



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 1st Location	Date application received and for date stamp: <u>Rec'd by Portland Liquor Licenses</u>
<input type="checkbox"/> Brewery 2nd Location	<u>MAY 19 2020</u>
<input type="checkbox"/> Brewery 3rd Location	Name of City or County: <u>PD 75 CR</u>
<input type="checkbox"/> Brewery-Public House 1st Location	<u># 4687</u>
<input type="checkbox"/> Brewery-Public House 2nd Location	Recommends this license be:
<input type="checkbox"/> Brewery-Public House 3rd 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	OLCC USE ONLY
<input type="checkbox"/> Full On-Premises, Passenger Carrier	Date application received: <u>3.19.20</u>
<input type="checkbox"/> Full On-Premises, Other Public Location	By: <u>sa</u>
<input type="checkbox"/> Full On-Premises, For Profit Private Club	License Action(s): <u>APPRV</u>
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	
<input type="checkbox"/> Grower Sales Privilege 1st Location	
<input type="checkbox"/> Grower Sales Privilege 2nd Location	
<input type="checkbox"/> Grower Sales Privilege 3rd Location	
<input type="checkbox"/> Limited On-Premises	
<input checked="" type="checkbox"/> Off-Premises	
<input type="checkbox"/> Off-Premises with Fuel Pumps	
<input type="checkbox"/> Warehouse	
<input type="checkbox"/> Wholesale Malt Beverage & Wine	
<input type="checkbox"/> Winery 1st Location	
<input type="checkbox"/> Winery 2nd Location	
<input type="checkbox"/> Winery 3rd Location	
<input type="checkbox"/> Winery 4th Location	
<input type="checkbox"/> Winery 5th Location	

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

Shum LLC _____ (Applicant #1)

_____ (Applicant #2)

_____ (Applicant #3)

_____ (Applicant #4)

3. Trade Name of the Business (Name Customers Will See)

Sungar Pearl

4. Business Address (Number and Street Address of the Location that will have the liquor license)

1105 NW Lovejoy St.

City <u>Portland</u>	County <u>Multnomah</u>	Zip Code <u>97209</u>
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OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

AS 3/31/20

✓

Applicant Name: Sungari Pearl SHUMI, LLC Phone: 971 229 7327

Trade Name (dba): Sungari Pearl

Business Location Address: 1105 NW Lovejoy St.

City: Portland ZIP Code: 97209

DAYS AND HOURS OF OPERATION OFF-PREMISES LICENSE ONLY

Business Hours:

Sunday	11 am	to	10 pm
Monday	11	to	10
Tuesday	11	to	10
Wednesday	11	to	10
Thursday	11	to	10
Friday	11	to	10
Saturday	4 PM	to	10 PM

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: due to covid-19, closing at 9 pm

ENTERTAINMENT DAYS & HOURS OF LIVE OR DJ MUSIC

- Check all that apply: OFF ONLY
- Live Music
 - Recorded Music
 - DJ Music
 - Dancing
 - Nude Entertainers
 - Karaoke
 - Coin-operated Games
 - Video Lottery Machines
 - Social Gaming
 - Pool Tables
 - Other: _____

OFF ONLY

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

SEATING COUNT

Restaurant: 72 Outdoor: 0

Lounge: 0 Other (explain): 0

Banquet: 0 Total Seating: 72

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: 18/3/20