

Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West 7th Avenue, Suite 1600 Anchorage, AK 99501

Main: 907.269.0350

MEMORANDUM

TO: DATE: October 22, 2021 Alcoholic Beverage Control Board

> #5317 Muse Transfer RE:

FROM: Carrie Craig, RLS with Kristina Serezhenkov, OLE

Statutory & Regulatory

Authority:

AS 04.11.100(b) Restaurant or Eating Place license

"A license may be issued under this section only if the board determines that the premises to be licensed are a bona fide restaurant or eating place."

AS 04.16.049 Access of persons under the age of 21 to licensed premises

- A person under 21 years of age may not knowingly enter or remain in premises licensed under this title unless
 - accompanied by a parent, guardian, or spouse who has attained 21 years of age; 1)
 - the person is at least 16 years of age, the premises are designated by the board as a restaurant for the purposes of this section, and the person enters and remains only for dining;
 - 3) the person is under 16 years of age, is accompanied by a person over 21 years of age, the parent or guardian of the underaged person consents, the premises are designated by the board as a restaurant for the purposes of this section, and the person enters and remains only for dining

3 AAC 304.305 Restaurant or Eating Place License

- a) In AS 04.11.100 and this section, a "bona fide restaurant or eating place" is an establishment, or portion of an establishment, where, during all times that beer or wine is served or consumed,
 - the patron's principal activity is consumption of food; and
 - a variety of types of food items appropriate for meals is available for sale as shown on a menu provided to patrons and filed with the board;
- In considering an application for issuance, transfer, or relocation of a restaurant or eating place license, the board will determine the portion of the premises or proposed premises that constitutes a restaurant or eating place, and will license only that portion for the sale and consumption of alcoholic beverages.

3 AAC 304.910 Restaurant Definition

- The board will use the following guidelines when determining what qualifies as a bona fide restaurant or eating place:
 - the applicant demonstrates minimum standards for a kitchen to prepare food onsite, in accordance with 18 AAC 31.040(c) or municipal ordinance;
 - the applicant provides a menu of food items, including entrees, that are regularly sold and prepared by the licensee on the licensed premises;
 - the establishment has tables or counters for consuming food in a dining area on the premises;
 - the applicant includes a detailed plan to
 - A. prevent access to alcohol by minors; and
 - B. ensure that introduction or removal of alcoholic beverages is in compliance with AS 04.16.120.

Background: At the August 17, 2021 meeting, the board heard from staff, the applicant and their counsel, Sherman Ernouf and after discussion, the board voted to table the consideration of the transfer application pending more information regarding the proposed premises.

On August 31st, Director Klinkhart, Rick Helms and Carrie Craig meet with the applicant and Mr. Ernouf to review a proposal to remove the 4th floor from the proposed licensed premises, which staff was agreeable to.

Previous Background: At the July 9, 2019 ABC meeting, the board considered the transfer of a Restaurant/Eating Place license #5317 from NANA Management Services, LLC to Muse with Laura Cole (current transferor). Staff recommendation at that time was to ask the board to reduce the proposed licensed premises only to the restaurant area (in accordance with AS 04.06.090(c)) and approve the transfer.

At the time, Director McConnell had referenced the above statutes and regulations in the board memo and expressed concern that the operation of the license would not be compliant with the requirements for a Restaurant/Eating Place license, as well as the risk of museum patrons under the age of 21 and not accompanied by a parent or guardian entering the premises.

The board listened to testimony from Sherman Ernouf and Dan Coffey, legal counsel for the licensee, and Brian Steele (Deputy Director of Anchorage Museum) in which they said they understood the Director's concerns but the premises had been licensed for years in a similar manner. They were concerned about the time and effort it would take to address statute issues and proposing changes with the legislature, so they asked the board to allow them to keep their previous approved licensed premises. The board unanimously agreed, but there were some concerns from Member Rex Leath with approving a license that did not seem to match the statute.

With this current transfer of ownership application in the Municipality of Anchorage, the applicant and their counsel are requesting a similar, yet slightly reduced licensed premises as the 2019 proposal.

Staff Recommendation:

Staff asks the board to consider the new proposed licensed premises, decide if it is in accordance with AS 04.06.090(c) and approve the transfer with delegation.

Attachments: Sherman Ernouf's Updated Memo

2021 Proposed Premises pages Current Approved Premises pages 2019 Proposed Premises pages

AB - 01 pages AB - 03 pages

LAW OFFICES OF ERNOUF & COFFEY, P.C.

P.O. Box 212314 Anchorage, Alaska 99521 (907) 274-3385

MEMO TO ALCOHOL BEVERAGE CONTROL BOARD

TO: CHAIRMAN WALUKIEWICZ, MEMBERS OF ALCOHOL

BEVERAGE CONTROL BOARD

FROM: W. SHERMAN ERNOUF

RE: ANCHORAGE MUSEUM (MUSE) PREMISES REDUCTION

DATE: October 25, 2021

At the September 2021 ABC Board Meeting, the Board tabled consideration of the transfer of a restaurant eating place liquor license to the Anchorage Museum at the Museum's request and due to concern voiced by the Board over the size of the premises being proposed.

After the Board meeting, we met with the Director and his team to discuss potential solutions to address the Board's concerns. The outcome of the meeting was positive and we believe resulted in a solution that will work for the Museum, this Board, and which is appropriate under Title 4 of Alaska law.

First, the whole fourth floor has now been excluded from the premises diagram. As you will recall, this was one of the main concerns voiced by staff and this Board. This space been eliminated and will be utilized using catering and/or special events permits when needed.

Second, alcohol service will be contained to the Muse Restaurant and the Museum's Kiosk/Atrium area. This area is a confined space which can be monitored and secured by the Museum's roaming security team, food service employees who will be TAP trained, and by their security team monitoring video surveillance.

Lastly, private functions and events will occur in the Muse and in the Atrium and Kiosk areas. These private events would be for adults and no minors would be on the premises.

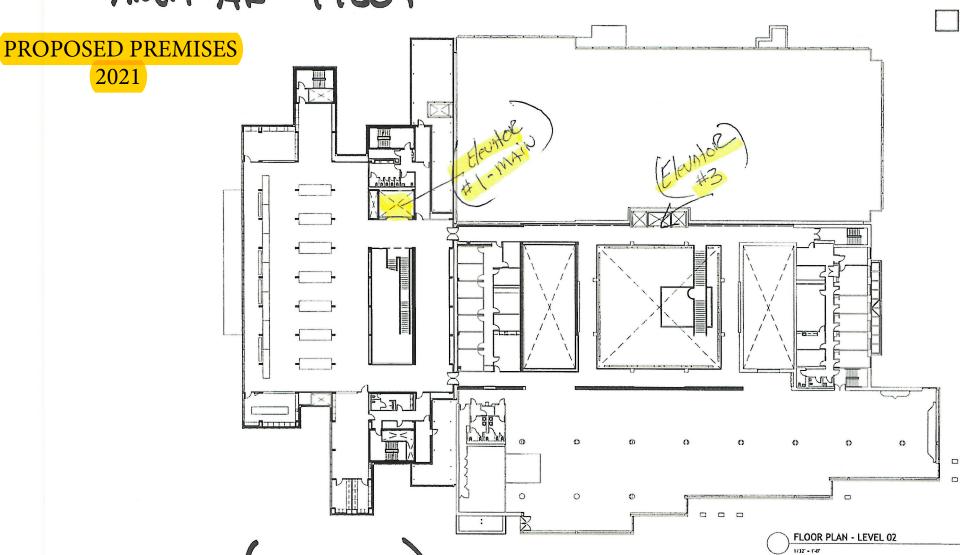
The Anchorage Museum respectfully requests approval of the transfer with the reduced premises discussed herein.

