



Alaska Alcoholic Beverage Control Board

Form AB-12: Petition

What is this form?

Any application for a restaurant / eating place – public convenience (REPC) license or any liquor license application for a premises located in an area with no local governing body must file a petition in accordance with **AS 04.11.400(g)**, **AS 04.11.460**, **3 AAC 304.115**, and/or **3 AAC 304.335**. Instructions vary with the type of area in which your proposed premises are located.

Please read the instructions in Section 2 of this form carefully.

A liquor license application for a premises that is **within 50 miles** of the boundary of a local governing body must submit a petition signed by the **majority** of the **permanent residents** residing within **one mile** of the proposed premises per **AS 04.11.460(a)**.

A liquor license application for a premises that is **50 miles or more** from the boundary of a local governing body must submit a petition signed by **two-thirds** of the **permanent residents** residing within a **five mile radius** of the United States post office nearest to the proposed licensed premises per **AS 04.11.460(b)**

This form must be submitted to AMCO's main office before any REPC license application or before any liquor license application in an area with no local government will be considered complete. You may include as many pages of signatures as necessary.

	Yes	No
I am applying for a restaurant / eating place – public convenience license, under AS 04.11.400(g).	☒	☐
My proposed premises is outside, but within 50 miles of the boundary of a local government.	☐	☒
My proposed premises is 50 miles or more from the boundary of a local government.	☐	☒

Section 1 – Establishment Information

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

Licensee:	The Cookery LLC				
License Type:	Restaurant / Eating Place Public Convenience				
Doing Business As:	The Lone Chicharron Taqueria				
Premises Address:	215 4th Avenue, Suite B				
City:	Seward	State:	AK	ZIP:	99664
Latitude:	60.1042° N	Longitude:	149.4422° W		



Alaska Alcoholic Beverage Control Board
Form AB-12: Petition

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

Section 2 – Petition Instructions

Please read these instructions carefully.

The following information must accompany all liquor license applications requiring petitions:

1. A map showing the population within:
 - a. the one mile radius with the proposed premises as center (required for REPC applications and for premises within 50 miles of the boundary of a local government)

OR

 - b. the five mile radius with the United States post office as center (required for premises 50 miles or more from the boundary of a local government)*
2. Graphic designation on a map showing the general area where petition signatures were obtained
3. A narrative and mathematical calculation of how population totals were determined
4. A narrative of how signatures were obtained (door to door solicitation; premises solicitation; etc.)

“Permanent resident” means a person 21 years of age or older who has established a permanent place of abode. A person may be a permanent resident of only one place, per **3 AAC 304.115(b)**.

Signatures must be obtained within the 90-day period immediately before submitting the petition to the board.

*If there is no United States post office within a radius of five miles of the proposed licensed premises, the applicant must obtain the signatures of two-thirds of the permanent residents residing within a five mile radius of the proposed licensed premises. The map should show the applicable area.



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Section 3 – Petition

*Have a completed copy of this page available for those considering this petition.

This is a petition in support of a

Restaurant Eating Place Public Convenience license application.
(type of license applied for)

By signing this petition, you are stating that you are in favor of having a licensed alcohol establishment in your community.

Each person who has signed this petition states that he or she is a **permanent resident** in the area indicated below; that he or she is 21 years of age or older; and agrees to the issuance of a

Restaurant Eating Place Public Convenience to sell
(type of license applied for) (manufacture, sell)

alcohol at 215 4th Avenue, Suite B
(location of proposed premises)

in the State of Alaska, and that the physical address of his/her residence is:

☒ **within one (1) mile of proposed premises.**
(Check one)

☐ **within five (5) miles of the nearest post office to the proposed premises.**



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Section 4 – Certifications

This petition is not valid if this page is not complete, signed, and notarized.

I, The Cookery, LLC, the applicant for a
(proposed licensee)

Restaurant/Eating Place Public Convenience A.S. 4.11.400(g), hereby certify that the
(type of license applied for) (statutory reference)

number of permanent residents 21 years of age or older who live within 1 mile(s) of
(one/five)

The Lone Chicharron Taqueria totals 287, and this petition
(proposed premises or nearest US Post Office address) (total population)

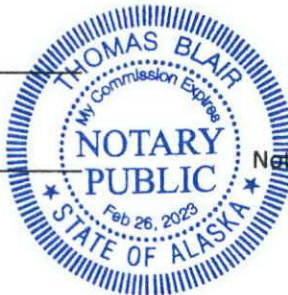
totals 168 signatures, which is 58.5 % of the permanent residents in the area as required by statute.
(number) (percentage)

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

[Signature]

Signature of licensee

Kevin Lane
Printed name of licensee



[Signature]

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 2.26.2023

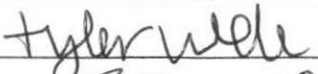
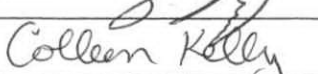
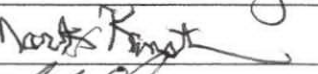
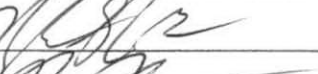
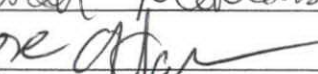
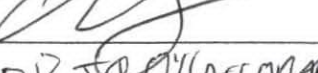
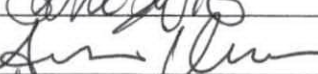
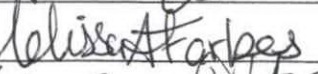
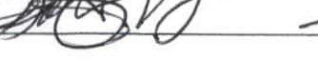
Subscribed and sworn to before me this 24 day of Feb, 2020.

Please provide your printed name, signature, birthdate, the physical location of your residence, date, and check the appropriate box.

By signing this petition, you are stating that you are in favor of having a licensed alcohol establishment in your community.

