



MEMORANDUM

TO: Alcoholic Beverage Control Board

DATE: October 16, 2020

FROM: Glen Klinkhart, Interim Director

RE: 1811 Lil' Babes Bar and Grill

Requested Action: Transfer 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 04.11.470: "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; consider the objection by the Department of Labor – Workers Compensation.

Background: This is a transfer of controlling interest of Family Restaurants, Inc, from Ralf Kalenaka 100% to Roderick Van Buren 100% The response from the Municipality of Anchorage and Mountain View Community Councils are pending.

Attachment: Objection
Transfer Application



THE STATE
of **ALASKA**
GOVERNOR MIKE DUNLEAVY

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 5, 2020

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

License Number:	1811
License Type:	Beverage dispensary
Applicant:	Family Restaurants, Inc.
Doing Business As:	Lil Babes Bar & Grill
Transferee EIN:	92-0059860
Transferor EIN:	92-0059860

Transfer of Ownership Application

Transfer of Controlling Interest

AS 04.11.330(b) and AS 04.11.370(a)(6) require that an applicant for a liquor license operate in compliance with each applicable public health, fire, safety, and tax code and ordinance of the state and the local governing body in which the applicant's proposed licensed premises are located.

This letter serves to provide written notice and request for compliance status from the above referenced entities regarding the above application (see attached application documents for more information). **Please complete and return this form to the AMCO office at alcohol.licensing@alaska.gov.**

REVIEWER: Erwin Fariolan

DOR
 Employment Security
 Workers' Compensation

DATE: 10/6/2020 PHONE: (907) 465-6919

Compliant Non-compliant

COMMENTS: No workers' comp. insurance coverage.

If you have any questions, please send them to alcohol.licensing@alaska.gov.

Sincerely,

Glen Klinkhart
Interim-Director, ABC Board



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

What is this form?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing 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, AS 04.11.280, AS 04.11.290, 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 – Transferor Information

Enter information for the **current** licensee and licensed establishment.

Licensee:	Family Restaurants, Inc.	License #:	1811
License Type:	Beverage Dispensary	Statutory Reference:	04.11.090
Doing Business As:	Ralf's Sports Bar		
Premises Address:	3515 Mountain View Drive		
City:	Anchorage	State:	AK
		ZIP:	99508
Local Governing Body:	MOA		

Transfer Type:

- Regular transfer
- Transfer with security interest
- Involuntary retransfer

OFFICE USE ONLY

Complete Date:		Transaction #:	1286939
Board Meeting Date:		License Years:	
Issue Date:		BRE:	



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 2 – Transferee Information

Enter information for the **new** applicant and/or location seeking to be licensed.

Licensee:	Family Restaurants, Inc.				
Doing Business As:	Lil' Babes Bar & Grill				
Premises Address:	3515 Mountain View Drive				
City:	Anchorage	State:	AK	ZIP:	99508
Community Council:	Mountain View				

Mailing Address:	205 E. Dimond Blvd., Ste. 572				
City:	Anchorage	State:	AK	ZIP:	99515

Designated Licensee:	Roderick Van Buren				
Contact Phone:	907-947-4349	Business Phone:	907-947-4349		
Contact Email:	vroderick56@gmail.com				

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

Section 3 – 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.

0.6 Miles

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.

0.2 Miles

AMCO
 AUG 21 2020



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 4 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5.
 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:	

Section 5 – 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 6.
 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:	Roderick Van Buren				
Title(s):	Pres./Direc/SH/Sec/Treas	Phone:	907-947-4349	% Owned:	100
Address:	205 E. Dimond Blvd., Ste. 572				
City:	Anchorage	State:	AK	ZIP:	99515



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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:	

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 #:	16459D	AK Formed Date:	1/12/1977	Home State:	AK
Registered Agent:	Roderick Van Buren	Agent's Phone:	907-947-4349		
Agent's Mailing Address:	205 E. Dimond Blvd., Ste. 572				
City:	Anchorage	State:	AK	ZIP:	99515

Residency of Agent: Yes No

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

AMCO
 AUG 21 2020



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 – Other Licenses

Ownership 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?

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 7 – 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:

The Law Offices of Ernouf & Coffey, P.C. is assisting with the transfer process.



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.

