

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

NO. 20157

In the Matter of the Application of

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

RECOMMENDATION

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

Guest Services Management, LLC

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

5-29-2025

**Local Government Recommendation – Liquor License****Annual Liquor License Types**

Off-Premises Sales	Brewery-Public House
Limited On-Premises Sales	Brewery
Full On-Premises, Caterer	Distillery
Full On-Premises, Commercial	Grower Sales Privilege
Full On-Premises, For Profit Private Club	Winery
Full On-Premises, Non Profit Private Club	Wholesale Malt Beverage & Wine
Full On-Premises, Other Public Location	Warehouse
Full On-Premises, Public Passenger Carrier	

Section 1 – Submission – To be completed by Applicant:**License Information**

Legal Entity/Individual Applicant Name(s): Guest Services Management, LLC

Proposed Trade Name: Big Leaf Grill

Premises Address: 20022 Silver Falls Hwy SE

Unit:

City: Sublimity

County: Marion

Zip: 97385

Application Type: ☒ New License Application ☐ Change of Ownership ☐ Change of Location

License Type: F-COM

☐ Additional Location for an Existing License**Application Contact Information**

Contact Name: JJ Condella

Phone: (503) 528-4253

Mailing Address: 3055 Prosperity Ave

City: Fairfax

State: VA

Zip: 22031

Email Address: businesslicensing@guestservices.com

Business Details

Please check all that apply to your proposed business operations at this location:

☐ Manufacturing/Production☒ Retail Off-Premises Sales☒ Retail On-Premises Sales & Consumption

If there will be On-Premises Consumption at this location:

☒ Indoor Consumption☒ Outdoor Consumption☐ Proposing to Allow Minors**Section 1 continued on next page**



Local Government Recommendation – Liquor License

Section 1 Continued – Submission - To be completed by Applicant:

Legal Entity/Individual Applicant Name(s): Guest Services Management, LLC

Proposed Trade Name: Big Leaf Grill

IMPORTANT: You MUST submit this form to the local government PRIOR to submitting to OLCC.
Section 2 must be completed **by the local government** for this form to be accepted
with your CAMP application.

Section 2 – Acceptance - To be completed by Local Government:

Local Government Recommendation Proof of Acceptance

After accepting this form, please return a copy to the applicant with received and accepted information

City or County Name:

Optional Date Received Stamp

Date Application Received:

Received by:

Section 3 – Recommendation - To be completed by Local Government:

- ☐ Recommend this license be granted
- ☐ Recommend this license be denied (Please include documentation that meets [OAR 845-005-0308](#))
- ☐ No Recommendation/Neutral

Name of Reviewing Official:

Title:

Date:

Signature:

After providing your recommendation and signature, please return this form to the applicant.



OREGON LIQUOR & CANNABIS COMMISSION
BUSINESS INFORMATION – LIQUOR LICENSE

Applicant Name	Guest Services Management, LLC	Business Contact	JJ Condella
Trade Name	Big Leaf Grill	Mailing Address	3055 Prosperity Ave Fairfax, VA 22031
Premises Street Address	20022 Silver Falls Hwy SE Sublimity, OR 97385	Phone Number	(503) 528-4253
License Type	F-COM	Email Address	businesslicensing@guestservices.com

Operating Hours

<u>Day of Week</u>	<u>Open Time</u>	<u>Closed Time</u>	<u>Seasonal Variation</u>	<u>Explanation</u>
Sunday	8:00 AM	8:PM	Yes <input type="checkbox"/>	
Monday	8:00 AM	8:PM		
Tuesday	8:00 AM	8:PM		
Wednesday	8:00 AM	8:PM	<input type="checkbox"/>	Not open to the public or by appointment only
Thursday	8:00 AM	8:PM		
Friday	8:00 AM	8:PM		
Saturday	8:00 AM	8:PM		

Seating

Restaurant Seating: 48 Outdoor Seating: 132 Other Seating: _____

☐ No On-Premises Consumption

ENTERTAINMENT

Check all that apply:

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

MARION COUNTY
BILL BURGESS
MARION COUNTY CLERK

Receipt #: 58893

Receipt Date: 05/22/2025 09:54 AM

Station: 37

Cashier: DEB

Receipt Name: GUEST SERVICES

Comments:

Thank You!

BILL BURGESS, MARION COUNTY CLERK

Please retain this receipt for your records.

Documents are recorded as submitted. The Marion County Clerk's Office assumes no liability for sufficiency, validity, or accuracy.

Miscellaneous Fees

LIQUOR LICENSE FEE	YES	\$25.00
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Receipt Total		\$25.00
CHECK	883184	\$25.00