

Department of Commerce, Community, and Economic Development

Alcohol and Marijuana Control Office

550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: March 23, 2022

FROM: Kristina Serezhenkov, OLE RE: #5986 Tatliani Restaurant

Requested action: Consideration of new application for a Restaurant/Eating Place license.

Statutory and Regulatory Authority:

Renewal; transfer of ownership; evaluation of the public interest under AS 04.11.360(1) and 3 AAC 304.180.

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 04.11.040(a): "A license issued under this title may not be transferred to another person except with the written consent of the board."

3 AAC 304.180. Denial, suspension, revocation, or refusal to renew or transfer, in the public interest:

- (a) The board may consider the following factors in determining whether it is in the public interest to deny, revoke, suspend, or refuse to renew or transfer a license:
 - (1) the applicant's, the applicant's affiliates', the transferee's, or the transferee's affiliates' histories of conviction of a felony in this state, the United States, or another state or territory during the 15 years immediately preceding the date of application;
 - (2) the applicant's, the applicant's affiliates', the transferee's, or the transferee's affiliates' histories of commission of
 - (A) a violation of AS 04 or regulations adopted by the board; or
 - (B) a violation of the alcoholic beverage control laws of another state, as a licensee of that state;
 - (3) whether the applicant, the applicant's affiliates, the transferee, or the transferee's affiliates are untrustworthy, unfit to conduct a licensed business, or a potential source of harm to the public;
 - (4) whether the applicant, the applicant's affiliates, the transferee, or the transferee's affiliates have permitted, on licensed premises belonging to that person, the occurrence of sexual contact between persons; for the purpose of this paragraph, "sexual contact" means the touching of genitals, anus, or female breast or the intrusion of any object into the genital or anal opening regardless of whether the act was consensual; and

- (5) all other factors the board in its discretion determines relevant to the public interest.
- (b) A local governing body may properly protest an application under AS 04.11.480 using the factors set out in (a) of this section.

Staff Rec.: Evaluate the public interest under AS 04.11.360(1) when considering the transfer application.

Background: This application is for a new Restaurant/Eating Place license #5986 Tatliani Restaurant for licensee Asumaia LLC. Mr. Grey, an officer of this entity, submitted an AB-08a Authorization of Records release form and a letter of explanation. Mr. Grey's background investigation was completed and there was a finding in his history.

Attachments:

AB-08a: Authorization of Records Release

AB-00 AB-02

AB-03

Confidential Written Explanation-provided separately Confidential Correspondence-provided separately



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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

What is this form?

This authorization of records release form is required for all liquor license applications. Each licensee and affiliate who is required to be listed on an application for a liquor license under AS 04.11.260 must provide written authorization for release of conviction and arrest records, as required by 3 AAC 304.105(a)(1).

The following individuals must complete this form:

- If the applicant is a sole proprietor, this form must be completed by the applicant and the applicant's spouse.
- If the applicant is a <u>corporation</u>, this form must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president*, *vice-president*, *secretary*, and *managing officer*.
- If the applicant is a <u>limited liability organization</u>, this form must be completed for each *member with an ownership interest of* **10% or more**, and for each *manager*.
- If the applicant is a <u>partnership</u>, including a <u>limited partnership</u>, this form must be completed for each <u>partner with an interest</u> of 10% or more, and for each <u>general partner</u>.

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

Section 1 - Establishment Information

Enter information for licensed establishment.

Licensee:	Asumaia LLC				
License Type:	Restaurant/Eating Place	License	Number:	50	186
Doing Business As:	Tatilani Restaurant				
Premises Address:	3002 Spenard Rd, Suite 101				
City:	Anchorage	State:	AK	ZIP:	99503

Section 2 - Individual Information

Enter information for the individual licensee or affiliate.

Name:	Gene Grey
Title:	Member
Date of Birth:	





alcohol.licensing@alaska.gov

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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