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Elizabeth DeMoss	<i>Elizabeth DeMoss</i>	4/26/77	101 Ravine St.	Seward	12/22	Yes ☒ No ☐
Tyson Davis	<i>Tyson Davis</i>	7/24/84	417 5th Ave.	Seward	12/22	Yes ☒ No ☐
XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXX	XXXXXXXXXXXX	XXXXXX	XXXXXX	Yes ☐ No ☐
Vanessa Verhey	<i>Vanessa Verhey</i>	12/26/78	310 2nd Ave.	Seward	12/22/19	Yes ☒ No ☐
Michael Mahmood	<i>Michael Mahmood</i>	6/14/77	314 2nd Ave	Seward	12/23/19	Yes ☒ No ☐
Scott A. Ransom	<i>Scott A. Ransom</i>	4/21/51	535 5th	Seward	12/23/19	Yes ☒ No ☐
Sharna Potocky	<i>Sharna Potocky</i>	8/24/71	208 Main St.	Seward	12/23/19	Yes ☒ No ☐
Jessica McLeod	<i>Jessica McLeod</i>	9/25/93	417 5th Ave	Seward	12/28/19	Yes ☒ No ☐
Val Bradshaw	<i>Val Bradshaw</i>	1/8/86	611 6th Ave	Seward	12/28/19	Yes ☒ No ☐
Anastasia Lane	<i>Anastasia Lane</i>	9-12-75	517 6th Ave.	Seward	12/28/19	Yes ☒ No ☐
Karina Lane	<i>Karina Lane</i>	9-25-69	517 6th Ave	Seward	12/28/19	Yes ☒ No ☐
XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXX	XXXXXXXXXXXX	XXXXXX	XXXXXX	Yes ☐ No ☐
Justin Gallardo	<i>Justin Gallardo</i>	4/20/88	612 3rd Ave	Seward	12-29-19	Yes ☒ No ☐
XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXX	XXXXXXXXXXXX	XXXXXX	XXXXXX	Yes ☐ No ☐
Alexander Havens	<i>Alexander Havens</i>	3/23/29	106 Washington St	Seward	12/30/2019	Yes ☒ No ☐
Laura Havens	<i>Laura Havens</i>	9/11/89	106 Washington St.	Seward	12/30/19	Yes ☒ No ☐
Laura Schneider	<i>Laura Schneider</i>	4/22/87	513 First Ave	Seward	12/30/19	Yes ☒ No ☐
Kenneth Cardwell	<i>Kenneth Cardwell</i>	6/18/86	513 First Ave	Seward	12/30/19	Yes ☒ No ☐
Daniel Samko	<i>Daniel Samko</i>	6/29/92	803 4th Ave	Seward	1/3/20	Yes ☒ No ☐
Carmeguen	<i>Carmeguen</i>	12/25/80	2501 Birch Street	Seward	1/3/20	Yes ☒ No ☐

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Tyler Welch		06/8/82	2501 Birch Street	Seward	1/3/20	Yes ☒ No ☐
Michele Mewendyk		1-21-74	439 Madison Ave	Seward	1/4/2020	Yes ☒ No ☐
Dan Nicholas		2-28-62	226 Second Ave	Seward	1/4/2020	Yes ☒ No ☐
Simon Swiderski		5/30/89	704 2nd Ave	Seward	1/5/2020	Yes ☒ No ☐
Colleen Kelly		6/20/55	235 Ballaine Blvd	Seward	1/5/2020	Yes ☒ No ☐
Mark Kansteiner		8-10-51	235 Ballaine Blvd	Seward	1-5-2020	Yes ☒ No ☐
Nyla Sharpe		10/13/92	220 3rd Street	Seward	1/5/2020	Yes ☒ No ☐
Benny Flees		1/24/66	612 3rd St.	Seward	1/6/2020	Yes ☒ No ☐
Mark Tackenberg		6/3/73	620 2nd Ave.	Seward	1/10/2020	Yes ☒ No ☐
Sarah McManus		11/15/87	1809 Sweetmann Ave	Seward	1/10/2020	Yes ☒ No ☐
Joe Horne		06-19-86	383 Adams St.	Seward	1-11-20	Yes ☒ No ☐
Tessa Adamson		07/10/95	221 Bear Dr.	Seward	01/11/2020	Yes ☒ No ☐
Amya Boyes		6/20/98	238 Brownell St.	Seward	1/12/2020	Yes ☒ No ☐
DR JED HALLORAN		07/14/58	2305 Diamond Blvd	SEWARD	19 JAN 2020	Yes ☒ No ☐
SADIE ULMAN		3/6/82	512 SECOND AVE	SEWARD	26 JAN 2020	Yes ☒ No ☐
Sean Ulman		3/2/81	512 Second Ave	Seward	26 Jan 2020	Yes ☒ No ☐
Melissa Forbes		02/04/81	1123 Resurrection Blvd	Seward	01/27/20	Yes ☒ No ☐
Solomon D'Amico		07/19/83	534 4th Ave	Seward	01/27/20	Yes ☒ No ☐
Sen Wells		1/9/14	210 Brownell	Seward	1/27/2020	Yes ☒ No ☐
						Yes ☐ No ☐

By signing this petition, you are stating that you are in favor of having a licensed alcohol establishment in your community.

[illegible]

By signing this petition, you are stating that you are in favor of having a licensed alcohol establishment in your community.

[illegible]

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Elaine E. Philmont		9-14	218 Brownell #F2	Seward	1-22-20	Yes ☒ No ☐
Elmer Anghonals		5-13-68	218 Brownell C-2	Seward	1-22-20	Yes ☒ No ☐
CHARLES WITHE		7-2-53	230 Brownell 64	Seward	1-22-20	Yes ☒ No ☐
Andrew Nelson		8-27-82	238 Brownell	Seward	1-22-20	Yes ☒ No ☐
Amos Naves		6-28-98	236 Brownell	Seward	1-22-20	Yes ☒ No ☐
Bruce Sledge		11-10-56	238 Brownell	Seward	1-22-20	Yes ☒ No ☐
Peggy Hamner		11-18-59	311 Second	Seward	1-22-20	Yes ☒ No ☐
Steve Lemme		06-08-53	331 2nd	Seward	1-22-20	Yes ☒ No ☐
Marie Gog		11-20-53	107 Howard Canyon	Seward	1-22-20	Yes ☒ No ☐
Jessica Bishop		6/16/84	519 3rd Ave	Seward	2/6/20	Yes ☒ No ☐
Rhonda Milton		6/26/61	214 6th	Seward	2/6/20	Yes ☒ No ☐
Todd German Sr.		8-23-63	214 6th AVE	Seward	2-6-20	Yes ☒ No ☐
MIKE GRADER		12-26-54	323 BALLAINE	SEWARD	2/6/20	Yes ☒ No ☐
Jodi Andriano ff		6/25/56	531 Ballaine	Seward	2/6/20	Yes ☒ No ☐
Nick Quinn		7/15/74	528 6th Ave	Seward	2/6/20	Yes ☒ No ☐
Michelle Quinn		2/19/77	528 6th Ave	Seward	2/6/20	Yes ☒ No ☐
Hope Quinn		12/3/98	528 6th Ave	Seward	2/6/20	Yes ☒ No ☐
Monika Banic		7/6/87	510 6th Ave	Seward	2/6/20	Yes ☒ No ☐
Michelle Wulfsberg		5-8-82	374 6th Ave	Seward	2/6/20	Yes ☒ No ☐
Jasen Nelson		6/13/89	600 Adams St.	Seward	2/6/20	Yes ☒ No ☐

