

# Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE 550 West 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

### **MEMORANDUM**

TO: Alcoholic Beverage Control Board DATE: October 7, 2020

FROM: Glen Klinkhart, Interim Director RE: 5927 Hyatt Place Fairbanks

Requested Action:

New license application

Statutory and Regulatory 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 04.11.400(d): "The board may approve

- (1) the issuance of a new beverage dispensary or restaurant or eating place license without regard to (a) of this section if it appears that the issuance willencourage the tourist trade by encouraging the construction or improvement of
  - (A) a hotel, motel, resort, or similar business relating to the tourist trade with a dining facility or having kitchen facilities in a majority of its rental rooms and at least a minimum number of rental rooms required according to the population of the incorporated city, unified municipality, or population area established under (a) of this section in which the facility will be located, as follows:
    - (i) 10 rental rooms if the population is less than 1,501;
    - (ii) 20 rental rooms if the population is 1,501 2,500;
    - (iii) 25 rental rooms if the population is 2,501 5,000;
    - (iv) 30 rental rooms if the population is 5,001 15,000;
    - (v) 35 rental rooms if the population is 15,001 25,000;
    - (vi) 40 rental rooms if the population is 25,001 50,000; and
    - (vii) 50 rental rooms if the population is greater than 50,000; or
  - (B) an airport terminal; and"
- (2) the renewal or transfer of ownership of a beverage dispensary or restaurant or eating place license issued under (1) of this subsection if the
  - (A) holder of the license operates a hotel, motel, resort, or similar business relating to the tourist trade that
    - (i) has a dining facility on the licensed premises or kitchen facilities in a majority of its rental rooms; and

- (ii) maintains at least the minimum number of rental rooms that the hotel, motel, resort, or similar business had at the time of initial licensure or that were required at the time of initial licensure; or
- (B) licensed premises are located inside an airport terminal.

**Staff Rec.:** Approve with delegation

**Background:** This is an application to issue a Beverage Dispensary – Tourism license in the City of Fairbanks in Fairbanks North Star Borough.

AS 04.11.400(d)(2)(A)(ii) requires that the facility must maintain at least the minimum number of rental rooms required at original licensure. Staff has determined that the license is compliant with the room number requirements.

The applicant offers 148 rental rooms and all rooms are equipped with kitchen facilities. This establishment offers a light food menu Mondays through Wednesdays.

Attachment: Tourism Statement

AB-01 AB-02 AB-03



Fairbanks Hospitality, LLC 400 Merhar Avenue Fairbanks, AK 99701

August 19, 2020

Alaska Alcoholic Beverage Control Board c/o Alcohol & Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501

Re: Tourism Statement

#### To Whom it May Concern;

Fairbanks Hospitality, LLC dba Hyatt Place Fairbanks, encourages tourism by being a premier lodging facility in Fairbanks, where transient and business travelers have the option of 112 well-appointed guestrooms, in addition to meeting space for business needs and a 24/7 business center. Being part of the Hyatt Hotels franchise, we can build on the World of Hyatt loyalty program by being the only Hyatt product in Fairbanks. Our conversion to a Hyatt Place includes renovation modifications for a more open floorplan, a full-service bar and more flexible meeting space. Being a Hyatt Place allows us to offer travelers with many amenities in our guestrooms, such as in-room microwaves, mini-refrigerators, coffeemakers, and free-wifi. We do not stock alcoholic beverages in any of our guestrooms. Additional amenities include free hot breakfast served every morning, a 24/7 sundry shop, our H Bar serving craft cocktails and freshly prepared bar bites, and a 24/7 fitness center. Our hotel will have a restaurant which will be open to the public as well as hotel guests, offering a wide variety of tastes & flavors. We are also pet friendly, which many travelers look for in their hotel lodging choice and offer a hotel shuttle to take travelers to & from the airport and local area attractions. Our flexible meeting space promotes tourism through group meetings and gatherings, therefore providing an additional resource for event space.

