	
<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 1st Location	
<input type="checkbox"/> Winery 2nd Location	
<input type="checkbox"/> Winery 3rd Location	
<input type="checkbox"/> Winery 4th Location	
<input type="checkbox"/> Winery 5th Location	

2. Identify the applicant(s) applying for the license(s). ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license(s):

Delish Bistro LLC

(Applicant #1)

*Thomas L. Hull*

(Applicant #2)

(Applicant #3)

(Applicant #4)

3. Trade Name of the Business (Name Customers Will See)		
Delish Bistro		
4. Business Address (Number and Street Address of the Location that will have the liquor license)		
1619 N 1st St		
City	County	Zip Code
Hermiston		



OREGON LIQUOR CONTROL COMMISSION

## LIQUOR LICENSE APPLICATION

5. Trade Name of the Business (Name Customers Will See) <b>Delish Bistro</b>			
6. Does the business address currently have an OLCC liquor license? <input type="checkbox"/> YES <input checked="" 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 257			
City Hermiston		State OR	Zip Code 97838
9. Phone Number of the Business Location (541)303-9006		10. Email Contact for this Application lhull@delishbistro.com	
11. Contact Person for this Application La Nae Hull		Phone Number (541)701-4305	
Contact Person's Mailing Address (if different) 720 E Quince Ave	City Hermiston	State OR	Zip Code 97838

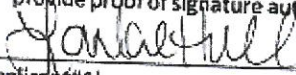
Please note that liquor license applications are public records. A copy of the application will be posted on the OLCC website for a period of several weeks.

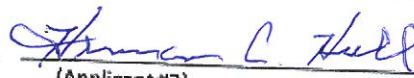
I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is **prohibited** on the licensed premises.

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)

