



MEMORANDUM

TO: Alcoholic Beverage Control Board

DATE: December 29, 2021

FROM: Kristina Serezhenkov, OLE

RE: #6017 Bites on Broadway

**Requested
Action:** New license application

**Statutory
and
Regulatory
Authority:** AS 04.06.090(b): "The board shall review all applications for licenses made under this title and may order the director to issue, renew, revoke, transfer, or suspend licenses and permits authorized under this title."

AS 04.11.400(d): "The board may approve

(1) the issuance of a new beverage dispensary or restaurant or eating place license without regard to (a) of this section if it appears that the issuance will encourage the tourist trade by encouraging the construction or improvement of

(A) a hotel, motel, resort, or similar business relating to the tourist trade with a dining facility or having kitchen facilities in a majority of its rental rooms and at least a minimum number of rental rooms required according to the population of the incorporated city, unified municipality, or population area established under (a) of this section in which the facility will be located, as follows:

- (i) 10 rental rooms if the population is less than 1,501;
- (ii) 20 rental rooms if the population is 1,501 — 2,500;
- (iii) 25 rental rooms if the population is 2,501 — 5,000;
- (iv) 30 rental rooms if the population is 5,001 — 15,000;
- (v) 35 rental rooms if the population is 15,001 — 25,000;
- (vi) 40 rental rooms if the population is 25,001 — 50,000; and
- (vii) 50 rental rooms if the population is greater than 50,000; or

(B) an airport terminal; and"

(2) the renewal or transfer of ownership of a beverage dispensary or restaurant or eating place license issued under (1) of this subsection if the

(A) holder of the license operates a hotel, motel, resort, or similar business relating to the tourist trade that

- (i) has a dining facility on the licensed premises or kitchen facilities in a majority of its rental rooms; and

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

Staff Rec.: Approve the new license application with delegation.

Background: This is an application to issue a Beverage Dispensary – Tourism Seasonal license to Bites on Broadway in the Municipality of Skagway.

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

The applicant offers 10 rental rooms without kitchen facilities. There is a full community kitchen available for guests. This establishment offers a dining facility on site.

Attachment: Tourism Statement
AB-00
AB-02
AB-03



Alaska Alcoholic Beverage Control Board

Tourism Statement

A new, transfer, or renewal application for a beverage dispensary – tourism or restaurant / eating place – tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

This document must be submitted to AMCO's main office before any tourism license application will be reviewed.

Section 1 – Establishment Information

Enter information for the business seeking to have its license renewed. If any populated information is incorrect, please contact AMCO.

Doing Business As:	Bites on Broadway	License #:	
License Type:	Beverage Dispensary / tourism - Seasonal		

Section 2 – Tourism Statement

2.1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.

We are located at the end of the main tourist street in Seward - the Skagway Brewing Company moved in 2018 and with a new liquor license it will encourage tourists to visit more and give them a place to sit, eat, enjoy music, and lodge upstairs.

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.11.400(d)(1):

See attached photos & note for explanation

2.3 Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located?

YES

☒

NO

☐

2.4 If "no" who operates the tourism facility?



Alaska Alcoholic Beverage Control Board Tourism Statement

2.5 Do you offer room rentals to the traveling public?

YES

☒

NO

☐

If "yes" answer the following questions:

How many rooms are available?

How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)?

Do you stock or plan to stock alcoholic beverages in guest rooms?

YES

☐

NO

☒

If "no" is your facility located within an airport terminal?

YES

☐

NO

☒

2.6 If your establishment includes a dining facility, please describe that facility. If it does not please write "none".

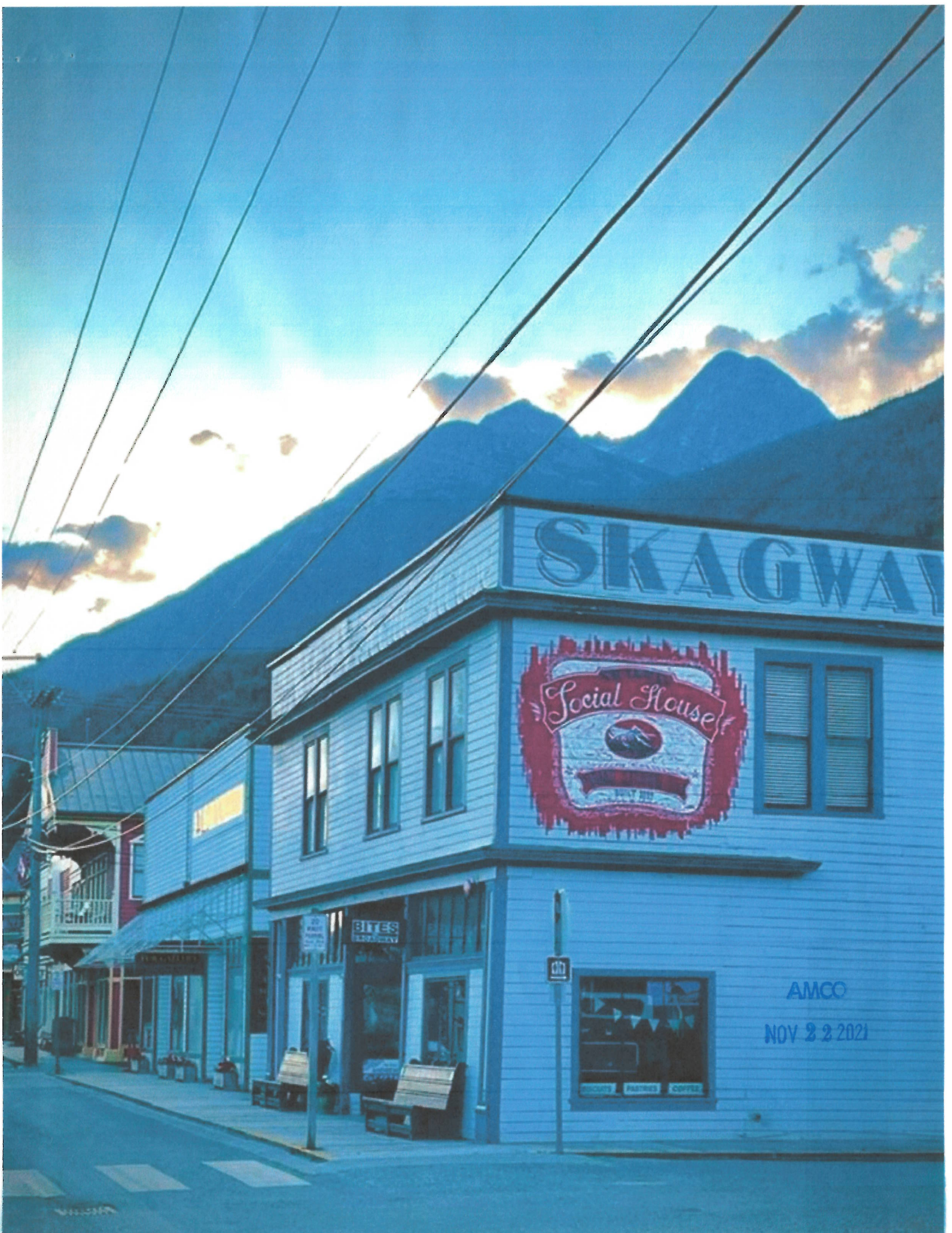
2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists), please describe them. If they are not offered, please write "none".

