



MEMORANDUM

TO: Bob Klein, Chair, and Members of the
Alcoholic Beverage Control Board

DATE: June 12, 2018

FROM: Erika McConnell, Director

RE: 5652 Zip Kombucha

Requested Action: New license application

Statutory Authority: AS 04.06.090(b): "The board shall review all applications for licenses made under this title and may order the director to issue, renew, revoke, transfer, or suspend licenses and permits authorized under this title."

AS 04.11.100(b): "A license may be issued under this section only if the board determines that the premises to be licensed are a bona fide restaurant or eating place."

3 AAC 304.305(a): "In AS 04.11.100 and this section, a "bona fide restaurant or eating place" is an establishment, or portion of an establishment, where, during all times that beer or wine is served or consumed,
(1) the patron's principal activity is consumption of food; and
(2) a variety of types of food items appropriate for meals is available for sale as shown on a menu provided to patrons and filed with the board;"

Staff Rec.: Approve the license with the condition that all non-dessert menu items be prepared on the licensed premises by the time of license renewal at the end of 2019

Background: This applicant for a new restaurant or eating place license has provided a very limited menu. The licensee stated that while the four available sandwiches and the two available salads will be made on site, the three types of pizza will not be made on site, and it appears the desserts are also made elsewhere.

The board has denied restaurant or eating place license applications in the past when the applicant proposed to serve food that was not prepared on the licensed premises, determining such establishments were not bona fide restaurants, as required by AS 04.11.100.

Attachment: Revised menu and email correspondence with applicant
Application

From: Jessie Janes
To: [Oates, Sarah D \(CED\)](#)
Subject: Re: Lic. 5652 DBA Zip Kombucha - Sample Menu Required
Date: Wednesday, May 30, 2018 12:40:33 PM

Good Afternoon Sarah,

We will be making Salads and Sandwiches on site.

I intend to make Pizzas on site once i get enough cashflow to install a pizza oven.

Jessie Janes

On Wed, May 30, 2018 at 12:35 PM, Oates, Sarah D (CED) <sarah.oates@alaska.gov> wrote:

Good afternoon,

Please provide a list of the foods that you will be making and preparing on the premises for sale to the public during your operating hours.

Thank you,

Sarah Daulton Oates

Program Coordinator

Alcohol & Marijuana Control Office

Phone: 907.269.0350

alcohol.licensing@alaska.gov

marijuana.licensing@alaska.gov



Please consider the environment before printing this e-mail.

From: jessie@zipkombucha.com <jessie@zipkombucha.com>

Sent: Wednesday, May 30, 2018 12:20 PM

To: Alcohol Licensing, CED ABC (CED sponsored) <alcohol.licensing@alaska.gov>
Subject: Re: Lic. 5652 DBA Zip Kombucha - Sample Menu Required

The pizza will be made off premise.

Jessie

On May 30, 2018, at 11:26 AM, Alcohol Licensing, CED ABC (CED sponsored) <alcohol.licensing@alaska.gov> wrote:

Good morning,

I have received the updated menu. Can you clarify whether or not the pizza on the menu is made on premises or off?

Sincerely,

<image001.png> **TJ Zielinski**

Occupational Licensing Examiner

Alcohol & Marijuana Control Office

[550 West 7th Avenue, Suite 1600](#)

[Anchorage, Alaska 99501](#)

From: Jessie Janes <jessie@zipkombucha.com>

Sent: Wednesday, May 30, 2018 11:21 AM

To: Alcohol Licensing, CED ABC (CED sponsored) <alcohol.licensing@alaska.gov>

Subject: Re: Lic. 5652 DBA Zip Kombucha - Sample Menu Required



CAFÉ MENU

Salads in a Jar

Spring-

*Organic Lime and Honey Dressing, Organic Zucchini, Organic Corn
Cherry Tomatoes, Organic Italian Farro Salad, Hydroponic Grown
Greens.*

Mediterranean-

*Red Wine Vinaigrette, Organic Couscous, Non-GMO Bell Pepper,
Organic Green Beans, Organic Lentil Salad, Cherry Tomatoes,
Hydroponic Grown Greens.*

Sandwiches

(Choice of Chips or Potato Salad)

Hot Ham and Cheese

Smoked Salmon Salad

BLT

Club

Pizza by the Slice

Cheese

Pepperoni

Combo

Just Dessert

Wild Scoops Ice Cream

Fire Island Cupcakes



Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

What is this form?