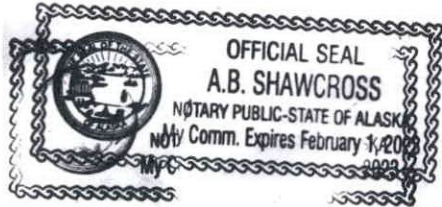
I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

Ralf Kalenka
Signature of transferor

Ralf Kalenka
Printed name of transferor

Subscribed and sworn to before me this 12 day of MARCH, 20 20.

A B Shawcross
Signature of Notary Public



Notary Public in and for the State of ALASKA

My commission expires: 2/1/23

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this ____ day of _____, 20 ____.

Signature of Notary Public

Notary Public in and for the State of _____

My commission expires: _____



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee 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.

[Handwritten initials in box]

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

[Handwritten initials in box]

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.

[Handwritten initials in box]

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.

[Handwritten initials in box]

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

[Handwritten initials in box]

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.

Roderick Van Buren

Signature of transferee

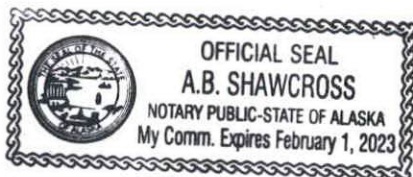
Roderick Van Buren

Printed name

Subscribed and sworn to before me this 12 day of MARCH, 2020.

A.B. Shawcross

Signature of Notary Public



Notary Public in and for the State of ALASKA

My commission expires: 2/1/23



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.

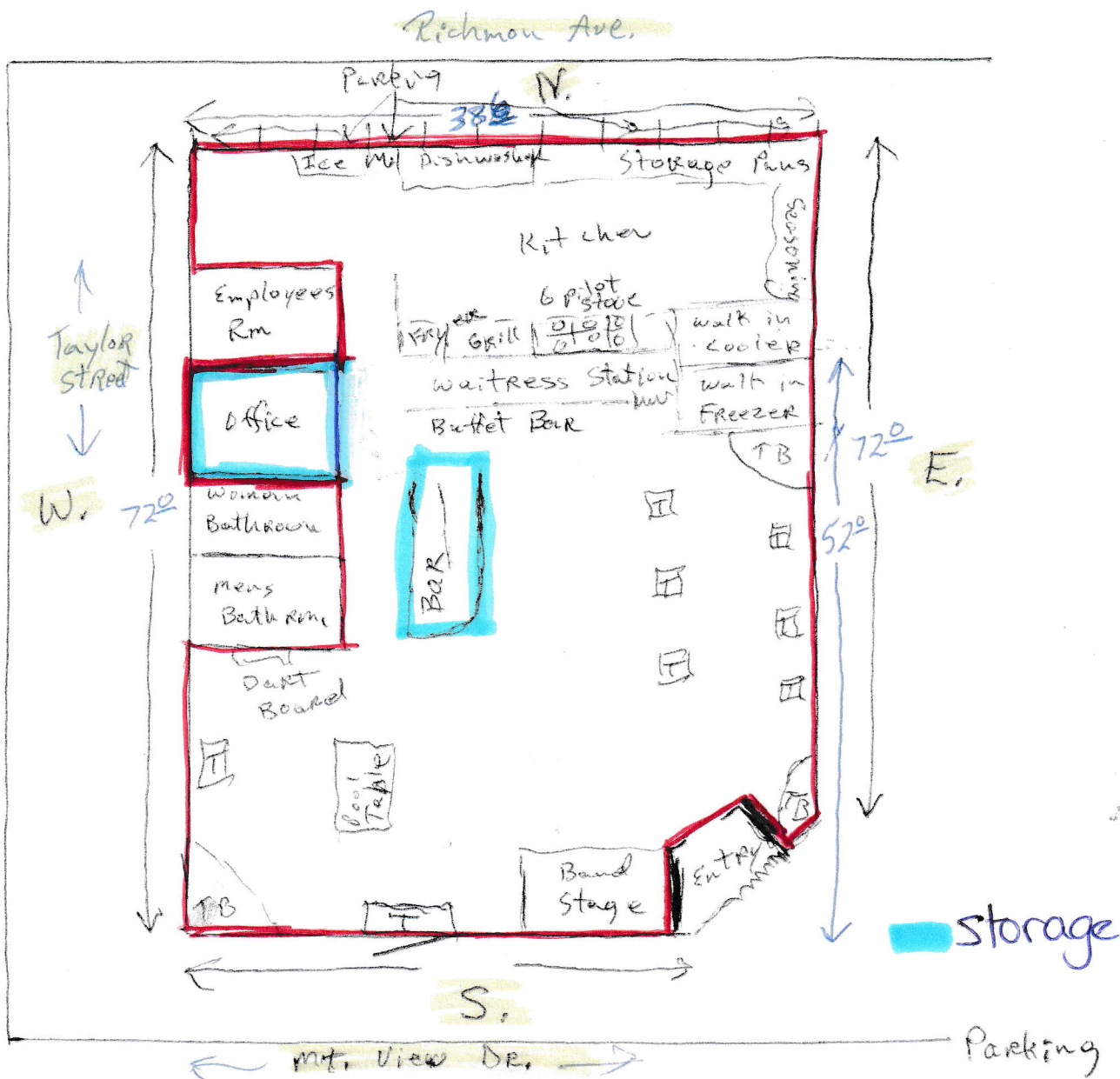
Licensee:	Family Restaurants, Inc.	License Number:	1811		
License Type:	Beverage Dispensary				
Doing Business As:	Lil' Babes Bar & Grill				
Premises Address:	3515 Mountain View Drive				
City:	Anchorage	State:	AK	ZIP:	99508