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Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Joy Michaud	Joy C. Michaud	1-24-53	226 Second Ave	Seward	1/22/2020	Yes ☒ No ☐
DAN MICHAUD	Dan Michaud	2-28-62	226 Second Ave	Seward	1/22/20	Yes ☒ No ☐
Doug Schesser	Doug Schesser	6-29-61	231 2nd Ave	Seward	1/22/20	Yes ☒ No ☐
Denny Murphy	Denny Murphy	5/21/79	308 2nd Ave	Seward	1/22/20	Yes ☐ No ☐
Ben Clock	Ben Clock	07/03/84	314 2nd Ave	Seward	1/22/20	Yes ☒ No ☐
Bethany Waggoner	Bethany Waggoner	2-23-83	314 2nd Ave	Seward	1-22-20	Yes ☒ No ☐
SUE WARD	Sue Ward	3-21-54	318 2nd Ave	Seward	1-22-20	Yes ☒ No ☐
ERIC WARD	Eric Ward	10-9-45	318 2nd Ave	SEWARD	1-22-20	Yes ☒ No ☐
Mary Ann G	Mary Ann G	11-1-55	324 Second Ave	SEWARD	2-22-20	Yes ☒ No ☐
Melanie Goddard	Melanie Goddard	11-27-80	408 Second Ave	Seward	2-22-20	Yes ☒ No ☐
Chris Carneau	Chris Carneau	2-10-97	106 Cairnes St	Seward	2-22-20	Yes ☒ No ☐
LDWIS EVERETT	LDWIS EVERETT	8-9-39	607 1st Ave	SEWARD	2-22-20	Yes ☒ No ☐
Mary Williamson	Mary Williamson	6-7-45	615 2nd	Seward	2-22-20	Yes ☒ No ☐
MARK TUCKER	Mark Tucker	6-3-73	620 2nd Ave	Seward	1-22-2020	Yes ☒ No ☐
Brian Williams	Brian Williams	5-27-75	203 Monroe Ave	Seward	1-21-20	Yes ☒ No ☐
A. Koster	A. Koster	6-23-67	524-2nd	Seward	1/21/20	Yes ☒ No ☐
William Bruner	William Bruner	12/21/83	515 2nd	Seward	1/21/20	Yes ☒ No ☐
Sharon Finn	Sharon Finn	2/23/57	326 6th Ave	Seward	2/5/20	Yes ☐ No ☐
BONNIE	BONNIE	5-2-43	226 B-4 6th Ave	Seward	2-5-20	Yes ☒ No ☐
Bob Davidson	Bob Davidson	8-21-46	214 6th Ave	Seward	2-6-20	Yes ☒ No ☐

AMCO

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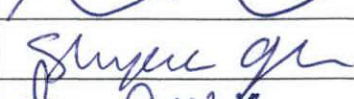
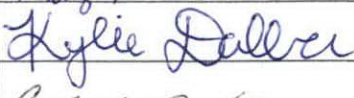
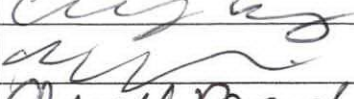
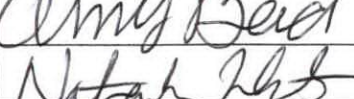
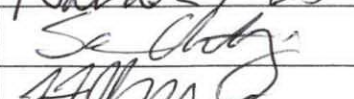
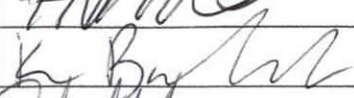
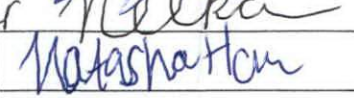
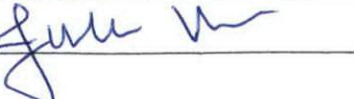
Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Nicole L Stover	Nicole Stover	3/30/81	315 2nd Ave	Seward	2/3/20	Yes ☒ No ☐
Al Plan	Al Plan	3/15/79	315 2nd Ave.	Seward	2/3/20	Yes ☒ No ☐
Arsal Bunn	Arsal Bunn	11-18-75	310 2nd Ave	Seward	2-3-20	Yes ☒ No ☐
Rick Brown	Rick Brown	9/9/52	310 2nd Ave	Seward	2-3-20	Yes ☒ No ☐
Mark Kansteiner	Mark Kansteiner	8/10/51	236 Ballaine Blvd	Seward	2.6.20	Yes ☒ No ☐
Dona Walker	Dona Walker	5-1-45	237 Ballaine	Seward	2.7.20	Yes ☒ No ☐
Art Schabert	Art Schabert	4/21/87	611 Menroe st	Seward	2/7/20	Yes ☒ No ☐
Amanda Jacobs	Amanda Jacobs	4/12/4/1990	604 6th Ave	Seward	2/6/2020	Yes ☒ No ☐
Matthew Torik	Matthew Torik	4/26/2020	531 6th Ave	Seward	2/26/2020	Yes ☒ No ☐
DANIEL LINKHART	Daniel Linkhart	8/3/77	336 6th AVE	SEWARD	2/6/20	Yes ☒ No ☐
Peter M. Toloff	Peter M. Toloff	04-05-65	326 6th Ave	SRD.	2-6-20	Yes ☒ No ☐
Justine Pechural	Justine Pechural	5/8/80	336 6th Ave	Seward	2/6/20	Yes ☒ No ☐
Amanda gill	Amanda Gill	04/22/88	528 2nd Ave.	Seward	2/6/2020	Yes ☒ No ☐
Jaime Vicknair	Jaime Vicknair	12/19/73	334 5th AVE	Seward	2/6/2020	Yes ☒ No ☐
Amor Weiner	Amor Weiner	2/17/81	425 4th Unit D	Seward	2/13/2020	Yes ☒ No ☐
Gretchen Weiner	Gretchen Weiner	01/12/87	425 4th Ave	Seward	2/13/20	Yes ☒ No ☐
Jacie Matis	Jacie Matis	7-20-77	1011 4th Ave APT 10120	Seward	2/13/2020	Yes ☒ No ☐
Natalie Norris	Natalie Norris	06/05/98	802 Port Ave	Seward	2/13/20	Yes ☒ No ☐
Lynissa Hammer	Lynissa Hammer	3/2/71	1601 Bayview Pl	Seward	2/13/20	Yes ☒ No ☐
Robin McKnight	Robin McKnight	4/14/97	319 Third Ave.	Seward	2/13/20	Yes ☒ No ☐