AMCO

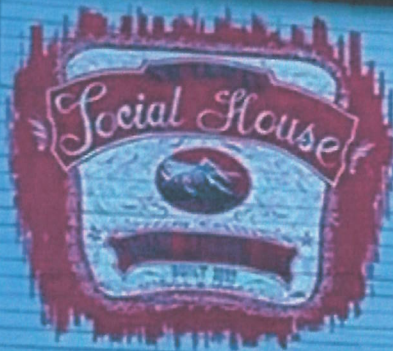
NOV 22 2021

Untitled

WE BOUGHT THIS BUILDING 7 YEARS AGO AND ALWAYS HAD A VISION OF IT BEING THE SKAGWAY SOCIAL HOUSE WHERE LOCALS AND TOURISTS COULD COME AND FEEL WELCOME AND ENJOY COFFEE, GOOD FOOD, LIVE MUSIC , AND RELAX AND HAVE A DRINK. WE HAVE PAINTED THE BUILDING, REMODELED THE INSIDE AND THE 10 GUEST ROOMS. WE CHANGED THE NAME OF THE BUILDING TO THE SKAGWAY SOCIAL HOUSE AND NOW IT HAS THE CHANCE TO BECOME EXACTLY THAT!! I HAVE ATTACHED A PHOTO OF THE BUILDING WHEN WE BOUGHT IT AND IT WAS YELLOW AND SOME UDATED PHOTOS OF THE BUILDING NOW....WE FEEL THIS WILL BE A GREAT DRAW FOR OUR TOURISTS TO COME AND ENJOY. IT HAS TRULY BEEN A LABOR OF LOVE....THANKS NILS AND SKIPPER



SKAGWAY



BITES

AMCO

NOV 22 2021



AMCO
NOV 22 2021



AMCO

NOV 22 2021



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:	Bites on Broadway tourism				
License Type:	Seasonal Beverage dispensary	Statutory Reference:	AS 04.11.400(d)		
Doing Business As:	Bites on Broadway				
Premises Address:	648 Broadway				
City:	Slagway	State:	Alaska	ZIP:	99840
Local Governing Body:	Municipality of Slagway				
Community Council:					

Mailing Address:	Po Box 1345				
City:	Slagway	State:	Alaska	ZIP:	99840

Designated Licensee:	Paul Nils Davis				
Contact Phone:	907 203 0551	Business Phone:	907 983 2166		
Contact Email:	bites on broadway @ hot mail . com				

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

OFFICE USE ONLY					
Complete Date:	12/29/21	License Years:		License #:	6017
Board Meeting Date:	1-18-2022	Transaction #:	100316036		
Issue Date:		BRE:	KRS		



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.

1 mile / 5280 feet

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.

1/2 mile / 2640 feet

Section 3 – Sole Proprietor Ownership Information

This 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.

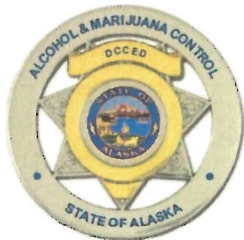
The following information must be completed for each licensee and each affiliate (spouse).

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:	Paul Nils Davis				
Title(s):	Partner	Phone:	907 209 0557	% Owned:	50
Address:	PO Box 1345				
City:	SKAGWAY	State:	Alaska	ZIP:	99840

Entity Official:	Earl H. Stovall Jr.				
Title(s):	Partner	Phone:	601 209 0736	% Owned:	50
Address:	PO Box 1345				
City:	SKAGWAY	State:	Alaska	ZIP:	99840

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.

* N/A FOR GENERAL PARTNERSHIP

DOC Entity #:		AK Formed Date:		Home State:	
Registered Agent:			Agent's Phone:		
Agent's Mailing Address:					
City:		State:		ZIP:	

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):

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:



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.

pn

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

pn

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.

pn

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.

pn

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

pn

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.