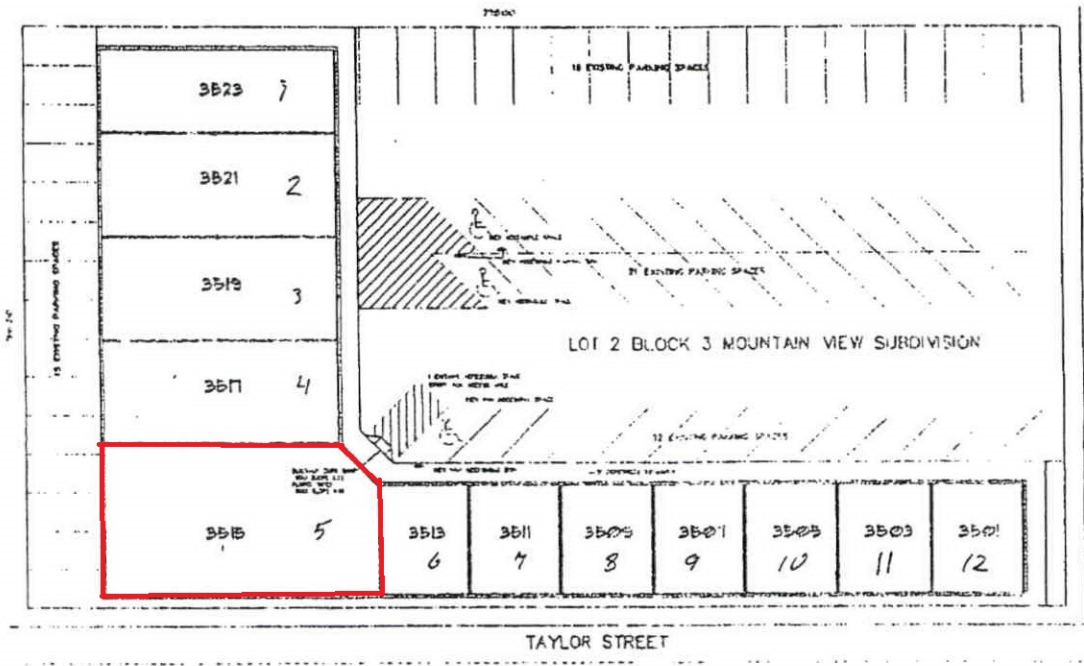


Alaska Alcoholic Beverage Control Board Form AB-02: Premises Diagram

Section 2 - Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, and fixtures, and outline in red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Include dimensions, cross-streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of this form.





A N APPR "A"



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 **menu** or expected menu listing the meals, including entrees prepared onsite and offered to patrons, and copy of the DEC Food Service Permit (or corresponding DHHS documentation for licenses located in the Municipality of Anchorage) 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:	Family Restaurants, Inc.				
License Type:	Beverage Dispensary	License Number:	1811		
Doing Business As:	Lil' Babes Bar & Grill				
Premises Address:	3515 Mountain View Drive				
City:	Anchorage	State:	AK	ZIP:	99508
Contact Name:	Roderick Van Buren	Contact Phone:	907-947-4349		

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	
Transaction #:	Initials:



Alaska Alcoholic Beverage Control Board Form AB-03: Restaurant Designation Permit Application

Section 3 – Minor Access

Review AS 04.16.049(a)(2); AS 04.16.049(a)(3); AS 04.16.049(c)

List where within the premises minors are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Minors will only be allowed in the dining area. OR Minors will only be employed and present in the Kitchen.)

