



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

pending

LICENSE FEE: Do not include the license fee with the application (the license fee will be collected at a later time).

APPLICATION: Application is being made for:

- Brewery
- Brewery-Public House
- Distillery
- Full On-Premises, Commercial
- Full On-Premises, Caterer
- Full On-Premises, Passenger Carrier
- Full On-Premises, Other Public Location
- Full On-Premises, Nonprofit Private Club
- Full On-Premises, For-Profit Private Club
- Grower Sales Privilege
- Limited On-Premises
- Off-Premises
- Off-Premises with Fuel Pumps
- Warehouse
- Wholesale Malt Beverage & Wine (WMBW)
- Winery

CITY AND COUNTY USE ONLY

Date application received _____

Name of City or County _____

Recommends this license be ___ Granted ___ Denied

By _____

Date _____

OLCC USE

Application received by *[Signature]*

Date 12-14-17

License Action: n/o

Rec'd by Portland

1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license: *Liquor Licenses*

Applicant #1 Ichiza LLC	Applicant #2	JAN 02 2018 PD \$100 ok # 139
Applicant #3	Applicant #4	

2. Trade Name of the Business (the name customers will see):
Ichiza Kitchen & Tea House

3. Business Location: Number and Street **1628 SW Jefferson Street #3**
 City **Portland** County **Multnomah** ZIP **97201**

4. Is the business at this location currently licensed by the OLCC? Yes No

5. Mailing Address (where the OLCC will send your mail):
 PO Box, Number, Street, Rural Route **1628 SW Jefferson Street**
 City **Portland** State **OR** ZIP **97201**

6. Phone Number of the Business Location: **5037028374**

7. Contact Person for this Application:
 Name **Ryan Christopher Wythe** Phone Number **9712660884**
 Mailing Address, City, State, ZIP
1628 SW Jefferson Street, Portland, OR 97201
 Email **ichizakitchen@gmail.com**

I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is **prohibited** on the licensed premises.

Signature of Applicant #1 <i>[Signature]</i> General Manager, Co-owner	Signature of Applicant #2 <i>[Signature]</i> Co-owner
Signature of Applicant #3	Signature of Applicant #4

RECEIVED

OLCC Liquor License Application (Rev. 06/2017)

Initials: *[Signature]*
Oregon Liquor Control Commission



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: Ichiza, LLC Phone: 503-702-8374

Trade Name (dba): Ichiza Kitchen & Tea House

Business Location Address: 10245 SW Jefferson St # 3

City: Portland ZIP Code: 97201

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday 12:00 PM to 10 PM
Monday _____ to _____
Tuesday _____ to _____
Wednesday 12:00 PM to 10 PM
Thursday 12:00 PM to 10 PM
Friday 12:00 PM to 10 PM
Saturday 12:00 PM to 10 PM

EMV PCW

Outdoor Area Hours: N/A

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

The outdoor area is used for: N/A

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: N/A

- Live Music
- Recorded Music
- DJ Music
- Dancing
- Nude Entertainers
- Karaoke
- Coin-operated Games
- Video Lottery Machines
- Social Gaming
- Pool Tables
- Other: _____

DAYS & HOURS OF LIVE OR DJ MUSIC

N/A
Sunday _____ to _____
Monday _____ to _____
Tuesday _____ to _____
Wednesday _____ to _____
Thursday _____ to _____
Friday _____ to _____
Saturday _____ to _____

SEATING COUNT

Restaurant: 24 Outdoor: _____
Lounge: _____ Other (explain): _____
Banquet: _____ Total Seating: 24

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: 11/7/2017

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1321105-94

Please Print or Type

LLC Name: Ichiza LLC Year Filed: 2017 ✓

Trade Name (dba): Ichiza Kitchen + Tea House

Business Location Address: 1628 SW Jefferson St #3

City: Portland ZIP Code: 97201

List Members of LLC:

1. Ryan Christopher Wythe
(managing member)
2. Cyrus Albert Rhine
(members)
3. _____
4. _____
5. _____
6. _____

Percentage of Membership Interest:

- 50%
- 50%
- _____
- _____
- _____
- _____

(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: Ryan Wythe DOB: 12/16/1985

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

Signature: [Signature] (name) General Manager + Co-owner (title) Date: 11/7/2017

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: Ichiza, LLC

DBA OR TRADE NAME: Ichiza Kitchen & Tea House PHONE: 503-702-8374 FAX: N/A

BUSINESS ADDRESS (Including ZIP Code): 16240 SW Terpenin St #3 Portland OR 97201

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

CONTACT PERSON: Ryan Wythe PHONE: 971-260-0884 EMAIL: ryanwythe@gmail.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: 400 sq. ft.

EXISTING BUILDING: Yes No

ZONING: Commercial

STRUCTURAL CHANGES (DESCRIBE): N/A

RESTAURANT SEATING CAPACITY: 24 LOUNGE SEATING CAPACITY: N/A OUTSIDE SEATING CAPACITY: N/A

DESCRIBE SECURITY: Premises w/ ADT alarm with passcode specific to user to alarm/disarm

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 Don't Know we have large iron gate in front of door

HOURS OF OPERATION

SUNDAY - THURSDAY OPEN: 12pm-10pm CLOSE: 10pm FRIDAY & SATURDAY OPEN: 12pm CLOSE: 10pm

HOW LATE WILL THERE BE OUTSIDE SEATING? N/A HOW LATE WILL THERE BE ENTERTAINMENT? N/A

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Homegrown Smoker BBQ
NAME & ADDRESS OF PROPERTY OWNER: Barbara LaVelle 7682 SW Aptan Ln, Portland, OR 97224

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: [Signature] DATE: 12/20/2017

Property Search

Owner Name: HIERONIMUS, HENRY M TR (HENR
 Site Address: 1636 SW JEFFERSON ST
 State ID: 1SJE044B 5000
 Account #: R128211

Search Clear Portlandlaps

- Geocode Address When Taxlot Not Found
- Search is Based on Active Field Only
- Hide Personal Property Accounts
- Display Taxlot Detail Window

Navigate Query Results

Owner: HIERONIMUS, HENRY M TR (HENR) Site Address: 1636 SW JEFFERSON ST State: OR

*CF Zone. CCID, Good below
 Retail Sale + Service
 allowed by right.*

*Tyler Neumann, City Planner
 503-823-5002*

Bureau of Development Services
 Land Use Review
 1900 SW 4th Ave, Suite 5000
 Portland, OR 97201

Search Legend Add Data Selection



Taxlot Details

Lot Size: 4980 sqft Building Size: 2576 sqft Map Number: 3128
 Legal Description: CARTERS ADD TO P, BLOCK 1, W 1/2 OF LOT 1 EXC PT IN ST, W 1/2 OF LOT 2, LOT 788 EXC PT IN ST 1
 Mailing Information: HIERONIMUS, HENRY M TR (HENRY M HIERONIMU) 2436 NW WESTOVER RD #202

Zoning Code(s): CXd
 Historic District:
 Conservation District:

1/4 Section Map Tax Map Zoning Map
 Plan District: CENTRAL CITY
 Subdistrict: GOOSE HOLLOW
 Subarea:

LUR Case History:
 Draw LURS LUR Search