PROPOSED PREMISES Anchorage Museum 2021 625 C Street Anch. AK. 99501 AMCO Received 7/8/20 MILLE FLOOR PLAN - LEVEL 01 = 15,887 sq. ft. (1st floor)

Aucholage Museum 625 c Street Auch AK 99501



(6th Ave)



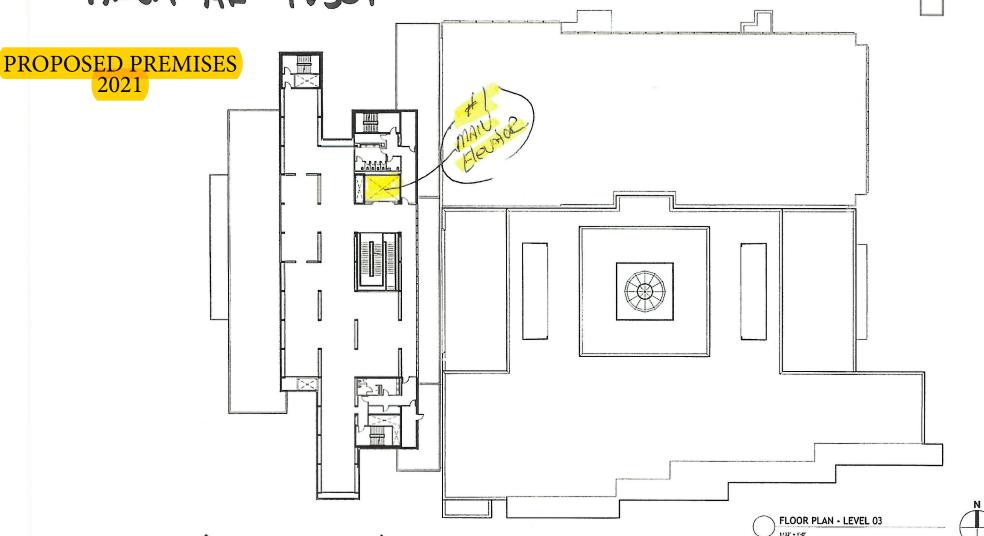
level 2 - (No Alcohol)

(7th Ave)

Anthorage Museum 605 C Street Andh Ak 99501



COM Ave



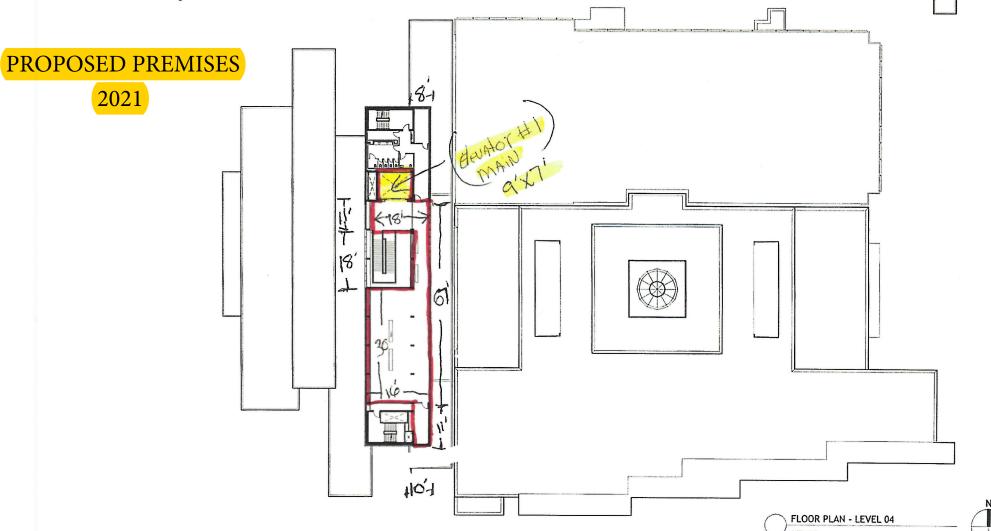
Level 3 HO Alcuhol Sorvice

(7-10 Ave)

Anchorage Museum 625 C Street Anch AK 99501



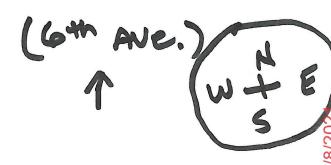
(6th Ave)

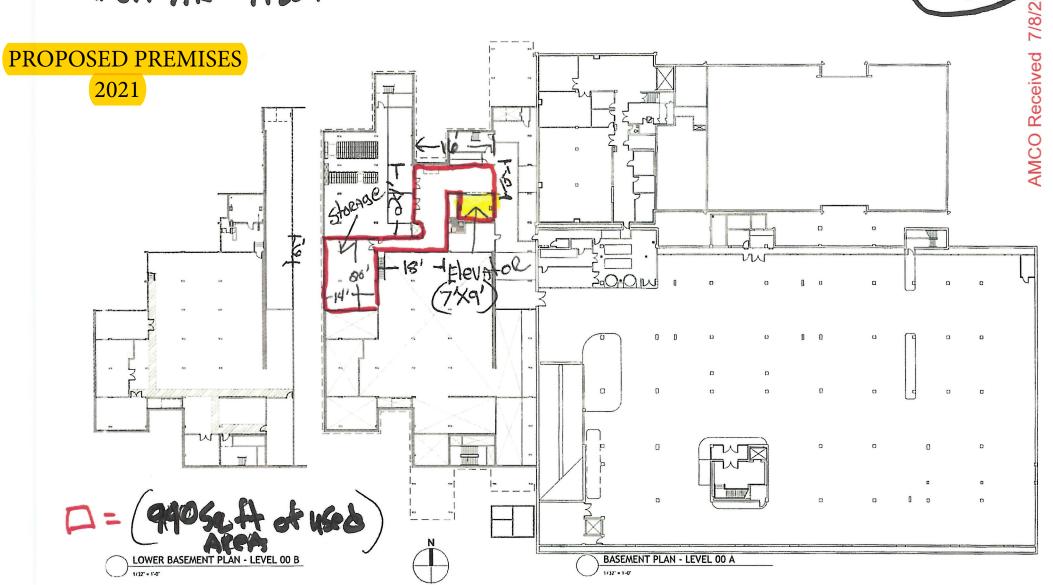


= 995 sq. fd (4th Floor)

(7th Ave)

Anchorage Museum-"Basement-" 625 C Street Anch AK 99501





(7th AVE)

MUSE Restaurant, LLC Security Plan

Outside Deck Area: MUSE Restaurant, LLC dba Muse is located at the Anchorage Museum. The outside deck/patio portion of the restaurant is segregated from the rest of the premises and includes a 3-foot-high steel railing around the entire perimeter of the patio with an opening/control point at the north end nearest to door for accessing the restaurant. There will be a manager on site at all times, and when the outdoor serving area is open (weather and staffing dependent), there will be waiting staff that are TAP trained walking between the indoor seating area, and outdoor area to monitor alcohol consumption. The safety and security of patrons is also monitored though CCTV and 24/7 on site security personnel. When the indoor seating area is open, and the outdoor seating area is closed, doors to the outdoor seating area will be closed and used only for emergency egress. Waiting staff in the indoor seating area will monitor to ensure patrons do not attempt to use the outside area when it is closed. Door alarms will also be activated in the event a patron tries to exit though a secured door.