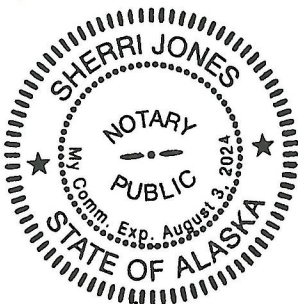
Paul Nils Davis
Signature of licensee

Paul Nils Davis
Printed name of licensee

Sherrri Jones
Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: Aug. 3, 2024



Subscribed and sworn to before me this 29 day of September, 2021.



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-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.

☒ ☐

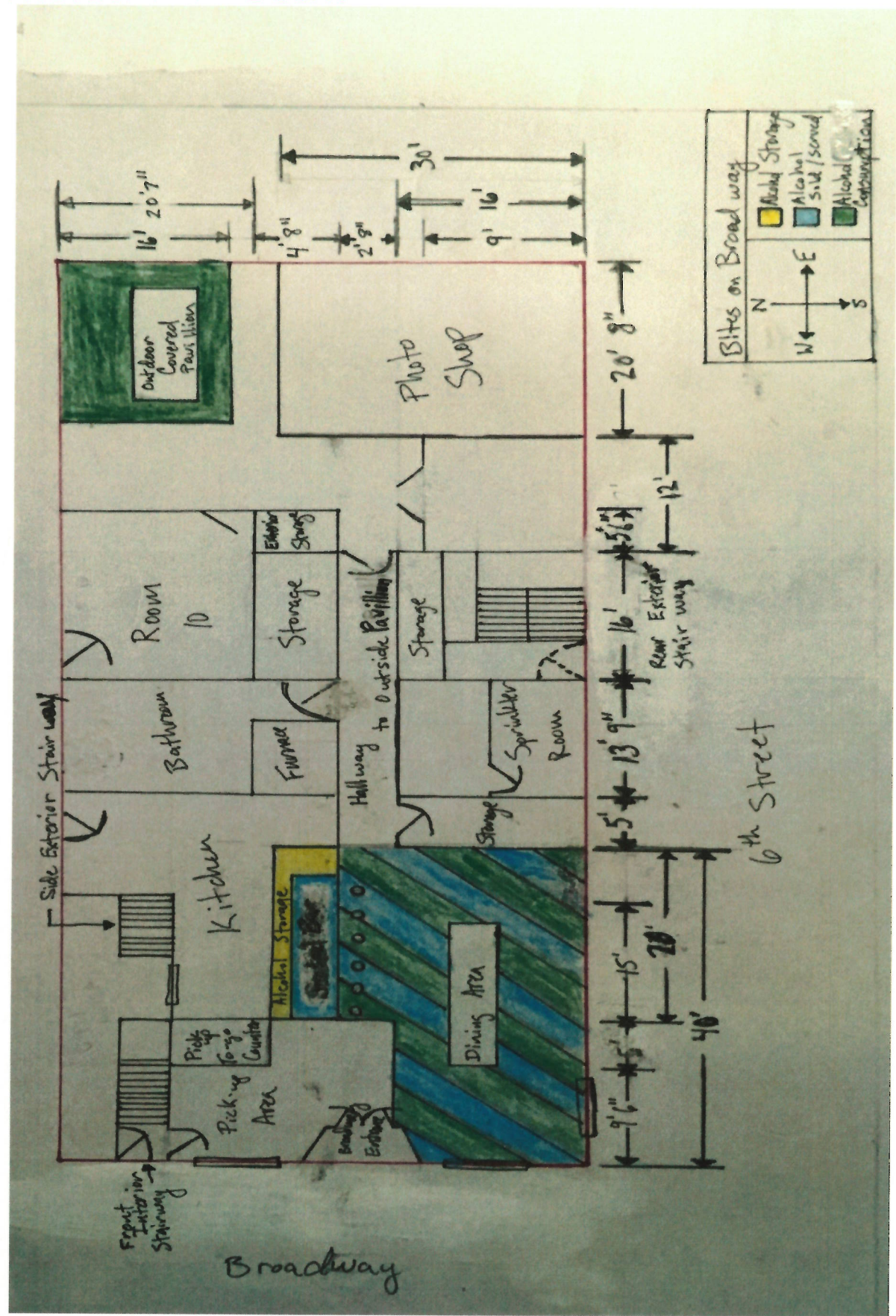
Section 1 - Establishment Information

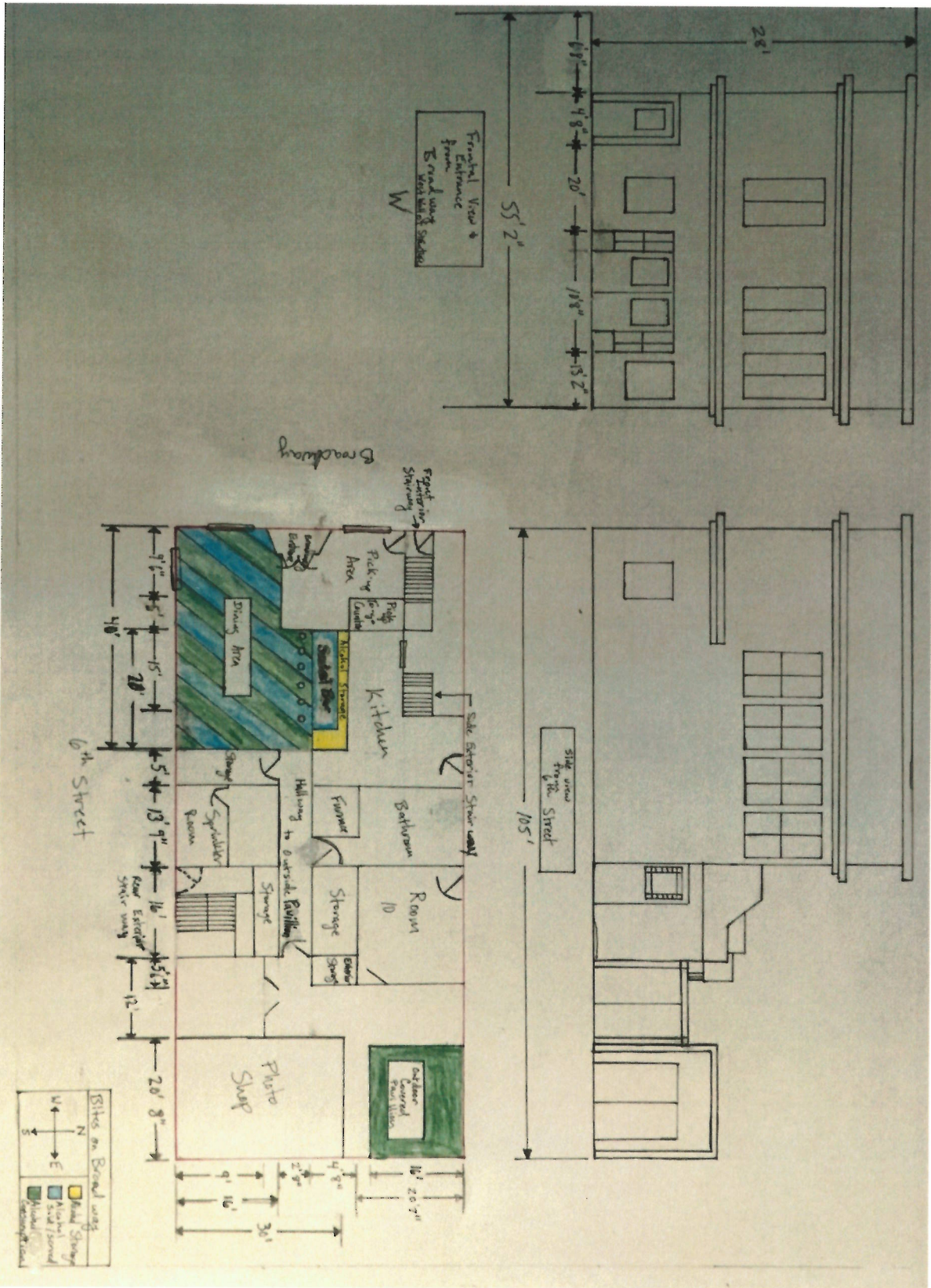
Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Bites on Broadway	License Number:	
License Type:	Beverage Dispensary - tourism - Seasonal		
Doing Business As:	Bites on Broadway		
Premises Address:	648 Broadway		
City:	Slagway	State:	AK
		ZIP:	99840

