

Department of Commerce, Community, and Economic Development

ALCOHOL AND MARIJUANA CONTROL OFFICE 550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: November 12, 2019

FROM: Erika McConnell, Director RE: 3050 Cushman Irashai

Requested Transfer of ownership and DBA change

Action:

Statutory AS 04.11.040(a): "A license issued under this title may not be transferred to another

Authority: person except with the written consent of the board."

AS 04.11.470: "A person may object to an application for issuance, renewal, transfer of location, or transfer to another person of a license, or for issuance of a permit, by serving upon the applicant and the board the reasons for the objection. The board shall consider the objections and testimony received at a hearing conducted under AS 04.11.510(b)(2) when it considers the application..."

AS 04.11.510(b)(2): "The board may review an application for the issuance, renewal, transfer of location, or transfer to another person of a license without affording the applicant notice or hearing, except...(2) the board may, on its own initiative or in response to an objection or protest, hold a hearing to ascertain the reaction of the public or a local governing body to an application if a hearing is not required under this subsection;"

Staff Rec.: Hold a public hearing; approve the transfer with delegation

Background: This is an application for transfer of ownership and DBA change of a restaurant or eating place license in Fairbanks. An objection from the Department of Labor – Workers' Compensation has been received due to non-compliance. Responses from the local governing bodies are still pending, as are the background investigations.

Attachment: Department of Labor objection

Transfer application



Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West Seventh Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

October 24, 2019

License Number:

Department of Revenue Department of Labor, Employment Security Department of Labor, Workers' Compensation Via email: theresa.mitchell@alaska.gov

elizabeth.glooschenko@alaska.gov

rizalina.olde@alaska.gov

velma.thomas@alaska.gov erwin.fariolan@alaska.gov dor.tax.collections@alaska.gov

3050

License Type:	Restaurant or Eating Place		
Applicant:	Three Star, LLC		
Doing Business As:	Cushman Irashai		
Transferee EIN:	84-2195458		
Transferor EIN:	83-1777797		
☑ Transfer of Ownersh	p Application	☐ Transfer of Controlling I	nterest
each applicable public hea which the applicant's prop This letter serves to provid	.11.370(a)(6) require that an apolith, fire, safety, and tax code are osed licensed premises are local entitle written notice and request for the control of	nd ordinance of the state and ated. or compliance status from the	the local governing body in e above referenced entities
	ation (see attached application 1CO office at alcohol.licensing(nation). Please complete and
REVIEWER: Erwin Fariola	n		□ DOR
DATE: 10/24/2019	PHONE: (907) 465-69	919	☐ Employment Security ☐ Workers' Compensation
☐ Compliant ► Nor	-compliant		
COMMENTS: No Workers	s' Compensation coverage.	Trans De	
If you have any questions,	please send them to <u>alcohol.lic</u>	ensing@alaska.gov.	
Sincerely,			

Erika McConnell Director, ABC Board

Euha M'Connell



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-01: Transfer License Application

/hat is this form?

his transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or cation of an existing liquor license. Applicants should review Title 04 of Alaska Statutes and Chapter 304 of the Alaska dministrative Code. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and AAC 304.105.

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

iter information for the current licensee and licensed establishment.

Section 1 - Transferor Information

Licensee:	3 Giro, Inc.			License #:		3050
License Type:	Restaurant oi	- Eatin	ig Place	Statutory Refere	ence:	As-04-11-100
Doing Business As:		Irashi	ai`			
Premises Address:	1448 5 ((ushinan	St			
City:	Fairbanks	1	State:	Alask 2	ZIP:	99701
Local Governing Body:		Star	Borough			
ansfer Type:						
Regular transfer	*			4		
Transfer with security	v interest					
Involuntary retransfe	r					
			×			
		OFFICE U	SE ONLY			
Complete Date:			Transa	ection #:		
Board Meeting Date:			License	e Years:		
issue Date:			BRE:		white the state of	
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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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ter information for the new	applicant and/or lo	cation seeking to	be licensed.				The second secon
Licensee:	Three	Stor, LLC					
Doing Business As:	Cush	man Ir	ashou				
Premises Address:	1448 S	(ushman	St F7.	banks AKK	99	70	
City:	Fairbanhs		State:	Alasha		ZIP:	7970]
Community Council:							
Mailing Address:	1002 -		<i>-</i>				
	1448 S	s (Jahnan	State:	Absta		ZIP:	99701
City:	Fairbanhs	A Company	State:	MAN		2.11	77/0/
Designated Licensee:	John	lee					
Contact Phone:	924-24046		Business	Phone:	907 -	-374 -	7003
Contact Email:	JUL SEAT	TAC @ gmi	il com				
	Section	on 3 – Pren	nises inf	ormation			
emises to be licensed is:							
an existing facility	a new bi	uilding [a propos	ed building			
e next two questions must	be completed by be	everage dispens	ary (including	tourism) and <u>pa</u>	ickage sto	r <u>e</u> applica	nts only:
What is the distance of the	e shortest pedestria ne nearest school gr	n route from the	e public entra	nce of the buildi	ing of your	r propose r.	d premises to
	O.S mile						
What is the distance of the public entrance of the	e shortest pedestria	in route from th	e public entra	ince of the buildi	ing of your	rpropose	d premises to
	0-4 miles		-	MENERAL	AND THE PROPERTY OF THE PARTY O		
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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 4 - Sole Proprietor Ownership Information