This new license application form is required for all individuals or entities seeking to apply for a new liquor license. Applicants should review **Title 04 of Alaska Statutes** and **Chapter 304** of the **Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260 and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 – Establishment and Contact Information

Enter information for the business seeking to be licensed.

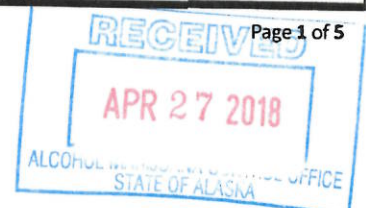
Licensee:	Zip Kombucha LLC		
License Type:	Restaurant/Eating Place	Statutory Reference:	AS 04.11.100
Doing Business As:	Zip Kombucha		
Premises Address:	3404 Arctic Blvd		
City:	Anchorage	State:	AK ZIP: 99503
Local Governing Body:	Municipality of Anchorage		
Community Council:	Spenard Community Council		

Mailing Address:	PO Box 111504		
City:	Anchorage	State:	AK ZIP: 99511

Designated Licensee:	Jessie Janes		
Contact Phone:	907-227-7166	Business Phone:	907-227-7166
Contact Email:	Jessie@ZipKombucha.com		

Seasonal License? Yes No If "Yes", write your six-month operating period: _____

OFFICE USE ONLY			
Complete Date:	4/30/2018	License Years:	License #: 5652
Board Meeting Date:	6/12/2018	Transaction #:	69157
Issue Date:		BRE:	TJZ





Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

Section 2 – Premises Information

Premises to be licensed is:

- an existing facility a new building a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer.

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.

Section 3 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 4.

If more space is needed, please attach a separate sheet with the required information.

The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: applicant affiliate

Name:					
Address:					
City:		State:		ZIP:	

This individual is an: applicant affiliate

Name:					
Address:					
City:		State:		ZIP:	





Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

Section 4 – Entity Ownership Information

This section must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 5.

If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a corporation, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president, vice-president, secretary, and managing officer*.
- If the applicant is a limited liability organization, the following information must be completed for each *member with an ownership interest of 10% or more*, and for each *manager*.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

Entity Official:	Jessie L. Janes				
Title(s):	Member	Phone:	907-227-7166	% Owned:	100
Address:	12231 Johns Road Apt 2				
City:	Anchorage	State:	AK	ZIP:	99515

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	





Alaska Alcoholic Beverage Control Board Form AB-00: New License Application

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10071812	AK Formed Date:	11/15/17	Home State:	Alaska
Registered Agent:	Andrew Mitton		Agent's Phone:	907-602-8360	
Agent's Mailing Address:	405 W 36TH AVE STE 200				
City:	Anchorage	State:	AK	ZIP:	995

Residency of Agent: Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?

Section 5 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses: Yes No

Does any representative or owner named in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

Section 6 – Authorization

Communication with AMCO staff: Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

If "Yes", disclose the name of the individual and the reason for this authorization:





Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

Section 7 – Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.



I certify that all proposed licensees have been listed with the Division of Corporations.



I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.



I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.



I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.



As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete.


Signature of licensee

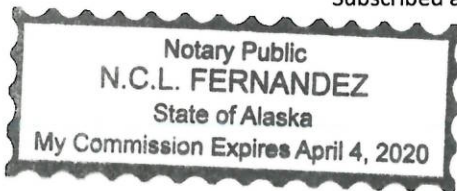

Signature of Notary Public

Jessie Janes
Printed name of licensee

Notary Public in and for the State of ALASKA

My commission expires: 04/04/2020

Subscribed and sworn to before me this 20TH day of FEBRUARY, 20 18.





Alaska Alcoholic Beverage Control Board Form AB-02: Premises Diagram

What is this form?

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

Yes No

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.



