

Alcoholic Beverage Control Board  
 550 West 7<sup>th</sup> Ave. Suite 1600  
 Anchorage, AK 99501

## New Liquor License

(907) 269-0350  
 Fax: (907) 334-2285  
<http://commerce.alaska.gov/dnn/abc/Home.aspx>

License is:     Full Year                      OR                       Seasonal    List Dates of Operation: \_\_\_\_\_

SECTION A - LICENSE INFORMATION			FEES
Office Use: License Year: _____	License Type: <b>Beverage Dispensary License/Duplicate</b>	Statute Reference Sec. <b>04.11.090</b>	License Fee: <b>\$ 2500<sup>00</sup></b>
Office Use: License #: <b>5428</b>			Filing Fee:        \$100.00
Local Governing Body: (City, Borough or Unorganized) <b>Fairbanks North Star Borough</b>	Community Council Name(s) & Mailing Address:		Rest. Desig. Permit Fee:                \$
Name of Applicant (Corp/LLC/LP/LLP/Individual/Partnership): <b>636 LLC</b>	Doing Business As (Business Name): <b>28 Below</b>	Business Telephone Number: <b>907-452-3684</b> Fax Number: <b>907-456-6993</b>	Fingerprint:        \$ <b>(\$49.75 per person)</b>
Mailing Address: <b>1855 Van Horn Rd</b>	Street Address or Location of Premises: <b>636 28<sup>th</sup> Ave Fairbanks AK 99701</b>	Email Address: <b>fbxpub@gmail.com</b>	<b>TOTAL</b> _____
City, State, Zip: <b>Fairbanks AK 99701</b>			
SECTION B - PREMISES TO BE LICENSED			
Distance to closest school grounds: <b>3 Miles</b>	Distance measured under: <input checked="" type="checkbox"/> AS 04.11.410        OR <input type="checkbox"/> Local ordinance No. _____	<input type="checkbox"/> Premises is GREATER than 50 miles from the boundaries of an incorporated city, borough, or unified municipality.	
Distance to closest church: <b>1 Mile</b>	Distance measured under: <input checked="" type="checkbox"/> AS 04.11.410        OR <input type="checkbox"/> Local ordinance No. _____	<input checked="" type="checkbox"/> Premises is LESS than 50 miles from the boundaries of an incorporated city, borough, or unified municipality.	
Premises to be licensed is: <input type="checkbox"/> Proposed building <input checked="" type="checkbox"/> Existing facility <input type="checkbox"/> New building		<input checked="" type="checkbox"/> Not applicable	
		<input type="checkbox"/> Plans submitted to Fire Marshall (required for new & proposed buildings) <input checked="" type="checkbox"/> Diagram of premises attached	

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## SECTION C – LICENSEE INFORMATION

1. Does any individual, corporate officer, director, limited liability organization member, manager or partner named in this application have any direct or indirect interest in any other alcoholic beverage business licensed in Alaska or any other state?

Yes  No If Yes, complete the following. Attach additional sheets if necessary.

Name	Name of Business	Type of License	Business Street Address	State
See Attached List				

2. Has any individual, corporate officer, director, limited liability organization member, manager or partner named in this application been convicted of a felony, a violation of AS 04, or been convicted as a licensee or manager of licensed premises in another state of the liquor laws of that state?

Yes  No If Yes, attach written explanation

See Attached Notes

## SECTION D – OWNERSHIP INFORMATION - CORPORATION

*Corporations, LLCs, LLPs and LPs must be registered with the Dept. of Community and Economic Development.*

Name of Entity (Corporation/LLC/LLP/LP) (or N/A if an Individual ownership):  636, LLC		Telephone Number: 907-451-8673	Fax Number: 907-456-6993
Corporate Mailing Address: 1855 Van Horn Rd	City: FAirbanks	State: AK	Zip Code: 99701
Name, Mailing Address and Telephone Number of Registered Agent:		Date of Incorporation OR Certification with DCED:	State of Incorporation:
Is the Entity in "Good Standing" with the Alaska Division of Corporations? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, attach written explanation. Your entity <b>must</b> be in compliance with Title 10 of the Alaska Statutes to be a valid liquor licensee.			

### Entity Members (Must include President, Secretary, Treasurer, Vice-President, Manager and Shareholder/Member with at least 10%)

Name	Title	%	Home Address & Telephone Number	Work Telephone Number	Date of Birth
Randall Kelsch	Owner	50	3254 Riverview Dr. Fairbanks AK 99701 907-378-6582	907-451-8673	06/12/1950
John McCoy	Owner	50	P.O.BOX 73808 Fairbanks AK 99704 907-318-4650	907-452-3684	07/02/1959



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**NOTE: If you need additional space, please attach a separate sheet.**


## SECTION E – OWNERSHIP INFORMATION – SOLE PROPRIETORSHIP (INDIVIDUAL OWNER & SPOUSE)

**Individual Licensees/Affiliates** (The ABC Board defines an "Affiliate" as the spouse or significant other of a licensee. Each Affiliate must be listed.)