	leted by any <u>sole proprietor</u> who is a	beling for a He	unaca Entitias chauld ski	n to Caction	τ.
more space is needed, pl	ease attach a separate sheet with the nust be completed for each licensee a	e required info	rmation.	r to stotion	•••
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Address:		and the state of t			,
City:		State:		ZIP:	
is individual is an:	applicant affiliate				
Name:					
Address:					
City:		State:		ZIP:	
ortnership, that is applying more space is needed, plus of the applicant is a continuous the stock in the corporal of the applicant is a liming awnership interest of 10% with an interest of 10% applicant is a par with an interest of 10% applicant of 10% applica	leted by any entity, including a corporate for a license. Sole proprietors show ease attach a separate sheet with the poration, the following information of ation, and for each president, vice-presided liability organization, the following 10% or more, and for each manager. Increship, including a ilmited partners for more, and for each general partners.	ld skip to Secti e required info just be completesident, secreto ing information hip, the followi	on 6. rmation. ted for each <i>stockholder</i> (try, and managing office) must be completed for ea	who owns 10 c. ach member	% ar more of with an
Entity Official:	John Lee	and the second second	-	T	
Title(s):	member	Phone:	929-240-1619	% Owns	ed: 100
Address:	2/107 37th (+	_5			
City:	Scatax	State:	Washing ta	ZIP:	48198
			In the Contract of the Contrac	· · · · · · · · · · · · · · · · · · ·	
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Form AB-01: Transfer License Application

					***************************************		,,	
Entity Official:								
Title(s):			Phone:			% Owi	ned:	
Address:						•		
City:			State:			ZIP:		
						·		
Entity Official:				<u> </u>		T		
Title(s):			Phone:			% Owr	ned:	6640-ah/2010-ah/ah/ah/ah/ababa
Address:								
City:			State:			ZIP:		

Entity Official:								***************************************
Title(s):			Phone:			% Own	ed:	
Address:							_	
City:			State:			ZIP:		
This subsection must be comp tanding with the Alaska Divis Alaska. DOC Entity #:			a registered		ndividua			te of
Registered Agent:		noe		Agent's Phone:				
Agent's Mailing Address:			venue	Site 108				
City:	Archoize	State:		Plakele	ZIP:		995	18
esidency of Agent:							Yes	No
Is your corporation or LI	LC's registered agent a	n individual res	ident of the	state of Alaska?			X	Ò



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 - Other Licenses

vnership and financial interest in other alcoholic beverage businesses:	Yes	No
Does any representative or owner named as a transferee 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?		X
If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alalicense number(s) and license type(s):	aska, wh	ich
Section 7 – Authorization		
manufaction with 68400 staff.	V	4.
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?	Yes	No



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 - Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.
declare under penalty of perjury that the undersigned represents a controlling interest of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.
Signature of transferor
Afex June
Printed name of transferor
Subscribed and sworn to before me this 30 Mday of 00 , 20 19.
Signature of Notary Public Notary P
signature of transferor
Hex June
Printed name of transferor Subscribed and sworn to before me this 30 hay of 000, 20 9.
Signature of Notary Public
Signature of Notary Public Notary Eublic in and for the State of PLASKA My commission expires: 03 13 2023



Alaska Alcoholic Beverage Control Board

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Form AB-01: Transfer License Application