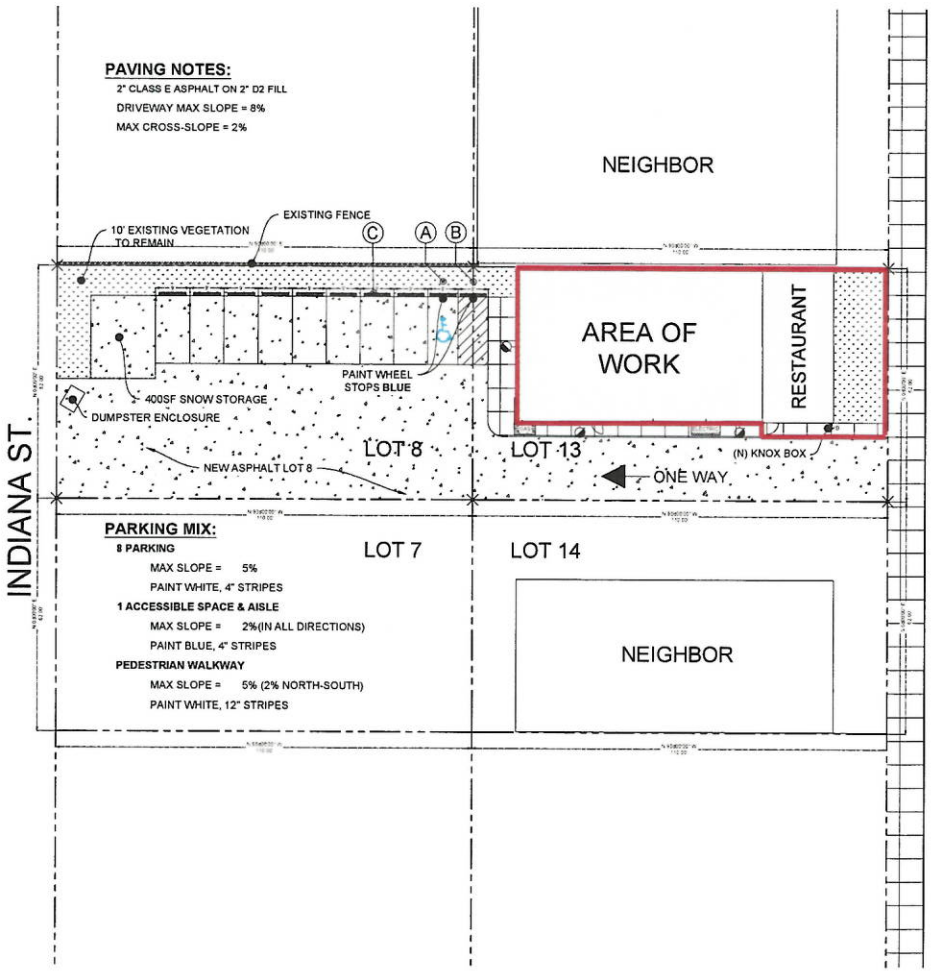
Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Zip Kombucha LLC	License Number:	
License Type:	Restaurant/ Eating Place		
Doing Business As:	Zip Kombucha		
Premises Address:	3404 Arctic Blvd		
City:	Anchorage	State:	AK
		ZIP:	99503



PAVING NOTES:
 2" CLASS E ASPHALT ON 2" D2 FILL
 DRIVEWAY MAX SLOPE = 8%
 MAX CROSS-SLOPE = 2%



PARKING MIX:
8 PARKING
 MAX SLOPE = 5%
 PAINT WHITE, 4" STRIPES
1 ACCESSIBLE SPACE & AISLE
 MAX SLOPE = 2% (IN ALL DIRECTIONS)
 PAINT BLUE, 4" STRIPES
PEDESTRIAN WALKWAY
 MAX SLOPE = 5% (2% NORTH-SOUTH)
 PAINT WHITE, 12" STRIPES

TITLE 21 CODE REVIEW - DETAILS

Site Data:
 LEGAL: Roberts BLK: 3, LT: 8 & 13
 ADDRESS: 3404 Arctic Blvd
 CITY, STATE: Anchorage, AK
 ZONING: B3, R3
 LOT SIZE: 6,820 S.F.
 PARCEL: 010-106-05-000
 PLAT: SW-1629

ZONING: 21.04-07

- USE SPECIFIC STANDARDS: 21.05.050
- TRASH ENCLOSURE: PROVIDED
- LANDSCAPING: L1 REQUIRED ALONG LOCAL STREET. LEGAL NONCONFORMITY.
- SNOW STORAGE: 5% OF PAVEMENT, MIN WIDTH: 6', 7,950 SF PROPOSED PAVING, 400 SF STORAGE
- AASHTO SITE TRIANGLE: N/A ACCESS IS EXISTING TO REMAIN
- STREET CLASSIFICATION: MINOR ARTERIAL II
- COVERAGE: 50.0% (21.06-2)
- OPEN SPACE: N/A
- LANDSCAPE ARCHITECT REQUIRED: NO, FOR LANDSCAPED AREA BELOW 1,000 SF
- PEDESTRIAN CONNECTION TO ENTRANCE REQ'D
- INDUSTRIAL AND CONTROLLED ACCESS EXEMPT
- INCORPORATE HEIGHT ADDRESS NUMBERS, EXISTING TO REMAIN.

