

CITY OF KNOXVILLE BEER PERMIT

APPLICATION CHECKLIST | DISTRICT: 2

Business Name: Kyuramen Account Number: 67002

Business Address: 213 N Peters Rd 37923

Agenda Date: 4, 29, 25 CLT Number: 119 02913

TASK	COMMENTS
New Application:	<u>Received 4/1/25</u>
Permit Fee Paid	(New Application \$250.00)
Publication Fee Paid:	<input checked="" type="checkbox"/> (\$50.00)
Records Check Completed	
Current City Business License:	Expiration Date: <u>5, 15, 26</u>
Copy of Certificate of Registration for Tennessee Sales Tax	
Copy of Corporate Charter; LLC; ETC.	<input checked="" type="checkbox"/>
Notice of Application to Knox County Health Dept. (215-5200)	Sent: ___/___/___ Received: ___/___/___ Approved: Pending: <u>✓ 4/23/25</u>
Notice of Application to Building Inspections (215-3669)	Sent: ___/___/___ Received: ___/___/___ Approved: Pending:
Notice of Application to Fire Prevention Bureau (633-0400)	Sent: ___/___/___ Received: ___/___/___ Approved: Pending:
Request distances measured by Engineering Dept. (215-6132)	Sent: <u>4, 3, 25</u> Received: <u>4, 11, 25</u> Approved: <input checked="" type="checkbox"/> Pending Location needs add'l research?
Plan for Server Compliance	<input checked="" type="checkbox"/>
KAST Program completed	
Previous Business at this location:	<u>Viet Taste Restaurant (#61776); Inach</u>

CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT

It is the applicant's responsibility to provide complete and accurate information. The Beer Board could deny or delay action on the application if any information is not accurate.

I / we hereby make application for a permit to sell, store, or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Knoxville alcoholic beverages ordinance Chapter 4 and base my application upon the answers to the following questions:

1. Reason for Application: New Business New Ownership Name Change Other _____

2. Name of Business Owner(s): Chuan Shyr Kyuramen Knoxville LLC

3. Is Owner a: Corporation General Partnership Limited Partnership LLC Sole Proprietorship
 Other _____

4. Under what name will the business operate: Kyuramen Knoxville LLC

5. Business Address: 213 N Peters Rd. Zip 37923 Phone (615) 696-1706

6. Property Owner's Name: DDRTC T+C, LLC Phone 404-410-7120

7. Type of business you will operate: Ramen Restaurant

8. List names of **all** general partners and owners and **designate PERCENTAGE of ownership**. (Use additional paper if necessary.) Each person owning 5% or more of the business must complete an owner/manager application (attached) and submit to a city of Knoxville Police Department background check. If ownership is a corporation, please indicate whether the corporation is privately held or publicly traded. If privately held, each person owning 5% or more of the corporation must complete an owner/manager application and submit to a city of Knoxville Police Department background check.

Chuan Shyr 100%

9. List the name(s) of managers or others on-site responsible for operations. Any change in management **must** be reported to the Business Tax Office. A new manager is subject to a background check and applicable fees. Each individual listed must complete an owner/manager application and submit to a City of Knoxville Police Department background check.

Hsinhao Liao

10. List machines currently in use or planned for use on premises and **owner** of machines (cigarette, pinball, jukebox, etc.)

