



# LIQUOR LICENSE APPLICATION

DT

<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> <ul style="list-style-type: none"> <li><input type="checkbox"/> Brewery</li> <li><input type="checkbox"/> Brewery-Public House</li> <li><input type="checkbox"/> Distillery</li> <li><input type="checkbox"/> Full On-Premises, Commercial</li> <li><input type="checkbox"/> Full On-Premises, Caterer</li> <li><input type="checkbox"/> Full On-Premises, Passenger Carrier</li> <li><input type="checkbox"/> Full On-Premises, Other Public Location</li> <li><input type="checkbox"/> Full On-Premises, Nonprofit Private Club</li> <li><input type="checkbox"/> Full On-Premises, For-Profit Private Club</li> <li><input type="checkbox"/> Grower Sales Privilege</li> <li><input checked="" type="checkbox"/> Limited On-Premises</li> <li><input type="checkbox"/> Off-Premises</li> <li><input type="checkbox"/> Off-Premises with Fuel Pumps</li> <li><input type="checkbox"/> Warehouse</li> <li><input type="checkbox"/> Wholesale Malt Beverage &amp; Wine (WMBW)</li> <li><input type="checkbox"/> Winery</li> </ul>	<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 ___ Granted ___ Denied</p> <p>By _____</p> <p>Date _____</p> <hr/> <p align="center"><b>OLCC USE</b></p> <p>Application received by _____</p> <p>Date <u>7-9-18</u></p> <p>License Action: <u>9/0 c/tn</u></p>
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277834

*[Signature]*

<b>1. LEGAL ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license:</b>			
Applicant #1 <u>Sushi Sapporo LLC</u>	Applicant #2	Applicant #3	Applicant #4
<p align="right">Rec'd by Portland Liquor Licenses <b>JUL 10 2018</b> PD CC \$7500 - ADMA # <u>829372</u></p>			
<b>2. Trade Name of the Business (the name customers will see):</b> <u>Sushi Sapporo</u>			
<b>3. Business Location: Number and Street</b> <u>9738 SE Washington St # M-N</u>			
City <u>Portland</u>	County <u>Multnomah</u>	ZIP <u>97216</u>	
<b>4. Is the business at this location currently licensed by the OLCC?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5. Mailing Address (where the OLCC will send your mail):</b> <u>9738 SE Washington St # M-N</u>			
PO Box, Number, Street, Rural Route			
City <u>Portland</u>	State <u>OR</u>	ZIP <u>97216</u>	
<b>6. Phone Number of the Business Location:</b> <u>(503) 255-9922</u>			
<b>7. Contact Person for this Application:</b>			
Name <u>Jose Luciano Han Tum</u>	Phone Number <u>(360) 850-9614</u>		
Mailing Address, City, State, ZIP <u>9738 SE Washington St # M-N Portland, OR 97216</u>			
Email <u>luciano.hantum9@gmail.com</u>			
<b>I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is prohibited on the licensed premises.</b>			
Signature of Applicant #1 <i>[Signature]</i>	Signature of Applicant #2 <i>[Signature]</i>		
Signature of Applicant #3	Signature of Applicant #4		

**RECEIVED**  
**JUN 27 2018**



# OREGON LIQUOR CONTROL COMMISSION BUSINESS INFORMATION

Please Print or Type

Applicant Name: Sushi Sapporo LLC Phone: 503-255-9922

Trade Name (dba): Sushi Sapporo

Business Location Address: 9738 SE Washington St # M-N

City: Portland ZIP Code: 97216

### DAYS AND HOURS OF OPERATION

#### Business Hours:

Sunday	<u>11:00<sup>AM</sup></u> to <u>9:00<sup>PM</sup></u>
Monday	<u>10:30<sup>AM</sup></u> to <u>9:00<sup>PM</sup></u>
Tuesday	<u>10:30<sup>AM</sup></u> to <u>9:00<sup>PM</sup></u>
Wednesday	<u>10:30<sup>AM</sup></u> to <u>9:00<sup>PM</sup></u>
Thursday	<u>10:30<sup>AM</sup></u> to <u>9:00<sup>PM</sup></u>
Friday	<u>10:30<sup>AM</sup></u> to <u>10:00<sup>PM</sup></u>
Saturday	<u>11:00<sup>AM</sup></u> to <u>10:00<sup>PM</sup></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: N/A