Section 3 –	Certifications and Approvals	
Read each line below, and then sign your initials in the	ne box to the right of <u>any applicable statements</u> :	Initials
I certify that I have never been convicted of a violation	n of AS 04 or regulations adopted by the ABC Board.	GG
I certify that I have never been convicted of a violation as a licensee of that state.	n of the alcoholic beverage control laws of another state,	GG
	his state, the United States, or another state or territory, the 15 years immediately preceding the date of this form.	
Sign your initials to the following statement only if you	ou are unable to certify one or more of the above statements:	Initials
	ffenses, and I have attached a written explanation that includes interest for the ABC Board to approve me as a licensee.	961
Alaska Alcoholic Beverage Control Board through the A 3 AAC 304.105. I understand that my fingerprints will be Investigation (FBI), and that I have the opportunity to a	written authorization for release of my conviction and arrest record Alaska Alcohol & Marijuana Control Office under AS 04.11.295 and be used to check the criminal history records of the Federal Bureau complete or challenge the accuracy of the information contained in hange, correction, or updating an FBI identification record are set for	of the FBI
correct, and complete.	ding all attachments and accompanying schedules and statements, Signature of Notary Public	is true,
Signature of licensee/affiliate Greve	Notary Public in and for the State of ACCO	
Printed name of thensel /affiliate	My commission expires:	2072
PUBLIC Subscribed and	d sworn to before me this day of OCTO ber	, 20 <u></u>
[Form AB-08a] (rev 11/27/2019)	CCT 322	Page 2 of 2
	AMCO Received 3/14	/2022



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-00: New License Application

What is this form?

[Form AB-00] (rev 10/10/2016)

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.

5	iection 1 – Establishmen	t and Co	ntact Info	rmation	
Enter information for the bu	usiness seeking to be licensed.				
Licensee:	Asumaia LLC				
License Type:	Restaurant/Eating Place	1.04	Statutory R	eference:	AS 04.11.100
Doing Business As:	Tatilani Restaurant				
Premises Address:	3002 Spenard Rd, Suite 1	01			
City:	Anchorage	State:	AK	ZIP:	99503
Local Governing Body:	Municipality of Anchorage				
Community Council:	Spenard				
Mailing Address:	3002 Spenard Rd, Suite 1	 01			
City:	Anchorage	State:	AK	ZIP:	99503
Designated Licensee:	Gene Grey			10048	
Contact Phone:	(907) 744-0581	Business F	Phone:	(907) 865-8	623
Contact Email:	asumaia2020@gmail.com			1	1.3%
Yes easonal License?	No ✓ If "Yes", write your si	x-month op	erating period	d:	1
	OFFICE US	SE ONLY			
Complete Date:	3-23_22 License Years:			License #:	5986
Board Meeting Date:	3-23-22 License Years: 4-(2-2022	Transa	iction #:	1000-	18440
Issue Date:	*	BRE:	RE	GEIWED	C2B/1



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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

	Se	ection 2 – Pren	nises Inf	ormation		
Premises to be licensed is:						
✓ an existing facility	ar	new building	a propose	ed building		
The next two questions mu	st be completed	l by <u>beverage dispens</u>	ary (including	tourism) and package sto	re applican	ts only:
What is the distance of	the shortest ped	lestrian route from the	e public entra	nce of the building of you asurement in your answe	r proposed	
0.6 mile walk to						
What is the distance of the public entrance of the 0.3 mile walk to	ne nearest churc	h building? Include th	e public entrar e unit of meas	nce of the building of you surement in your answer.	r proposed	premises to
		31141311				
	cotion 2	Sala Dranvict	or O			
	ection 3 -	Sole Propriet	or Owner	rship Informatio	n	
This section must be comple If more space is needed, ple The following information m	ease attach a sep	parate sheet with the r	equired inform	mation.	to Section 4	. .
This individual is an:	applicant	affiliate				
Name:						
Address:						
City:			State:		ZIP:	
This individual is an:	applicant	affiliate				
Name:						
Address:						
City:			State:		ZIP:	
				OCT 22 2	1ED 021	
Form AB-00] (rev 10/10/2016)				ALCOHUL MARIJUANA CON STATE OF ALASK	TROL OFFICE	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.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

Section 4 - Entity Ownership Information

This section must be completed by any <u>entity</u>, 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 <u>corporation</u>, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president*, *vice-president*, *secretary*, and *managing officer*.
- If the applicant is a <u>limited liability organization</u>, the following information must be completed for each *member with an ownership interest of 10% or more*, and for each *manager*.
- If the applicant is a <u>partnership</u>, including a <u>limited partnership</u>, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

with an interest of 10%	or more, and for each general partner	.				
Entity Official:	Gene Grey					
Title(s):	Member	Phone:	(907) 744-0581	% Ow	ned:	50
Address:	8609 E 10th Ave, Unit A			1		
City:	Anchorage	State:	AK	ZIP:	995	504
				•	•	
Entity Official:	Epenesa Grey					
Title(s):	Member	Phone:	(907) 865-8623	% Owi	ned:	50
Address:	8609 E 10th Ave, Unit A					
City:	Anchorage	State:	AK	ZIP:	995	504
Entity Official:						
Title(s):		Phone:		% Owr	ned:	
Address:						
City:		State:		ZIP:		
Entity Official:						
Title(s):		Phone:		% Own	ed:	
Address:						
City:		State:		ZIP:		