Minor customers will only be permitted in the dining area, and restroom areas.
Minor Employees only permitted in the kitchen area.

Describe the policies, practices and procedures that will be in place to ensure that minors do not gain access to alcohol while dining or employed at your premises.

Storage: All alcohol will be locked in secure storage. This will only be accessible by the restaurant owners, general manager and bar tender. Each of these individuals will be at least 21 years old and will hold on their persons a current TAP or eTIP card verifying that they have been trained to control the distribution and service of alcoholic beverages in Alaska.
Access/Service: There will be no alcohol sales or delivery outside the building walls. Dining guests must walk in and out the same door, which controls the transfer of alcohol. An owner or manager is always on site and monitors the consumption of alcohol.

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

Yes No

Section 4 – DEC Food Service Permit

Per 3 AAC 304.910 for an establishment to qualify as a Bona Fide Restaurant, a Food Service Permit or (for licenses within the Municipality of Anchorage) corresponding Department of Health and Human Services documentation is required.

Please follow this link to the DEC Food Safety Website: <http://dec.alaska.gov/eh/fss/food/>

Please follow this link to the Municipality Food Safety Website:

<http://www.muni.org/Departments/health/Admin/environment/FSS/Pages/fssfood.aspx>

IF you are unable to certify the below statement, please discuss the matter with the AMCO office:

Initials

I have attached a copy of the current food service permit for this premises OR the plan review approval.

*Please note, if a plan review approval is submitted, a final permit will be required before finalization of any permit or license application.



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 5 – Hours of Operation

Review AS 04.16.010(c).

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

Sun. - Thurs. 11am to 11pm
Fri. & Sat. 11am to 2am

Section 6 – Entertainment & Service

Review AS 04.11.100(g)(2)

Yes No

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

If "Yes", describe the entertainment offered or available and the hours in which the entertainment may occur:

Dart Boards, Pool Table, and live music

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]



Alaska Alcoholic Beverage Control Board Form AB-03: Restaurant Designation Permit Application

Section 7 - Certifications and Approvals

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

Initials

There are tables or counters at my establishment for consuming food in a dining area on the premises.

[Handwritten initials]

I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons. This menu includes entrees that are regularly sold and prepared by the licensee at the licensed premises.

[Handwritten initials]

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.

[Handwritten initials]

I have included with this application a copy of the most recent AB-02 or AB-14 for the premises to be permitted. (AB-03 applications that accompany a new or transfer license application will not be required to submit an additional copy of their premises diagram.)

[Handwritten initials]

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

[Handwritten signature of Roderick Van Buren]

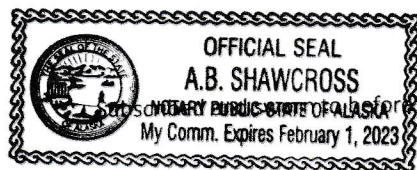
Signature of licensee
Roderick Van Buren
Printed name of licensee

[Handwritten signature of A.B. Shawcross]

Signature of Notary Public

Notary Public in and for the State of ALASKA

My commission expires: 2/1/23



I signed this 12 day of MARCH, 2020

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

Approved Denied

Signature of local government official

Date

Printed name of local government official

Title

THIS PERMIT MUST BE CONSPICUOUSLY POSTED IN A PUBLIC PLACE IN THE ESTABLISHMENT

Municipality of Anchorage

DEPARTMENT OF HEALTH & HUMAN SERVICES PERMIT

PERMIT NO.

FA0000560

FACILITY NAME

RALF'S SPORTS BAR

OWNER'S NAME:

FAMILY RESTAURANTS, INC.

