



Augusta-Richmond County Planning & Development Department  
1803 Marvin Griffin Road  
Augusta, GA. 30906

ALCOHOL BEVERAGE APPLICATION

Alcohol Number 25-22 Year 2025 Alcohol Account Number \_\_\_\_\_

1. Name of Business Osaka sushi & steakhouse
2. Business Address 222 Tobacco Road
3. City Hephzibah State GA Zip 30815
4. Business Phone (606) 364 2626 Home Phone ( ) \_\_\_\_\_
5. Applicant Name and Address: Shi mei xing  
3708 Pinnacle Place  
Hephzibah, GA 30815
6. Applicant Social Security # 071-02-231 D.O.B. 01/10/1980
7. If Application is a transfer, list previous Applicant: \_\_\_\_\_

8. Business Location: Map & Parcel 1400010100 Zoning B1
9. Location Manager(s) \_\_\_\_\_

10. Is Applicant an American Citizen or Alien lawfully admitted for permanent residency?  
☒ Yes ( ) No

OWNERSHIP INFORMATION

11. Corporation (if applicable): Date Chartered: 11/14/22
12. Mailing Address:  
Name of Business Osaka sushi & steakhouse  
Attention Shi mei xing  
Address 2626 Tobacco Road  
City/State/Zip Hephzibah GA 30815
13. Ownership Type: ☒ Corporation ( ) Partnership ( ) Individual
14. Corporate Name: Osaka 2626 Restaurant INC  
List name and other required information for each person having interest in this business.

Name	Position	SSNO#	Address	Interest
<u>Shi Mei xing</u>	<u>Owner</u>		<u>3708 Pinnacle Place</u>	<u>100%</u>

15. What type of business will you operate in this location?  
( ) Restaurant - Full ( ) Lounge ( ) Convenience Store  
☒ Restaurant - Limited ( ) Package Store ( ) Hybrid  
( ) Other: \_\_\_\_\_

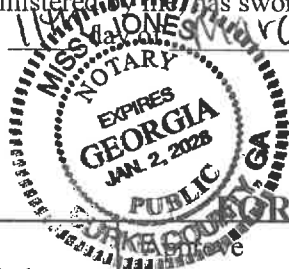
License Information	Liquor	Beer	Wine	Dance	Sunday Sales
Retail Package Dealer					
Consumption on Premises		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Wholesale					

Total License Fee: \$ \_\_\_\_\_  
Prorated License Fee: (After July 1 ONLY) \$ \_\_\_\_\_

16. Have you ever applied for an Alcohol Beverage License before: \_\_\_\_\_  
If so, give year of application and its disposition: \_\_\_\_\_
17. Are you familiar with Georgia and Augusta-Richmond County laws regarding the sale of alcoholic beverages? ☒ Yes ( ) No If so, please initial SX



18. Attach a passport-size photograph (front view) taken within two years. Write name on back of the dealer submitting the license application.
19. Has any liquor business in which you hold, or have held, any financial interest, or are employed, or have been employed, ever been cited for any violation of the rules and regulations of Augusta-Richmond County or the State Revenue Commission relating to the sale and distribution of distilled spirits? ( ) Yes (X) No  
If yes, give full details: \_\_\_\_\_
20. Have you ever been arrested, or held by Federal, State, or other law-enforcement authorities, for any violation of any Federal, State, County or Municipal law, regulation or ordinance: (Do not include traffic violations, with the exception of any offenses pertaining to alcohol or drugs). All other charges must be included, even if they are dismissed. ( ) Yes (X) No  
If yes, give reason charged or held, date and place where charged and its disposition. \_\_\_\_\_
21. List owner or owners of building and property.  
shi mei xing
22. List the name and other required information for each person, firm or corporation having any interest in the business.  
NO
23. If a new application, attach a surveyor's plat and state the straight line distance from the property line of school, church, library, or public recreation area to the wall of the building where alcohol beverages are sold.  
A) Church \_\_\_\_\_ C) School \_\_\_\_\_  
B) Library \_\_\_\_\_ D) Public Recreation \_\_\_\_\_
24. State of Georgia, Augusta-Richmond County, I, shi mei xing  
Do solemnly swear, subject to the penalties of false swearing, that the statements and answers made by me as the applicant in the forgoing alcoholic beverage application are true.  
shi mei xing  
Applicant Signature
25. I hereby certify that Shi mei xing is personally known to be,  
That he/she signed his/her name to the forgoing application stating to me that he/she knew and understood all statements and answers made herein, and, under oath actually administered by me, has sworn that said statements and answers are true.  
This 11th day of March, in the year 2025.



Missy Jones  
Notary Public

FOR OFFICE USE ONLY			
Department	Recommendation	Alcohol Inspector	Deny
Sheriff			
Fire Inspector			

The Board of Commissioners on the \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_,  
(Approved, Disapproved) the forgoing application

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
Date