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-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 #:	10130583	AK Formed Date:	April 24, 2020	Home State:	AK	
Registered Agent:	Gene Grey		Agent's Phone:	(907) 744-0	581	
Agent's Mailing Address:	8609 E 10th A	Ave, Unit A				
City:	Anchorage	State:	AK	ZIP:	9950	4
esidency of Agent:					Yes	No
ls your corporation or LL	C's registered agent a	an individual resident of	the state of Alaska?		√	
	Sect	tion 5 – Other L	icenses			
wnership and financial intere	st in other alcoholic	beverage businesses:			Yes	No
Does any representative	or owner named in th	his application have any	dianata di di C			
Does any representative any other alcoholic bever If "Yes", disclose which indiv license number(s) and license	rage business that do vidual(s) has the fina	es business in or is licen	sed in Alaska?		aska, wh	√ ich
any other alcoholic bever	rage business that do vidual(s) has the fina	es business in or is licen	sed in Alaska?		aska, wh	√ ich
any other alcoholic bever If "Yes", disclose which indiv	rage business that do vidual(s) has the fina se type(s):	es business in or is licen	sed in Alaska?		aska, wh	√ ich
any other alcoholic bever If "Yes", disclose which indivicense number(s) and license	rage business that do vidual(s) has the fina se type(s):	es business in or is licen	sed in Alaska?		laska, whi	ich No
any other alcoholic bever If "Yes", disclose which indivicense number(s) and license	rage business that do vidual(s) has the fina se type(s): Sec	es business in or is licen ncial interest, what the tion 6 – Author	type of business is, and the state of business is an extension of business is a state of business is	nd if licensed in Al		
any other alcoholic bever If "Yes", disclose which individense number(s) and license mmunication with AMCO state Does any person other the AMCO staff?	rage business that do vidual(s) has the fina se type(s): Sec ff:	es business in or is licen ncial interest, what the tion 6 – Author in this application have a	type of business is, and ization	nd if licensed in Al		
any other alcoholic bever If "Yes", disclose which indivicense number(s) and license mmunication with AMCO sta	rage business that do vidual(s) has the fina se type(s): Sec ff:	es business in or is licen ncial interest, what the tion 6 – Author in this application have a	type of business is, and ization	nd if licensed in Al		



https:/

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

Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

Section 7 – Certifica	tions
Read each line below, and then sign your initials in the box to the right of each	n statement: Initials
I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have	ave been listed on this application.
I certify that all proposed licensees have been listed with the Division of Corpor	rations.
I certify that I understand that providing a false statement on this form or any of for rejection or denial of this application or revocation of any license issued.	ther form provided by AMCO is grounds
I certify that all licensees, agents, and employees who sell or serve alcoholic beveration will complete an approved alcohol server education course, if required by serving alcoholic beverages, will carry or have available to show a current course certifying completion of approved alcohol server education course, if required by	y AS 04.21.025, and, while selling or
I agree to provide all information required by the Alcoholic Beverage Control Boa	ard in support of this application.
As an applicant for a liquor license, I declare under penalty of perjury that I have that this application, including all accompanying schedules and statements, is true	read and am familiar with AS 04 and 3 AAC 304, and ue, correct, and complete.
Signature of licensee Gene Grey Notary Public in	Signature of Notary Public and for the State ofALASKA
NOTARY PUBLIC Subscribed and sworn to before me this	My commission expires: 02 - 12 - 2024



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 <u>second page</u> 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:	Asumaia LLC	License	Number:	598	36
License Type:	Restaurant/Eating Place	•	5. Sec. 10		100
Doing Business As:	Tatilani Restaurant				
Premises Address:	3002 Spenard Rd, Suite 101			770	
City:	Anchorage	State:	AK	ZIP:	99503