Vanessa

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Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Nathaniel Charbonneau		03/23/80	230 2nd Ave	Seward	1/15/2020	Yes ☒ No ☐
Halley Werner		12/07/84	230 Second Ave.	Seward	1/15/20	Yes ☒ No ☐
Madeire meranda		09/30/96	230 Second Ave	Seward	1/15/20	Yes ☒ No ☐
Shyanne Glenn		2/5/98	125 3rd ave	Seward	1/18/20	Yes ☒ No ☐
Jasmine COLLIER		3/30/90	125 3rd ave	Seward	1/18/20	Yes ☒ No ☐
Mary Keenan		8/31/97	125 3rd Ave	Seward	1/10/20	Yes ☒ No ☐
Kylie Dalbee		2/19/94	125 3rd Ave	Seward	1/18/20	Yes ☒ No ☐
Cassidy Kelly		12/27/96	437 4th Ave	Seward	2/14/20	Yes ☒ No ☐
Chris Bink		6-6-93	414 5th Ave	Seward	2-14-20	Yes ☒ No ☐
Amy Beal		12/18/87	414 5th Ave	Seward	2-14-20	Yes ☒ No ☐
Natalie Hunter		4/11/95	1114 4th Ave Unit 7	Seward	2-14-20	Yes ☒ No ☐
Samuel Artair		11/11/92	403 6th Ave	Seward	2-14-20	Yes ☒ No ☐
Hailey Barron		6/24/95	437 4th Ave	Seward	2/14/20	Yes ☒ No ☐
Kara Bolander		8/16/92	506 6th Ave	Seward	2/14/20	Yes ☒ No ☐
Josh Muller		4/21/90	225 4th Ave	Seward	2/14/20	Yes ☒ No ☐
NICK GRAY		1/9/82	426 4th Ave	SEWARD	2/14/20	Yes ☒ No ☐
TONI HENDERSON		9/5/80	426 4TH AVE	SEWARD	2/14/20	Yes ☒ No ☐
Neeka Erchinger		08/23/94	310 2nd Ave #B	Seward	2/14/20	Yes ☒ No ☐
Natasha Ham		9/13/93	313 Third Ave	Seward	2/15/2020	Yes ☒ No ☐
Julie Wilder		1/5/76	503 A St	Seward	2/15/2020	Yes ☒ No ☐

Please provide your printed name, signature, birthdate, the physical location of your residence, date, and check the appropriate box.

By signing this petition, you are stating that you are in favor of having a licensed alcohol establishment in your community.

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Diana Morrison		2-4-58	214 6th Ave C2	Seward	2-5-20	Yes ☒ No ☐
Derek Tritz		3-21-04	1118 4th Ave	Seward	2-5-20	Yes ☒ No ☐
Autumn Dell		5-2-85	1118 4th Ave	Seward	2-5-20	Yes ☒ No ☐
MARIA GLOTFELTY		9-10-44	1006 2nd AVE	Seward	2-5-20	Yes ☒ No ☐
BRETT NEMITZ		3-5-86	1010 2nd AVE	Seward	2-5-20	Yes ☒ No ☐
Kenneth L Schoening		3-29-52	518 2nd Ave	Seward	2-18-20	Yes ☒ No ☐
Karen L Schoening		8-29-53	518 2nd Ave	Seward	2-18-20	Yes ☒ No ☐
Jane Belovarac		3-9-71	330 2nd Ave	Seward	2-20-20	Yes ☒ No ☐
Tara Miller		1/30/83	213 Lowell C. Rd	Seward	2-20-20	Yes ☒ No ☐
Danny Wolfson		4/10/68	213 Lowell C. Rd	Seward	2-20-20	Yes ☒ No ☐
Dana Takmantis		5/7/62	203 Marathan Dr.	Seward	2/26/20	Yes ☒ No ☐
Darin Trobaugh		8/23/73	1700 Phoenix Rd.	Seward	2/20/20	Yes ☒ No ☐
Tara Ruemer		5/26/71	312 First Ave	Seward	2/20/20	Yes ☒ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐

Please provide your printed name, signature, birthdate, the physical location of your residence, date, and check the appropriate box.

By signing this petition, you are stating that you are in favor of having a licensed alcohol establishment in your community.

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Arthur D. Damm	[Signature]	5/15/67	227 4th Ave Seward	Seward	1/25/20	Yes ☒ No ☐
Scott H. Ranson	[Signature]	4/21/51	536 5th Ave Seward	Seward	1/28/20	Yes ☒ No ☐
Jason Leslie	[Signature]	7/14/75	512 4th Ave	Seward	1/28/20	Yes ☒ No ☐
Kim Leslie	[Signature]	8/11/76	512 4th Ave	Seward	1/28/20	Yes ☒ No ☐
Daisy Meyers	[Signature]	5/8/78	214 6th Ave D7	Seward	1/31/20	Yes ☒ No ☐
Radostina Kosenova	[Signature]	12/15/90	233 4th Ave	Seward	1/31/20	Yes ☒ No ☐
Tess Stoe	[Signature]	12/2/94	300 Washington St	Seward	1/31/20	Yes ☒ No ☐
Jean A. Tisdall	[Signature]	1/31/20	704 5th Ave	Seward	1/31/20	Yes ☒ No ☐
Justin Baldwin	[Signature]	2/14/98	506 6th Ave	Seward	1/31/20	Yes ☒ No ☐
Evelyn Lentz	[Signature]	1/18/92	806 6th Ave	Seward	2/1/20	Yes ☒ No ☐
Kinda Lasota	[Signature]	5/26/50	339 55th Ave Seward	Seward	2/1/20	Yes ☒ No ☐
Joe Harper	[Signature]	6/19/86	343 Adams	Seward AK	2/3/20	Yes ☒ No ☐
Michelle Plamungum	[Signature]	03/25/90	416 4th Ave	Seward AK	02/4/20	Yes ☒ No ☐
Mark Castro	[Signature]	04/28/97	416 4th Ave	Seward AK	02/4/20	Yes ☒ No ☐
Deb Kurtz	[Signature]	5/20/74	501 Second Ave	Seward, AK	2/11/20	Yes ☒ No ☐
DAN ESLER	[Signature]	9/20/63	501 SECOND AVENUE	Seward	11 FEB 2020	Yes ☒ No ☐
Samantha Allen	[Signature]	8-11-95	300 3rd ave	Seward	2/11/20	Yes ☒ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐

MAB - 2 2020

Please provide your printed name, signature, birthdate, the physical location of your residence, date, and check the appropriate box.

By signing this petition, you are stating that you are in favor of having a licensed alcohol establishment in your community.