Kiosk/Atrium: With regard to the atrium, and kiosk area waiting staff within these two areas will be TAP trained and employed by Muse Restaurant, LLC. Children are permitted in these areas when accompanied by an adult. Wait staff will monitor the service of alcohol and consumption of alcohol.

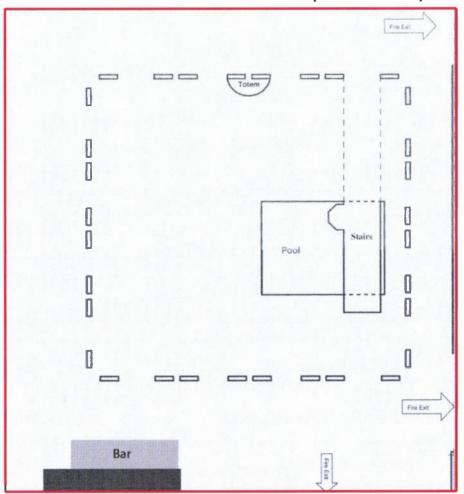
Additionally, we have CCTV and 24/7 security personnel although they are not TAP trained or employed by Muse Restaurant, LLC they will monitor to ensure children do not get alcohol.

Level 4: With regard to level 4 waiting staff within this area who are selling and serving alcohol will be TAP trained and employed by Muse Restaurant, LLC. Children are permitted in this area when accompanied by an adult. Wait staff will monitor the service of alcohol and consumption of alcohol. Additionally, we have CCTV and 24/7 security personnel although they are not TAP trained or employed by Muse Restaurant, LLC they will monitor to ensure children do not get alcohol.

All Levels of Museum: Children are permitted on all 4 levels of the museum when accompanied by a parent or guardian. Security guards are on the premises 24/7, although they are not TAP trained as they will not be serving alcohol but are on the premises at all times. Security personnel are authorized to enforce all museum safety and security protocols in the facility. Additionally, we have surveillance cameras around the facility monitoring all areas of the museum. This is monitored by museum staff that are not TAP trained but again will monitor children do not get alcohol or that alcohol does not leave licensed areas.

CURRENT APPROVED PREMISES

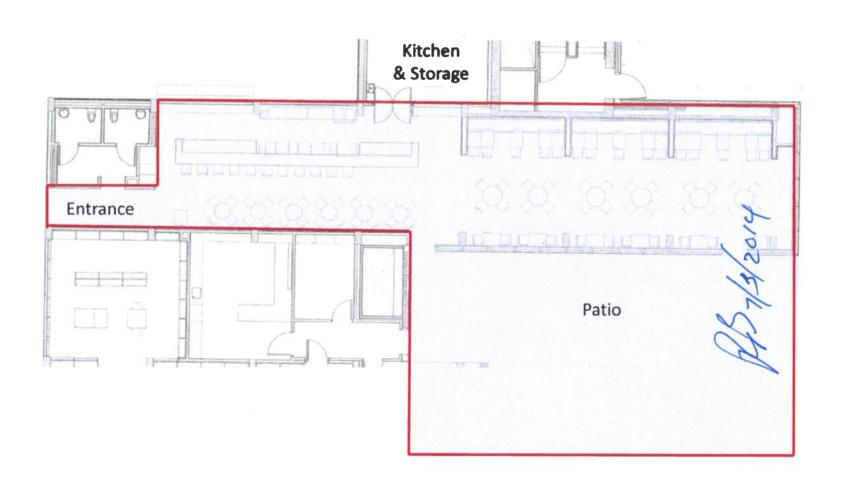
ANCHORAGE MUSEUM Atrium Service Area (Main Level)



M2/4/2014

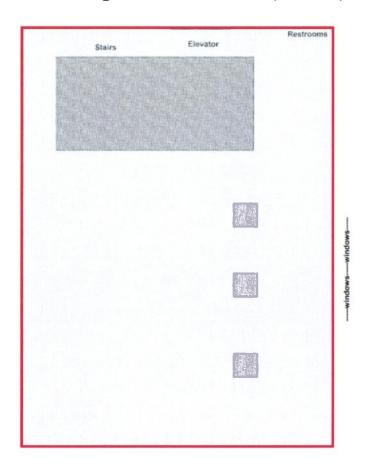
CURRENT APPROVED PREMISES

ANCHORAGE MUSEUM Muse Restaurant Service Area (First Floor)



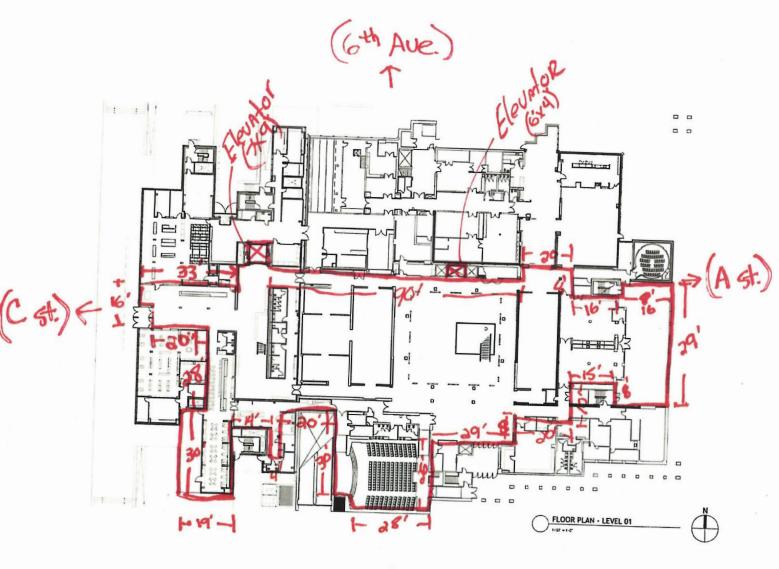
CURRENT APPROVED PREMISES

ANCHORAGE MUSEUM Chugach Service Area (4th Floor)