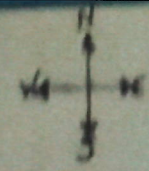
NOV 22 2021

AMCO Received 12/21/2021

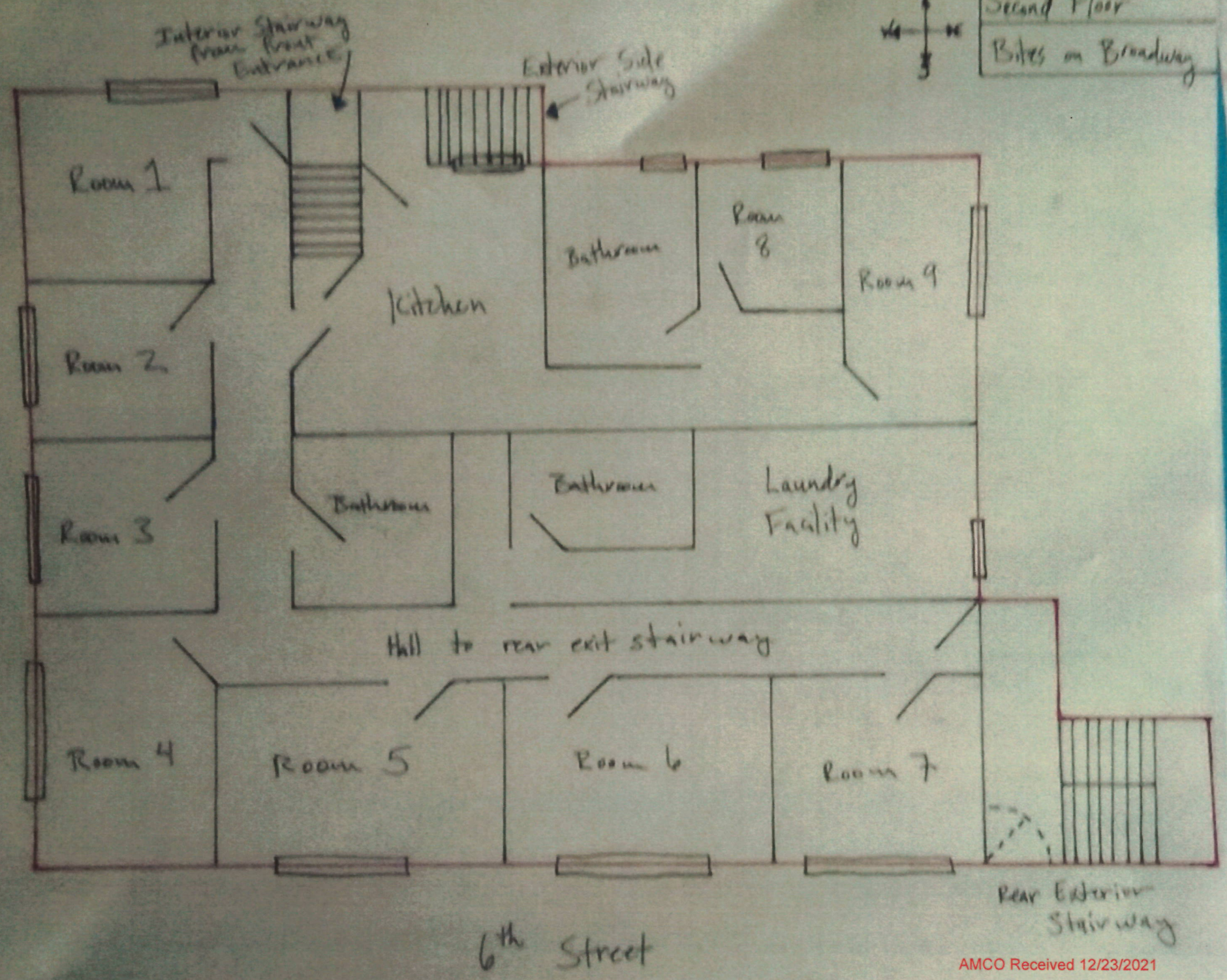


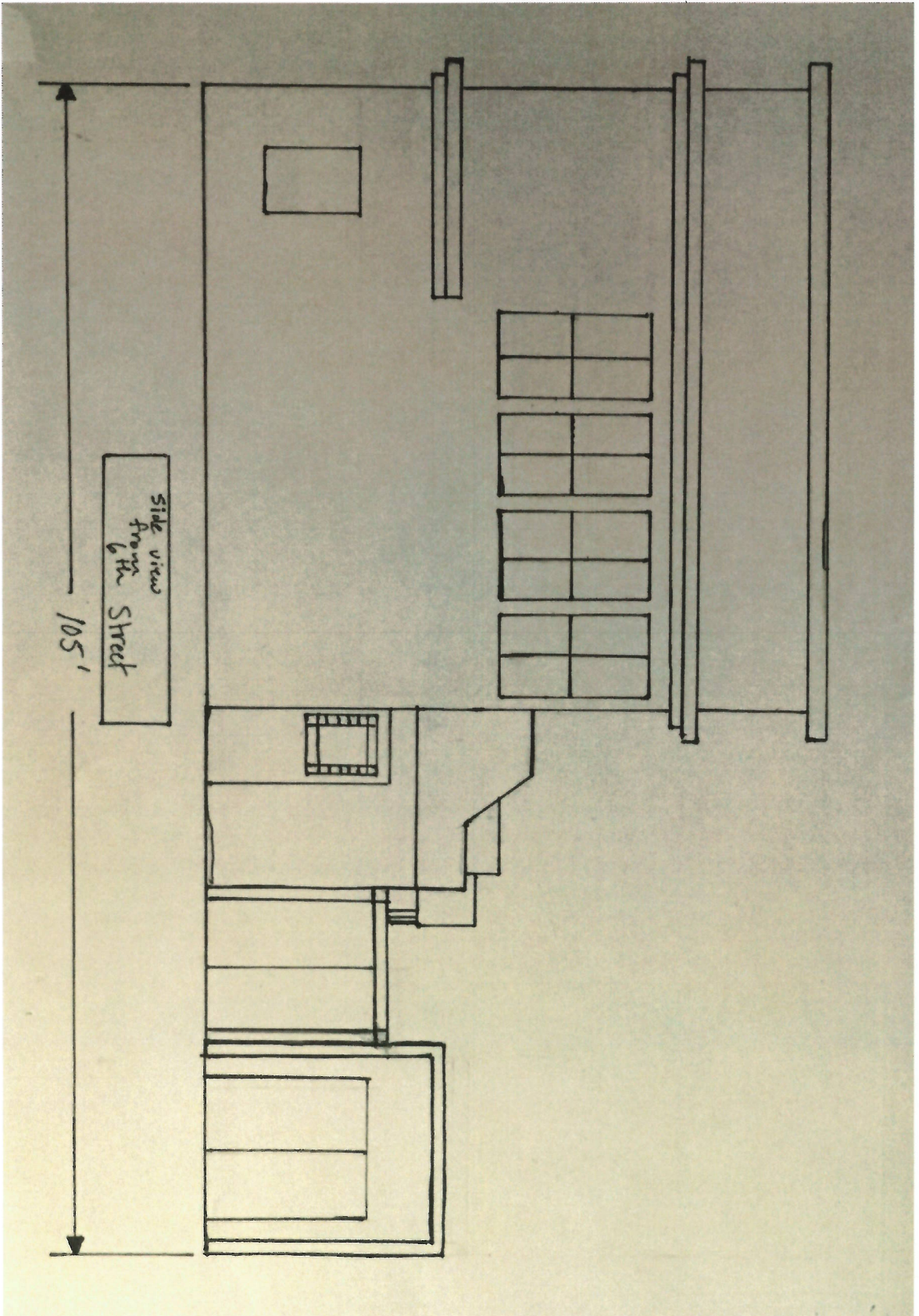


