



LIQUOR LICENSE APPLICATION

DT

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 1-12-18

License Action: 40

Rec'd by Portland
Liquor Licenses
JAN 25 2018
PD # 75-2017

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

Applicant #1 <u>Kacy, LLC</u>	Applicant #2
Applicant #3	Applicant #4

2. Trade Name of the Business (the name customers will see): J & T Market

3. Business Location: Number and Street 4438 NE Glisan St.
 City Portland County Multnomah ZIP 97213

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

5. Mailing Address (where the OLCC will send your mail): 4438 NE Glisan St.
 PO Box, Number, Street, Rural Route
 City Portland State OR ZIP 97213

6. Phone Number of the Business Location:

7. Contact Person for this Application:

Name <u>Yune Han</u>	Phone Number <u>503-997-8177</u>
Mailing Address, City, State, ZIP <u>4438 NE Glisan St. Portland OR 97213</u>	
Email <u>han895@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 <u>KC LLC member</u> <u>[Signature]</u>	Signature of Applicant #2 <u>KCLLC member</u> <u>[Signature]</u>
Signature of Applicant #3	Signature of Applicant #4

RECEIVED
DEC 28 2017



OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Kacy LLC Phone: 503-997-8177

Trade Name (dba): J & T Market

Business Location Address: 4438 NE GILSAN ST.

City: Portland ZIP Code: 97213

DAYS AND HOURS OF OPERATION

Business Hours:

Sunday	<u>6 AM</u> to <u>9 to pm</u>
Monday	<u>6</u> to <u>9 to</u>
Tuesday	<u>6</u> to <u>9 to</u>
Wednesday	<u>6</u> to <u>9 to</u>
Thursday	<u>6</u> to <u>9 to</u>
Friday	<u>6</u> to <u>9 to</u>
Saturday	<u>6</u> to <u>9 to</u>

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
- 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

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

SEATING COUNT

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

OLCC USE ONLY	
Investigator Verified Sealing: _____(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] LLC member Date: 12/28/2017

OREGON LIQUOR CONTROL COMMISSION
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1394424-95

Please Print or Type

LLC Name: Kacy LLC Year Filed: 2017 2018

Trade Name (dba): J & T Market

Business Location Address: 4438 NE Glisan St.

City: Portland ZIP Code: 97213

List Members of LLC:

Percentage of Membership Interest:

1. Yune Han
(managing member)

50%

2. Kacy Han
(members)

50%

3. _____

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: Yune Han DOB: 3/29/1955

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

Signature: [Signature] KC LLC member Date: 12/26/17
(name) (title)

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: Kacy LLC

DBA OR TRADE NAME: J & T Market PHONE: 503-997-8177 FAX: _____

BUSINESS ADDRESS (Including ZIP Code): 4438 NE Glisan St. Portland OR 97213

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

CONTACT PERSON: Yune Han PHONE: 503-997-8177 EMAIL: han895@hotmail.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

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

SIZE OF SERVICE AREA: 800 sq

EXISTING BUILDING: Yes No

ZONING: CU2

STRUCTURAL CHANGES (DESCRIBE): _____

RESTAURANT SEATING CAPACITY: _____ 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: 6 am CLOSE: 10 pm FRIDAY & SATURDAY OPEN: 6 am CLOSE: 10 pm

HOW LATE WILL THERE BE OUTSIDE SEATING? _____ HOW LATE WILL THERE BE ENTERTAINMENT? _____

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: J & T Market.

NAME & ADDRESS OF PROPERTY OWNER: _____

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: _____ | |

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

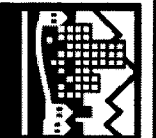
A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: [Signature] DATE: 1/18/18