PARKING REQUIRED (21.07-4):

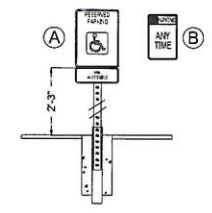
- ASSEMBLY AREA
600 SF gfa X 1 PER 100 SF gfa = 6 SPACES
- COMMERCIAL FOOD PRODUCTION AREA
2,645 SF gfa X 1 PER 800 SF gfa = 3.3 SPACES
- TOTAL NOW REQUIRED = 9.3 SPACES
 (COMMON DEVELOPMENT AGREEMENT TO BE PROVIDED)

HYDRANT INFORMATION

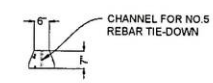
- HYDRANT NUMBER : HY31630017
- HYDRANT FLOW AT MAX DAY DEMAND OF YEAR
31.40 gpm @ 20 psi. STATIC 63 psi.

CONDITIONAL USE WILL BE REQUIRED

- LOT 13 (B3)
- LOT 8 (R3)



A,B Handicap/No Parking Sign
 Scale: 1/2"=1'-0"



C Concrete Curb Stop Detail - MASS 30.09
 Scale: 1/2"=1'-0"

1 Parking Facility Layout, Circulation, & Design Plan
 Scale: 1/16"=1'-0"

KEY - SYMBOL - LEGEND

	VEGETATION		EXTERIOR LIGHT (E)		NEAREST HYDRANT
	SIDEWALK		PROPERTY LINE		ELECTRIC METER (E)
	ASPHALT		FENCE (E)		GAS METER (E)

NOTE: USE HALF INDICATED SCALE FOR 11X17 DRAWINGS

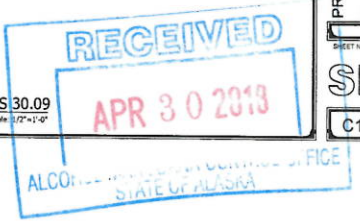


Determine DESIGN LLC
 AECL1613
 903 W. NORTHERN LTS, BLVD # 206
 ANCHORAGE, AK 99503
 C: (907)339-9100
 dan@determinedesign.com

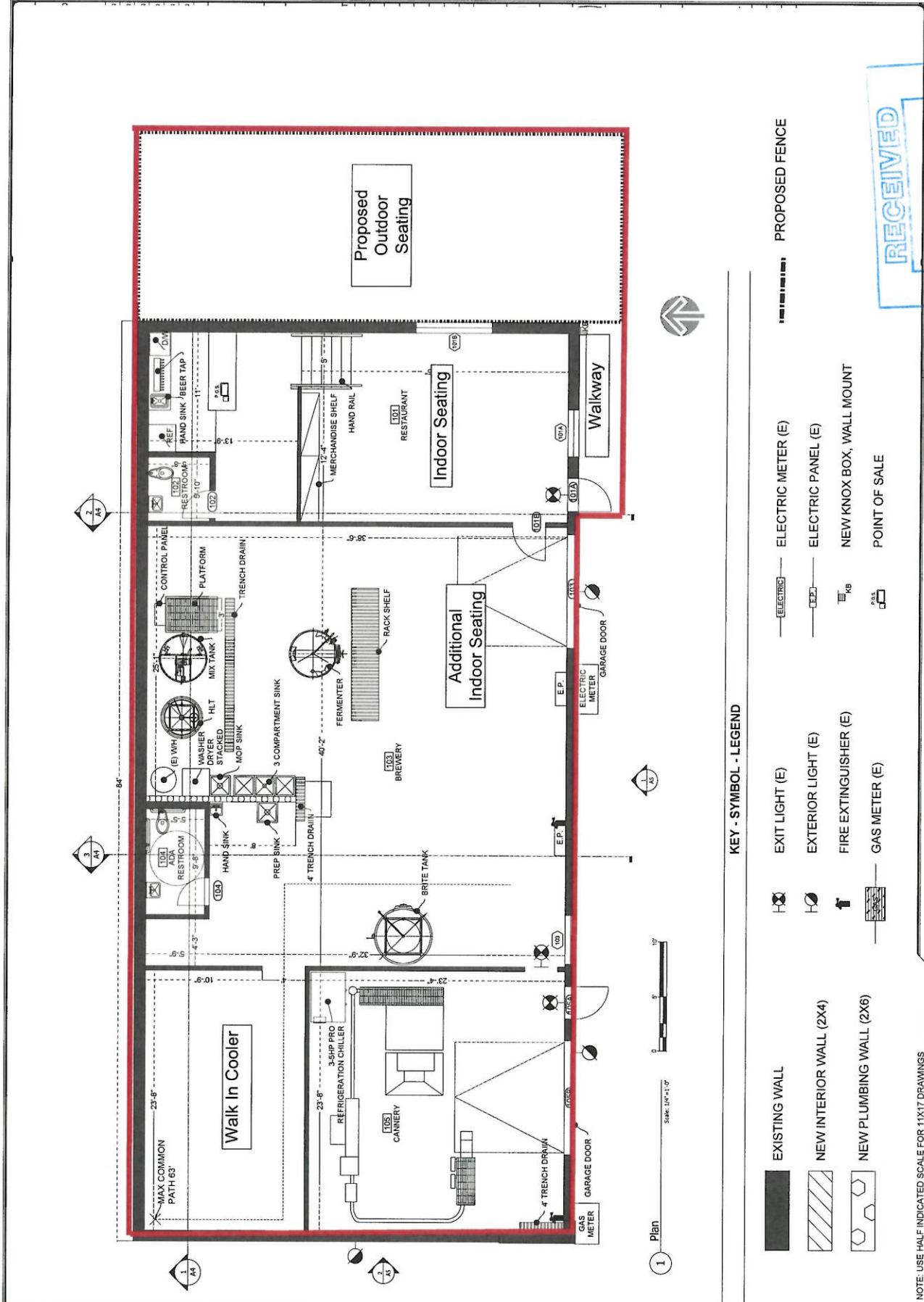
Drawn: Daniel Clift
 Date: 3/20/18
 Time: 9:08 AM