Section 9 - Transferee Certifications

ead each line below, and then	sign your initials in the box to the rig	ht of each statement:	Initials
certify that all proposed license	es (as defined in AS 04.11.260) and a	ffiliates have been listed on this application.	JL
certify that all proposed license	es have been listed with the Division	of Corporations.	JL
	roviding a false statement on this form dication or revocation of any license is	n or any other form provided by AMCO is grounds ssued.	ĴĹ
atron will complete an approve riving alcoholic beverages, will	d alcohol server education course, if r	pholic beverages or check the identification of a required by AS 04.21.025, and, while selling or ent course card or a photocopy of the card required by 3 AAC 304.465.	J
agree to provide all Information	required by the Alcoholic Beverage C	Control Board in support of this application.	JL
John Coe gnature of transferee			
JOHN LEE		<i>H</i> 2	
rinted name	Subteribad and swore to befor	e me this Wth day of AUGUST	20 9
	OCKARO TARLES	Signature of PLASY A	Notary Public
	OF ALTHUR	My commission expires:	8-2022
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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.

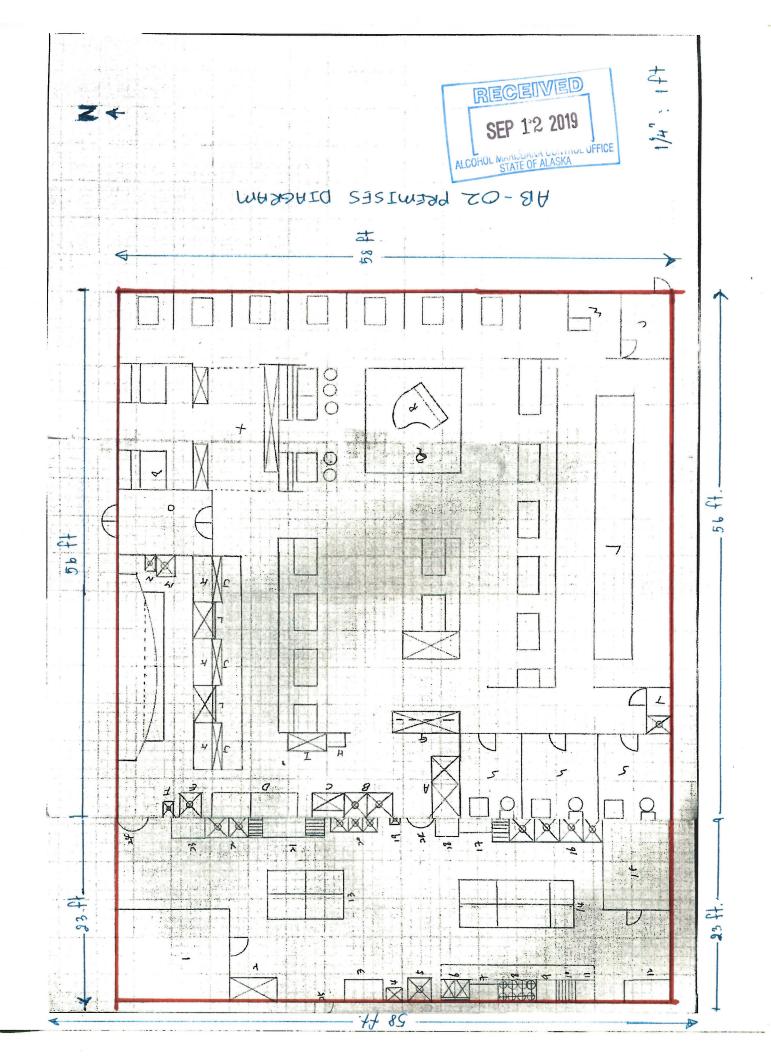
	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.	Z	