19/2/2014

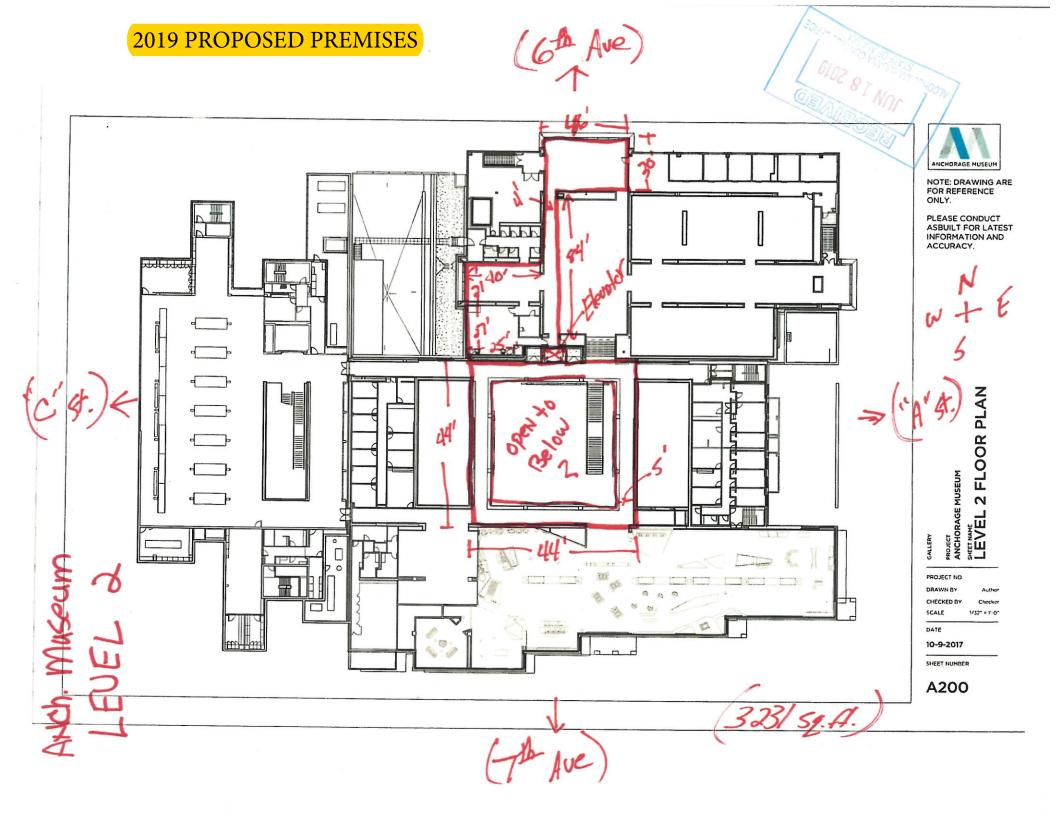
Anchorage Museum - Level 1 625 C Street 2019 PROPOSED PREMISES ANCH AK 99501



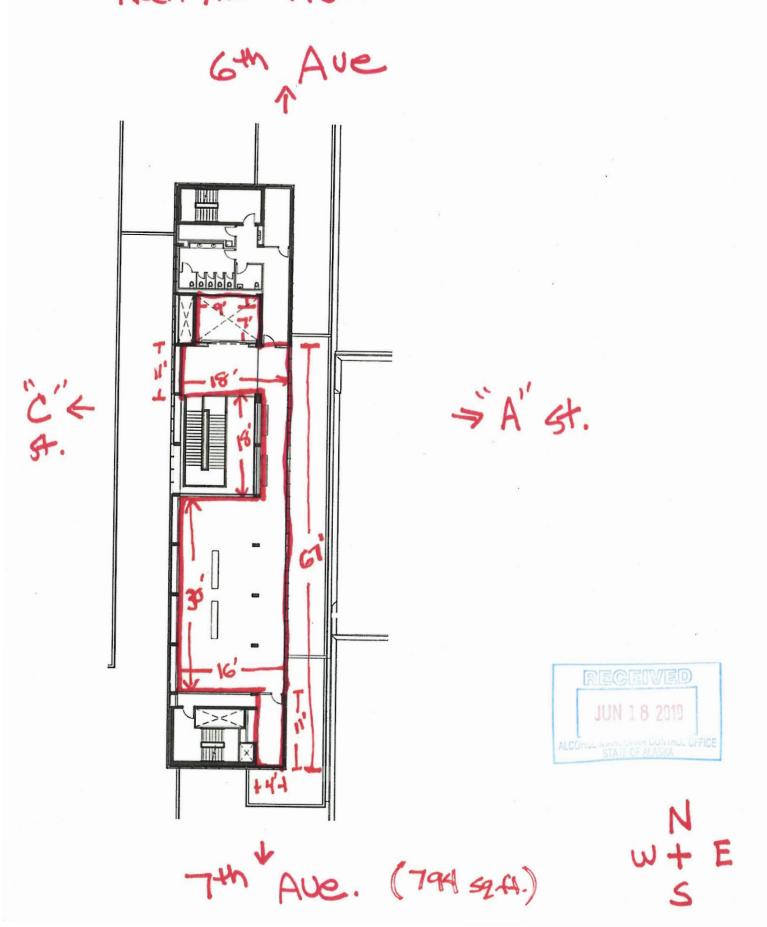
(7th Ave)



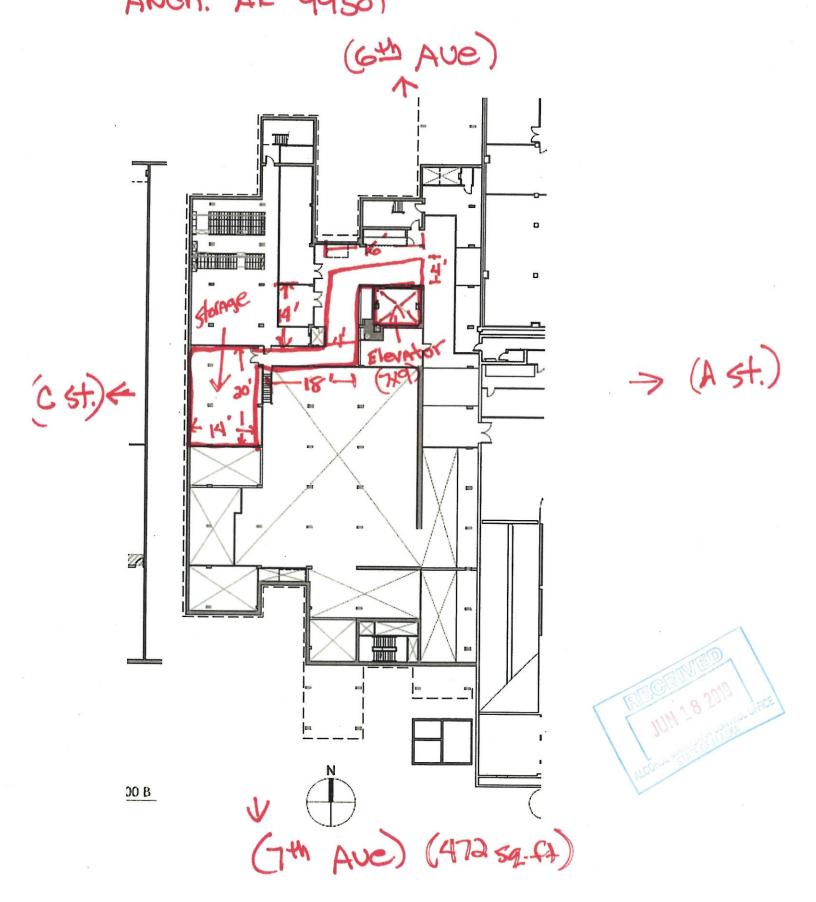
(9915 sq.A.)