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: 4430-4438 NE GLISAN ST

R#: R212336

State ID: 1N2E31CB 1900

Zone: CN2

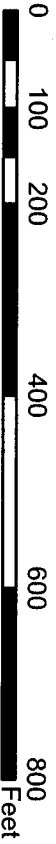
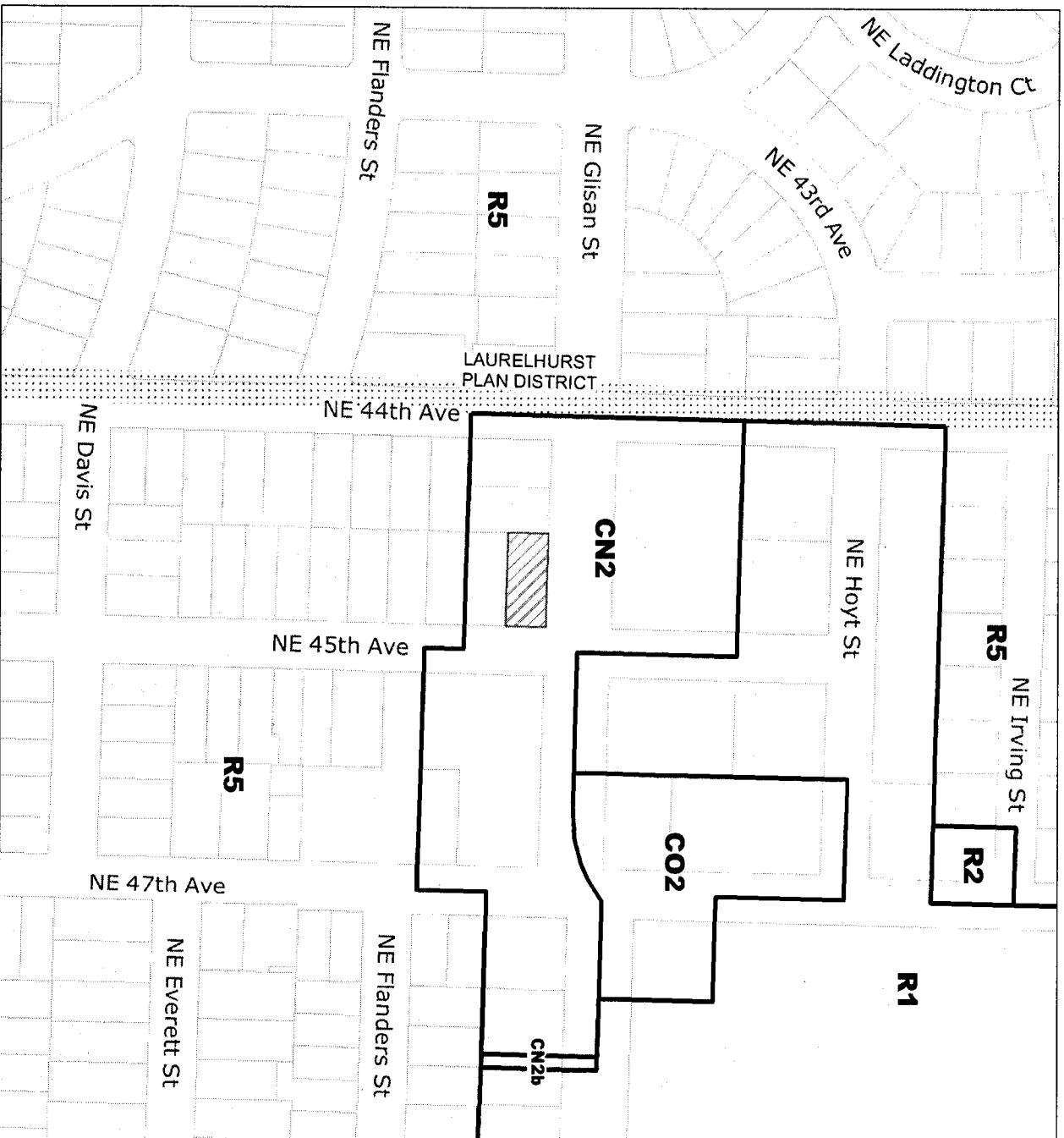
Plan District:

Proposed Use: RETAIL SALES AND SERVICE

RETAIL SALES AND SERVICE is an ALLOWED use in the CN2 zone

Additional Comments:

Retail Sales and Service Use Allowed in the CN2 Zone per 33.130.100 and Table 130-1. Hours of operation are limited to 6am to 9pm, or 15 hours.



1 inch = 200 feet



Cassandra Ballew

Name of City Official

City Planner

Title

503-823-7252

Contact Number

Signature of Official

1 /25 /2018

Date