PROJECT TITLE: ZIP Kombucha
 Prepared for: Jessie L. James
 Sheet Title: Site Design & Parking
 ADDRESS: 3404 Arctic Blvd.



SD-1
 C18-1198



1 Plan
 Scale: 1/4" = 1'-0"

KEY - SYMBOL - LEGEND

- EXISTING WALL
- NEW INTERIOR WALL (2X4)
- NEW PLUMBING WALL (2X6)
- EXIT LIGHT (E)
- EXTERIOR LIGHT (E)
- FIRE EXTINGUISHER (E)
- GAS METER (E)
- ELECTRIC METER (E)
- ELECTRIC PANEL (E)
- NEW KNOX BOX, WALL MOUNT
- POINT OF SALE
- PROPOSED FENCE



NOTE: USE HALF INDICATED SCALE FOR 11X17 DRAWINGS



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

What is this form?

A restaurant designation permit application is required for a licensee desiring designation under 3 AAC 304.715 – 3 AAC 304.795 as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049. Designation will be granted only to a holder of a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license, and only if the requirements of 3 AAC 304.305, 3 AAC 304.725, and 3 AAC 304.745, as applicable, are met. A **detailed floor plan** of the proposed designated and undesignated areas of the licensed business and a **menu** or expected menu listing the meals to be offered to patrons must accompany this form. Applicants should review AS 04.16.049 – AS 04.16.052 and 3 AAC 304.715 – 3 AAC 304.795. All fields of this form must be completed. The required \$50 permit fee may be made by credit card, check, or money order.

Section 1 – Establishment Information

Enter information for licensed establishment.

Licensee:	Zip Kombucha LLC				
License Type:	Restaurant/ Eating Place	License Number:			
Doing Business As:	Zip Kombucha				
Premises Address:	3404 Arctic Blvd				
City:	Anchorage	State:	AK	ZIP:	99503
Contact Name:	Jessie Janes	Contact Phone:	907-227-7166		

Section 2 – Type of Designation Requested

This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

- Dining after standard closing hours: AS 04.16.010(c)
- Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)
- Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)
- Employment for persons 16 or 17 years of age: AS 04.16.049(c)

NOTE: Under AS 04.16.049(d), this permit is not required to employ a person 18 - 20 years of age.

OFFICE USE ONLY					
Issue Date:		Transaction #:	78490	BRE:	TJZ





Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 3 – Additional Information

Enter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/pm:

M-F 4 p.m. to 11 p.m.
Sat-Sun 11 a.m. to 11 p.m.