N/A

11. Type of permit requested:

Off Premise On/Off Premise Caterer Manufacturer/Distributor Self-Serve

CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
AFFIDAVIT

1. I/we Chuan Shyr hereby solemnly swear or affirm that each statement in this application is true and correct and understand that if any statement contained herein is false, the permit issued is automatically forfeited and voided. Furthermore, that in the event of forfeiture I/we shall not be eligible to receive another permit for a period of ten (10) years pursuant to Tennessee Code Annotated § 57-5-105(d).
2. I/we understand that all applicants are charged with the responsibility of knowing the local and state beer laws. I/we are aware that the penalty for violating state or local beer laws can include revocation or suspension of the permit and/or the imposition of civil penalties up to ONE THOUSAND FIVE HUNDRED 00/100 DOLLARS (\$1,500.00) PER OFFENSE.
3. I/we understand that if the business allows illegal gambling on the premises that the beer permit will be subject to revocation.
4. I/we understand that a requirement of beer permit issuance is the permittee(s) and ON-SITE manager(s) who will supervise and/or sell and serve the beer at the establishment must complete alcohol education and training programs in accordance with City of Knoxville Code Section 4-60(c).
5. I/we understand that by submitting this application, a background investigation shall be conducted on the applicant(s) and on all ON-SITE managers who will be selling beer at the permitted establishment. It is further understood that any and all documents related to that investigation shall become public record open for public inspection and reproduction pursuant to Tennessee Code Annotated § 10-7-503.
6. I/we understand that a requirement of maintaining good status standing with the Knoxville Beer Board, is that I/we must notify the City of Knoxville Business Tax Office each time there is a change in the on-site manager responsible for selling the beer.
7. I/we hereby release, absolve and hold harmless, the City of Knoxville, the Knoxville Beer Board, the Knoxville Police Department, its employees, agents and representatives from any and all liability of whatever type for any damages, causes of actions, personal property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to my application. I/we hereby waive all possible liability of the City of Knoxville, Knoxville Beer Board, Knoxville Police Department, its employees, agents and representative as stated above.
8. I/we agree that the hiring of an employee who has been convicted within the past ten (10) years of any law relating to the sale, possession, manufacture or transportation of intoxicating beverages, including beer, as defined by City of Knoxville Code Section 4-37 or the hiring of an employee who has been convicted of any felony or crime involving moral turpitude within the past ten (10) years will be cause for possible revocation of the beer permit.
9. I/we understand if any information given in the application subsequently changes, I/we will immediately notify the Knoxville Beer Board c/o Business Tax Office.
10. I/we understand that if the business closes down, relocates, or there is ANY change in the ownership of the business, the permit will be surrendered to the Business Tax office within 15 days of said change for appropriate action.
11. I/we assume full responsibility for the permit and will be accountable for full compliance with the laws of Knoxville and the State of Tennessee in the sale of beer.
12. I/we have read the foregoing release. I/we fully understand its provisions, and voluntarily consent to abide by its requirements.
13. I/we acknowledge and understand that the fees paid for the beer permit application process are non-refundable.
14. The undersigned is the applicant or the bona fide and qualified agent/representative of the corporate applicant.

Chuan Shyr
Applicant Signature or Agent/Representative

Date: 4-1-2025

Co-Applicant Signature

Date: _____

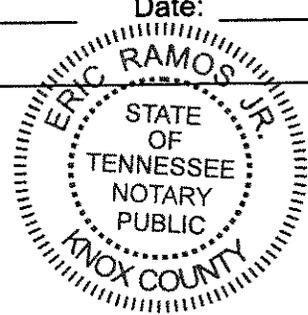
Co-Applicant Signature

Date: _____

Sworn to and subscribed before me this 01 day of 04, 2025.

Notary Public: [Signature]

My Commission Expires: 09/05/29



CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
OWNER/MANAGER APPLICATION

Reason for Application: New Application Manager Change or Addition

1. Name Chuan Shyr Owner—Percentage of Ownership 100 % Manager
2. Home Address 10063 Fox Cove Rd City KNOXVILLE State TN Zip 37922
3. Home Phone () _____ Cellular Phone (865) 696-1706 Date of Birth 05 / 31 / 1989
4. Driver's License # _____ State TN Social Security # _____
5. Local Business Name Kyuramen Knoxville LLC
6. Local Business Address/ZIP 213 N Peters Road, Knoxville TN 37923 Business Phone: 865, 696-1706
7. Have you ever been convicted of any violation of liquor and/or beer laws, felonies, or any crime involving moral turpitude, within the last ten-years, or do you have any charges **currently pending**? Yes No
 If yes, give particulars of each charge, including city, county, state: court and date: _____
8. Have you ever had a beer permit revoked, suspended, or denied? Yes No
 If yes, explain: _____
9. Have you ever been convicted of any misdemeanors (Speeding, DUI, Simple Assault, etc.) within the last ten (10) years or have any charges currently pending? Yes* No
 *If yes, give particulars of each charge, including city, county, state: court and date: _____
10. Do you understand both the state laws and the local laws regulating the sale and distribution of beer in the City of Knoxville? Yes No
11. Do you understand that **allowing illegal gambling** on the premises will subject the permit to revocation? Yes No

AFFIDAVIT

I hereby solemnly swear or affirm that each statement in this application is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

I understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code Annotated §10-7-503.

I, Chuan Shyr, understand that by submitting this application, a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

I, Chuan Shyr, hereby release, absolve and hold harmless, the City of Knoxville, the Knoxville Beer Board, the Knoxville Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

I have read and understand the foregoing Release and understand its provisions and voluntarily consent to abide by its requirements.

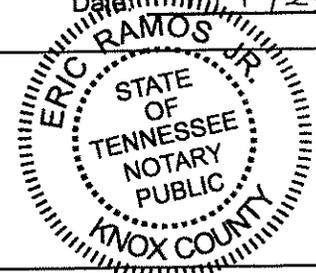
Chuan Shyr
 Signature of Applicant

Date: 11/1/2025

Sworn to and subscribed before me this 04 day of 04, 2025.