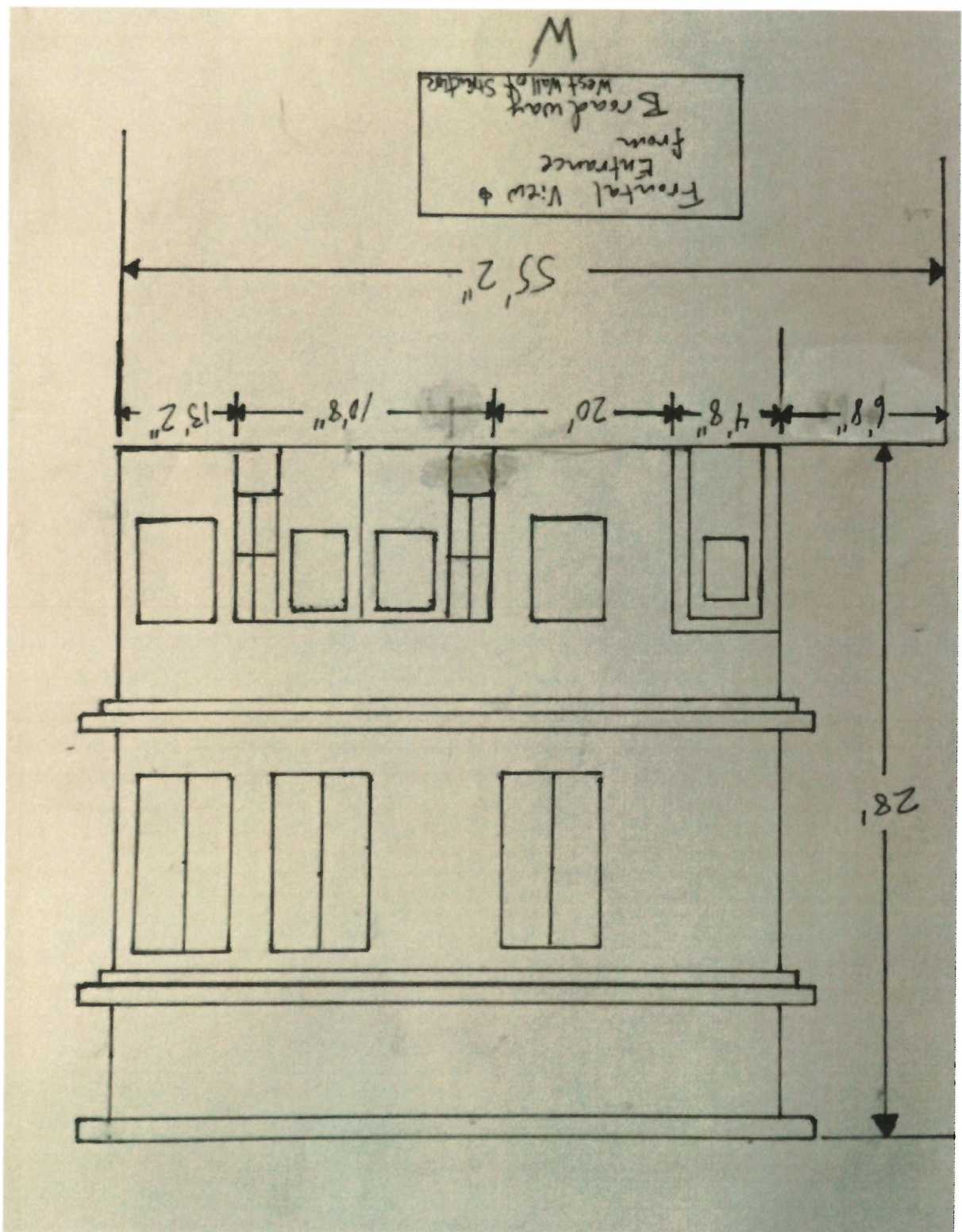
Second Floor
Bites on Broadway



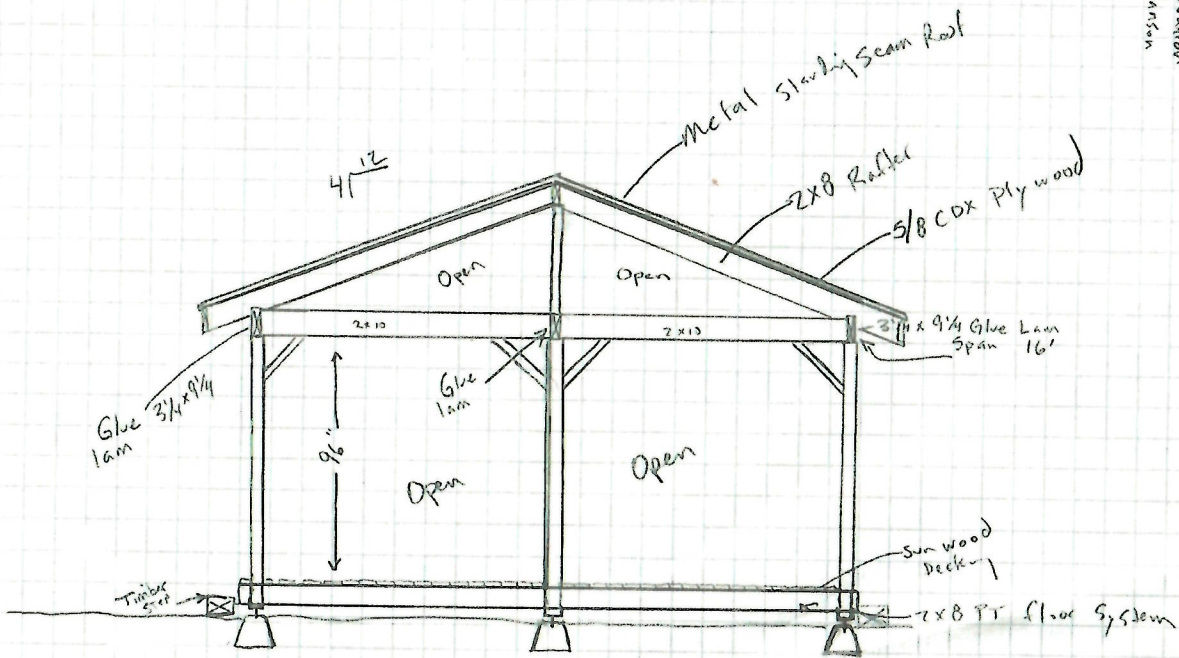
Broadway







Bites on Broadway
 North & South Elevation
 Drawn by Orion Hanson
 10/22/20



AMCO

NOV 22 2021

600A/600 Broadway Street

Parcel Number TOWN023072 GIS Link ID
Property Type C - Commercial City* Skagway
Customer ID STOV-E