Are any forms of entertainment offered or available within the licensed business or on the proposed designated portions of the premises?

Yes No

If "Yes", describe the entertainment offered or available:

Music, Dancing, Limited live music (1-2 people)

Food and beverage service offered or anticipated is:

table service buffet service counter service other

If "other", describe the manner of food and beverage service offered or anticipated:

[Empty text box for describing other food and beverage service]

Is an owner, manager, or assistant manager 21 years of age or older always present on the premises during business hours?

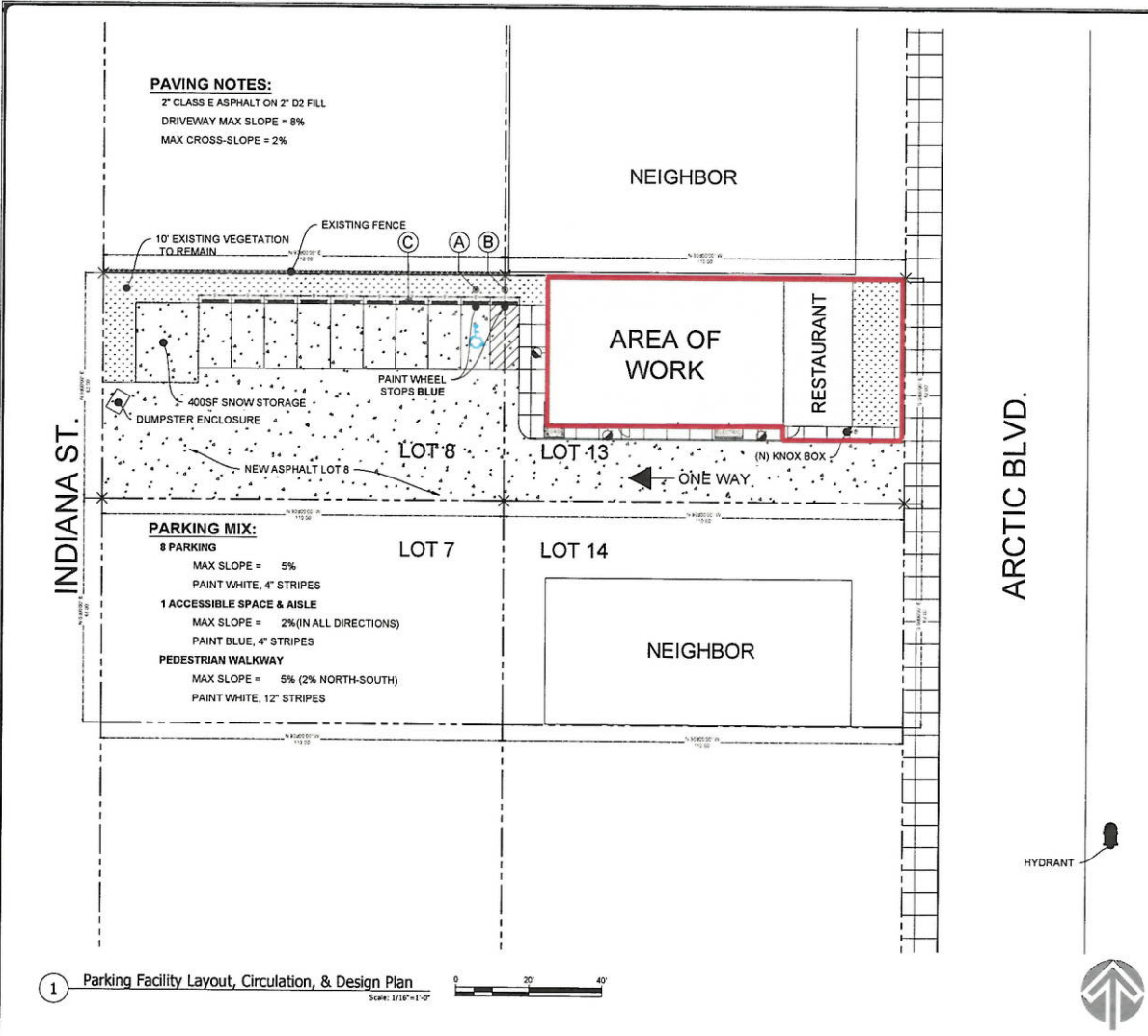
Yes No

Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the third page of this form.

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the third page of this form that meet the requirements of this form.

