



# LIQUOR LICENSE APPLICATION

*Pending*

<p><b>LICENSE FEE:</b> Do not include the license fee with the application (the license fee will be collected at a later time).</p> <p><b>APPLICATION:</b> Application is being made for:</p> <p><input type="checkbox"/> Brewery</p> <p><input type="checkbox"/> Brewery-Public House</p> <p><input type="checkbox"/> Distillery</p> <p><input checked="" type="checkbox"/> Full On-Premises, Commercial</p> <p><input type="checkbox"/> Full On-Premises, Caterer</p> <p><input type="checkbox"/> Full On-Premises, Passenger Carrier</p> <p><input type="checkbox"/> Full On-Premises, Other Public Location</p> <p><input type="checkbox"/> Full On-Premises, Nonprofit Private Club</p> <p><input type="checkbox"/> Full On-Premises, For-Profit Private Club</p> <p><input type="checkbox"/> Grower Sales Privilege</p> <p><input type="checkbox"/> Limited On-Premises</p> <p><input type="checkbox"/> Off-Premises</p> <p><input type="checkbox"/> Off-Premises with Fuel Pumps</p> <p><input type="checkbox"/> Warehouse</p> <p><input type="checkbox"/> Wholesale Malt Beverage &amp; Wine (WMBW)</p> <p><input type="checkbox"/> Winery</p>	<p align="center"><b>CITY AND COUNTY USE ONLY</b></p> <p>Date application received _____</p> <p>Name of City or County _____</p> <p>Recommends this license be <input type="checkbox"/> Granted <input type="checkbox"/> Denied</p> <p>By _____</p> <p>Date _____</p> <hr/> <p align="center"><b>OLCC USE</b></p> <p>Application received by <u><i>[Signature]</i></u></p> <p>Date <u>12-22-17</u></p> <p>License Action: <u>n/o</u></p>
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<b>1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license:</b>			
Applicant #1	Applicant #2		
<u>Saima LLC</u>	<u>Arthit Chusri</u>		
Applicant #3	Applicant #4		
<b>2. Trade Name of the Business (the name customers will see):</b>			
<u>Saima Thai + sushi</u>			
<b>3. Business Location: Number and Street</b>			
<u>4118 NE Sandy Blvd</u>	<u>Portland</u>	<u>Multnomah</u>	<u>97212</u>
<b>4. Is the business at this location currently licensed by the OLCC?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>5. Mailing Address (where the OLCC will send your mail):</b>			
<u>6253 SE Steen Ct</u>			
<u>Milwaukie</u>	<u>OR</u>	<u>97222</u>	
<b>6. Phone Number of the Business Location:</b>			
<b>7. Contact Person for this Application:</b>			
Name <u>Arthit Chusri</u>		Phone Number <u>503 913-7999</u>	
Mailing Address, City, State, ZIP <u>6253 Se Steen Ct Milwaukie OR 97222</u>			
Email <u>kingsury@hotmail.com</u>			
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		Signature of Applicant #2	
<u>[Signature]</u>		<u>[Signature]</u>	
Signature of Applicant #3		Signature of Applicant #4	

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1381514-93

Please Print or Type

LLC Name: SAIMA LLC Year Filed: 2017 ✓

Trade Name (dba): SAIMA THAI & SUSHI

Business Location Address: 4118 NE SANDY BLVD

City: PORTLAND ZIP Code: 97212  
97212

List Members of LLC:

Percentage of Membership Interest:

1. SOMCHIT CHUSRI  
(managing member)
2. \_\_\_\_\_  
(members)
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

100%  
*(per Arthur Chusri  
phone call 1-4-18  
11:38 AM)  
M. H. Olson*

(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: SOMCHIT CHUSRI DOB: 12/10/66

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

Signature: *[Signature]* Date: 11-30-17  
(name) (title)



# OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Saima LLC  
SOMCHIT CHUSRI Phone: \_\_\_\_\_

Trade Name (dba): Saima Thai & Sushi

Business Location Address: 4118 NE Sandy Blvd

City: Portland ZIP Code: 97212

### DAYS AND HOURS OF OPERATION

**Business Hours:**

Sunday	<u>11:00</u> to <u>9:00</u>
Monday	<u>11:00</u> to <u>9:00</u>
Tuesday	<u>11:00</u> to <u>9:00</u>
Wednesday	<u>11:00</u> to <u>9:00</u>
Thursday	<u>11:00</u> to <u>9:00</u>
Friday	<u>11:00</u> to <u>10:00</u>
Saturday	<u>11:00</u> to <u>10:00</u>