CCT 22 2021

ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA



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

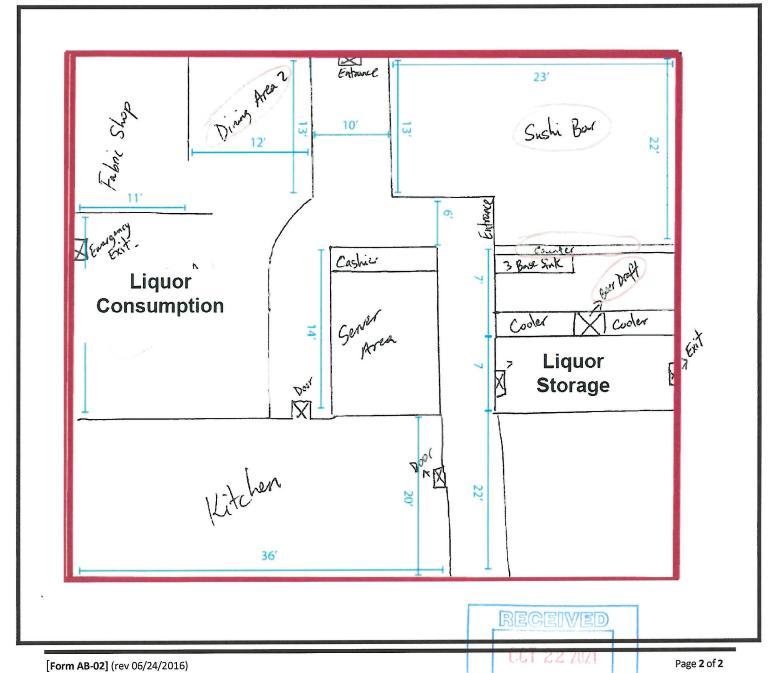
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

Section 2 - Detailed Premises Diagram

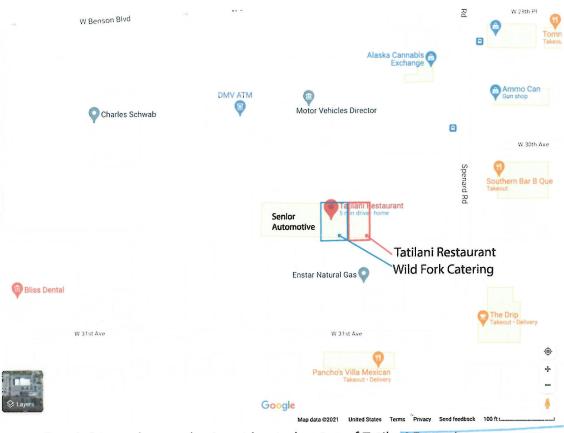
Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, and fixtures, and outline in red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Include dimensions, cross-streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of this form.



ALCOHUL MARIJUANA CONTROL OFFICE

Plot Plan - Tatilani Restaurant outlined in Red. Parking outlined in White.





- Google Maps placemarker is not located on top of Tatilani Footprint.
- Entrances and Exits on Premises Diagram
- Oriented North as Up. Scale on Bottom right of each screenshot. CT 22 7021