Yes No





PAVING NOTES:
 2" CLASS E ASPHALT ON 2" D2 FILL
 DRIVEWAY MAX SLOPE = 8%
 MAX CROSS-SLOPE = 2%

PARKING MIX:
 8 PARKING
 MAX SLOPE = 5%
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	VEGETATION		EXTERIOR LIGHT (E)		NEAREST HYDRANT
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 PLAT: SW-1629

ZONING: 21.04-07

USE SPECIFIC STANDARDS: 21.05.050
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SNOW STORAGE: 5% OF PAVEMENT, MIN WIDTH: 8'
 7,950 SF PROPOSED PAVING, 400 SF STORAGE

AASHTO SITE TRIANGLE: N/A ACCESS IS EXISTING TO REMAIN

STREET CLASSIFICATION: MINOR ARTERIAL II

COVERAGE: 50.0% (21.06-2)

OPEN SPACE: N/A

LANDSCAPE ARCHITECT REQUIRED: NO, FOR LANDSCAPED AREA BELOW 1,000 SF

PEDESTRIAN CONNECTION TO ENTRANCE REQ'D

INDUSTRIAL AND CONTROLLED ACCESS EXEMPT

INCORPORATE HEIGHT ADDRESS NUMBERS, EXISTING TO REMAIN.

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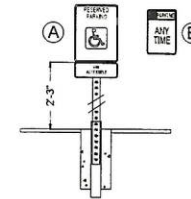
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600 SF gfa X 1 PER 100 SF gfa = 6 SPACES
- COMMERCIAL FOOD PRODUCTION AREA
2,645 SF gfa X 1 PER 600 SF gfa = 3.3 SPACES
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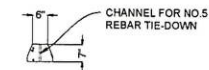
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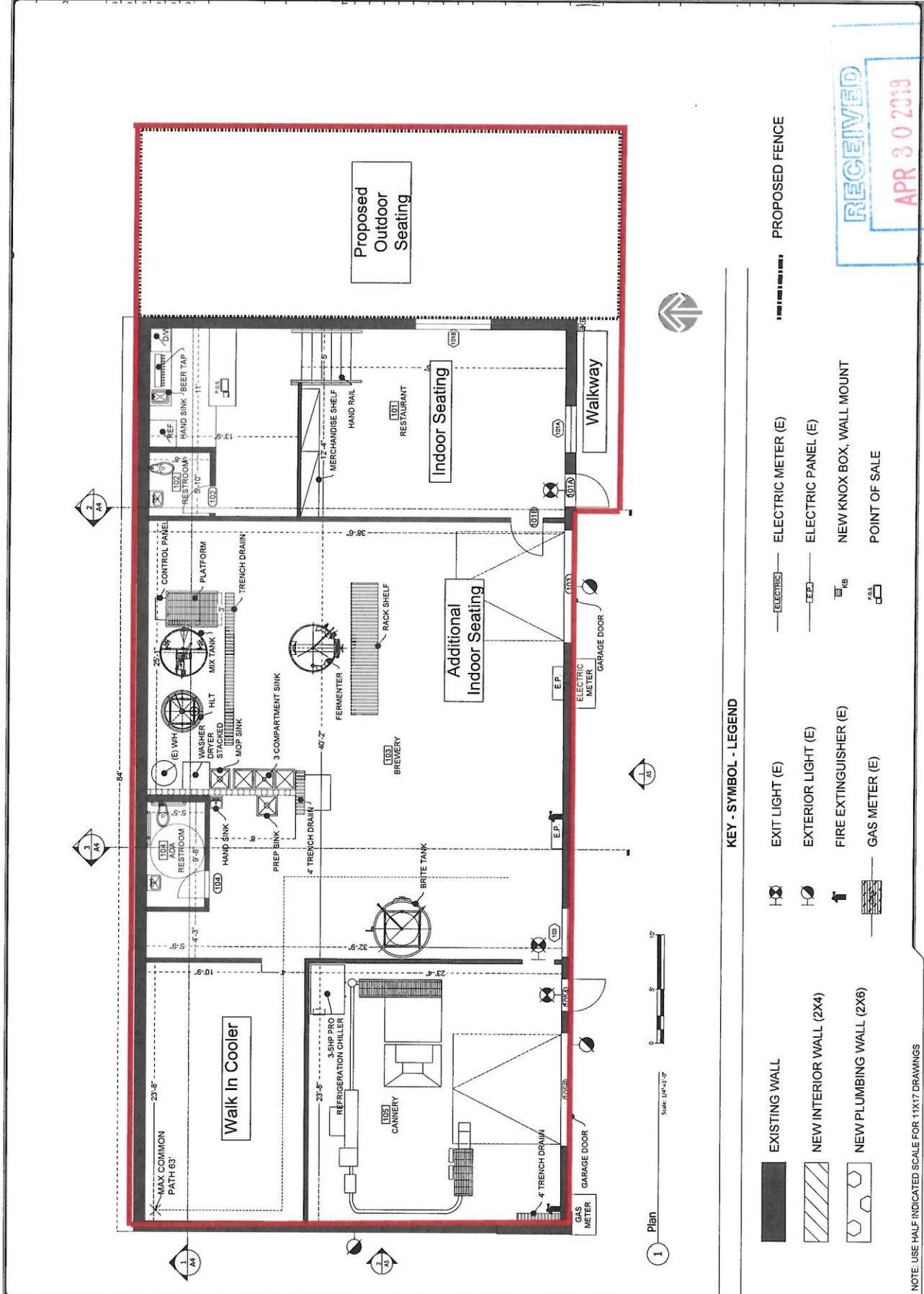
Determine DESIGN LLC
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 ANCHORAGE, AK 99503
 C: (907)339-9100
 dan@determinedesign.com

