

CITY OF ROCHESTER HILLS
CLASS C LIQUOR LICENSE APPLICATION

APPLICANT'S CHECK LIST FOR SUBMISSION

- Completed Application
 - Listing of Corporation/Partners
 - Building/Site Plans
 - Financial Statement
 - Lease Agreement (if applicable)
 - Menu
 - Training Policy
 - Fingerprints
 - Dance/Entertainment Agreement (if applicable)
-

CITY OF ROCHESTER HILLS

CLASS C LIQUOR LICENSE APPLICATION

Date: 9/21/06

- New Class C License
- Transfer Class C License
- Dance Permit
- Entertainment Permit
- Dance Entertainment Permit

*Stock Transfer
Hees Investments, d/b/a Kabla Khan
249 - 652-0303 W*

Applicant's Name: HAZEL Yung Phone No. 248-504-0178 W
 Address: 1650 Nottingham City Madison Hgts ST MI
 Age: 38 Citizenship: US Date of Birth 1/22/68 Birthplace: China
 If naturalized, year and place: 1992 Detroit Michigan

If a partnership, please complete the following:

Partner's Name: _____ Phone No. _____
 Address: _____ City _____ ST _____
 Age: _____ Citizenship: _____ Date of Birth 1/22/68 Birthplace: China
 If naturalized, year and place: _____

Manager's Name: _____ Phone No. _____
 Address: _____ City _____ ST _____
 Age: _____ Date of Birth: _____

If a corporation, the names, addresses of the officers and directors, date of birth and age of each:

*currently: Sik W. Lee (At Site Approval) Li Cheng Weng Pres
 SAU Sheung hee - Secy Hazel Yung Secy*

Liquor License Application

Location of Proposed License: 173 S. Wisconsin

Does applicant presently own the premises? No
If not, name of owner of premise: Paul Fured

Legal Description of Property (Sidwell #) _____

Length of time business has been in operation: 31 yrs

Has applicant ever been convicted of a felony? Yes ___ No X

If convicted of felony, explain: _____

Has applicant previously applied for liquor license? Year requested: No

Location of business: _____

Was liquor license granted: _____

Have any of the applicants or persons listed above been convicted of a violation of federal or state law concerning the manufacture, possession or sale of alcoholic beverages? Yes ___ No No

Name of person _____

What is the applicant's current business? waitress / Hostess

Length of time in named business? All Adult life.

List all uses in addition to sale of alcoholic beverages: Served Food

Does applicant presently operate a restaurant? Yes ___ No X

Name and address of restaurant: Works as waitress / Hostess

Does applicant presently hold a Class C liquor license? Yes ___ No X

Name and address of restaurant: _____

List record and history of any liquor license violations by the applicant for preceding ten (10) years

N/A

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Liquor License Application

Record history of any liquor license violations by the corporation or by a parent of subsidiary corporation of the applicant for the immediate preceding ten (10) years

N/A

<u>Proposed Liquor Establishment:</u>	<u>Existing Building</u>	<u>New Construction</u>
Size of Site:	_____	_____
Size of Building:	_____	_____
Size of Kitchen:	_____	_____
Seating Capacity:	_____	_____
Size of Dance Floor, if any:	_____	_____
Percentage of Floor Area for Dining:	_____	_____
Percentage of Floor Area for Bar:	_____	_____
Present Zoning:	_____	_____
Required Zoning:	_____	_____
Cost of Remodeling:	_____	_____
Cost of Construction:	_____	_____
Estimated Dates of Construction	Start: _____	Completion: _____
Total cost to be expended by licensee for the licensed premises: _____		
Building Plans Submitted – 1 Sets Required:	Number of Copies Enclosed: _____	
Site Plans Submitted – 1 Sets Required:	Number of Copies Enclosed: _____	
Do Site Plans show off-street parking and lighting?	Yes _____	No _____

Describe the proposed character/type of establishment (e.g. theme, entertainment, food)

Chinese Restaurant w/ Japanese Cuisine

Describe the proposed full food menu:

See Attached

Proposed menu attached: Yes No

Describe the surrounding neighborhood and explain how the proposed establishment fits this location in Rochester Hills.

Shopping Center

Revenues: Provide a breakdown of the anticipated revenues from food, alcoholic beverages and other revenues (copy must be attached):

Evidence of Financial Responsibility:

Amount of Funds supplied by Principals: 15,000

Amount of Funds to be Financed: 70,000

Name of Financer/Phone Number: Sik Wa Lee + Sav Shany Lee
248-528-2232

Liquor License Application

Personal References/Phone Number:

Beling Mocerai
596-769-8700

Business References/Phone Number:

Frank J Dufold
2558 Coolidge St #107
Troy Michigan
248-643-5400

Has applicant completed a certified training program? Yes ___ No x

Have employees completed a certified training program? Yes ___ No x

Names and addresses of those completing program

Frank J. Dufold
2558 Coolidge St #107 Troy, MI 48064

Applicant understands that should any of the above information prove to be inaccurate or untruthful, it will be grounds to deny applicant's request or revoke any approvals.