Notary Public: [Signature]

My Commission Expires: 09/05/27



**CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
OWNER/MANAGER APPLICATION**

Reason for Application: New Application Manager Change or Addition

1. Name Hsinhao Liao Owner—Percentage of Ownership _____ % Manager
2. Home Address 10063 Fox Cove Rd City Knoxville State TN Zip 37922
3. Home Phone () _____ Cellular Phone (865) 696-8636 Date of Birth 10/19/1981
4. Driver's License # _____ State TN Social Security # _____
5. Local Business Name Kyuvamen Knoxville LLC
6. Local Business Address/ZIP 213 N. Peters Rd Knoxville TN 37923 Business Phone: (865) 696-1706
7. Have you ever been convicted of any violation of liquor and/or beer laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges **currently pending**? Yes No
If yes, give particulars of each charge, including city, county, state: court and date: _____
8. Have you ever had a beer permit revoked, suspended, or denied? Yes No
If yes, explain: _____
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*If yes, give particulars of each charge, including city, county, state: court and date: _____
10. Do you understand both the state laws and the local laws regulating the sale and distribution of beer in the City of Knoxville? Yes No
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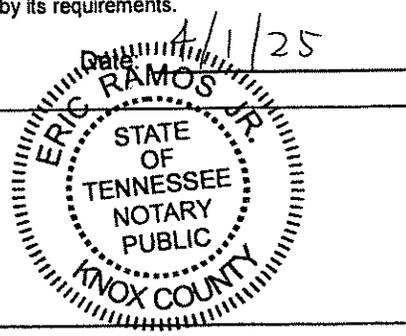
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Hsinhao Liao, understand that by submitting this application, a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

Hsinhao Liao, hereby release, absolve and hold harmless, the City of Knoxville, the Knoxville Beer Board, the Knoxville Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

I have read and understand the foregoing Release and understand its provisions and voluntarily consent to abide by its requirements.

[Signature]
Signature of Applicant



Sworn to and subscribed before me this 04 day of 04, 2025.

Notary Public: [Signature]

My Commission Expires: 09/05/27

CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT

Property Details

Property Address: 213 N. Peters Rd, Knoxville TN 37923

Directions to business, including any landmarks:

Town + Country Shopping Center at West Knoxville
Same shopping center w/ Panera Bread, Yassin's Falafel
House, Alfrud's Italian, + Blaze Pizza.

Property Owner Information:

Name DDRTC T+C, LLC (Property Manager, April Brown)
Phone 404-410-7120

Neighborhood Demographics

Provide the following locations nearest to the business. Provide ALL lines of information requested. You may want to drive or walk the area around the business location to determine which facilities are closest. You will be held accountable for the information provided.

****Must be filled in completely - No Exceptions****

School / Day Care:

Name Primrose School of West Knoxville
Address 267 S Peters Rd, Knoxville, TN 37923

Funeral Home:

Name Cremation Options Inc
Address 233 S Peters Rd, Knoxville TN 37923

Hospital:

Name Parkwest Medical Center
Address 9352 Park West Blvd, Knoxville TN 37923

CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT

Notice of Actions Contact

Pursuant to City of Knoxville Code Section 4-67, the City requires the applicant to designate an individual **residing within Knox County** to receive notice of actions of the City or the Beer Board and to accept service of process. Please provide the name of the individual, their position with the applicant (owner, manager, etc.) and their address (may be business location). Note that the applicant is required to notify the City in accordance with Section 4-67 if there is any change in this information. In addition to a local address, please provide an address to which certified mail may be sent.

BEER PERMIT APPLICATION:

Business Name: Kyuramen Knoxville LLC

Business Location: 213 N Peters Rd, Knoxville TN 37923

PERSON RESPONSIBLE TO RECEIVE SERVICE OF PROCESS:

Name: Chuan Shyr

Position: Owner Phone (865) 696-1706

Address: 10063 Fox Cove Rd

City, State, Zip: Knoxville, TN, 37922

CERTIFIED MAILING ADDRESS:

Name: Chuan Shyr

Address: 10063 Fox Cove Rd

City, State, Zip: Knoxville TN 37922.

**Department
of
Finance**

CITY OF KNOXVILLE, TENNESSEE
Business License

**Business
Tax
Division**

Business Name and Location:
KYURAMEN KNOXVILLE LLC
213 N PETERS RD



Mailing Address:

KYURAMEN KNOXVILLE LLC
c/o CHUAN
10063 FOX COVE RD
KNOXVILLE, TN 37922

Account #	67002
Classification	2
License/Receipt #	279807
Issue Date	04/01/2025
Expiration Date	05/15/2026

Mark B.