Many Fairbanks properties are more limited-service and do not offer alcohol or the other amenities we are able to offer, which sets us apart from the competition, in addition to our Hyatt name recognition and numerous amenities. Our hotel is managed by Northwest x Southern Hospitality, LLC, and Fairbanks Hospitality, LLC is the owner. We offer 112 nicely appointed guestrooms to the traveling public, and our occupancy depends on market demand and transient travel.

Regards,

William Lawson

Northwest x Southern Hospitality LLC

390 Mallory Station Road, Suite 104, Franklin, TN 37067



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alcohol.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

## 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: Fairbanks Hospitality, LLC **License Type:** Beverage Dispensary - Tourism **Statutory Reference:** AS 04.11.400(d) **Doing Business As:** Hyatt Place Fairbanks **Premises Address:** 400 Merhar Avenue City: **Fairbanks** State: AK ZIP: 99701 **Local Governing Body:** City of Fairbanks, Fairbanks North Star Bourough **Community Council:** None **Mailing Address:** 108 N Washington Street, Suite 603 City: Spokane State: WA ZIP: 99201 **Designated Licensee:** William Lawson **Contact Phone:** (509) 624-1170 ext 1 **Business Phone: Contact Email:** bill@aacdi.com - THIS IS PREFERRED OVER PHONE Yes No Seasonal License? If "Yes", write your six-month operating period: \_ ✓ OFFICE USE ONLY Complete Date: License Years: License #: **Board Meeting Date:** Transaction #:

BRE:

Issue Date:



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### Alaska Alcoholic Beverage Control Board

## Form AB-00: New License Application

	S	ection 2 – Pre	mises Inf	formation		
Premises to be licensed is:						
✓ an existing facility	а	new building	a propos	ed building		
The next two questions mu	st be complete	d by <u>beverage dispen</u> s	sary (including	tourism) and package sto	<u>re</u> applic	ants only:
What is the distance of the outer boundaries of	the shortest pe	destrian route from the	e public entra	nce of the building of you easurement in your answe	r propos	ed premises to
1.3 miles						
What is the distance of t	he shortest per e nearest chur	destrian route from th	e public entra	nce of the building of you surement in your answer.	r propos	ed premises to
1.6 miles				, car union.		
S	ection 3 -	- Sole Proprie	tor Owne	rship Informatio	n	
This section must be comple If more space is needed, ple The following information m	ase attach a se	parate sheet with the	required info	mation.	to Sectio	n 4.
This individual is an:	applicant	affiliate				
Name:			· · · · · · · · · · · · · · · · · · ·			
Address:						
City:			State:		ZIP:	
This individual is an:	applicant	affiliate				
Name:						
Address:				400		
City:			State:		ZIP:	
					*****	



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Alcohol and Marijuana Control Office

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Anchorage, AK 99501

### 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 <u>limited liability organization</u>, 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:	AAWL, LLC		,			
Title(s):	Member	Phone:	509-624-1170	% Owr	ned:	71
Address:	108 N Washington S	Street, Suite 6	03	····		
City:	Spokane	State:	WA	ZIP:	992	201

Entity Official:	Hope Holdings, LLC					***************************************
Title(s):	Member	Phone:	509-624-1170	% Owr	ned:	20
Address:	PO Box 2846					
City:	Spokane	State:	WA	ZIP:	992	220

Entity Official:	Adrian Lawson		3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	***************************************	
Title(s):	Affiliate	Phone:	509-624-1170	% Ow	ned: 0
Address:	108 N Washington Stree	t, Suite 6	603		• • • • • • • • • • • • • • • • • • • •
City:	Spokane	State:	WA	ZIP:	99201

Entity Official:	Andrew Lawson		100	****	
Title(s):	Affiliate	Phone:	509-624-1170	% Ow	ned: 0
Address:	108 N Washington St	reet, Suite 6	603	······································	
City:	Spokane	State:	WA	ZIP:	99201



DOC Entity #:

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alcohol.licensing@alaska.gov