I (We) Hazel Yung
affirm I (We) will not violate any of the laws of the State of Michigan or of the United States or any ordinances of the City of Rochester Hills in the conduct of my (our) business, and acknowledge receipt of a copy of Chapter 6, Alcoholic Liquor of the Rochester Hills Code of Ordinances.

I hereby certify the above information to be true and accurate to the best of my (our) knowledge.

Hazel Yung 9/21/06
Applicant Signature/Date

Applicant Signature/Date

This application is not considered complete until applicant has made contact with the Rochester Hills Contingent of the Oakland County Sheriff's Department and complied with fingerprinting and any other necessary requirements of the Oakland County Sheriff's Department.

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Date: 9-21-06

- New Class C License
- Transfer Class C License
- Dance Permit
- Entertainment Permit
- Dance Entertainment Permit

Applicant's Name: Li Cheng Weng Phone No. _____
Address: 22451 Streamside Dr. City Macomb Twp ST Mi
Age: 41 Citizenship: US Date of Birth 5/3/65 Birthplace: China
If naturalized, year and place: Detroit, Michigan

If a partnership, please complete the following:

Partner's Name: _____ Phone No. _____
Address: _____ City _____ ST _____
Age: _____ Citizenship: _____ Date of Birth _____ Birthplace: _____
If naturalized, year and place: _____

Manager's Name: _____ Phone No. _____
Address: _____ City _____ ST _____
Age: _____ Date of Birth: _____

If a corporation, the names, addresses of the officers and directors, date of birth and age of each:

Location of Proposed License: 173 S Liveoaks Rochester Hills, Mi

Does applicant presently own the premises? No
If not, name of owner of premise: Paul Ford

Legal Description of Property (Sidwell #) _____

Length of time business has been in operation: 1989 to present

Has applicant ever been convicted of a felony? Yes ___ No

If convicted of felony, explain: _____

Has applicant previously applied for liquor license? No Year requested: _____

Location of business: _____

Was liquor license granted: _____

Have any of the applicants or persons listed above been convicted of a violation of federal or state law concerning the manufacture, possession or sale of alcoholic beverages? Yes ___ No

Name of person _____

What is the applicant's current business? Manager Restaurant

Length of time in named business? 1 yr

List all uses in addition to sale of alcoholic beverages: Chinese & Asian Foods

Does applicant presently operate a restaurant? Yes No ___
Name and address of restaurant: Kublic Khan 173 S Liveoaks Rochester Hills, Mi

Does applicant presently hold a Class C liquor license? Yes No ___
Name and address of restaurant: Kublic Khan Stockholder

List record and history of any liquor license violations by the applicant for preceding ten (10) years

None

Record history of any liquor license violations by the corporation or by a parent of subsidiary corporation of the applicant for the immediate preceding ten (10) years

<u>Proposed Liquor Establishment:</u>	<u>Existing Building</u>	<u>New Construction</u>
Size of Site:	<u>same</u>	_____
Size of Building:	_____	_____
Size of Kitchen:	_____	_____
Seating Capacity:	_____	_____
Size of Dance Floor, if any:	_____	_____
Percentage of Floor Area for Dining:	_____	_____
Percentage of Floor Area for Bar:	_____	_____
Present Zoning:	_____	_____
Required Zoning:	_____	_____
Cost of Remodeling:	_____	_____
Cost of Construction:	_____	_____
Estimated Dates of Construction	Start: _____	Completion: _____

Total cost to be expended by licensee for the licensed premises: _____

Building Plans Submitted – 3 Sets Required: Number of Copies Enclosed: _____

Site Plans Submitted – 6 Sets Required: Number of Copies Enclosed: _____

Do Site Plans show off-street parking and lighting? Yes _____ No _____

Describe the proposed character/type of establishment (e.g. theme, entertainment, food)

Chinese Restaurant

Describe the proposed full food menu:

Same as currently being served.

Proposed menu attached: Yes No

Describe the surrounding neighborhood and explain how the proposed establishment fits this location in Rochester Hills.

Shopping Center

Revenues: Provide a breakdown of the anticipated revenues from food, alcoholic beverages and other revenues (copy must be attached): 10% Alcoholic beverages 90% Food

Evidence of Financial Responsibility:

Amount of Funds supplied by Principals: 75,000

Amount of Funds to be Financed: 70,000

Name of Financer/Phone Number: Sik Wai Lee & Sav Sheng (former owners)
248-525-2232

Liquor License Application

Personal References/Phone Number:

Weling Moccia
586-709-8700

Business References/Phone Number:

Frank J. Bajala
248-643-5400

Has applicant completed a certified training program? Yes ___ No X

Have employees completed a certified training program? Yes ___ No X

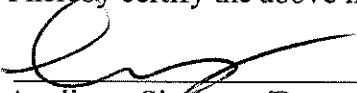
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Frank J. Bajala
2555 Coe Ridge St. 107 Troy, MI 48064

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I (We) Li Cheng Wang
affirm I (We) will not violate any of the laws of the State of Michigan or of the United States or any ordinances of the City of Rochester Hills in the conduct of my (our) business, and acknowledge receipt of a copy of Chapter 6, Alcoholic Liquor of the Rochester Hills Code of Ordinances.

I hereby certify the above information to be true and accurate to the best of my (our) knowledge.


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