Anchorage Museum - LEUEL 4 625 C Street Auch AK 99501 2019 PROPOSED PREMISES



Anchorage Museum - Basement
625 C Street
2019 PROPOSED PREMISES
Anch. AK 99501



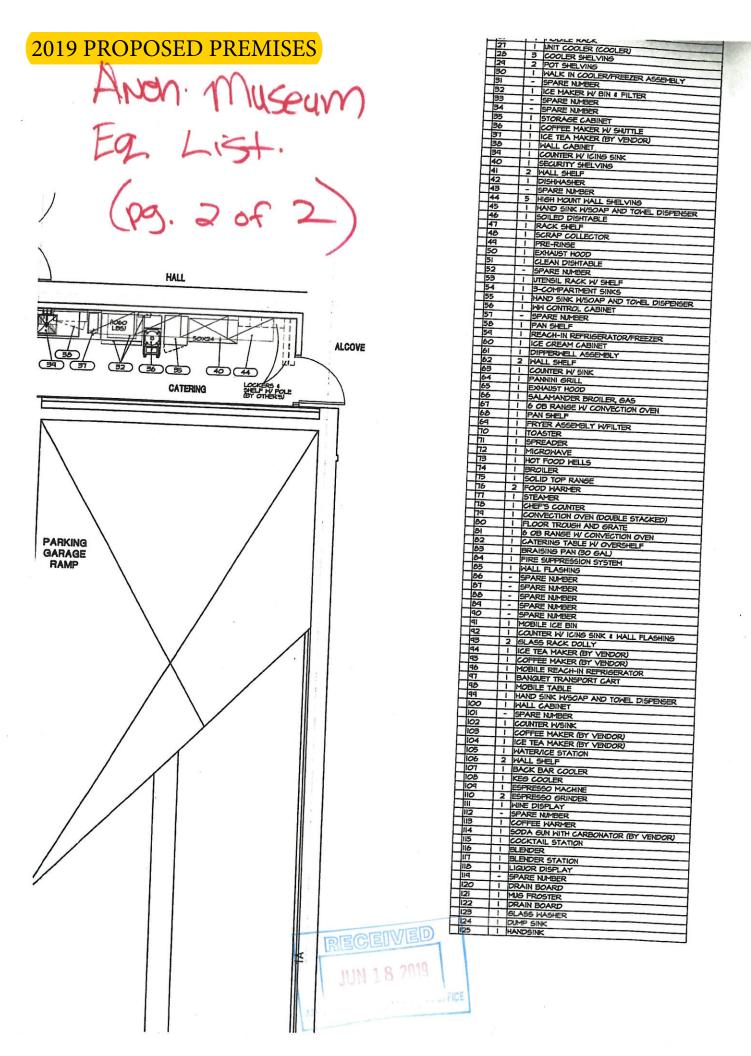
Anch Museum Eq. List (ps. 1 of 2)

2019 PROPOSED PREMISES



PARKING GARAGE RAMP

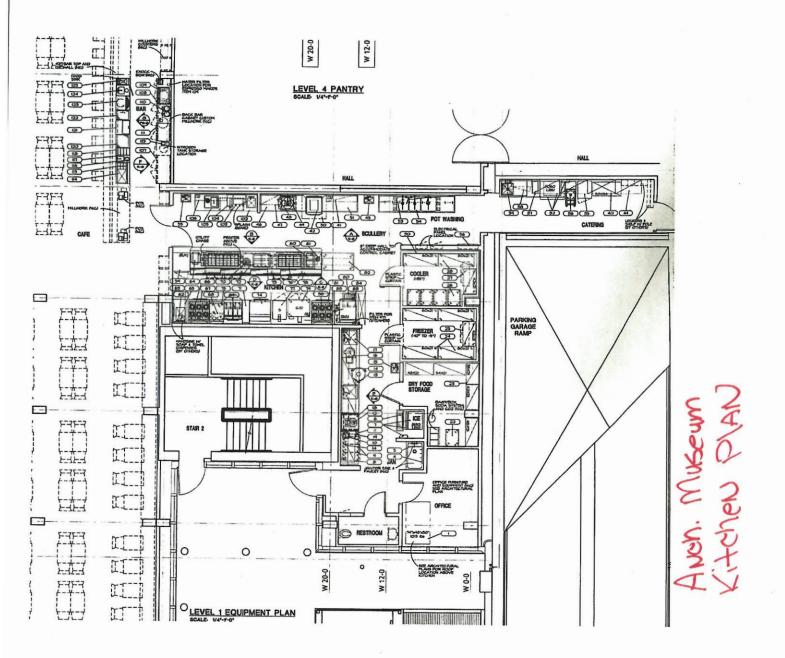
Γ		KI	TCHEN EQUIPMENT
H	TOTAL A	IVI	TCHEN EQUIPMENT
R	ITEM NO	QTY	DESCRIPTION
	1	T	REFRIGERATION RACK
H	3	1=	SPARE NUMBER SPARE NUMBER
	4	Ī	MAT RACK
H	5	!	MOP AND BROOM RACK/ SHELF
	7	+	FLOOR TROUGH AND GRATE ICE MAKER W BIN & FILTER
	В	I	WORKTABLE
	9 10	3	INGREDIENT BINS FOOD PROCESSOR
	=	H	CAN OPENER
	12	!	MIXER (20 QT)
	13 14	4	SALAD SPINNER WALL SHELF
	15	T	HAND SINK WSOAP AND TOWEL DISPENSER
	16 17	+	PREP TABLE WSINKS
	18	i	MOBILE MIXER TABLE
_	19	4	HIGH MOUNT WALL SHELVING
	20 21	=	SPARE NUMBER SPARE NUMBER
	22	1	MOBILE RACK
	23	5	STORAGE SHELVING FREEZER SHELVING
	24 25	5	UNIT COOLER (FREEZER)
	26	4	MOBILE RACK
	27 28		UNIT COOLER (COOLER) COOLER SHELVING
	29	2	POT SHELVING
	30	1	WALK IN COOLER/FREEZER ASSEMBLY
	31 32	1	SPARE NUMBER ICE MAKER W/ BIN & FILTER
	33	-	SPARE NUMBER
	34 35	- 1	SPARE NUMBER STORAGE CABINET
	36	+	COFFEE MAKER W SHUTTLE
	31		ICE TEA MAKER (BY VENDOR)
	38 34		WALL CABINET COUNTER W ICING SINC
	40	_	SECURITY SHELVING
	41		WALL SHELF
	42 43		DISHWASHER SPARE NUMBER
	44		HIGH MOUNT WALL SHELVING
	45 46	-	HAND SINK WISOAP AND TOWEL DISPENSER SOILED DISHTABLE
	47		RACK SHELF
	48	1	SCRAP COLLECTOR
	49 50		PRE-RINSE EXHAUST HOOD
	51		CLEAN DISHTABLE
	52		SPARE NUMBER
	59 54		UTENSIL RACK W SHELF 3-COMPARTMENT SINKS
1	55		HAND SINK WSOAP AND TOWEL DISPENSER
	56 57		WH CONTROL CABINET SPARE NUMBER
	58		PAN SHELF
1	54		REACH-IN REFRIGERATOR/FREEZER
_	60 61		ICE CREAM CABINET DIPPERWELL ASSEMBLY
-	52	2	WALL SHELF
	53 54		COUNTER W SINK
	55	+	PANNINI GRILL. EXHAUST HOOD
7	56		SALAMANDER BROILER, GAS
	57 58		6 OB RANGE W/ CONVECTION OVEN PAN SHELF
_	59		FRYER ASSEMBLY WFILTER
	10	1	TOASTER
	11 12		SPREADER MICROHAVE
	13	1	HOT FOOD WELLS
	14 15		BROILER SOLID TOP RANGE
1	16	2	FOOD WARMER
_	Π	1	STEAMER CHEF'S COUNTER
	18 19		CONVECTION OVEN (DOUBLE STACKED)
1	30		FLOOR TROUGH AND GRATE
	61 62		6 OB RANGE W CONVECTION OVEN CATERING TABLE W OVERSHELF
-	93	1	Braising Pan (30 Gal.)
	94 95		FIRE SUPPRESSION SYSTEM
	36		WALL FLASHING SPARE NUMBER
1	B7	-	SPARE NUMBER
	88		SPARE NUMBER SPARE NUMBER
-	10	-	SPARE NUMBER
-	41	1	MOBILE ICE BIN
	12		COUNTER MY ICING SINK & WALL FLASHING GLASS RACK DOLLY
-	14	1	ICE TEA MAKER (BY VENDOR)
	45 46	1	COFFEE MAKER (BY VENDOR)
	47		MOBILE REACH-IN REFRIGERATOR BANQUET TRANSPORT CART
-	18	1	MOBILE TABLE
	100		HAND SINK WISOAP AND TOWEL DISPENSER WALL CABINET
	101	-	SPARE NUMBER
	02		COUNTER WISINK COFFEE MAKER (BY VENDOR)
1			THE PERSON AND ADDRESS OF THE PERSON



Dr.