- |  |   |
|--|---|
| <input type="checkbox"/> Live Music        | <input type="checkbox"/> Karaoke                |
| <input type="checkbox"/> Recorded Music    | <input type="checkbox"/> Coin-operated Games    |
| <input type="checkbox"/> DJ Music          | <input type="checkbox"/> Video Lottery Machines |
| <input type="checkbox"/> Dancing           | <input type="checkbox"/> Social Gaming          |
| <input type="checkbox"/> Nude Entertainers | <input type="checkbox"/> Pool Tables            |
|  | <input type="checkbox"/> 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: 45 Outdoor: \_\_\_\_\_

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

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

<b>OLCC USE ONLY</b>	
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: Luciano K Date: 6/20/18

OREGON LIQUOR CONTROL COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE



1450367-94

Please Print or Type

LLC Name: Sushi Sapporo LLC Year Filed: 2018 ✓

Trade Name (dba): Sushi Sapporo

Business Location Address: 9738 SE Washington St # M-N

City: Portland ZIP Code: 97216

List Members of LLC:

Percentage of Membership Interest:

- |  |            |
|--|------------|
| 1. <u>Jose Luciano Hau Tun</u><br>(managing member)  | <u>95%</u> |
| 2. <u>Santos Javier Palomo Interian</u><br>(members) | <u>5%</u>  |
| 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: \_\_\_\_\_ DOB: \_\_\_\_\_

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

Signature: Luciano Hau Tun \_\_\_\_\_ Date: 6/20/18  
(name) (title)



# CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

PLEASE SUBMIT TO: Mike Boyer, Office of Neighborhood Involvement, 1221 SW 4<sup>th</sup> Avenue, Suite #110, Portland OR 97204 - (503) 823-3092

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 Sapporo LLC

DBA OR TRADE NAME: Sushi Sapporo PHONE: (503) 255-9922 FAX: -

BUSINESS ADDRESS (Including ZIP Code): 9738 SE Washington St # M-N Portland OR 97216

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

CONTACT PERSON: Jose Luciano Han Tum PHONE: (360) 850-9614 EMAIL: luciano.hantum@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: 2,520 sq

EXISTING BUILDING:  Yes  No

ZONING: commercial

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

RESTAURANT SEATING CAPACITY: 45 LOUNGE SEATING CAPACITY: 0 OUTSIDE SEATING CAPACITY: 0

DESCRIBE SECURITY: shopping center 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: 10:30 am CLOSE: 9:00 pm FRIDAY & SATURDAY OPEN: 10:30 am CLOSE: 10:00 pm

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: Umenoki Kaiten Sushi

NAME & ADDRESS OF PROPERTY OWNER: 205 place Associates, LLC

### ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY) none

- |  |   |   |   |
|--|---|---|---|
| <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: Jose Luciano Han Tum DATE: 6/20/18





# 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: 9710-9740 SE WASHINGTON ST.

R#: R332449

State ID: 1S2E04A 1300

**Zone: CXd**

**Plan District: GATEWAY**

**Proposed Use: RETAIL SALES AND SERVICE**

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

### Additional Comments:

Per 33.130.100 and Table 130-1, Retail Sales and Services uses are allowed by right in the CX zone. The use is not further limited by the plan district.