WA

https://www.commerce.alaska.gov/web/amco

**Home State:** 

Phone: 907.269.0350

### Alaska Alcoholic Beverage Control Board

108882

## 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.

**AK Formed Date:** 

5/24/2007

Registered Agent: Barbara Kraft Agent's Phone: 907-257-532						
Agent's Mailing Address:	1888 W North	ern Lights Blvd,	Suite 1100			
City:	Anchorage	State:	AK	ZIP:	99503	}
Residency of Agent:					Yes	No
Is your corporation or LL		$\checkmark$				
	Sect	ion 5 – Other L	icenses			
Ownership and financial intere	est in other alcoholic b	peverage 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 indi		ncial interest, what the	type of business is, a	and if licensed in Al	laska, whi	ch
AK Liquor Licenses	4869, 4844, 550	7 - William Lawso	n			
	Sec	tion 6 – Author	rization			
Communication with AMCO sta	aff:				Yes	No
Does any person other the AMCO staff?	nan a licensee named	in this application have	authority to discuss t	his license with	<b>V</b>	
If "Yes", disclose the name	of the individual and	the reason for this aut	norization:	TANAN TANAN TANAN	****	
Catherine DeVane (	615-517-5511) S	herri Myre-Burrin	gton (509-624-1	170 ext 2)		



<u>htt</u>

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### 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.	WL
I certify that all proposed licensees have been listed with the Division of Corporations.	WL
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.	WL
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.	WL
l agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	WL
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 that this application, including all accompanying schedules and statements, is true, correct, and complete.	304, and
Signature of licensee  William J Lawson  Printed name of licensee  Notary Public in and for the State of Washington  Alexa T Mupe Bauington  Signature of Notary Public  Notary Public in and for the State of Washington  3/8/2	*
My commission expires: 3/6/8  NOTARY PUBLIC  COMM. EXPIRES  FEB. 8, 2022  Subscribed and sworn to before me this 15 day of Avg v S T  EMPLOY OF WASHINGTON, THE TOTAL OF WA	, 20 <u></u> 20.



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## 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.

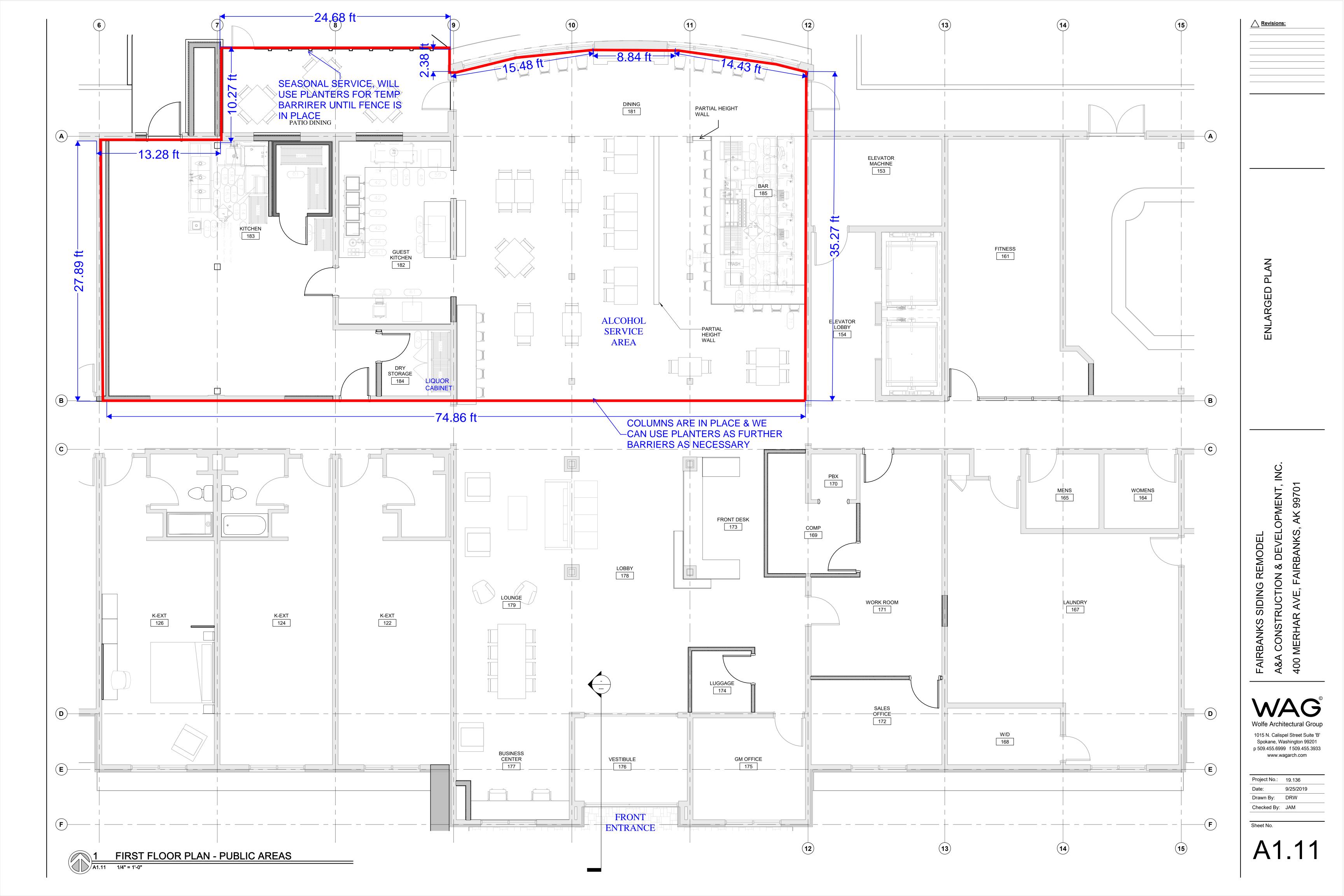
This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