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Tyson Davis		7/24/84	417 5th Ave.	Seward	1/13/20	Yes ☒ No ☐
Michael Mahmood		6/14/77	314 2nd Ave	Seward	1/13/20	Yes ☒ No ☐
Joanna Johnson		05/18/81	420 1st Ave	Seward	01/20/20	Yes ☒ No ☐
ZACHARY JOHNSON		3/10/80	420 1st Ave	Seward	1/20/2020	Yes ☒ No ☐
Amy Bishop		10/02/86	1919 Dora Way	Seward	4/10/2020	Yes ☒ No ☐
Justin Gallack		4/20/88	612 3rd Ave	Seward	1/20/20	Yes ☒ No ☐
Malia Acorak		4/9/97	610 3rd Ave	Seward	1/20/20	Yes ☒ No ☐
Ben Sayers		7-8-96	417 5th ave.	Seward	2/3/20	Yes ☒ No ☐
Kyle Comeau		9-1-91	324 2nd Ave	Seward	2/25/20	Yes ☒ No ☐
Ren N. Smith		7-22-91	209 2nd Ave	SAK	2/25/20	Yes ☒ No ☐
Joanna Johnson		7-31-93	13020 Peck Street	Seward	2-25-20	Yes ☒ No ☐
Logan Clemens		2-5-94	6969 2nd Ave	Seward	2-25-20	Yes ☒ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐
						Yes ☐ No ☐

MAR - 2 2020

Lone Chicharron Liquor License application.
Seward Alaska

The population of Seward is approximately 2748 and 20.4% (561ppl) are under the age of 21 which brings the total to 2187.(see attached)

The location of the Lone Chicharron is in the downtown/business district. As such, most of the buildings in the area are businesses/commercial use as opposed to residential use, with the outlying areas filled with residents.

In addition, many of the residents that do live in the downtown area are seasonal workers and not year-round.

The areas East and South of our location are made up of water and a non-liveable road/area.

Approximately 600 residents are in the Spring Creek Correctional facility which is outside of the 1 mile radius. That brings the total to 1587. (2187-600=1587)

The majority of the residential subdivisions in the City of Seward (Forest Acres 800ppl, Dairy Hill/Dora Way 500ppl..) are outside of the 1 mile radius which leaves 287 year round residents 21 years of age or older.

In our estimation the year round population within a 1 mile radius is 287 and we have gathered 168 signatures which is 58.5%

To recap:

Seward population 2748 – 561 (under 21)=2187

2187 – 600 (Spring Creek residents)= 1587

1587-1300 (subdivisions outside of 1 mile radius) = 287

Signatures gathered = 168 which is 58.5%.

AMCO

MAR - 2 2020

Narrative 2

Petition signatures were gathered via door to door and also on premises.

AMCO

MAR - 2 2020

Google Maps Lone Chicharron Taqueria



Map data ©2019

1000 ft

1 mile Radius



Lone Chicharron Taqueria

4.6 ★ ★ ★ ★ ★ (9)

Mexican restaurant



Directions



Save



Nearby



Send to your
phone

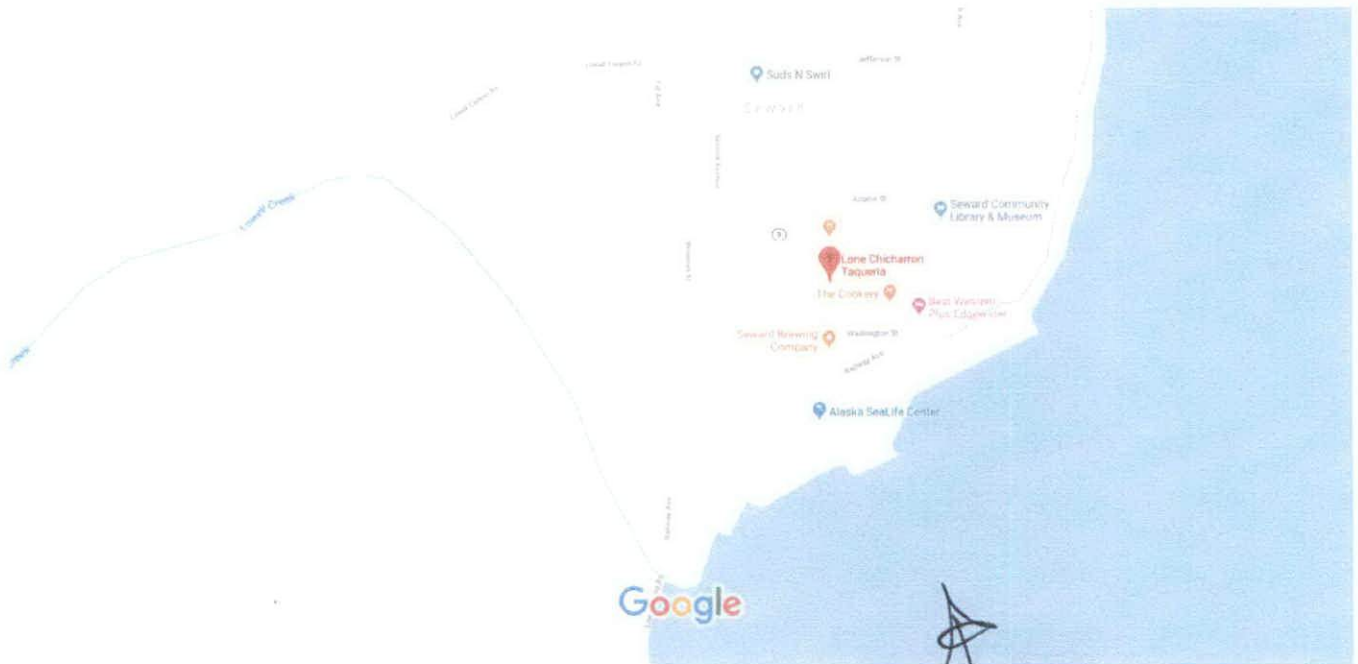


Share

AMCO

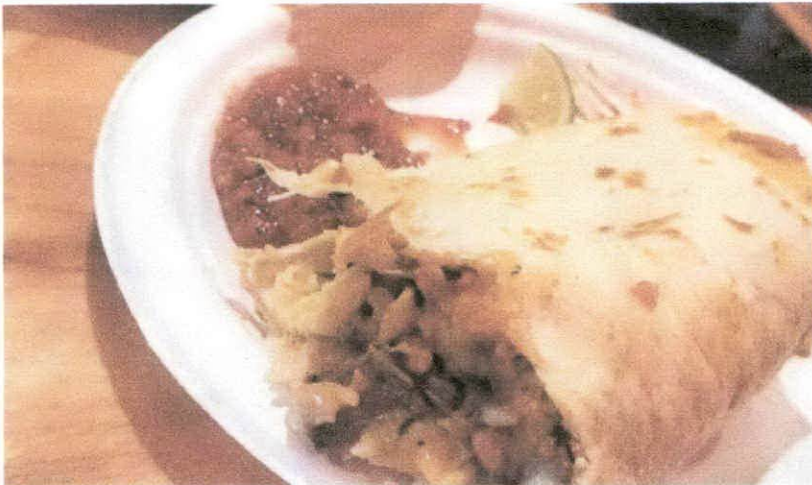
MAR - 2 2020

Google Maps Lone Chicharron Taqueria



Map data ©2019 200 ft

Area that signatures were gathered



Lone Chicharron Taqueria

4.6 ★ ★ ★ ★ ★ (9)

