



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

3. Applicant #1 <i>KURA INC.</i>		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) <i>KURA SUSHI</i>			
5. Business Address (Number and Street Address of the Location that will have the liquor license) <i>8230 SE Harrison ST Ste 310</i>			
City <i>portland</i>	County <i>Multnomah</i>	Zip Code <i>97216</i>	
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) <i>8230 SE Harrison ST Suite 310</i>			
City <i>portland</i>	State <i>OR</i>	Zip Code <i>97236</i>	
9. Phone Number of the Business Location		Email Contact for this Application <i>TIM ZHEN 2010 @ yahoo.com</i>	
Contact Person for this Application <i>TIM ZHEN</i>		Phone Number <i>(971) 239-8688</i>	
Mailing Address <i>4619 FULTZ AVE N.E</i>	City <i>SALEM</i>	State <i>OR</i>	Zip Code <i>97301</i>

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.

Tim Zhen

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

pending DT

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:
<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"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Distillery	By: _____
<input type="checkbox"/> Full On-Premises, Commercial	Date: _____
<input type="checkbox"/> Full On-Premises, Caterer	<i>Rec'd by Portland Liquor Licenses</i>
<input type="checkbox"/> Full On-Premises, Passenger Carrier	<i>NOV 07 2018</i>
<input type="checkbox"/> Full On-Premises, Other Public Location	<i>PD \$75 ck</i>
<input type="checkbox"/> Full On-Premises, For Profit Private Club	<i># 353</i>
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	OLCC USE ONLY
<input type="checkbox"/> Grower Sales Privilege 1 st location	Date application received:
<input type="checkbox"/> Grower Sales Privilege 2 nd location	_____
<input type="checkbox"/> Grower Sales Privilege 3 rd location	By: _____
<input checked="" type="checkbox"/> Limited On-Premises	Date application accepted as initially complete:
<input type="checkbox"/> Off-Premises	_____
<input type="checkbox"/> Off-Premises with Fuel Pumps	By: <i>10-29-18</i>
<input type="checkbox"/> Warehouse	License Action(s): <i>cio c/n</i>
<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):

KURA INC.
(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY RECEIVED OCT 22 2018	OLCC FINANCIAL SERVICES USE ONLY
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OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: KURA INC. Phone: (471) 239-8688

Trade Name (dba): KURA SUSHI

Business Location Address: 8230 S.E Harrison ST STE 310

City: portland OR ZIP Code: 97216

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 11:00AM to 9:00pm
 Monday 11:00AM to 9:00pm
 Tuesday 11:00AM to 9:00pm
 Wednesday 11:00AM to 9:00pm
 Thursday 11:00AM to 9:00pm
 Friday 11:00AM to 9:00pm
 Saturday 11:00AM to 9:00pm

Outdoor Area Hours:

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

The outdoor area is used for:

- Food service Hours: _____ to _____
 Alcohol service Hours: _____ to _____
 Enclosed, how _____

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 Karaoke
 Recorded Music Coin-operated Games
 DJ Music Video Lottery Machines
 Dancing Social Gaming
 Nude Entertainers 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: 49 Outdoor: _____
 Lounge: _____ Other (explain): _____
 Banquet: _____ Total Seating: 49

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: 10-22-2018



OREGON LIQUOR CONTROL COMMISSION CORPORATION QUESTIONNAIRE

1487128-96

Please Print or Type

Corporation Name: KURA INC. Year Incorporated: 2018 ✓

Trade Name (dba): KURA SUSHI

Business Location Address: 8230 S.E. Harrison ST STE 310

City: Portland OR ZIP Code: 97216

List Corporate Officers:

<u>TIM ZHEN</u> (name)	<u>president</u> (title)
_____	_____
_____	_____
_____	_____

List Board of Directors:

<u>TIM ZHEN</u> (name)

List Stockholders: (Note: If any stockholder is another legal entity, that entity may also need to complete another Corporation Questionnaire. See Liquor License Application Guide for more information.)

<u>Stockholders:</u>	<u>Number of Shares Held:</u>	Number of Stock Shares:
<u>TIM ZHEN</u>	<u>100</u>	Issued: _____
_____	_____	Unissued: _____
_____	_____	Total Shares Authorized to Issue: _____
_____	_____	

Server Education Designee: TIM ZHEN DOB: 03-11-1981
(See Liquor License Application Guide for more information)

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

Officer's Signature: Tim Zhen president Date: 10-27-2018
(name) (title)

CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

PLEASE SUBMIT TO: Liquor Licensing Notification Program, 1221 SW 4th Avenue, Suite #110, Portland OR 97204

On New Outlet applications, property owners within 300 feet of the location, the Portland Police Bureau and all interested parties are notified by mail (with a copy of this form) and given an opportunity to comment on your application. The OLCC allows the City at least 45 days to complete the recommendation process. Submission of a complete operating plan can expedite the time required to process. A City liquor endorsement is not a confirmation that the property is properly zoned. Call (503) - 823-7526 to confirm that the property is properly zoned.

On submission of this form, you must also include the following:

- OLCC Liquor Application Form, initialed by your OLCC License Investigator
- OLCC Individual History Forms (all persons anticipated to have a financial interest, or key personnel are required)
- City Endorsement Fees

City Endorsement Fees are payable at the beginning of the application process (please make checks payable to City of Portland): New outlets are \$100.00, all others are \$75.00. All blank sections must be filled in. If the question does not apply, write "N/A" in the space.

LEGAL NAME OF BUSINESS: KURA INC.

DBA OR TRADE NAME: KURA Sashi PHONE: (971)239-8688 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 8230 S.E Harrison ST Portland OR 97216

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): _____

CONTACT PERSON: TIM ZHEN PHONE: (971)239-8688 EMAIL: TIM_ZHEN2010@yahoo.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- Food Cart Night Club
 Restaurant Sports Bar
 Convenience Store Other: _____

SIZE OF SERVICE AREA: _____

EXISTING BUILDING: Yes No

ZONING: _____

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: 40 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: Video Camera

HAS AN APPLICATION FOR A LIQUOR LICENSE AT THIS LOCATION BEEN RECEIVED BY THE CITY OF PORTLAND IN THE LAST TWO (2) YEARS?
 Yes No I Don't Know

HOURS OF OPERATION

SUNDAY - THURSDAY OPEN: 11:00 AM CLOSE: 9:00 PM FRIDAY & SATURDAY OPEN: 11:00 AM CLOSE: 9:00 PM

HOW LATE WILL THERE BE OUTSIDE SEATING? _____ HOW LATE WILL THERE BE ENTERTAINMENT? _____

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: _____

NAME & ADDRESS OF PROPERTY OWNER: _____

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- Dancing Video Poker Live Music Nude Dancers
 Karaoke Video Games/Pinball Recorded Music DJ Entertainment
 Pool Tables (How Many): _____ Events (Describe): _____ Other: _____

The City requires an **Amusement Location Permit** for all locations with amusement devices or pool tables. **Contact the Revenue Bureau for rules and an Amusement Location Permit application form now.** Permits are non-transferable from one owner to another and must be paid before games are placed on the premises. Contact Anne Holm at 503-865-2488. The City of Portland will notify affected nearby neighbors and a copy of this form will be included in our mailing.

Use this area to provide any additional information that you wish to be considered on this liquor application

A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: Tim Zhen DATE: 11-7-2018