2019 PROPOSED PREMISES





Culinary Adventures with Laura Cole, LLC Outside Security Plan

Culinary Adventures with Laura Cole, LLC dba Muse with Laura Cole is located at the Anchorage Museum. The outside deck/patio portion of the restaurant is segregated from the rest of the premises and includes a 3foot-high steel railing around the entire perimeter of the patio with an opening/control point at the north end nearest to door for accessing the restaurant. There will be a manager on site at all times, and when the outdoor serving area is open (weather and staffing dependent), there will be waiting staff walking between the indoor seating area, and outdoor area to monitor alcohol consumption. The safety and security of patrons is also monitored though CCTV and 24/7 on site security personnel. When the indoor seating area is open, and the outdoor seating area is closed, doors to the outdoor seating area will be closed and used only for emergency egress. Waiting staff in the indoor seating area will monitor to ensure patrons do not attempt to use the outside area when it is closed. Door alarms will also be activated in the event a patron tries to exit though a secured door.





Alaska Alcoholic Beverage Control Board

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u>

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

Phone: 907.269.0350

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 – Tran	sferor li	nformation		
Enter information for the co	urrent licensee and licensed establishm	ent.	akan kali mendikin kalimatan pendengan kepada berangan		
Licensee:	Culinary Adventures with La	aura Cole	CLicense #:		5317
License Type:	Restaurant Eating Place		Statutory Referenc	e:	04.11.100
Doing Business As:	Muse with Laura Cole				
Premises Address:	625 C Street				
City:	Anchorage	State:	AK	ZIP:	99501
Local Governing Body:	MOA			217.	100001
Transfer Type: Regular transfer Transfer with secur Involuntary retrans					
	OFFICE U	SF ONLY			
Complete Date:	7-12-2021		action #:	NV -1-6	0.07
Board Meeting Date:	8-17.2021	Licens	CO VOCES	00669	7

BRE:

Issue Date:

21 - 22



Alcohol and Marijuana Control Office 550 W 7th Avenue, Sulte 1600 Anchorage, AK 99501 alcohol licensing@alaska.gov

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

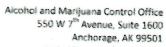
Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Licensee:	w applicant and/or location seeking to MUSE Restaurant, LLC	to be licensed			N. S. W.	
Doing Business As:	Muse					***
Premises Address:	625 C Street					
City:	Anchorage	State:	AK		ZIP:	99501
Community Council:	Downtown	AND SHAPE OF THE S			Lir,	100001
Mailing Address:	625 C Street			Mark and a subsequent of the colony of the		
City:	Anchorage	State:	AK		ZIP:	99501
Designated Licensee:	Julie Decker	The state of the same of the s				
Contact Phone:	907-929-9200	Business	Phone:	907-9	19 (2200
1000						
Contact Email:	jdecker@anchoragemuseur				×1- \	7200
Seasonal License?		six-month op				7000
Yes	No If "Yes", write your s	six-month op	ormation			7200
Yes Seasonal License? Premises to be licensed is: an existing facility	If "Yes", write your s	six-month op	Ormation d building	d:		
Premises to be licensed is: an existing facility The next two questions must What is the distance of the the outer boundaries of the	If "Yes", write your s Section 3 - Prem	a proposed	ourism) and pac	d:	applican	ts only:

[Form AB-01] (rev 10/10/2016)

Page 2 of 7





Alaska Alcoholic Beverage Control Board

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

Phone: 907.269.0350

Section 4 - Sole Proprietor Ownership Information

Form AB-01: Transfer License Application

in more space is needed, p	pleted by any <u>sole proprietor</u> who is a please attach a separate sheet with the must be completed for each licensee a	required inf	ormation	ip to Secti	on 5.
This individual is an:	applicant affiliate				
Name:					
Address:	The state of the s	No. of Particular Street, Stre			
City:		State:		ZIP:	
This individual is an:	applicant affiliate				
Name:		-1			
Address:					
City:		State:		ZIP:	
	Soction E Entity O				
imore space is needed, ple If the applicant is a corr the stock in the corpora If the applicant is a limit ownership interest of 1 If the applicant is a part with an interest of 10%	Section 5 — Entity On the ted by any entity, including a corporar g for a license. Sole proprietors should ease attach a separate sheet with the reporation, the following information mustion, and for each president, vice-presided liability organization, the following 0% or more, and for each manager. The ship, including a limited partnership or more, and for each general partnership.	skip to Section required information information in p, the following	liability company (LLC), pon 6. rmation. ted for each stockholder was managing officer. must be completed for each	tho owns 1	10% or more of
imore space is needed, ple If the applicant is a corr the stock in the corpora If the applicant is a limit ownership interest of 1 If the applicant is a part with an interest of 10% Entity Official:	eted by any entity, including a corpora g for a license. Sole proprietors should ease attach a separate sheet with the r coration, the following information mu- ition, and for each president, vice-presi ted liability organization, the following 0% or more, and for each manager. mership, including a limited partnership for more, and for each general partner	skip to Section required information information information information in p, the following:	liability company (LLC), pon 6. rmation. ted for each stockholder wary, and managing officer. must be completed for each	tho owns 1	10% or more of
imore space is needed, ple If the applicant is a corr the stock in the corpora If the applicant is a limit ownership interest of 1 If the applicant is a part with an interest of 10% Entity Official: Title(s):	eted by any entity, including a corpora g for a license. Sole proprietors should ease attach a separate sheet with the r coration, the following information mu- sition, and for each president, vice-presided ted liability organization, the following 0% or more, and for each manager. mership, including a limited partnership or more, and for each general partner Julie Decker	skip to Section required information information in p, the following	liability company (LLC), pon 6. rmation. ted for each stockholder was managing officer. must be completed for each	tho owns 1	10% or more of er with an for each partner
f more space is needed, ple If the applicant is a corr the stock in the corpora If the applicant is a limit ownership interest of 1 If the applicant is a part with an interest of 10% Entity Official:	eted by any entity, including a corpora g for a license. Sole proprietors should ease attach a separate sheet with the r coration, the following information mu- ition, and for each president, vice-presi ted liability organization, the following 0% or more, and for each manager. mership, including a limited partnership for more, and for each general partner	skip to Section required information information information information in p, the following:	liability company (LLC), pon 6. rmation. ted for each stockholder wary, and managing officer. must be completed for each	tho owns :	10% or more of er with an for each partner