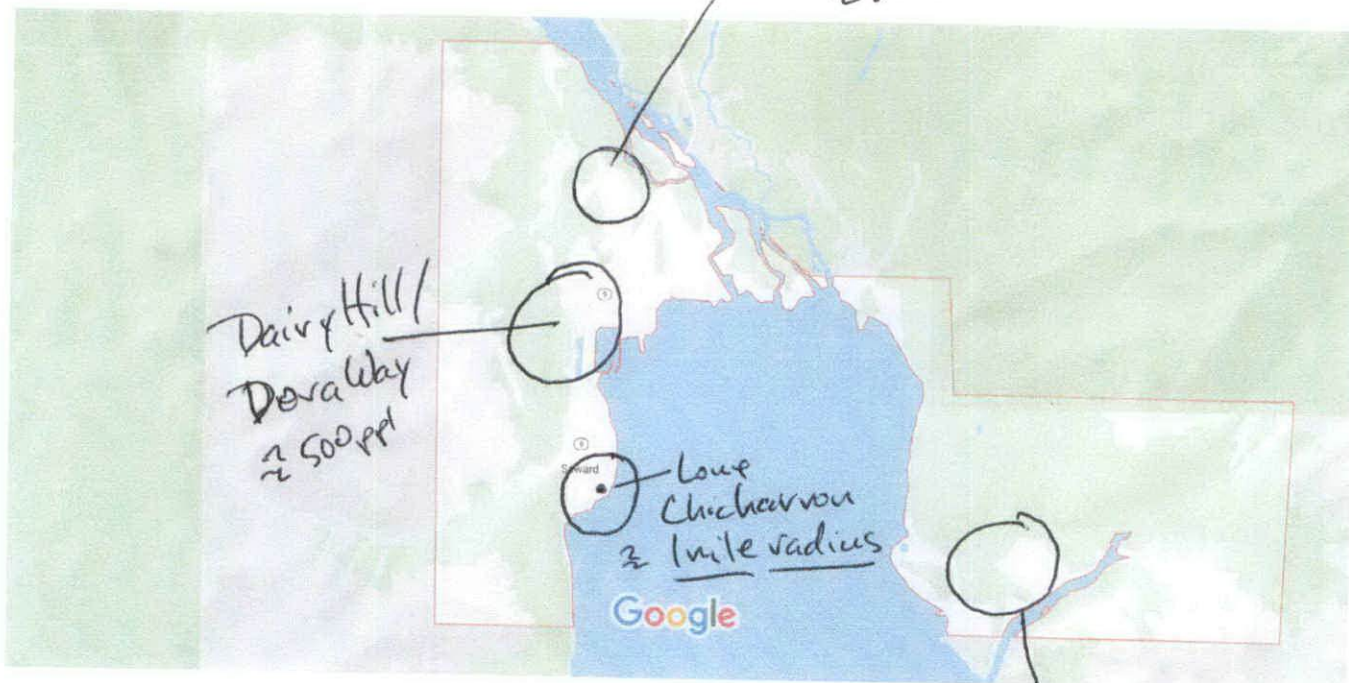
Mexican restaurant

- Directions
- Save
- Nearby
- Send to your phone
- Share

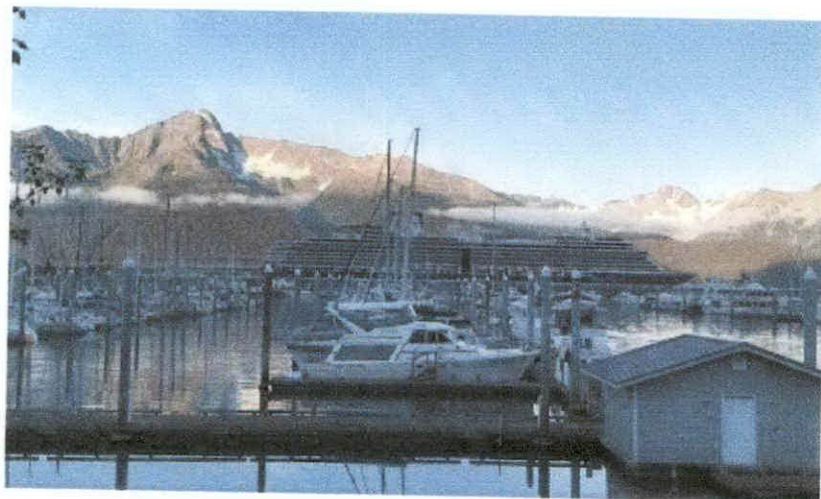
AMCO

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Google Maps Seward



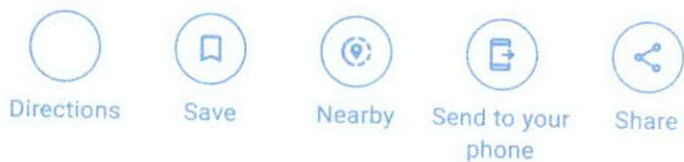
Map data ©2019 Google 2000 ft



Seward

Alaska 99664

Cloudy · 40°F
2:29 PM



Photos

AMCO

MAR - 2 2020

www.bestplaces.net/people/city/alaska/seward

BEST BUY
See Details A

Big screen TVs
as low as \$199.99



[Shop Now](#)

Seward, Alaska



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People in Seward, Alaska

The population in Seward is 2,748. There are **197 people per square mile** aka population density. The **median age in Seward is 41.1**, the US median age is 37.4. **The number of people per household in Seward is 2.2**, the US average of people per household is 2.6.

Family in Seward

- 36.8% are married
- 14.8% are divorced
- 15.0% are married with children
- 16.0% have children, but are single

Race in Seward

- 67.3% are white
- 2.1% are black
- 1.9% are asian
- 16.5% are native american
- 0.0% claim Other
- 1.8% claim Hispanic Ethnicity