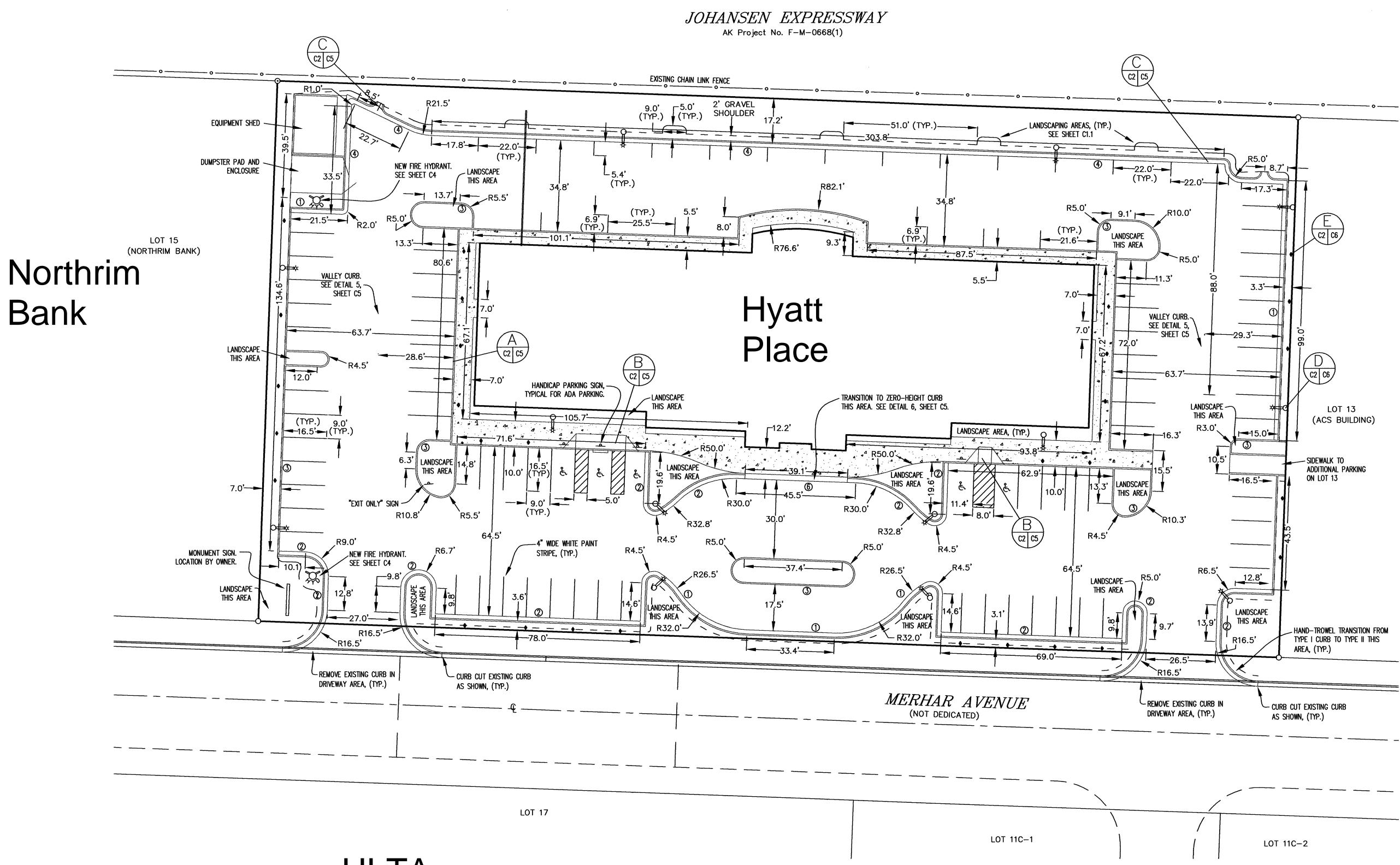
									Yes	No
I have attached blueprints page of this form.	s, CAD dra	awings, or	other suppo	orting docum	ents in additi	on to, or in	lieu of, the	second	1	