ALCOHUL MARILUANA CONTROL OFFICE



6. Main Entrance, Sushi Bar w. Alcohol to left, Main Dining Areas to the right.



4. Sushi Bar with Alcohol storage + Keg taps



2. Main Dining Area



5. Hallway to Sushi Bar



3 Hallway to additional alcohol storage (to the right of Sushi Bar)



1. Additional Alcohol Storage (locked at all times)



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

AMCO Received 3/14/2022

Phone: 907.269.0350

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

inter information for licen	sed establishment.				
Licensee:	Asumaia LLC				
License Type:	Restaurant/Eating Place	License	Number:	598	8'6
Doing Business As:	Tatilani Restaurant				
Premises Address:	3002 Spenard Rd, Suite 101			***************************************	W
City:	Anchorage	State:	AK	ZIP:	99503
Contact Name:	Gene Grey	Contact	Phone:	(907)	744-0581
his application is for the S 04.16.010(c) or AS 04	Section 2 – Type of Designation erequest of designation as a bona fide restaurant 16.049, and for the request of the following designation as a bona fide restaurant 16.049, and for the request of the following designation are sections.	, hotel, or	eating plac	ce for pu hat apply	rposes of /):
his application is for the				ce for pu	rposes of
S 04.16.010(c) or AS 04	e request of designation as a bona fide restaurant 16.049, and for the request of the following design	, hotel, or	eating plac	ce for pu hat apply	rposes of /):
S 04.16.010(c) or AS 04 Dining after s	e request of designation as a bona fide restaurant 16.049, and for the request of the following designation and for the request of the following designation and the contract of the following hours: AS 04.16.010(c)	, hotel, or	eating plac	ce for pu hat apply	rposes of /):
S 04.16.010(c) or AS 04 Dining after s	e request of designation as a bona fide restaurant 16.049, and for the request of the following design	, hotel, or	eating plac	ce for pu hat apply	rposes of
S 04.16.010(c) or AS 04 Dining after s Dining by per	e request of designation as a bona fide restaurant 16.049, and for the request of the following designation and for the request of the following designation and the contract of the following hours: AS 04.16.010(c)	, hotel, or gnation(s)	eating place (check all t	hat apply	/):
S 04.16.010(c) or AS 04 Dining after s Dining by personal Dining by personal Dining by personal Dining by Dining b	e request of designation as a bona fide restaurant .16.049, and for the request of the following designations and for the request of the following designations and closing hours: AS 04.16.010(c) sons 16 – 20 years of age: AS 04.16.049(a)(2)	, hotel, or gnation(s)	eating place (check all t	hat apply	/): AS 04.16.049(a)(:
S 04.16.010(c) or AS 04 Dining after s Dining by personal Dining by personal Dining by personal Dining by Dining b	e request of designation as a bona fide restaurant 16.049, and for the request of the following designation as a bona fide restaurant 16.049, and for the request of the following designation and the following designation and the following designation and the following designation as a bona fide restaurant the following designation as a bona fide restaurant fide restaurant for several fide restaurant fide restau	, hotel, or gnation(s)	eating place (check all t	hat apply	/): AS 04.16.049(a)(:



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 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.)

Persons aged 16 years and above, but under 21 years of age, will only be allowed in the dining area, kitchen, restrooms, and server area. Persons aged 16 years and above, but under 21 years of age, will not be allowed in the bar area and designated liquor storage areas where beer and wine is stored and served.

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.

Persons aged 16 years and above, but under 21 years of age, may be employed with the written consent of their parent or legal guardian and an exemption certificate from the Department of Labor, but may not sell, serve, or deliver alcoholic beverages. Persons 16 years of age and above, but under 21 years of age, may enter for the purpose of dining only. Persons under the age of 16 may enter licensed premises for the purpose of dining only when accompanied by a person over the age of 21 years and with the consent of the underage person's parent. Staff under 21 are encouraged to clean tables without unconsumed alcohol beverages. Though, if no other staff over 21 years if available, staff under 21 and 16 of age or above may clean tables that have containers with unconsumed portions of alcoholic beverages, but the unconsumed alcoholic beverages must be disposed of in waste water or a waste container immediately. All liquor will be secured in designated liquor storage areas and no persons under the age of 21 years will be allowed in those areas. A person who is restricted from purchasing alcohol under AS 04.16.160 may not knowingly enter or remain in a licensed premises to obtain or consume alcohol, per AS 04.16.047. When checking ID upon ordering alcoholic beverages, if this is the restriction found on their ID, this person will not be allowed to order or consume alcoholic beverages.

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.

6161

*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



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

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 3 of 5

AMCO Received 3/14/2022

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/weel	kday hours, and indicate am/pm:
11am to 8pm, 7 days a week.	
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 entertainn	nent may occur:
Offerings of space reservations for birthday parties. Karaoke and Live Barantertainment options during the hours listed below. Entertainment (allow will only be provided on the licensed premises between the hours of 3:00	ved under AS 04.11.100)
ood and beverage service offered or anticipated is:	
table service buffet service counter service	other
"other", describe the manner of food and beverage service offered or anticipated:	
N/A	



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 initia	als in the box to the right of each	n statement:	Initials
There are tables or counters at my establishme	ent for consuming food in a dinir	ng area on the premises.	66
I have included with this form a menu, or an ex This menu includes entrees that are regularly s			G6
I certify that the license for which I am request golf course, or restaurant or eating place licens		age dispensary, club, recreational site	GG
I have included with this application a copy of t (AB-03 applications that accompany a no not be required to submit an additional	ew or transfer license application	n will	661
I declare under penalty of perjury that this form correct, and complete. Signature of licensee	n, including all attachments and a	Signature of Notary Public	nts, is true,
Gene Grey	Natara Dublia i	Mas	(a
Printed name of lice OSES	Notary Public II	My commission expires	2077
NOTART PUBLIC Subscrib	ed and sworn to before me this	2 day of OCTO Der	, 20 21
Local Government Review (to be completed by	an appropriate local governmer	nt official): Approved	Denied
Signature of local government official	Date		
Printed name of local government official	Title		
[Form AB-03] (rev 4/16/2019		MEGETVED	Page 4 of 5



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:			