ESTIMATED TOTAL POPULATION BY AGE

COMPARE COST OF LIVING

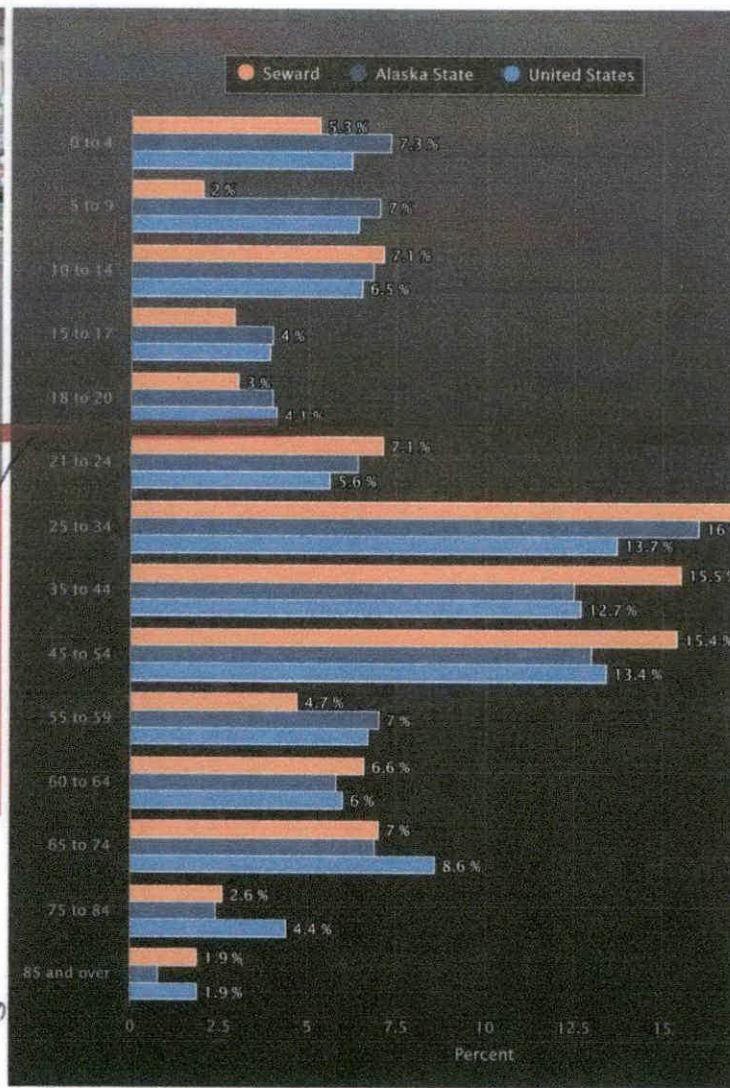
Compare **Seward, Alaska** to any other place in the USA.



**Sorry,
cybercriminals.**

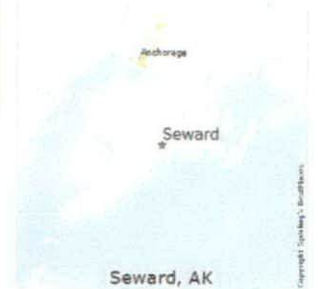
AMCO

MAR - 2 2020



MAPS OF SEWARD, ALASKA

Check out the latest Maps in a variety of categories including cost of living, population, and commute time.



ZIP CODES IN SEWARD, ALASKA

99664

Seward Population
under 21 years
≈ 20.4%

PEOPLE	Seward, Alaska	United States
Population	2,748	321,004,407
Female Population	42.4%	50.8%
Male Population	57.6%	49.2%
Median Age	37.5	37.8
Population - 2010	2,621	308,745,538
Population - 2000	2,830	285,036,114
Population - 1990	2,699	251,960,433
Pop. 2000 to Now	-2.9%	12.6%
Pop. 1990 to Now	1.8%	27.4%
Population Density	196.8	90.9

Trump Ends Another Obama Era Program

If you owe less than \$726,525 your home and haven't missed a mortgage payment in 6 months, Congress's mortgage stimulus p for the middle class. You'll be s when you see how much you ca

Tap Your Age: Recalculate Your House Pa

18-25	26-35	3
46-55	56-65	(

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NEW LISTINGS IN SEWARD



\$305,000
13188 Bruno Rd
Bed 3 | Bath 2

AMCO

MAR - 2 2017



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:	The Cookery, LLC				
License Type:	Restaurant/Eating Place public convenience		Statutory Reference:	AS 04.11.400(g)	
Doing Business As:	The Lone Chicharron Taqueria				
Premises Address:	215 Fourth Avenue, Suite B				
City:	Seward	State:	AK	ZIP:	99664
Local Governing Body:	Seward				
Community Council:					

Mailing Address:	PO Box 1068				
City:	Seward	State:	AK	ZIP:	99664

Designated Licensee:	Kevin Lane				
Contact Phone:	907-362-7893	Business Phone:	907-422-7459		
Contact Email:	info@cookeryseward.com ; kevin@cookeryseward.com				

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

OFFICE USE ONLY					
Complete Date:	5/21/2020	License Years:	2020-2021	License #:	5903
Board Meeting Date:	6/9/2020	Transaction #:	1264167		
Issue Date:		BRE:	OMF		



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 InformationThis 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:	Kevin Lane				
Title(s):	Member	Phone:	907-362-7893	% Owned:	50
Address:	517 Sixth Avenue				
City:	Seward	State:	AK	ZIP:	99664

Entity Official:	Anastasia Lane				
Title(s):	Member	Phone:	907-362-7892	% Owned:	50
Address:	517 Sixth Avenue				
City:	Seward	State:	AK	ZIP:	99664

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 #:	10027043	AK Formed Date:	02/16/2015	Home State:	Alaska
Registered Agent:	Kevin Lane	Agent's Phone:	907-362-7893		
Agent's Mailing Address:	Home: PO Box 63 Work: PO Box 1068				
City:	Seward	State:	AK	ZIP:	99664

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):

Kevin and Anastasia Lane, 5400, Restaurant/Eating Place public convenience

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:

Carri Fisher, general manager of The Cookery, LLC and the person filling out this form on behalf of Kevin and Anastasia Lane



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

Kevin Lane

Printed name of licensee



Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 2.26.2023

Subscribed and sworn to before me this 26 day of Feb, 2020.