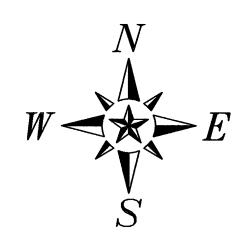
### Section 1 - Establishment Information

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

Licensee:	Fairbanks Hospitality, LLC License Number: 5927							
License Type:	Beverage Dispensary - Tourism							
Doing Business As:	Hyatt Place Fairbanks	Hyatt Place Fairbanks						
Premises Address:	400 Merhar Avenue							
City:	Fairbanks	State:	AK	ZIP:	99701			







ULTA Beauty

# Hyatt Place Fairbanks Outdoor/Indoor Serving Security Plan

- 1. All minors must be accompanied by an adult (age over 21) while in the restricted area when any alcohol is being served/sold/consumed.
- 2. All new patrons are carded upon ordering alcohol.
- 3. All staff is trained in the identification of fake IDs.
- 4. Waist-high planters will be used temporarily for barriers around the outdoor servicing area until winter is over.
- 5. Underaged persons will be monitored closely by our professionally trained alcohol servers.
- 6. Proper egress from the outdoor service area will always remain unobstructed.
- 7. ABC mandated posters as required by law are posted inside Hyatt Place Fairbanks and at the entrances of the outdoor seating area.
- 8. All entrances and exits will provide clear notice that NO ALCOHOL IS ALLOWED BEYOND THE OUTDOOR SEATING AREA.
- 9. Keeping outdoor seating area viable without any increased risk to minors exposed to alcohol WILL continue to be a part of our training for our staff.
- 10. All safety related operations for our current liquor service will additionally be enforced in the new service area.
- 11. Proper signage at points of entry indicating no minors without a parent or legal guardian will be posted.
- 12. All servers will closely monitor that only the guests that have been carded will have alcoholic beverages.
- 13. Our top priority continues in providing safety for all guests regarding the service of alcoholic beverages.
- 14. Servers will be present in the outdoor area to monitor consumption.