**Outdoor Area Hours:**

Sunday	<u>11:00</u> to <u>9:00</u>
Monday	<u>11:00</u> to <u>9:00</u>
Tuesday	<u>11:00</u> to <u>9:00</u>
Wednesday	<u>11:00</u> to <u>9:00</u>
Thursday	<u>11:00</u> to <u>9:00</u>
Friday	<u>11:00</u> to <u>10:00</u>
Saturday	<u>11:00</u> to <u>10:00</u>

The outdoor area is used for:

Food service Hours: 11:00 to 10:00 <sup>AM</sup> <sup>PM</sup>

Alcohol service Hours: 11:00 to 10:00 <sup>AM</sup> <sup>PM</sup>

Enclosed, how \_\_\_\_\_

The exterior area is adequately viewed and/or supervised by Service Permittees.  
\_\_\_\_\_  
(Investigator's Initials)

Seasonal Variations:  Yes  No If yes, explain: NO OUTDOOR SERVICE ON WINTER

### ENTERTAINMENT

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

### DAYS & HOURS OF LIVE OR DJ MUSIC

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

### SEATING COUNT

Restaurant: 85 Outdoor: 20

Lounge: \_\_\_\_\_ Other (explain): \_\_\_\_\_

Banquet: \_\_\_\_\_ Total Seating: 105

**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: Somchit Chusri Date: 11-30-17

# 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: SAIMA LLC

DBA OR TRADE NAME: Saima Thai & SUSHI PHONE: 503 954 1315 FAX: 954 1250

BUSINESS ADDRESS (Including ZIP Code): 4118 N.E Sandy blvd. PORTLAN OR 97212

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

CONTACT PERSON: Arhit Chusri PHONE: 503 913-7999 EMAIL: saimpdx8@gmail.com

## DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- |  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> Food Cart             | <input type="checkbox"/> Night Club   |
| <input checked="" type="checkbox"/> Restaurant | <input type="checkbox"/> Sports Bar   |
| <input type="checkbox"/> Convenience Store     | <input type="checkbox"/> Other: _____ |

SIZE OF SERVICE AREA: 65-85

EXISTING BUILDING:  Yes  No

ZONING: \_\_\_\_\_

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

RESTAURANT SEATING CAPACITY: 85 LOUNGE SEATING CAPACITY: 18 OUTSIDE SEATING CAPACITY: 24

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 AM CLOSE: 9:00 PM FRIDAY & SATURDAY OPEN: 11:00 AM CLOSE: 10:00 PM

HOW LATE WILL THERE BE OUTSIDE SEATING? 30 MIN Before Close HOW LATE WILL THERE BE ENTERTAINMENT? N/A

## HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: PONO farm.

NAME & ADDRESS OF PROPERTY OWNER: Dennis Soekhoff 735 SW 158th AVE BEAVERTON 97006

## ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Dancing                       | <input type="checkbox"/> Video Poker              | <input type="checkbox"/> Live Music                 | <input type="checkbox"/> Nude Dancers     |
| <input type="checkbox"/> Karaoke                       | <input type="checkbox"/> Video Games/Pinball      | <input type="checkbox"/> Recorded Music             | <input type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): _____ | <input type="checkbox"/> Events (Describe): _____ | <input type="checkbox"/> Other: <u>NON of this.</u> |   |

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

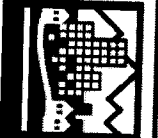
A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: Arhit Chusri DATE: 12/26/17