Collection Officer

- FOLD -

Must be posted in a conspicuous place

- FOLD -

Business Tax Receipt

*Final Returns MUST be filed within 15
days of close of Business.*

Retail	0.00
Wholesale	0.00
Business Tax	0.00
Less Credits	0.00
Sub Total	0.00
Penalty	0.00
Interest	0.00
SubTotal	0.00

Min. Bus. Tax	15.00
Penalty	0.00
Interest	0.00
Coll. & Rec. Fees	0.00
SubTotal	15.00
Total Amount	15.00
Total Payments	15.00
Balance Due	0.00

Lic_New_App

City Revenue Office - P.O. Box 1028 - Knoxville, Tennessee 37901 - (865)215-2083 - (865)215-2621 (fax)

KYURAMEN KNOXVILLE LLC

Entity Type: Limited Liability Company (LLC)

Formed in: TENNESSEE

Term of Duration: Perpetual

Managed By: Member Managed

Series LLC: No

Number of Members: 6 or less

Status: Active

Control Number: 001472975

Initial Filing Date: 10/5/2023 1:08:00 PM

Fiscal Ending Month: December

AR Due Date: 04/01/2026

Obligated Member Entity: No

Registered Agent

DONALD J TEFFETELLER

105 WATAUGA DR

MARYVILLE, TN 37803

AR Standing: Good

Principal Office Address

213 N PETERS RD

KNOXVILLE, TN 37923

RA Standing: Good

Mailing Address

213 N PETERS RD

KNOXVILLE, TN 37923

Other Standing: Good

Revenue Standing: Not Good

History (5)



Server Plan for Kyuramen

As part of Beer Permit Application

Business Name: Kyuramen

Business Address: 213 N Peters Road

Knoxville, TN 37923

Applicant/Owner: Chuan Shyr

Contact Phone Number: 865-696-1706

1. Server Training

All employees who serve beer will complete an approved responsible alcohol service training program, such as the TABC Responsible Beer Vendor Training (or the appropriate training per state/county).

- Training will be completed within 30 days of hire.
- Refresher training will be conducted annually.

2. Age Verification / ID Policy

Kyuramen has a strict 21-and-over policy for beer service.

- Servers are trained to check all IDs for guests who appear under 40.
- Acceptable IDs include valid government-issued driver's licenses, state IDs, passports, or military IDs.
- Fake or altered IDs will be confiscated and reported to management and law enforcement, if necessary.

3. Over-Serving Prevention

- Servers are trained to recognize signs of intoxication (slurred speech, coordination issues, etc.).

- If a guest appears intoxicated, staff is instructed to stop service and notify a manager.
- We promote food and water service alongside alcohol to moderate consumption.
- Management reserves the right to cut off alcohol service at any time.

4. Security and Incident Handling

- A manager or lead server will be present during all hours of alcohol service.
- Any incidents (over-intoxication, fake ID attempts, service refusal) will be documented in a server logbook and reviewed weekly.
- In cases of unruly or intoxicated patrons, local law enforcement will be called as needed.

5. Supervision & Enforcement

- All beer service will be overseen by a manager or designated supervisor.
- Only trained and authorized staff will be allowed to serve beer.
- Random spot checks will be conducted to ensure ID checks and proper service.

Signed:



Chuan Shyr

Owner

4/21/25

CITY OF KNOXVILLE
INTEROFFICE MEMORANDUM

DATE: 4-3-25

TO: Donald Jenkins, City Surveyor
Engineering Department

FROM: Mark Byrd, Collections Officer
Finance Department

RE: Request for distance measurements for beer permit application

Please measure the distances from the below indicated beer permit applicant's proposed location to the public facilities indicated and forward this information back to me. As required by law, this information is necessary to process the applicant's beer permit request. Thank you in advance for your assistance.

Business name: Kyuramen

Business location: 213 N Peters Rd

Property description: New construction Pre-existing structure

Directions to and/or landmarks near location: _____

SCHOOL/DAYCARE:

Name: Primrose School of West Knoxville

Address: 267 S Peters Rd

Distance/feet: MORE THAN 300'

FUNERAL HOME:

Name: Cremation Options

Address: 233 S Peters Rd

Distance/feet: MORE THAN 300'

HOSPITAL:

Name: ParkWest Medical Center

Address: 9352 Parkwest Blvd

Distance/feet: MORE THAN 300'