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### 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: Fairbanks Hospitality, LLC **License Type:** Beverage Dispensary - Tourism **License Number:** 5927 **Doing Business As:** Hyatt Place Fairbanks **Premises Address:** 400 Merhar Avenue City: Fairbanks ZIP: State: AK 99701 **Contact Name:** Catherine DeVane **Contact Phone:** 615-517-5511 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): 1. Dining after standard closing hours: AS 04.16.010(c) 2. 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) 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

Initials:

Transaction #:



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alcohol.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

## Form AB-03: Restaurant Designation Permit Application

	Section	3 – Minor Ac	cess		
Review AS 04.16.049(a)(2); AS 04.16.					
List where within the premises minor Section 2. (Example: Minors will only	s are anticipated to habe	ave access in the coing area. OR Minors	urse of either dining or will only be employed	employment a	as designated in the Kitchen.)
Minors will only be allowed i minors					
Describe the policies, practices and p dining or employed at your premises					
All alcohol will be secured be locked after hours and are s	ehind service cou taffed during norr	inters in lockab mal business h	le storage cabine ours.	ts. These ca	abinets are
Is an owner, manager, or assistant m during business hours?	anager who is 21 year	s of age or older al	ways present on the pr	emises	Yes No ✓
	Cotion A RE	0 F 1 0			

#### 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 y	ou are unable to certif	v 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.

WL

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



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### **Alaska Alcoholic Beverage Control Board**

## Form AB-03: Restaurant Designation Permit Application

	Section	5 – Hours	s of Operatio	<b>on</b>			
Review AS 04.16.010(c).				775			
Enter all hours that your establish	ment intends to be	onen Include v	zariances in weeker	nd/weekday bour	s and indi	cata am	lnm:
Tentatively Planned for th Breakfast Monday - Frida Bar 5:00pm - 10:00pm da Sundry market available 2	ne following: iy, 6:30am - 9:00 aily	0am and Sa	at/Sun 7:00am		s, and mur	cate am <sub>j</sub>	
Review AS 04.11.100(g)(2)	Section 6	– Enterta	inment & S	ervice			
Are any forms of entertainment of within the proposed licensed pre		within the licer	sed business or			Yes	No ✓
If "Yes", describe the entertainm	ent offered or availa	ble and the ho	urs in which the en	tertainment may	occur:		
ood and beverage service offered	d or anticipated is:  buffet service	<b>√</b> co	unter service	other			·
f "other", describe the manner of	food and beverage s	service offered	or anticipated:		:		



[Form AB-03] (rev 4/16/2019

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Alaska Alcoholic Beverage Control Board

# Form AB-03: Restaurant Designation Permit Application

Section 7	- Certifications and App	provals	
Read each line below, and then sign your initials i	n the box to the right of each stateme	nt:	Initials
There are tables or counters at my establishment	for consuming food in a dining area on	the premises.	WL
I have included with this form a menu, or an expec This menu includes entrees that are regularly sold	cted menu, listing the meals to be offer and prepared by the licensee at the lic	ed to patrons. ensed premises.	WL
I certify that the license for which I am requesting golf course, or restaurant or eating place license.	designation is either a beverage disper	nsary, club, recreational site,	WL
I have included with this application a copy of the included with this application a copy of the included (AB-03 applications that accompany a new control of the required to submit an additional copy.)	or transfer license application will	emises to be permitted.	WL
I declare under penalty of perjury that this form, incorrect, and complete.  Signature of licensee	0.	ing schedules and statements, in the schedules are sche	,
William J Lawson Printed name of the printed	Notary Public in and for th	0 1 . 1	-
NOTARY PUBLIC NOTARY PUBLIC	My count of the second sworn to before me this $\frac{15}{100}$ day of	ommission expires: <u>2/8/3</u>	<u>·}</u> _20 <u>.30</u> .
Local Government Review (to be completed by an a	appropriate local government official):	Approved	Denied
Signature of local government official	Date		
Printed name of local government official	Title	**************************************	



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### **Alaska Alcoholic Beverage Control Board**

## Form AB-03: Restaurant Designation Permit Application

AMCO Enforcement Review:			Enforcement Reco	ommendation:	Approve	Deny
Signature of AMCO Enforceme	nt Supervisor	Printed name	of AMCO Enforceme	nt Supervisor		
Date						
Enforcement Recommendation	ns:					
						<b></b>
AMCO Director Review:					Approved	Denied
ignature of AMCO Director		Printed name	of AMCO Director			
Pate						
				- HIPAN		
Date Limitations:						



## Alaska Food Code 2020 Establishment Permit

Division of Environmental Health Food Safety & Sanitation Program

Permit Number:

10624

Issued to:

FAIRBANKS HOSPITALITY LLC

For:

Hyatt Place Fairbanks

For Operation of:

FF-1 Food Service

Located at:

400 Merhar AVE Fairbanks, AK 99701

This permit, issued under the provisions of 18 AAC 31, is valid until the noted expiration date or unless suspended or revoked by the department.