Drawn: Daniel Clift
 Date: 3/20/18
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PROJECT TITLE: ZIP Kombucha
 Prepared for: Jessie L. James
 Sheet Title: Site Design & Parking
 ADDRESS: 3404 Arctic Blvd.

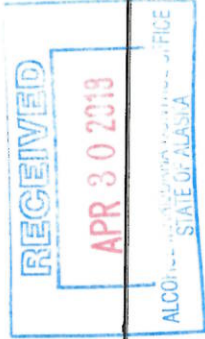




1 Plan
 Scale: 1/4" = 1'-0"

KEY - SYMBOL - LEGEND

- | | | | | | | |
|--|-------------------------|--|-----------------------|--------------------|--------------------------|----------------|
| | EXISTING WALL | | ELECTRIC | ELECTRIC METER (E) | | PROPOSED FENCE |
| | NEW INTERIOR WALL (2X4) | | EXIT LIGHT (E) | | ELECTRIC PANEL (E) | |
| | NEW PLUMBING WALL (2X6) | | EXTERIOR LIGHT (E) | | NEW KNOX BOX, WALL MOUNT | |
| | | | FIRE EXTINGUISHER (E) | | GAS METER (E) | |
| | | | GAS METER (E) | | POINT OF SALE | |



NOTE: USE HALF INDICATED SCALE FOR 11X17 DRAWINGS



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 5 – Certifications and Approvals

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I have included with this form a detailed floor plan of the proposed designated and undesignated areas of the licensed business for purposes of this application. I understand that this diagram is different than my licensed premises diagram.

I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons.

I certify that the license for which I am requesting designation is either a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license.

I declare under penalty of perjury that this form, including all attachments and accompanying schedules and statements, is true, correct, and complete.

[Signature]
Signature of licensee

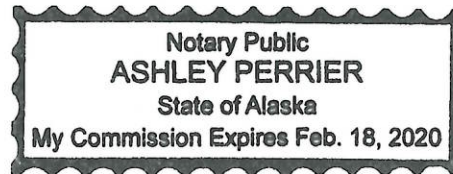
[Signature]
Signature of Notary Public

Jessie Jones
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: Feb 18, 2020

Subscribed and sworn to before me this 27 day of April, 2018.



Local Government Review (to be completed by an appropriate local government official):

Approved Disapproved

Signature of local government official

Date

Printed name of local government official

Title





Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

AMCO Enforcement Review:

Signature of AMCO Enforcement Supervisor

Printed name of AMCO Enforcement Supervisor

Enforcement Recommendations:

AMCO Director Review:

Approved Disapproved

Signature of AMCO Director

Printed name of AMCO Director

Date

Limitations:





CAFÉ MENU

Meat and Cheese Plates

Local Sausage and English Cheddar

German Sausage and Gouda

Smokes Salmon and

Small Plates

Mediterranean Plate

Hummus, tapenade, pita chips and Dolmas

Mexican Plate

Chips, Salsa, Guacamole

Alaska Plate

Smoked salmon dip and baguette

POPCORN

Just Butta

Cinnamon and honey

Spicy lime

Just Dessert

Wild Scoops Ice Cream

Fire Island Cupcakes