Name: Address:  Home Phone: Work Phone:	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>  Date of Birth:	Name: Address:  Home Phone: Work Phone:	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>  Date of Birth:
Name: Address:  Home Phone: Work Phone:	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>  Date of Birth:	Name: Address:  Home Phone: Work Phone:	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>  Date of Birth:

### Declaration

- I declare under penalty of perjury that I have examined this application, including the accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete, and this application is not in violation of any security interest or other contracted obligations.
- I hereby certify that there have been no changes in officers or stockholders that have not been reported to the Alcoholic Beverage Control Board. The undersigned certifies on behalf of the organized entity, it is understood that a misrepresentation of fact is cause for rejection of this application or revocation of any license issued.
- I further certify that I have read and am familiar with Title 4 of the Alaska statutes and its regulations, and that in accordance with AS 04.11.450, no person other than the licensee(s) has any direct or indirect financial interest in the licensed business.
- I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

Signature of Licensee(s) Signature:  Signature: Name & Title (Please Print) <u>RANDALL G. KETSCH Member</u> Subscribed and sworn to before me this <u>30</u> day of <u>September</u> , <u>2015</u> . Notary Public in and for the State of <u>Alaska</u>  My commission expires: <u>4/8/15</u>	Signature of Licensee(s) Signature:  Signature: Name & Title (Please Print) <u>JONATHAN L. MCCOY</u> Subscribed and sworn to before me this <u>8</u> day of <u>October</u> , <u>2015</u> . Notary Public in and for the State of <u>Alaska</u>  My commission expires: <u>Sept 1, 2017</u>
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State of Alaska  
**NOTARY PUBLIC**  
Sydney Holden  
My Commission Expires Apr 8, 2018



STATE OF ALASKA  
ALCOHOLIC BEVERAGE CONTROL BOARD  
APPLICATION FOR RESTAURANT DESIGNATION PERMIT  
AS 04.16.049 & 3 AAC 304.715 - 794

The granting of this permit allows access of persons under 21 years of age to designated licensed premises for purposes of dining, and persons between the ages of 16 - 20 for employment. If for employment please indicate in detail what the employment duties will be in question #3.

License Number 2124 5428 Type: Duplicate

This application is for designation of premises where: (Please check the appropriate items below)

1.  Bona fide restaurant pursuant to 3 AAC 304.305 & 3 AAC 304.715-794.  
2.  Persons 16 - 20 years of age may dine unaccompanied.  
3.  Persons under 16 may dine accompanied by a person 21 years of age or older.  
4.  Persons between 16 - 20 years of age may be employed. \*(See note below)

Licensee's Name: 636 LLC

Name of Business: Mc Coy's on 28th

Business Address: 636 28th Ave City: Fairbanks

1 Hours of operation 10 AM to 2 AM Telephone Number: 907-452-3684

2 Have police been called to your premises for any reason?  Yes  No  
(If you answered yes, please explain below).

3 \* Duties of employment Banquet and Catering

4 Are video games available to the public on your premises?  Yes  No

5 Do you provide live entertainment, such as live music, pool tables, karaoke, dancing, sports or pin-ball?  
 Yes  No

6 How is food served?  Table Service  Buffet Service  Counter Service  Other \_\_\_\_\_

7. Is an owner, manager or supervisor 21 years of age or older always present during business hours?  Yes  No

\*\*\* A MENU AND DETAILED PREMISES DIAGRAM MUST ACCOMPANY THIS APPLICATION \*\*\*

\*Employees 16 and 17 years of age must have a valid work permit and a letter maintained in your files from a parent or guardian authorizing employment at your establishment.

\*\*Please attach additional sheets of paper if more space is needed to describe food service, entertainment, etc.

Licensee Signature [Signature]

Local Governing Body Approval [Signature]

Subscribed and sworn to before me this 20 day of October 2015 12/9/15

Date

Notary Public in and for Alaska [Signature]

