



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 1 st Location | Date application received: |
| <input type="checkbox"/> Brewery 2 nd Location | Name of City or County: |
| <input type="checkbox"/> Brewery 3 rd Location | Recommends this license be: |
| <input type="checkbox"/> Brewery-Public House 1 st location | <input type="checkbox"/> Granted <input type="checkbox"/> Denied |
| <input type="checkbox"/> Brewery-Public House 2 nd location | By: _____ |
| <input type="checkbox"/> Brewery-Public House 3 rd location | Date: _____ |
| <input type="checkbox"/> Distillery | |
| <input checked="" type="checkbox"/> Full On-Premises, Commercial | |
| <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 1 st location | |
| <input type="checkbox"/> Grower Sales Privilege 2 nd location | |
| <input type="checkbox"/> Grower Sales Privilege 3 rd location | |
| <input checked="" type="checkbox"/> Limited On-Premises <i>non-gran 8-28-19</i> | |
| <input type="checkbox"/> Off-Premises <i>RS</i> | |
| <input type="checkbox"/> Off-Premises with Fuel Pumps | |
| <input type="checkbox"/> Warehouse | |
| <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 | |

| OLCC USE ONLY |
|--|
| Date application received: <i>8/16/19</i> |
| By: <i>Jan Z.</i> |
| Date application accepted as initially complete: <i>8/19/19</i> |
| By: <i>Jan Z.</i> |
| License Action(s): <i>C/O + C/TN + G/P/R</i> |

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

Haw LLC
 (Applicant #1) *Hyoang Sup Lee* (Applicant #2) *Jenny Unok YU*
 (Applicant #3) *Yu Jin Chae* (Applicant #4) *Eun Hyeo Kim*

| OLCC USE ONLY | OLCC FINANCIAL SERVICES USE ONLY |
|---------------|----------------------------------|
| | |

APPLICANT IS HYOUNG SUP LEE & JENNY UNOK YU PER ORAL 8-28-19 RS

Rec'd by Portland Liquor Licenses
 SEP 04 2019
 PD \$75 CK
 * 994



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

| | | | |
|--|--------------------|---|--------------------------|
| 3. Applicant #1 <u>Hyoung Sup Lee</u> | | Applicant #2 <u>Jenny Unok Yu</u> | |
| Applicant #3 <u>Yu Jin Chae</u> | | Applicant #4 <u>Em Hye Kim</u> | |
| 4. Trade Name of the Business (Name Customers Will See) <u>HARU SUSHI One Restaurant</u> | | | |
| 5. Business Address (Number and Street Address of the Location that will have the liquor license) <u>6516 N Denver Ave</u> | | | |
| City <u>Portland</u> | OR | County | Zip Code <u>97217</u> |
| 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) <u>2014 SW Nancy Dr</u> | | | |
| City <u>Gresham</u> | State <u>OR</u> | Zip Code <u>97080</u> | |
| 9. Phone Number of the Business Location | | Email Contact for this Application <u>Juncky@hotmail.com</u> | |
| Contact Person for this Application <u>Hyoung Sup Lee & Jenny Yu</u> | | Phone Number <u>503-841-0577</u> | |
| Mailing Address | City | State | Zip Code |

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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.

Hyoung Sup Lee

(Applicant #1)

Jenny Unok Yu

(Applicant #2)

Yu Jin Chae

(Applicant #3)

Em Hye Kim

(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

8-28-19 RL

Please Print or Type Havo Sushi LLC
Applicant Name: Hyouna Sup Lee Phone: 503-841-0577
Trade Name (dba): HARU SUSHI One Restaurant
Business Location Address: 6516 N Denver AVE
City: Portland OR ZIP Code: 97217

DAYS AND HOURS OF OPERATION

Business Hours: Sunday Closed, Monday 11:00 to 9:30, Tuesday 11:00 to 9:30, Wednesday 11:00 to 9:30, Thursday 11:00 to 9:30, Friday 11:00 to 10:00, Saturday 11:00 to 10:00.
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: 48 Outdoor: _____
Lounge: _____ Other (explain): _____
Banquet: _____ Total Seating: 28

OLCC USE ONLY
Investigator Verified Seating: (Y) (N) _____
Investigator Initials: RL
Date: 8-30-19

I understand if my answers are not true and complete, the OLCC may deny my license application.
Applicant Signature: _____ Date: 8/13/2019

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: Sushi One
 DBA OR TRADE NAME: Sushi One Corp PHONE: _____ FAX: _____
 BUSINESS ADDRESS (Including ZIP Code): 6516 N Denver Ave Portland OR 97217
 WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): _____
 CONTACT PERSON: Jenny Yu PHONE: 503-841-0577 EMAIL: Junokyu@hotmail.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): no

RESTAURANT SEATING CAPACITY: 48 LOUNGE SEATING CAPACITY: _____ OUTSIDE SEATING CAPACITY: _____

DESCRIBE SECURITY: _____

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 CLOSE: 9:30 FRIDAY & SATURDAY OPEN: 11:00 CLOSE: 10:00

HOW LATE WILL THERE BE OUTSIDE SEATING? _____

HOW LATE WILL THERE BE ENTERTAINMENT? _____

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Sushi one

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: _____ DATE: Sep