Dine-In / Catering / Parties / Take-Outs 907.865.8623 / 3002 Spenard Road, Suite 101, Anchorage Alaska / 99503

STARTERS		POLYNESIAN CUIS	INE
POT-STICKERS	9.00	MAMOE/LAMB FLAPS (PER LB)	10.00
Pan-fried or deep-fried veggie or pork dumplings.		BAKED TARO (PER LB)	10.00
BANANA CHIPS Fried Banana chips with mashed avocado, crabmeat tempura flakes, eel-lava sauce, spicy mayo.	10.00	PANOPANO FISH (Fried or cooked in coconut cream)	21.00
BAKED MUSSEL Bake mussel with tobiko, green onions, eel-lava	13.00	**SAMOAN OKA 8 oz bowl (Raw fish) 32 oz bowl	10.00 23.00
sauce, sriracha.		**HAWAIIAN POKE (Raw fish) 32 or boul	10.00
SHRIMP TEMPURA 5pcs Shrimp and tempura sauce.	10.00	32 02 BOWI	20.00
FIREBALL BOMBERS	14.00	TATILANI BURGER	5
Spicy tuna, crabmeat, cream cheese, jalapeno deep fried, eel-lava sauce, spicy mayo, tempura flakes.	14.00	ALL AMERICAN DELUXE BURGER 100% Angus beef with crisp lettuce, fresh tomato, onions, on a toasted bun, topped with American chec	13.00
**NACHO POKE	14.00	spicy mayo, fries.	ese,
Ahi tuna Hawaiian poke chunks, nacho chips, spicy mayo, green onions, avocado, eel-lava sauce.		GREYYTNESS KATSU BURGER Japanese breaded boneless fried chicken, crisp lettue fresh tomato, onions, on a toasted bun, mayo,	15.00 ce,
SHRIMP TEMPURA MIXED PLATTER Tempura shrimp, vegetables, tempura sauce.	14.00	house katsu sauce, fries	
VEGETABLES TEMPURA PLATTER 5pc Tempura Vegetables and tempura sauce	7.00	KIDS MENU	
DEEP FRIED CALAMARI	10.00	CHICKEN TERIYAKI Comes with tempura veggies, rice	13.00
Spc		S&S ORANGE CHICKEN House Sesame chicken, rice	14.00
SOUPS PO-LENA SOUP Choice of chicken or beef soup,	16.00	CHEESEBURGER & FRIES	11.00
mix vegetables, noodles.		DRINKS	
SPICY MISO SEAFOOD SOUP Shrimp, mussel, calamari, mixed veggies,	21.00	CAN DRINKS	2.00
chili powder, spicy broth, Udon noodles		BOTTLE DRINKS	3.50
TEMPURA UDON SOUP	14.00	COFFEE OR HOT TEA	3.00
Side Shrimp, Veggie Tempura.		KOKO SAMOA	5.00

^{**}This item may contain raw or undercooked ingredients or may be cooked to order. Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of food-borne illness.



Dine-In / Catering / Parties / Take-Outs 907.865.8623 / 3002 Spenard Road, Suite 101, Anchorage Alaska / 99503.