Legal Lot 8A, Plat 2011-1

Design

Plat Lot 8A Block 23

Quality

Location

Year Blt 1900~

Waterfront

Eff Age

View

Condition

Lot Size 2500

Rooms

Zoning BH

GLA

Owner Davis, Paul Nils & Stovall JR, Earl

Sales Date 9/9/2013

Basement

Street P.O. Box 1345

Sales Price \$850,000

Fin Bsmt

City/State Skagway, AK 99840

DOT

Functional

Current Year	2021	2020	2019	2018	2017
Land	\$339,700	\$339,700	\$339,700	\$339,700	\$323,500
Buildings	\$453,900	\$453,900	\$453,900	\$453,900	\$432,300
Total	\$793,600	\$793,600	\$793,600	\$793,600	\$755,800

Heating

Energy Efficient

Garage

Previous Owner Mitchell, Glenn

Garage Size

Prior Sales Date

Prior Sales Price

Tracking

EP

Exempt Type

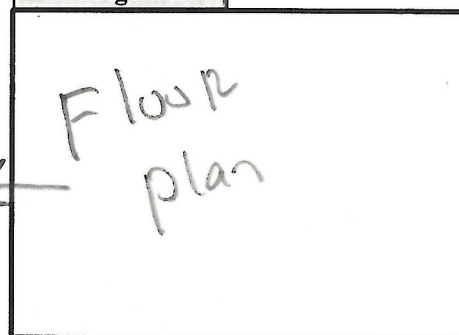
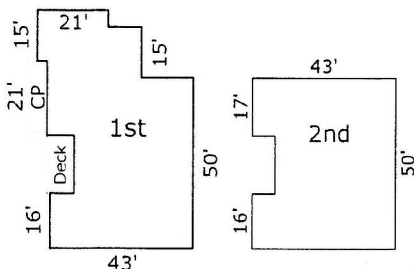
Exempt Amount

CP

Enlarge Sketch

Enlarge Plat

Dk



Show In Acrobat

Fireplace

Misc

Roof

Siding

Foundation

Scan Folder

Recorded Deed

Assessment History

Appeal Information

APPEAL#

Cost Approach

Sales Letter

Notes

Remodel 1970s & 80's

AMCO

NOV 22 2021

Photo's

Tax Info

Bites on Broadway
Outdoor/Indoor Serving Security Plan

- (1) All minors must be accompanied by an adult (21 years of age) while in the restricted area when any alcohol is being served, sold, or consumed.
- (2) All new patrons are carded upon ordering alcohol
- (3) All staff is trained in the identification of fake id's
- (4) Our outside seating area is enclosed by a wooden fence and has to be entered for the front entry of the building and walk thru the building to access the outside area. The wooden fence ranges from 4 1/2 ft to 8ft and encloses the entire area. This area will be monitored at all time by one of our professionally trained alcohol servers and will have security cameras and ABC mandated posters that are required by law posted at the entrance of the outside seating area.
- (5) Underage persons will be monitored closely by our professionally trained alcohol servers.
- (6) Proper egress from the outdoor service area will always remain unobstructed.
- (7) ABC mandated posters as required by law will be posted inside Bites on Broadway and at the entrance of the outdoor seating area.
- (8) All entrances and exits will provide clear notice that NO ALCOHOL BEYOND THE OUTDOOR SEATING AREA.
- (9) Keeping outdoor seating area viable without any increased risk to minors exposed to alcohol WILL continue to part of the training for our staff.
- (10) All safety related operations for our current liquor service will additionally be enforced to in the new service area.
- (11) Proper signage at points of entry indicating no minors without parent or legal guardian will be posted.
- (12) All servers will closely monitor that only guests that have been carded will have alcoholic beverages.
- (13) Our top priority continues in providing safety for all guests regarding the service of alcoholic beverages.
- (14) Servers will be present in the outdoor seating area to monitor consumption.

AMCO Received 12/23/2021

Untitled

I HAVE ATTACHED A DRAWING OF THE PREMISES AND ATTACHED PHOTOS AS WELL....WE WILL HAVE A TAKE OUT COUNTER SERVICE AREA THE WE WILL NOT SERVE ALCHOL FROM. AND THEN WE WILL HAVE A SEATED DINING AREA WITH A WALK UP BAR WITH STOOLS...WE HAVE A HALLWAY THAT GOES OUTSIDE TO A NEW COVERED SEATING AREA THAT WE WOULD ALSO LIKE TO BE ABLE TO SERVE ALCHOL THERE, WE WILL HAVE WAIT STAFF THAT WILL MONITER THIS AREA. AND WE ALSO HAVE A SMALL COURTYARD ON THE SIDE OF THE BUILDING THAT HAS 3 TABLES THAT WE WOULD LIKE TO BE ABLE TO SERVE DRINKS AT ALSO AGAIN IT WILL BE MOINTERED BY WAIT STAFF....THANK YOU ! NILS AND SKIPPER