**Tammy Boren-King**

Name of City Official

**City Planner**

Title

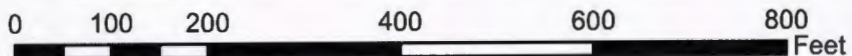
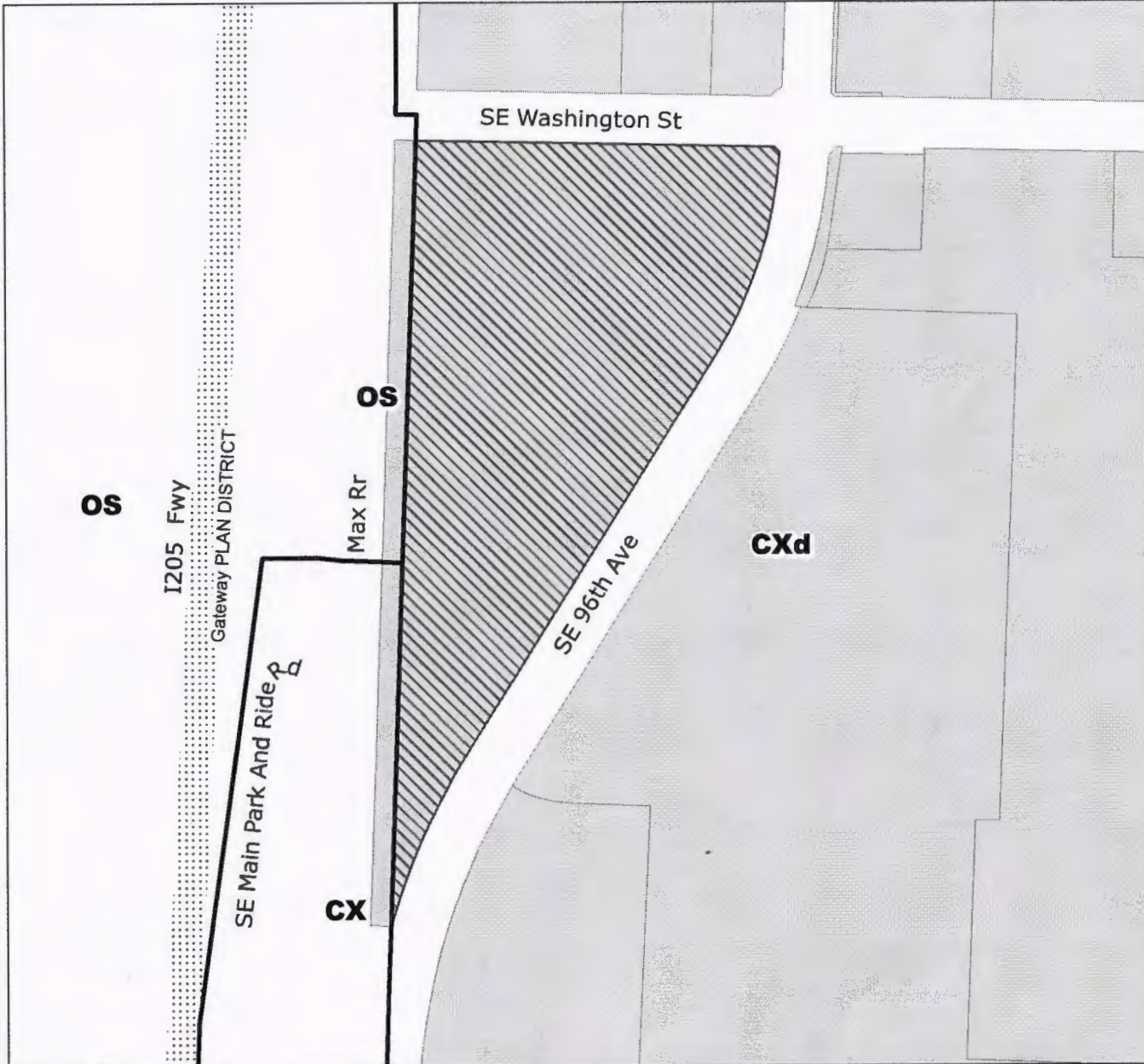
**503-823-5765**

Contact Number

Signature of Official

**7 / 10 / 2018**

Date



1 inch = 200 feet