LUNCH MENU		DINNER	, , , , , , , , , , , , , , , , , , , ,
(11:00AM-3:00PM)		GLAZE CHICKEN TERIYAKI	
CHOICE OF 1-4 SERVED WITH	15.00	Grilled Chicken Teriyaki, rice	17.00
2PCS POTSTICKERS AND 4PCS	15.00	MR. ASUMAIA SWEET BEEF Marinated sliced Mongolian Beef, green onions, rice.	19.00
SUSHI ROLL		TAB'S SHORT RIBS	29.00
1. Glaze Chicken Teriyaki		Kalbi, cabbage, rice	27.00
2. Chicken Katsu		CHICKEN KATSU	
3.S&S Orange Chicken		Breaded fried chicken, katsu sauce, rice.	18.00
4. Asumaia Sweet Beef		**LIMU POKE SALAD	14.00
TAB'S SHORT RIBS	19.00	Romaine Lettuce, **raw poke tuna, crabmeat, seaweed salad, cucumber, avocado, spicy mayo.	14.00
Kalbi Ribs, Rice	17.00	POLY BENTO BOX	
		Choice of Chicken Teriyaki or Beef Teriyaki (+3) Apcs suchi malla	21.00
BEEF TERIYAKI	18.00	deep-fried potstickers, shrimp veggie tempura mixed, rice.	
Grilled, cut steak in teriyaki sauce		S&S SESAME CHICKEN	40.00
		House Sesame Chicken, rice.	18.00
YAKISOBA NOODLES W/ MIXED		**GARLIC BUTTER SHRIMP	16.00
VEGETABLES		6pc shrimp saute'ed w/ butter	10.00
Chicken Beef	14.00	BEEF TERIYAKI	22.00
**Shrimp	15.00	Grilled, thinly cut steak in teriyaki sauce	22.00
House	16.00	FISH & CHIPS	
	17.00	4pc Deep Fried Halibut on French Fries	18.00
POLY LUNCH BOX	16.00	TEMPURA DINNER	
Choice of Chicken Teriyaki OR	10.00	Shrimp and Veggie Tempura 12pc	24.00
Beef Teriyaki (+3),4pcs sushi rolls, 2pcs fried		YAKISOBA NOODLES W/ MIXED VEGETABLES	
ootstickers, shrimp/veggies tempura mix, rice.		Chicken	15.00
TOLED DIGE		Beef	16.00
RIED RICE		**Shrimp House	17.00
Chicken Beef	14.00		18.00
*Shrimp	15.00	FRIED RICE Chicken	
louse	10.00	Beef	15.00
DECCEDTO		**Shrimp	16.00 17.00
DESSERTS FRIED OREOS		House	18.00
	6.00	SIDES	
TEMPURA ICE CREAM	8.00	SEAWEED SALAD	
TEMPURA CHEESECAKE	10.00		9.00
EMPURA BANANA	6.00	STEAM RICE	4.00
/AIFALA(PINEAPPLE SMOOTHIE)	4 00	STEAM VEGGIES	6.00
POI FA'I(BANANA SMOOTHIE)	4.00	MISO SOUP	4.00
**This item may contain raw or undercooked	4.00	SIDE TARO (PER LB)	10.00

^{**}This item may contain raw or undercooked ingredients or may be cooked to order. Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of food-borne illness.



Dine-In / Catering / Parties / Take-Outs 907.865.8623 / 3002 Spenard Road, Suite 101, Anchorage Alaska / 99503.

SUSHI MENU

CALIFORNIA ROLL Crabmeat, avocado, cucumber, sesame or tobiko.	12.00
A & A CRUNCH ROLL Shrimp tempura, cucumber, tobiko, eel sauce, crunch flakes.	13.00
** NINESSA ROLL Spicy Tuna, cucumber, sesame seeds, sriracha.	15.00
TATILANI ROLL Deep-Fried Tempura Shrimp, eel-lava sauce, topped with crabmeat, pineapple salsa, spicy mayo.	16.00
HERMANATOR ROLL Pisupo (corn beef), cucumbers, raw onions, mayo, shrimp tempura, topped avocado, green onions, spicy mayo, eel-lava sauce, tempura flakes.	22.00
**THE GREYYYZ ROLL Shrimp tempura, crabmeat, cream cheese inside, topping spicy tuna, jalapeno, spicy mayo, sweet ponzu, tobiko.	17.00
NINE O SEVEN ROLL Crabmeat, avocado, cucumber, topped spicy crabmeat, green onions, and sriracha.	15.00
DANCING EEL ROLL California Roll with Baked Eel, eel-lava sauce.	16.00

^{**}This item may contain raw or undercooked ingredients or may be cooked to order. Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of food-borne illness.

Dine-In / Catering / Parties / Take-Outs 907.865.8623 / 3002 Spenard Road, Suite 101, Anchorage Alaska / 99503.

TALOFA! ALOHA! HELLO! MALO E LELEI! KIA ORA! BULA VINAKA!

WELCOME TO TATILANI, ANCHORAGE'S FINEST RESTAURANT FOR DELICIOUS POLYNESIAN AND JAPANESE FOOD.

More than a take-out spot, Tatilani is a place to sit and share a meal with family or friends—your temporary escape to a tropical island paradise. Tatilani embodies the Polynesian spirit and culture. We're a gathering place, your home-away-from-home to celebrate birthdays, graduations, weddings, or the random Tuesday when you need a pick-me-up.

When you dine with us, you're family. Whether you miss the traditional flavors you grew up eating in Samoa or even if you don't know the difference between masi and kekesaiga, we are sure you will find something on our menu to nourish your body and soul.

ABOUT US

Our name, Tatilani, comes from the names of our three sisters. They are represented in our logo by the three turtles. In our Samoan culture, turtles are sacred; we have to preserve and protect them, much in the same way we want to protect our sisters. The three sharks represent the three brothers in our family. "Ole i'o ole mata ole tuagane ole tuafafine" translates to "the pupil of the eye of a brother is his sister."