Untitled

WE HAVE ALWAYS IN THE PAST BEEN A LIMITED SERVICE RESTAURANT WITH ONLY COUNTER SERVICE. WE SHARED OUR SPACE WITH A GIFT SHOP, THE GIFT SHOP WILL NO LONGER BE IN OUR BUILDING AND THAT IS THE SPACE THE WE WILL BE TAKING OVER AND ADDING SEATING AND WAIT STAFF. WE ARE SUPER EXCITED FOR THIS NEW ADVENTURE AND FINALLY MAKING OUR PLACE BECOME THE SKAGWAY SOCIAL HOUSE WITH BITES ON BROADWAY BEING THE RESTAURANT INSIDE AND 10 GUEST ROOMS. THANKS NILS AND SKIPPER

Lat/Long:
-135.313856
59.455960





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:	Bites on Broadway				
License Type:	Seasonal Beverage Dispensary - Tourism	License Number:			
Doing Business As:	Bites on Broadway				
Premises Address:	648 Broadway				
City:	Skagway	State:	AK	ZIP:	99840
Contact Name:	Nils Davis	Contact Phone:	907 209 0557		

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:

AMCC

NOV 22 2021

AMCO Received 12/21/2021



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 will only be allowed to be in the dining area or place to go food orders at our take out counter

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.

- train staff on the responsibilities of serving alcohol
- Establish a responsible alcohol service system
- Check everyones ID no matter how old they look
- No proof / No service
- train employees to spot fake ID's
- make sure employees can see all sections of the restaurant

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.

pm

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



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 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:

6am - 8 pm
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:

live music featuring our "singing barista"
he will perform music at
10:00 AM 2:00 pm 6:00 pm
12:00 noon 4:00 pm

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:

"Room Service"



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 7 – Certifications and Approvals

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

Initials

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

pn2

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.

pn2

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.

pn2

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.)

pn2

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

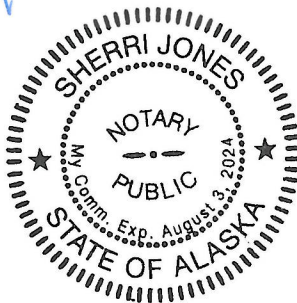
Paul Nils Davis
Signature of licensee

Sherri Jones
Signature of Notary Public

Paul Nils Davis
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: Aug. 3, 2024



Subscribed and sworn to before me this 29 day of September, 2021.

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



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

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:



Alaska Food Code 2021 Establishment Permit

Division of Environmental Health
Food Safety & Sanitation Program

Permit Number: 1776
Issued to: Earl H Stovall Jr & Paul N Davis
For: Bites On Broadway
For Operation of: FF-6 Deli/Takeout/Drive-in Food Service
Located at: 648 Broadway ST Skagway, AK 99840

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, 2021

Program Manager:

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

1-877-SAFE-FOOD

(in Anchorage call 334-2560)



AMCO

NOV 22 2021

Untitled

**THIS IS A COPY OF OUR BREAKFAST AND LUNCH MENU
AND A PHOTO OF OUR BUILD YOUR OWN BREAKFAST
SANDWICH**

A COFFEE MENU

**AND FOR ALCHOL DRINKS WE WILL FREATURE ALASKA
BEER IN BOTTLES
AND BASIC MIXED DRINKS , VODKA,GIN,WHISKEY,**

This order is for:

Your Name: _____

Dine in or To go

Build Your Own Lunch Sandwich

\$12.95

Served with Chips or Potato Salad

1. Choose A Bread

circle one:

Croissant Plain Bagel Cheddar Bagel Jalapeño Bagel
Pizza Bagel Asiago Bagel Asiago Everything Bagel
Everything Bagel Gluten Free Bun +\$1 Hoagie Roll

2. Choose A Meat

circle one:

BBQ Chicken Chicken Salad Roasted Turkey
Salmon Salad Sandwich Honey Ham Turkey Pot Roast Veggie Sandwich

3. Condiments

circle:

Mayonnaise Mustard Ketchup

4. Add Your Favorite Toppings

each additional topping .50¢

Spinach Onions Jalapeño Peppers Hot Sauce Black Olives
Mushrooms Hummus Tomato Cream Cheese Cheese +\$1 Basil +\$1

Homemade Soups

cup bowl

Alaska Salmon Chowder	\$6.99	\$11.99
Chicken Vegetable Soup	\$4.99	\$7.99
Homemade Chili	\$6.99	\$9.99

Broadway Dogs

Add chili, cheese , or onion \$1 each

Hot Dog	\$4.99
Reindeer Sausage	\$9.99
Frito Chili Pie	\$6.99

AMCO

NOV 22 2021

Build Your Own Breakfast Sandwich \$6.95
Served with Egg, Cheese, and Mayonnaise

1. Choose A Bread

circle one:

Croissant Plain Bagel Jalapeño Bage
Cheddar Bagel Everything Bagel Pizza Bage
Asiago Bagel Asiago Everything Bagel Gluten Free Bun +\$

2. Choose A Meat

circle one:

Sausage Bacon Ham Turkey
Extra Meat +\$1.50 Extra Egg +\$1.00

3. Add Your Favorite Toppings

each additional topping .50¢

Spinach Onions Jalapeño Peppers
Salmon Spread Hot Sauce Mushrooms
Black Olives Tomato Cream Cheese
Hummus Basil +\$1

4. Choose:

Dine In

Take Out

5. This sandwich was made special for:

Your Name: _____

AMCO

NOV 22 2021



AMCO

NOV 22 2021