# City of Portland, Oregon - Bureau of Development Services

1900 SW Fourth Avenue · Portland, Oregon 97201 | 503-823-7300 | www.portlandoregon.gov/bds



## ZONING VERIFICATION

Address: 4118 NE BROADWAY

R#: R251867

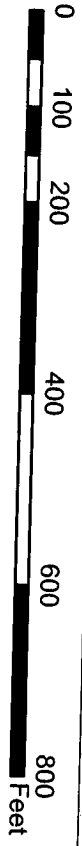
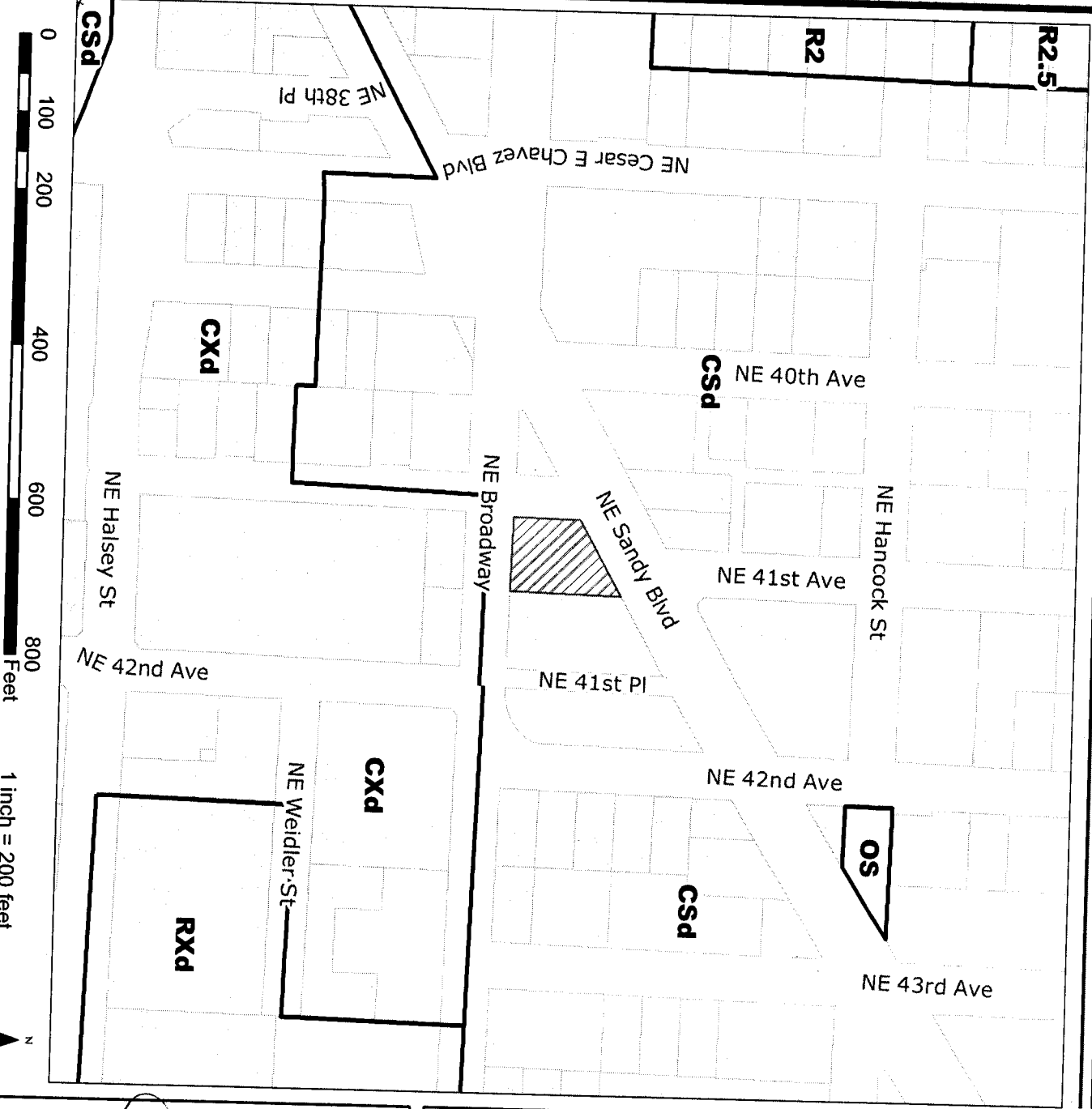
State ID: 1N1E25DD 10700

Zone: ~~CSD~~ HOLLYWOOD PLAN DISTRICT  
Subdistrict A  
Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is an ALLOWED use in the CSD - HOLLYWOOD PLAN DISTRICT zone

### Additional Comments:

Retail Sales and Service Use allowed by right per 33.130.100 and Table 130-1.



**Jamie Ostenson**  
Name of City Official

**City Planner**  
Title

**503-823-4987**  
Contact Number

*Jamie Ostenson*  
Signature of Official

**12 / 27 / 2017**  
Date