AMCO



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

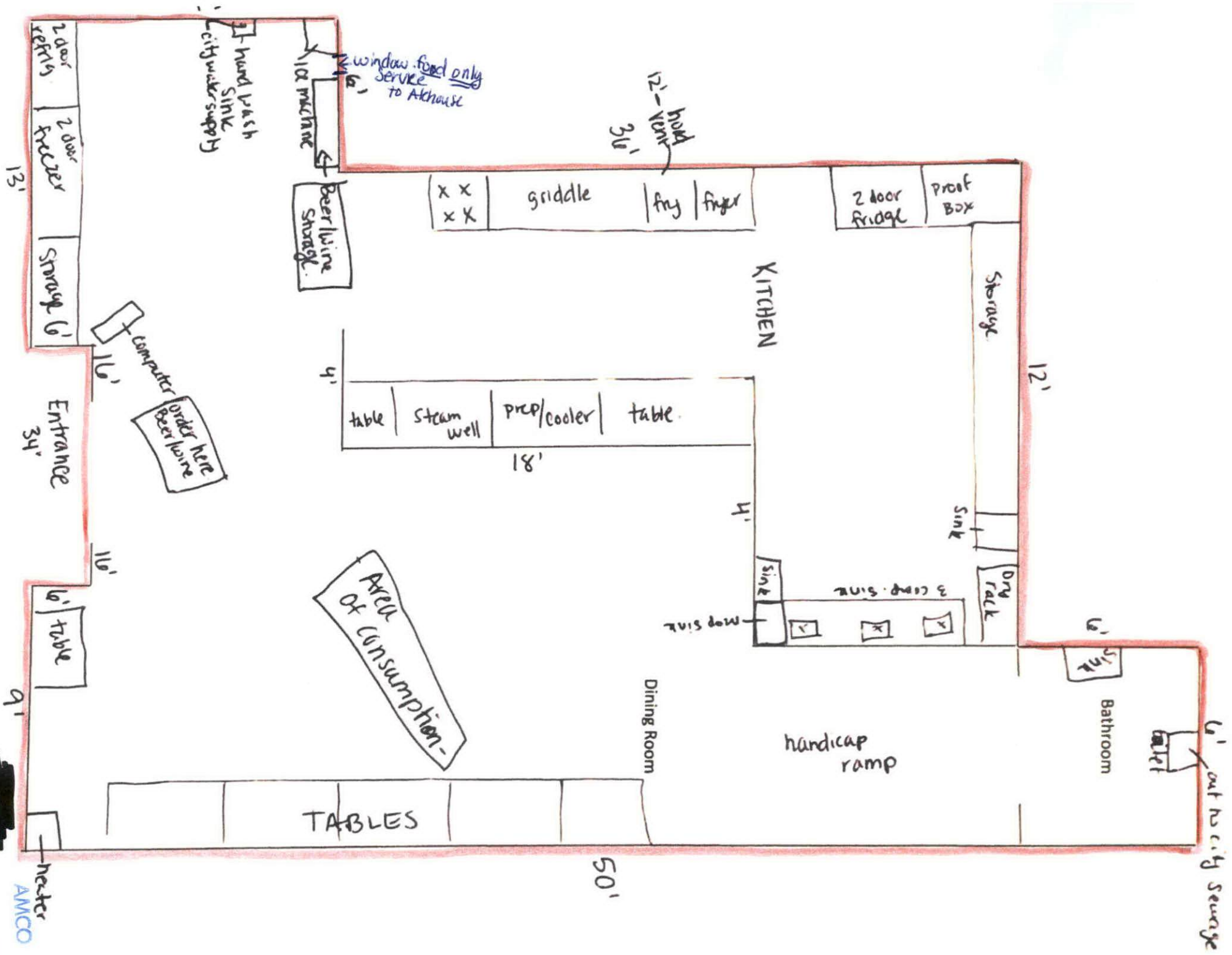
No

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:	The Cookery, LLC	License Number:			
License Type:	Restaurant/Eating Place Public Convenience				
Doing Business As:	The Lone Chicharron Taqueria				
Premises Address:	215 Fourth Avenue, Suite B				
City:	Seward	State:	AK	ZIP:	99664





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:	The Cookery, LLC				
License Type:	Restaurant/Eating Place Public Convenience	License Number:			
Doing Business As:	The Lone Chicharron Taqueria				
Premises Address:	215 Fourth Avenue, Suite B				
City:	Seward	State:	AK	ZIP:	99664
Contact Name:	Kevin Lane	Contact Phone:	907-362-7893		

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.)

Minors who are dining with us will only be allowed in the dining area and restroom. If we hire a minor, they will only be employed and present in the kitchen and not where we store and keep the beer and wine.

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.

All valid employees will have their TAPS card and will be trained to ensure that minors are not buying or drinking alcohol on premises.

All minor employees will not be given access to the beer and wine storage area.

There will always be a manager on duty to ensure this.

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:

12pm-11pm
Monday-Sunday

Section 6 – Entertainment & Service

Review AS 04.11.100(g)(2)

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

Yes
☐

No
☒

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

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:



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.



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.



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.



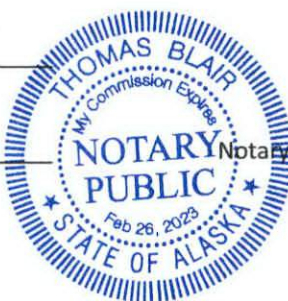
I have included with this application a copy of the most recent AB-02 or AB-14 for the premises to be permitted.
(AB-03 applications that accompany a new or transfer license application will not be required to submit an additional copy of their premises diagram.)



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


 Signature of licensee

Kevin Lane
 Printed name of licensee




 Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 2.26.2023

Subscribed and sworn to before me this 26 day of Feb, 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



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

AMCO Enforcement Review:

Enforcement Recommendation:

Approve

Deny

☐☐

Signature of AMCO Enforcement Supervisor

Printed name of AMCO Enforcement Supervisor

Date

Enforcement Recommendations:

AMCO Director Review:

Approved

Denied

☐☐

Signature of AMCO Director

Printed name of AMCO Director

Date

Limitations:



TACOS

\$4

House made corn tortillas

Tacos are served family style, please ask for an extra plate if needed.

All tacos are topped with cabbage

Please no modifications

“Elote” - (V)

Roasted corn, poblano, black beans, onions, cotija

Carne Asada

marinated steak

Pollo

Marinated chicken

Carnitas

Slow cooked pork

Rockfish

Lightly breaded and fried, slaw, and cilantro

THE HOT ROD

A perfect meal...choose two tacos, served with side of pinto beans and cilantro lime rice

\$12

TORTAS

Any one of our fillings on our house made talera roll, avocado salsa, tomatoes, lettuce, pickled jalapenos and lime mayo

\$12

MAKE IT A BURRITO

choose any of our 4 main options, add rice, beans, jack cheese, cilantro, cabbage & avocado salsa, roll it all up in a flour tortilla and voila, ¡burrito!

\$12

PALETAS

House made popsicles, see the specials board or ask for today's flavor!

\$4

SIDES

Cilantro Lime Rice – (V)

Pinto Beans – (V)

cooked with love, topped with cotija cheese
\$2.50 each

¡Ask about our specials or see the board!

BEVERAGES

Bottled Soda from Mexico - \$3

Coke, Fanta, Sprite

Diet Coke Can - \$2

Perrier Sparkling Water - \$2

!!!How to “Salsa”!!!

¡We abhor waste! ¡And tacos should be a one hand (and messy) experience!

Once you get your taco, please head to the salsa bar and dress your tacos as you please.

Help yourself to our water station over by the salsa bar, but if you have your own water receptacle, feel free to use it!

(V)=Vegetarian

AMCO

MAR - 2 2020



Alaska Food Code 2020 Establishment Permit

Division of Environmental Health
Food Safety & Sanitation Program

Permit Number: 9506
Issued to: **THE COOKERY LLC**
For: **The Lone Chicharron Taqueria**
For Operation of: **FF-1 Food Service**
Located at: **215 4th AVE STE B Seward, AK 99664**

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:

A handwritten signature in black ink, appearing to read "Kimberly S. V.", is written over the printed name of the 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)



AMCC

MAR - 2 2020