This permit is not transferable for change of ownership, facility location, or type of operation. It must be posted in plain view in the establishment and is the property of the State of Alaska.

**Expiration Date:** 

December 31, 2020

Program Manager:

If you have questions or concerns regarding safe food handling practices call toll free:

1-87-SAFE-FOOD

(in Anchorage call 334-2560)



## MENU



### SHARE

### CITRUS-CHILE POPCORN

freshly popped popcorn, citrus-chile spice, chives (v, gf)

### 

warm brie wheel, glazed pecans, dried fruit, honey, served with artisan bread (v)

### P&S FLATBREAD

Applegate<sup>®</sup> prosciutto, genoa salami, mozzarella and parmesan cheeses, basil pesto, oven-roasted tomato, lemon-dressed arugula, drizzled with honey

### CRISPY BRUSSELS SPROUTS

brussels sprout halves, whole-grain honey-mustard sauce, all-natural bacon (gf)

### AVOCADO TOAST

oven-roasted tomato, parmesan cheese, avocado, hot sauce, served on artisan bread ~ put an egg on it + \$1.00

## MEDITERRANEAN HUMMUS

roasted garlic hummus, cucumber, kalamata olives, olive oil, basil pesto, served with naan (v)

### PARMESAN-PAPRIKA FRENCH FRIES

parmesan cheese, paprika, basil aioli, served with boom boom sauce (v, gf)

### CHARCUTERIE BOARD

genoa salami, Applegate® prosciutto, brie cheese, whole-grain mustard, dark-berry jam, gherkins, served with artisan bread

### CLASSIC CHEESE PIZZA

8-inch cheese pizza, marinara, mozzarella and parmesan cheeses ~ put pepperoni on it + \$0.75

# BBQ HARDWOOD SMOKED CHICKEN WINGS

tossed in bbq sauce, served with buttermilk ranch dressing (g1)

### SOLO

### BURGER

two 3 oz. grass-fed Strauss® beef patties, cheddar cheese, arugula, tomato, boom boom sauce, served on a toasted bun

- ~ put an egg on it + \$1.00
- ~ put guacamole on it + \$0.50
- ~ put all-natural bacon on it + \$0.75

ALL NATURAL CHICKEN GRASS-FED BEEF

### CHICKEN AND BRIE CLUB

grilled chicken breast, brie cheese, baby kale, tomato, all-natural bacon, honey-mustard dressing, served on artisan bread

### BEYOND MEAT" BURGER

vegan burger patty, arugula, oven-roasted tomato, smashed avocado, red onion, served on a toasted bun (v)

### QUESO BLANCO MAC AND CHEESE

classic mac and cheese, green chiles, diced tomato, topped with breadcrumbs (v)

## BABY KALE CHICKEN CAESAR

baby kale salad mix, grated parmesan cheese, classic caesar dressing, garlic croutons (available vegetarian)

### WEEKENDER SALAD

arugula and kale mix, all-natural bacon, grilled chicken, scallions, diced tomato, shredded carrot, served with buttermilk ranch dressing (gf)

### CHICKEN TORTILLA SOUP

shredded chicken, roasted corn, poblano peppers, in a rich tomato broth, topped with tortilla strips

#### TURKEY B.L.A.T.

all-natural bacon, baby kale, avocado, smoked turkey breast, served on artisan bread

### FISH TACOS

beer battered cod, spicy slaw, salsa verde, flour tortillas, served with french fries

AVAILABLE LATE NIGHT

🖺 AVAILABLE FOR GRAB AND GO

(gf) GLUTEN-FREE (v) VEGETARIAN

Expected
Menu