Aktobel and Maryuana Control Office 550 W 7th Averue: Suite 1000 Anchorage: Ak 99501 alcohol scensing@alecke.gos 10531... NA 6-commerce elasha.gov."webJamco Pricke: 907-769-0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Title(s): Address City:	Muse Tru Member/Manag 625 Cstreet	Phone				
	625 CStoct		907 929 9	200 %0	wned: 16	20
City						
	Anchorage	State:	AK	ZIP	33501	1
Entity Official	,					
Title(s)		Phone		% Os	wned:	
Address.				· · · · · · · · · · · · · · · · · · ·		
City.		State		ZIP.		
Entity Official						
Title(s):		Phone		% Ov	vned:	
Address						
Address. City: is subsection must be con	mpleted by any applicant that is	State	LC. Corporations	ZIP:	ired to be in	n gr
City:	vision of Corporations (DOC) an	s a corporation or L ed have a registered		and LLCs are requ		100
City: is subsection must be cominding with the Alaska Diviska DOC Entity #:	10 150534 AK F	a corporation or Lid have a registered ormed Date.	2/21/2020	and LLCs are required individual resider. Home State:	AK.	ite
City: is subsection must be con inding with the Alaska Div iska	10150534 AKE	ormed Date.	agent who is an	and LLCs are required individual resider	it of the stat	ite i



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

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

ership 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?		
"Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in cense number(s) and license type(s):	Alaska, wh	ich
Section 7 – Authorization		
die das versiones de la comité de la comité de la formation de la formation de la comité de la comité de la co La comité de la comité de la comité de la comité de la formation de la comité de la comité de la comité de la c	Yes	N
de des la comentación de la como en entre de la falla de la falla de la falla de la falla de la como de la como	Yes	N [
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? "Yes", disclose the name of the individual and the reason for this authorization:	Yes	N [
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? "Yes", disclose the name of the individual and the reason for this authorization:	Yes	N [
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? "Yes", disclose the name of the individual and the reason for this authorization:	Yes	
Does any person other than a licensee named in this application have authority to discuss this license with	Yes	

[Form AB 01] (rev 10/10/2016)

Page 5 of 7



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 alcohol.licensing@alaska.sov

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

Alaska Alcoholic Beverage Control Board

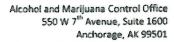
Form AB-01: Transfer License Application

Section 8 - Transferor Certifications

Additional copies of this page may b	e attached, as needed, for the controlling inte	rest of the current licensee to be represented.
that I, as the current licensee (either t		rest of the current licensee. I additionally certify the currently licensed entity) have examined this pplication to be true, correct, and complete.
Printed name of transferor	Subscribed and sworn to before me this	day of March 2021
NOTARY PUBLIC OF AL		COMA RANGS Signature of Notary Public ALASKA d for the State of
Signature of transferor		
Printed name of transferor	Subscribed and sworn to before me this	day of, 20
	Notary Public in an	Signature of Notary Public d for the State of My commission expires:

[Form A8-01] (rev 10/10/2016)

Page 6 of 7





Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 - Transferee Certifications

certify that all proposed licensees (a		
, , , , , , , , , , , , , , , , , , , ,	is defined in AS 04.11.260) and affiliates have been listed on this application.	Jug
I certify that all proposed licensees he	eve been listed with the Division of Corporations.	JMO:
	ing a false statement on this form or any other form provided by AMCO is grounds ion or revocation of any license issued.	MO
patron will complete an approved alco serving alcoholic beverages, will carry	employees who sell or serve alcoholic beverages or check the identification of a ohol server education course, if required by AS 04.21.025, and, while selling or or have available to show a current course card or a photocopy of the card ohol server education course, if required by 3 AAC 304.465.	dro
agree to provide all information requ	uired by the Alcoholic Beverage Control Board in support of this application.	JMD
Signature of transferee		
Julie Decker		
	Subscribed and sworn to before me this 8 day of July	
Julie Decker	Cytha 1 Bu	riell
Julie Decker Printed name	Signature of MALASKA	riell
Julie Decker Printed name C'NTHAL BURNAL Notary PARIC State of Alaska	Cytha 1 Bu Signature of I	riell



Alaska Alcoholic Beverage Control Board

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

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

Phone: 907.269.0350

Page 1 of 5

Form AB-03: Restaurant Designation Permit Application

What is this form?

Licensee:

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

Enter information for licensed establishment.

MUSE Restaurant, LLC

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

License Type:	Restaurant Eating Place	e	License	Number:	5317	
Doing Business As:	Muse					
Premises Address:	625 C Street					
City:	Anchorage		State:	AK	ZIP:	99501
Contact Name:	Julie Decker		Contac	t Phone:	907-9	29-9200
AS 04.16.010(c) or AS 0	he request of designation as a 4.16.049, and for the request standard closing hours: AS 04	of the following d				
	ersons 16 – 20 years of age: A ersons under the age of 16 years		by a person o	over the ag	e of 21: A	AS 04.16.049(a)(3)
4. Employmen	t for persons 16 or 17 years o er AS 04.16.049(d), this permit	f age: AS 04.16.04 is not required to	9(c)			
Transaction #:		OFFICE USE ONLY Initials:			-	-



Form AB-031 (rev 4/16/2019

Alaska Alcoholic Beverage Control Board

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

Phone: 907.269.0350

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 be permitted in the dining area, deck area, klosk, atrium a restroom areas which will be the areas where alcohol is served and consumed. Minor customers are to be accompanied by an adult, and staff in these areas are TAP trained and employed by Muse Restaurant, LLC.

Additionally, children are permitted on all 4 levels of the museum for viewing gallaries when accompanied by an adult, we have museum CCTV and security personnel monitoring all areas of the museum 24/7.

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 other than on the deck area which is a fenced off area. Additionally service and consumption of alcohol is permitted in the klosk, and atrium/ 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. Staff in these areas are all TAP trained and employed by Muse Restaurant, LLC. Additionally, we have CCTV and security personnel at the museum employed by a seperate entity monitoring all areas of the museum 24/7.

tevel H

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

Yes	1	NO
-	per	-
1.1		- 1
	L	_

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:

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

Initials

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

Page 2 of 5



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

alcohol.licensing@alaska.gov

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

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/om:
Summer 9 to 6 daily. Fridays 9 -9:	
Winter: 10 – 6, closed Mondays, open Unit 9pm Fridays)	
The state of state of the state	
Section 6 - Entertainment & Service	
Review AS 04.11.100(g)(2)	Voc. No.
Are any forms of entertainment offered or available within the licensed business or	Yes No
within the proposed licensed premises?	
within the proposed method premises.	
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:	
	A
table service	
If "other", describe the manner of food and beverage service offered or anticipated:	The Children is
if "otner", describe the manner of rood and beverage service offered or anticipated:	
·	
[Form AB-03] (rev 4/16/2019	Page 3 of 5



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-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.	00
	cted menu, listing the meals to be offered to patrons. I and prepared by the licensee at the licensed premises.	JD
I certify that the license for which I am requesting golf course, or restaurant or eating place license.	designation is either a beverage dispensary, club, recreational site,	SO
I have included with this application a copy of the (AB-03 applications that accompany a new not be required to submit an additional co		UD
I declare under penalty of perjury that this form, in correct, and complete.	ncluding all attachments and accompanying schedules and statements,	is true,
Signature of ligensee	Signature of Notary Public	rrell
Julie Decker	Notary Public in and for the State of	SKA
Printed name of licensee		(
	My commission expires:	1 2022
CYNTHIA L. BURRILL Subscribed Notary Public State of Alaska My Commission Expires Jan 1, 2022	and sworn to before me this <u>2</u> day of <u>January</u>	, 20 <u>21</u> .
Local Government Review (to be completed by a	n appropriate local government official): Approved	Denied
Signature of local government official	Date	
Printed name of local government official	Title	
[Form AB-03] (rev 4/16/2019		Page 4 of 5



