



# LIQUOR LICENSE APPLICATION

*pending*

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 <sup>st</sup> Location	Date application received:
<input type="checkbox"/> Brewery 2 <sup>nd</sup> Location	_____
<input type="checkbox"/> Brewery 3 <sup>rd</sup> Location	Name of City or County:
<input type="checkbox"/> Brewery-Public House 1 <sup>st</sup> location	_____
<input type="checkbox"/> Brewery-Public House 2 <sup>nd</sup> location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 3 <sup>rd</sup> 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	<b>DEC 31 2018</b>
<input type="checkbox"/> Full On-Premises, Other Public Location	PD <i>CK-75-00</i>
<input type="checkbox"/> Full On-Premises, For Profit Private Club	# <i>177</i>
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	<b>OLCC USE ONLY</b>
<input type="checkbox"/> Grower Sales Privilege 1 <sup>st</sup> location	Date application received:
<input type="checkbox"/> Grower Sales Privilege 2 <sup>nd</sup> location	<i>11-30-18</i>
<input type="checkbox"/> Grower Sales Privilege 3 <sup>rd</sup> location	By: <i>JA</i>
<input checked="" type="checkbox"/> Limited On-Premises	Date application accepted as initially complete:
<input type="checkbox"/> Off-Premises	<i>12-13-18</i>
<input type="checkbox"/> Off-Premises with Fuel Pumps	By: <i>JA</i>
<input type="checkbox"/> Warehouse	License Action(s): <i>C/O</i>
<input type="checkbox"/> Wholesale Malt Beverage & Wine	
<input type="checkbox"/> Winery 1 <sup>st</sup> Location	
<input type="checkbox"/> Winery 2 <sup>nd</sup> Location	
<input type="checkbox"/> Winery 3 <sup>rd</sup> Location	

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

AAA RESTAURANT GROUP LLC

(Applicant #1)

(Applicant #2)

(Applicant #3)

(Applicant #4)

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY
<p>RECEIVED</p> <p>NOV 30 2018</p> <p>Initials: <i>JA</i></p> <p>Oregon Liquor Control Commission</p>	



# LIQUOR LICENSE APPLICATION

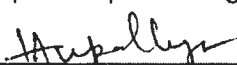
3. Applicant #1 AAA RESTAURANT GROUP LLC		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See) INDIA HOUSE			
5. Business Address (Number and Street Address of the Location that will have the liquor license) 1038 SW MORRISON STREET			
City PORTLAND	County MULTNOMAH	Zip Code 97205	
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) 17660 NW CORNELL ROAD APT 4			
City BEAVERTON	State OREGON	Zip Code 97006	
9. Phone Number of the Business Location 503-274-1017		Email Contact for this Application Amitupadhyay01@yahoo.com	
Contact Person for this Application AMIT UPADHYAY		Phone Number 408-718-9491	
Mailing Address 17660 NW CORNELL ROAD APT 4	City BEAVERTON	State OR	Zip Code 97006

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)



# OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: AAA RESTAURANT GROUP LLC Phone: 503-274-1017

Trade Name (dba): INDIA HOUSE

Business Location Address: 1038 SW MORRISON STREET

City: PORTLAND ZIP Code: 97205

## DAYS AND HOURS OF OPERATION

### Business Hours:

Sunday 10 AM to 10 PM  
Monday 10 AM to 10 PM  
Tuesday 10 AM to 10 PM  
Wednesday 10 AM to 10 PM  
Thursday 10 AM to 10 PM  
Friday 10 AM to 12 AM  
Saturday 10 AM to 12 AM

### Outdoor Area Hours:

Sunday 10 AM to 9 PM  
Monday 10 AM to 9 PM  
Tuesday 10 AM to 9 PM  
Wednesday 10 AM to 9 PM  
Thursday 10 AM to 9 PM  
Friday 10 AM to 10 PM  
Saturday 10 AM to 10 PM

The outdoor area is used for:

- Food service Hours: 10 AM to 9 PM  
 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: 40-50 Outdoor: 12-16  
Lounge: \_\_\_\_\_ Other (explain): \_\_\_\_\_  
Banquet: \_\_\_\_\_ Total Seating: \_\_\_\_\_

**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: *Douglas* Date: 11-30-2018

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1491202-97

DLCC-ACT 440 10-31-19 ✓

Please Print or Type

LLC Name: AAA RESTAURANT Group LLC Year Filed: 2018 ✓

Trade Name (dba): INDIA HOUSE

Business Location Address: 1038 SW MORRISON STREET

City: PORTLAND ZIP Code: 97205

List Members of LLC:

Percentage of Membership Interest:

1. <u>AMIT UPADHYAY</u> (managing member)	<u>34 %</u>
2. <u>ARYIND KUMAR</u> (members)	<u>33 %</u>
3. <u>ANIL KUMAR YADALAM</u>	<u>33 %</u>
4. _____	_____
5. _____	_____
6. _____	_____

(Note: If any LLC member is another legal entity, that entity must also complete an LLC, Limited Partnership or Corporation Questionnaire. If the LLC has officers, please list them on a separate sheet of paper with their titles.)

Server Education Designee: AMIT UPADHYAY DOB: 08/01/1979

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

Signature: [Signature] Date: 11/30/18  
(name) (title)

# CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

PLEASE SUBMIT TO: Liquor Licensing Notification Program, 1221 SW 4<sup>th</sup> 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: AAA Restaurant Group LLC

DBA OR TRADE NAME: India House PHONE: 503-274-1017 FAX: N/A

BUSINESS ADDRESS (Including ZIP Code): 1038 SW Morrison Street

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

CONTACT PERSON: Arvind Kumar PHONE: 408-368-1540 EMAIL: arvind3462@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: ~1763 Square feet

EXISTING BUILDING:  Yes  No

ZONING: CX

STRUCTURAL CHANGES (DESCRIBE): \_\_\_\_\_

RESTAURANT SEATING CAPACITY: 40-50 LOUNGE SEATING CAPACITY: N/A OUTSIDE SEATING CAPACITY: 12-16

DESCRIBE SECURITY: Security Cameras Alarm Lock.

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: 10 AM CLOSE: 10 PM FRIDAY & SATURDAY OPEN: 10 AM CLOSE: 12 AM

HOW LATE WILL THERE BE OUTSIDE SEATING? 9 PM HOW LATE WILL THERE BE ENTERTAINMENT? 10 PM

### HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: DBA Name: India House

NAME & ADDRESS OF PROPERTY OWNER: Parsons Farnell & Grzein LLP, 1030 SW Morrison St Portland 97203  
Attn: John D. Parsons

### 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: Arvind DATE: 12-31-2018