My Commission expires Sept 1, 2015

Director, ABC Board

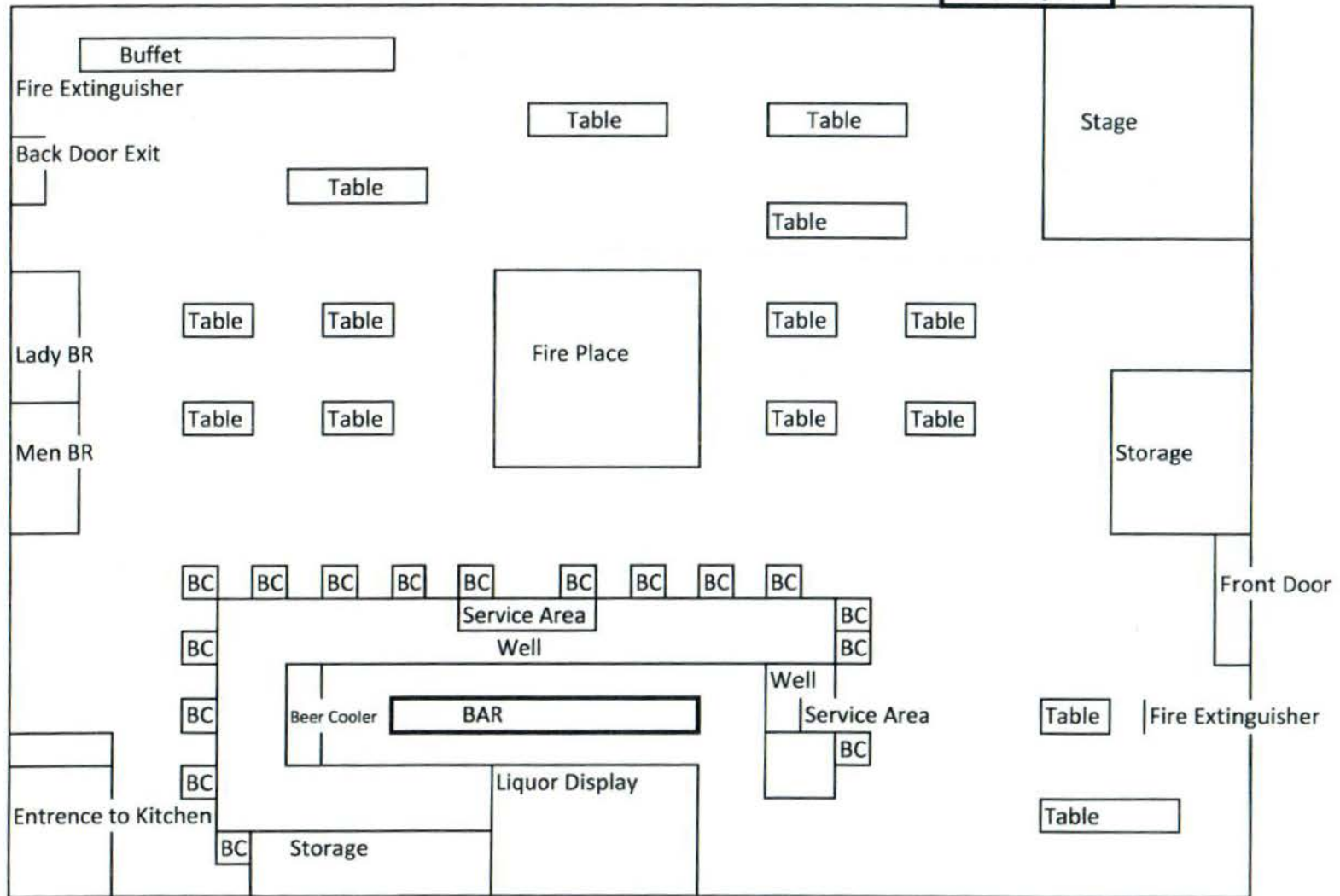
Date



636, LLC Downstairs

636 28th Ave Fairbanks AK 99701 Tel:907452-3684

**Actual Size  
3120 Sq Ft**



16 Bar Chairs, and Tables are set up as needed for the amount of people the reservation is for.

Fairbanks Fire Department Occupant Load is: 147 persons

Per Internation Fire Code Section 1003.2.2.5

# 636 LLC dba 28 Below

## Buffet Options

### **SPINACH AND ARTICHOKE DIP**

Fresh Spinach & Artichokes in our Cheesy, Creamy Sauce  
Paired with our House made Pita Chips

### **BLACKEND SEARED AHI**

Fresh Ahi Tuna, atop a Bed of Asian Slaw with Wasabi &  
Pickled Ginger

### **JUMBO SHRIMP COCKTAIL**

Prawns, Chilled and Served with our Homemade Cocktail  
Sauce

### **CRAB STUFFED MUSHROOMS**

Tender Flakes of Crab in our Homemade Cream Cheese  
Recipe, Topped with Cheddar Cheese

### **BACON WRAPPED FILET MIGNON SKEWERS**

Juicy Filet Mignon Medallions, Wrapped in Bacon,  
Skewered & served with a Zesty Béarnaise Sauce

## **CALAMARI**

Lightly Breaded Calamari, Fried & Served with Tartar Sauce

## **FILET MIGNON AND MUSHROOMS**

Filet Bits & Mushrooms, Served with Garlic Bread

This is our most favorite appraisers and recommended for any occasion, please feel free to ask for any special addition you might like to add to your Buffet.

For Reservation please call: 907-452-3684