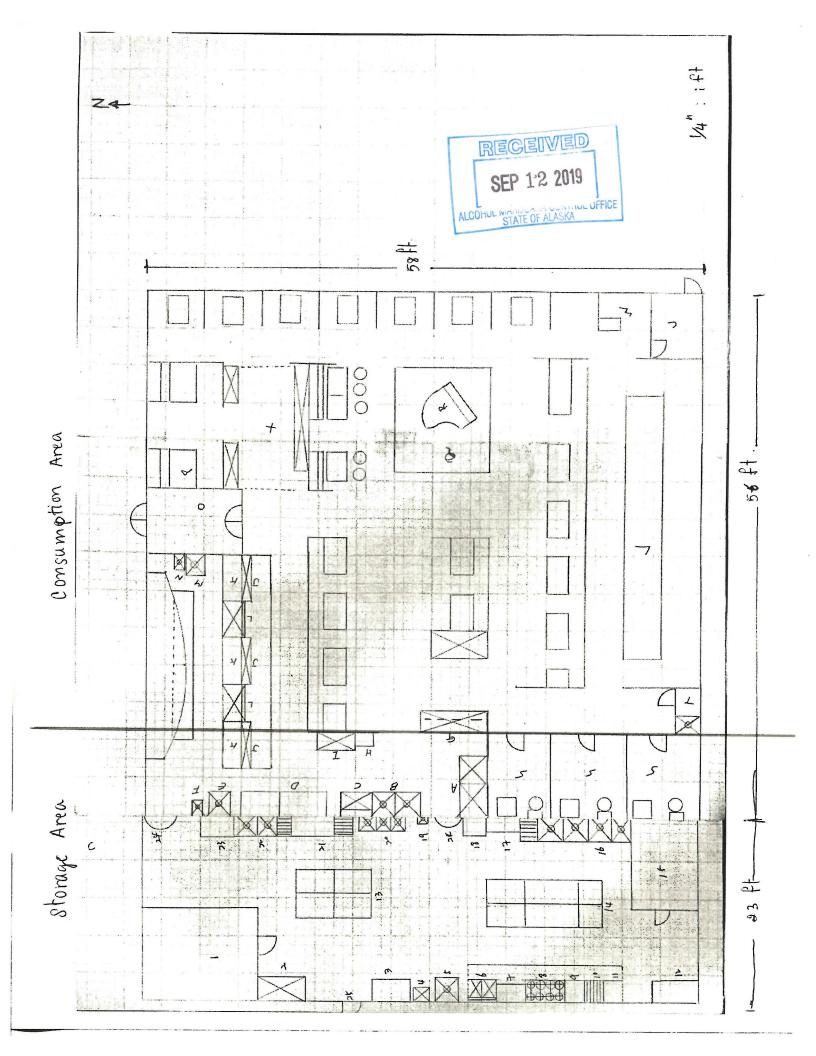
Section 1 - Establishment Information

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

Licensee:	Three Star LLC	License Number:	3050
License Type:	Restaurant and Eating	Ploice	
Doing Business As:	Cushman Irashai		
Premises Address:	1448 S (UShoran ST		
City:	Fzirbanks	State: AM	ZIP: 99751







Go gle Maps Irashai Sushi Restaurant (South Cushman Location)

rashai Sushi Restaurant (South

156 500

of The Form

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Map data @2019 50 ft L.

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https://www.google.com/maps/place/trashai+Sushi+Restaurant+(South+Cushman+Location)/@64.8352546, 147.7175469, 18.23z/data=!4m5!3m4!1s0x5132457d2e57d11b:0x5184ec20601de46|8m2!3d... 1/10x5184ec20601de46|8m2!3d... 1/10

Service Area

- A. refrigerator
- B. (2) bowl sink
- C. Ice Machine
- D. (2)Stainless Table
- E. (1)bowl sink
- F. Hand sink
- G. register(POS)
- H. Stainless Table
- I. Undercounter refrigeration
- J. (5Ft)Sushi case(HOSHIZAKI)
- K. Undercounter refrigeration
- L.(4Ft) sandwich refrigerator
- M. (1)bowl sink
- N. Hand sink
- O. Enter Door Area
- P. customer Table
- Q. Stage
- R. Piano
- S. (3)Restroom
- T. mop sink
- U. emergency Exit Door
- V.(10) Family room Table
- W. Extra Register(POS)
- X. Waiting seat

Cushman Irashai restaurant. Kitchen drawing

- 1. boiler room
- 2. refrigerator
- 3.(4x2.5Ft) Stainless Table
- 4. Hand sink
- 5.one bowl sink
- 6.(2)deep fryer
- 7. Stainless Table
- 8. 8 bowl burner grill
- 9. Stainless
- 10.grill
- 11. Stainless Table
- 12.13. (4)Stainless Table

Freever

- 14. (6)Stainless Table
- 15. walk in cooler
- 16. (4)bowl sink
- 17. grease
- 18. Stainless Table
- 19. Hand sink
- 20. (30bowl sink
- 21. dishwasher machine
- 22. (2)bowl sink
- 23. Stainless Table
- 24. kitchen in and out open door
- 25. back door