500

ORIGINAL

TRUST FUND NO. 46338

CITY OF PORTLAND, OREGON
DEPARTMENT OF FINANCE
BUREAU OF LICENSES

APPLICATION TO CITY OF PORTLAND FOR LICENSE

TO RENT ROOMS FOR LODGINGS FOR A PERIOD OF LESS THAN THIRTY DAYS APPLICATION IS HEREBY MADE for a license to operate a Hotel Treves Location 322 SW 11th Ave. Name of Place Number of rooms equipped for sleeping purposes 75 Other Rooms How long have you lived in Portland 20 yrs, Where 1963 W. Burnside. Do you read and write English Yes. What business or occupation have you followed the last five years Hotel prop. Were you ever arrested for violation of Federal, State or City laws / If so what was the Charge Who is the owner of the property Josephine Meyer — C; ty

(Name and Address)

Have you a lease Yes How long 3 yrs What rent 250 To whom paid Owners (Name and Address) GIVE NAMES OF (3) PROPERTY OWNERS AS REFERENCES 1 Tom Lukas — 1331 SW Washington St, years

2 Mrs. Banfield — 537 SW 12th Ave. years

3 Voe Meyer — 537 SW 12th Ave. JAN 3 years

Name

Address Date of Application /6/39 Bureau of License (Per) Referred to Health Dep't. 1-9,39 Returned APPROVED: Inspector of Licenses.