LOCATION:

3515 MOUNTAIN VIEW DR

ISSUED BY THE DEPARTMENT OF HEALTH & HUMAN SERVICES AND SUBJECT TO THE ANCHORAGE MUNICIPAL CODE OF ORDINANCES
TITLES 15 AND 16. UNLESS THE OWNERSHIP CHANGES, THIS PERMIT IS VALID FROM 1/1/2020 TO 12/31/2020

**RALF'S SPORTS BAR
PO BOX 92824
ANCHORAGE, AK 995092824**

6/20/21 Ver 1.001

THIS CERTIFICATE AND PERMIT IS NOT TRANSFERABLE
AND IS THE PROPERTY OF THE MUNICIPALITY OF ANCHORAGE

AMCO

AUG 21 2020

Lil' Babes

Alaskan Smoked **Red Salmon Special**

Single Smoked Red Salmon Infused Belgium Waffle

Served with Fresh Strawberries

\$14.95

Double Stack Smoked Red Salmon Belgium Waffle

Served with Fresh Strawberries

\$19.95

Smoked Red Salmon Platter

Sides: Seasoned Corn and Collard Greens

\$18.95

Li'l Babes

Main Menu

Single Chicken Infused Belgium Waffle

Toppings: Whipped Cream, Fresh Strawberries and your choice of Syrup or Honey.

\$12.95

Double Chicken Infused Belgium Waffle

Toppings: Whipped Cream, Fresh Strawberries and your choice of Syrup or Honey

\$17.95

Chicken Infused Belgium Waffle Platter

Toppings: Whipped Cream, Fresh Strawberries and your choice of Syrup or Honey

\$16.95

Plain Belgium Waffle

Toppings: Whipped Cream, Fresh Strawberries and your choice of Syrup or Honey

\$8.95

Double Stack Plain Belgium Waffle

Toppings: Whipped Cream, Fresh Strawberries and your choice of Syrup or Honey

\$13.95

Appetizers

Chicken Wings (5) w/ Fries - \$12.95

Lil Babes Proteine Special - \$14.95

(egg whites, tortilla chips, shrimp, homemade salsa)

Salmon Bites w/ Fries - \$16.95

Halibut Deep Fried or Grilled w/ Fries - \$16.95

Secondary Menu

**2 Halibut BLT Sliders w/ (Fries or Beans) -
\$16.95**

**Chicken Wings (5) w/ Beans and Rice -
\$14.95**

**Grilled Citrus Chicken Breast w/ Beans and Rice -
\$14.95**

**Halibut Deep Fried or Grilled w/ Beans and Rice or
Fries and Beans
- \$14.95**

**Chicken Wings (5) w/ Belgium Waffle -
\$14.95**

THIS PERMIT MUST BE CONSPICUOUSLY POSTED IN A PUBLIC PLACE IN THE ESTABLISHMENT

Municipality of Anchorage
DEPARTMENT OF HEALTH & HUMAN SERVICES
PERMIT

FACILITY NAME
OWNER'S NAME:
LOCATION:

LIL' BABE BAR & GRILL
FAMILY RESTAURANTS INC
3515 MOUNTAIN VIEW DR

PERMIT NO.
FA0016773

ISSUED BY THE DEPARTMENT OF HEALTH & HUMAN SERVICES AND SUBJECT TO THE ANCHORAGE MUNICIPAL CODE OF
ORDINANCES TITLES 15 AND 16. UNLESS THE OWNERSHIP CHANGES, THIS PERMIT IS VALID FROM 1/1/2020 TO 12/31/2020



LIL' BABE BAR & GRILL
3515 MOUNTAIN VIEW DR

ANCHORAGE AK 99508
THIS CERTIFICATE AND PERMIT IS NOT TRANSFERABLE
AND IS THE PROPERTY OF THE MUNICIPALITY OF ANCHORAGE

THIS PERMIT MUST BE CONSPICUOUSLY POSTED IN A PUBLIC PLACE IN THE ESTABLISHMENT

Municipality of Anchorage
DEPARTMENT OF HEALTH & HUMAN SERVICES

PERMIT

FACILITY NAME
OWNER'S NAME:
LOCATION:

LIL' BABES BAR & GRILL- BAR
FAMILY RESTAURANTS, INC
3515 MOUNTAIN VIEW DR

PERMIT NO.
FA0016774

ISSUED BY THE DEPARTMENT OF HEALTH & HUMAN SERVICES AND SUBJECT TO THE ANCHORAGE MUNICIPAL CODE OF
ORDINANCES TITLES 15 AND 16. UNLESS THE OWNERSHIP CHANGES, THIS PERMIT IS VALID FROM 1/1/2020 TO 12/31/2020

LIL' BABES BAR & GRILL- BAR
3515 MOUNTAIN VIEW DR
ANCHORAGE, AK 99508

THIS CERTIFICATE AND PERMIT IS NOT TRANSFERABLE
AND IS THE PROPERTY OF THE MUNICIPALITY OF ANCHORAGE