We are here to serve our community, the people of Anchorage. It brings us great joy to provide people with the food they crave from back home. We also love introducing people, who have never tried Polynesian food, to the flavors we love. We can think of no greater reward that to serve people and see them happy, enjoying the food we make.

We learned the restaurant business from the bottom up, starting as dish washers. Now, in our restaurant, everyone works together. Cooperation is the key in the Tatilani kitchen—though our mom has the final say!

TO ALL OF OUR CURRENT AND FUTURE CUSTOMERS

WE STRIVE TO DELIVER THE UTMOST QUALITY IN OUR PRODUCTS AND SERVICE. WE PROMISE TO ALWAYS DELIVER OUR BEST BECAUSE NONE OF THIS WOULD BE POSSIBLE WITHOUT YOU. WE'RE SO EXCITED FOR THE FUTURE AND EVERYONE THAT IS GOING TO BE A PART OF THE JOURNEY. FA'AFETAI FA'AFETAI TELE LAVA! THANK YOU FROM THE BOTTOM OF OUR HEARTS, GOD BLESS!

Like and follow us on social media and leave a review on google. Fa'afetai Tele Lava (Thank You)!!!













3002 Spenard Rd #101 Anchorage, AK 99503 907-865-8623

Anticipated Drink Menu:

Beer: Corona......\$5.95 Medelo.....\$5.95 Blue Moon.....\$5.95 Coors Light.....\$5.95 Bud Light.....\$5.95 Alaskan Amber....\$6.95

Wine:

(Red Wine) Meriot	\$10 // \$38
(Red Wine) Cabernet	\$9 // \$34
(Pink Wine) Moscato	\$7 // \$23
(Pink Wine) Rosé	\$7 // \$23
(White Wine) Chardonnay	\$9 // \$31

Jinro Soju.....\$11.95

THIS PERMIT MUST BE CONSPICUOUSLY POSTED IN A PUBLIC PLACE IN THE ESTABLISHMENT

Municipality of Anchorage

DEPARTMENT OF HEALTH & HUMAN SERVICES PERMIT

PERMIT NO.

FA0016700

FACILITY NAME

TATILANI RESTAURANT

OWNER'S NAME:

ASUMAIA LLC

LOCATION:

3002 SPENARD RD

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 1/1/2022 To 12/31/2022

TATILANI RESTAURANT 8609 E 10TH AVE A ANCHORAGE, AK 99504

70-031 Ver. 9_02 *

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

THIS PERMIT MUST BE CONSPICUOUSLY POSTED IN A PUBLIC PLACE IN THE ESTABLISHMENT

Municipality of Anchorage DEPARTMENT OF HEALTH & HUMAN SERVICES

PERMIT

FACILITY NAME
OWNER'S NAME:

TATILANI RESTAURANT

ASUMAIA LLC

LOCATION:

3002 SPENARD RD

PERMIT NO.

FA0016700

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

TATILANI RESTAURANT 8609 E 10TH AVE A ANCHORAGE, AK 99504

76-831 Ver 9-821

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

THIS PERMIT MUST 25

POSTED IN A PUBLIC PLACE IN THE ESTABLISHMENT.

unicipality of Anchorage

AT OF HEALTH & HUMAN SERVICES

PERMIT

FACILITY NAME

TATILANI RESTAURANT

PERMIT NO.

OWNER'S NAME:

ASUMAIA LLC

FA0016700

LOCATION:

3002 SPENARD RD

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 1/1/2020 TO 1/1/2020

TATILANI RESTAURANT 8609 E 10TH AVE A ANCHORAGE, AK 99504

7a 031 Ver 9 02 1

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

THIS PERMIT MUST BE CONSPICUOUSLY POSTED IN A PUBLIC PLACE IN THE ESTABLISHMENT

Municipality of Anchorage

DEPARTMENT OF HEALTH & HUMAN SERVICES PERMIT

PERMIT NO.

FA0016700

FACILITY NAME

TATILANI RESTAURANT ASUMAIA LLC

OWNER'S NAME: TYPE OF FACILITY:

ASU

LOCATIONS

3002 SPENARD RD

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

TATILANI RESTAURANT 8609 E 10TH AVE A ANCHORAGE, AK 99504

TO 82 PT WAY 6 02"

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

RECEIVED

CTATE OF AFFAIR OF ULTIDE