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

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

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

Phone: 907.269.0350

Page 5 of 5

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:			···
4			
AMCO Director Review:		Approved	Denied
Signature of AMCO Director	Printed name of AMCO Director	E	Description
Date			
Limitations:			

MUSE BRUNCH

BRUNCH

Housemade Granola, Greek Yogurt, Fresh Berries, Cinnamon Honey | 10

BUTTERMILK PANCAKES, BLUEBERRIES. VERMONT MAPLE SYRUP | 12

EGGS BENEDICT, FRENCH BREAD, POACHED EGGS, HOUSEMADE HOLLANDAISE SAUCE, CRISPED PROSCIUTTO, FRESH FRUIT | 16 ADD KING CRAB | 10

EGG WHITE OMELET, TOMATOES, ARUGULA, FETA CHEESE, FRESH FRUIT | 14

Huevos Rancheros, black beans, housemade tortillas, poached eggs, adobo bour cream, housemade salba, freeh fruit | 15

MAPLE CINNAMON TOAST, SEARED CITRUS FRUIT, CRÈME FRÂICHE | 10

BEEF HASH, POTATOES, POACHED EGG, CRISPED PROSCIUTTO | 16

Everything Baguette, house smoked wild salmon, cream cheese, roasted red onion, capers, fresh tomato, fresh fruit | 16

Chickpeas and Garden Micro Greens, kalamata tapenade, poached eggs, feta, fresh fruit \parallel 15

KING CRAB CAKES, PAPRIKA AIOLI, GREENS, LEMON OIL | 16

PORK BELLY LETTUCE TOMATO (PLT), GREEN PEPPERCORN AIOLI, PICKLED CUCUMBER, HOUSE BREAD | 16

ADD ON

House made reindeer sausage | 4 Dry cured bacon | 4 Toast and fresh Jam | 4 Two eggs any style | 4

DRINKS

FRESH ORANGE JUICE 1 3

Wine Cooler, passion fruit, ginger, lime, fresh strawberries | 8

MIMOSA, ORANGE OR PASSION FRUIT | 8

PASSION JULIUS | 5

FRUIT SMOOTHIE, ORANGE JUICE, COCONUT MILK, MIXED BERRIES | 5

COFFEE | 3 TEA | 3 EBPRESSO | 3 CAPPUCCINO | 4 LATTE | 4

WE STRIVE TO SERVE AND DEFINE ALASKAN CUILINE. EACH OF OUR DISHIE ARE ALASKAN INSPIRED AND COMPOSED OF INGREDIENTS FROM OUR FRIENDS FARML RANCHEL SISSERIES AND CARDENS. WE ARE FROUD MEMBERS OF CHIPS COLLABORATIVE — A NONFROFIT DEDICATED TO CONNECTING CHIPS WITH SUSTAINABLE MARVESTERS. SNACKS

Artichore, emoked paprika and green peppercorn aidli, lemon | 10

York Baby Back Rib. Beet Glaze. Apples | 12

Kalamata Olive Flatbread, freen Moezarella, Feta, Red Sauce. Arugura | 12

Chicken Flatbread. Fresh Mozzarella. Chevre, Arugula, Apple, Proscrutto, Lemon Gil | 12

Smoked paprika Charred Local Carrote, Chick Pea, Yogurt | 12

Bhashed Baby Potatoes, fresh Cress, Parmesam, Halsamic | 8

Crispy Parsnip Chips, House Made "Ranch" | 8

Stechuar Brussel Sprouts, Garnet Yams, Thai Chili, Mint, Basil, Peanut Rice Crunch | 12

STARTERS

add free-range Chicken Breast | 16 Garden Lettuce Caesar | 8

endive, Apple, Lemon, Thyme, Walmut Oil, Marcona Almonde, Pedorino, Crisfy Duck Shin | 10

Seared Radicchio, Balsamic reduction, Tangerine Oil, Peccrino | 10

Va Rotisserie Duck, Lumipa, Passion Fruit 5 spice, Greens, Scalligns, Daikon, Besame | 16

Grilled Antichore eoup. Leers. Potatoes, vegetable broth, Meyer Lemon Oil, Parmesan i 8

Ginger Beef Soup. Bean Thread Noodles. Box Choy, Carrote, Scallions, Ginger Prawn Broth | 14

FISH

Poblano ash scallops, Haricots, Masa Potatoes, Adobo Crême Fraiche, Balsa Roja | 20

Freen Cod, Ferrel, Olives, Pistachio, Orange, Tomato, Arubula, Emasned Potatoes, Prosciutto (20

emoned black Cod. Haricots. Smashed Potators. Apple, Horseradien, & Epice Glaze, West Chips I 25

Octopus, Squid ink Noorles, spicy tangerine oil freeh crees, tomatoes, emdry ham broth | 24

Bouillabaisse | Halibut, Cod, Scallops, Clams, Saffron Tomato Szafood Eroth.

SAFFRON ALOLI CRISPS | 24

Freeh Bucatini. Alabkan Clamb. Tomatore, Garlic, Bacon, Lemon, Parsley | 20

GRAINS GREENS Beet Pasta. Goat crème fraiche, Tangerine Oil., Greens, Hazelmuts, Beet Chips (20

Rainbow Chard and Spinach Phyllo, Peta. Nerbed Lemon Guinoa | 20

Charried Squash, Marcona Almonds, Pistou, Tomatoes, Tangerine Oil 1 20

Zucchini Napoleon, I summer squash, breaded tucchini, tomatore, onione, crimini muchroome, fresh mozzarella, Parmeban, Red Baucr, Spinachi 20

MEAT

Heritage Franch Beef Tenderloin, Potatoes, Haricots, Toasted Mustard Demi, Crispy Onion | 26

Reindeer Ragu. Lemon. Tomato. Garlig. Mint. Potato. House goat ricotta 1 24

Lamb Lollypops, arugula pesto, potato. Haricote, cristy parenips i 26

Chicken Wellington, green omons, portabella mushrooms, phylo, chicken jus | 24

Pork Belly, Asian Pear, Radiochio, Parsnip Puree, Almonds, Walmut Oil, Cider Gastric | 22

W TIRM TO BEVIAND SETIM ALAELA CUSINE, LACH OF OUR SIBIL LAC ALAELAH MISTRED AND COMPORTO OF INCRESSIBLES FRAMOUR FRIENDS:
FRAMI, RAMCHEL FEBRUHI AND CARPINE WI ARE PROUD MIMIERS OF CHIST CREAMBRATHY — A MOMERANT SEGUCIATO TO COMMETTING CHIST WITH
MICRANISM HAR WITH AND CARPINE WITH AND CONTROL OF THE CON

THIS PERMIT MUST BE CONSPICUO Municipality of Anchorage IC PLACE IN THE ESTABLISHMENT DEPARTMENT OF HEALTH & HUMAN SERVICES

PERMIT

FACILITY NAME OWNER'S NAME: MUSE RESTAURANT LLC

MUSE RESTAURANT LLC

LOCATION:

625 C ST

PERMIT NO.

FA0016904

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 1/1/2021 TO 12/31/2021

MUSE RESTAURANT LLC 625 C ST ANCHORAGE, AK 99501

70-031 Ver 9 02

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