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
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 corporation, 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 limited liability organization, 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 partnership, including a limited partnership, this form must be completed for each partner with an interest of 10% or more, and for each general partner.

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.

<table>
<thead>
<tr>
<th>Licensee</th>
<th>Asumaia LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>License Type</td>
<td>Restaurant/Eating Place</td>
</tr>
<tr>
<td>License Number</td>
<td>5986</td>
</tr>
<tr>
<td>Doing Business As</td>
<td>Tatilani Restaurant</td>
</tr>
<tr>
<td>Premises Address</td>
<td>3002 Spenard Rd, Suite 101</td>
</tr>
<tr>
<td>City</td>
<td>Anchorage</td>
</tr>
<tr>
<td>State</td>
<td>AK</td>
</tr>
<tr>
<td>ZIP</td>
<td>99503</td>
</tr>
</tbody>
</table>

### Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

<table>
<thead>
<tr>
<th>Name</th>
<th>Gene Grey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>Member</td>
</tr>
<tr>
<td>Date of Birth</td>
<td>[redacted]</td>
</tr>
</tbody>
</table>
Section 3 – Certifications and Approvals

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

I certify that I have never been convicted of a violation of AS 04 or regulations adopted by the ABC Board.

[GG]

I certify that I have never been convicted of a violation of the alcoholic beverage control laws of another state, as a licensee of that state.

[GG]

I certify that I have not been convicted of a felony in this state, the United States, or another state or territory, including a suspended imposition of sentence, during the 15 years immediately preceding the date of this form.

[ ]

Sign your initials to the following statement only if you are unable to certify one or more of the above statements:

I have been convicted of one or more of the above offenses, and I have attached a written explanation that includes the type of offense and why it would be in the public interest for the ABC Board to approve me as a licensee.

[6]

I understand that by signing this form, I am providing written authorization for release of my conviction and arrest records to the Alaska Alcoholic Beverage Control Board through the Alaska Alcohol & Marijuana Control Office under AS 04.11.295 and 3 AAC 304.105. I understand that my fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), and that I have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

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

Signature of licensee/affiliate

Printed name of licensee/affiliate

Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 11/2022

Subscribed and sworn to before me this 12 day of October, 2021.

AMCO Received 3/14/2022
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:   | Asumaia LLC          |
| License Type: | Restaurant/Eating Place | Statutory Reference: AS 04.11.100 |
| Doing Business As: | Tatilani Restaurant |
| Premises Address: | 3002 Spenard Rd, Suite 101 |
| City: | Anchorage | State: AK | ZIP: 99503 |
| Local Governing Body: | Municipality of Anchorage |
| Community Council: | Spenard |

| Mailing Address: | 3002 Spenard Rd, Suite 101 |
| City: | Anchorage | State: AK | ZIP: 99503 |

| Designated Licensee: | Gene Grey |
| Contact Phone: | (907) 744-0581 | Business Phone: (907) 865-8623 |
| Contact Email: | asumaia2020@gmail.com |

Seasonal License? | Yes | No |
If “Yes”, write your six-month operating period: ___________

OFFICE USE ONLY

| Complete Date: | 3-23-22 |
| Board Meeting Date: | 4-12-2022 |
| Issue Date: | BRE: |
| License #: | 5986 |
| Transaction #: | 100078440 |

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

0.6 mile walk to Romig Middle School

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.

0.3 mile walk to True North Church

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: ____________
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**.

<table>
<thead>
<tr>
<th>Entity Official:</th>
<th>Gene Grey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title(s):</td>
<td>Member</td>
</tr>
<tr>
<td>Address:</td>
<td>8609 E 10th Ave, Unit A</td>
</tr>
<tr>
<td>City:</td>
<td>Anchorage</td>
</tr>
<tr>
<td>State:</td>
<td>AK</td>
</tr>
<tr>
<td>ZIP:</td>
<td>99504</td>
</tr>
<tr>
<td>Phone:</td>
<td>(907) 744-0581</td>
</tr>
<tr>
<td>% Owned:</td>
<td>50</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Entity Official:</th>
<th>Epenesa Grey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title(s):</td>
<td>Member</td>
</tr>
<tr>
<td>Address:</td>
<td>8609 E 10th Ave, Unit A</td>
</tr>
<tr>
<td>City:</td>
<td>Anchorage</td>
</tr>
<tr>
<td>State:</td>
<td>AK</td>
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<td>Phone:</td>
<td>(907) 865-8623</td>
</tr>
<tr>
<td>% Owned:</td>
<td>50</td>
</tr>
</tbody>
</table>

<table>
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<tr>
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<td>Phone:</td>
<td></td>
</tr>
<tr>
<td>% Owned:</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>DOC Entity #:</th>
<th>10130583</th>
<th>AK Formed Date:</th>
<th>April 24, 2020</th>
<th>Home State:</th>
<th>AK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Agent:</td>
<td>Gene Grey</td>
<td>Agent's Phone:</td>
<td>(907) 744-0581</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agent's Mailing Address:</td>
<td>8609 E 10th Ave, Unit A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>Anchorage</td>
<td>State:</td>
<td>AK</td>
<td>ZIP:</td>
<td>99504</td>
</tr>
</tbody>
</table>

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:

[Form AB-00] (rev 10/10/2016)
Section 7 – Certifications

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

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

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

I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.

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

As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee
Gene Grey

Signature of Notary Public

Printed name of licensee

Notary Public in and for the State of ALASKA.

My commission expires: 02.12.2024.

Subscribed and sworn to before me this 3rd day of JUNI0 2021.
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.

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.

<table>
<thead>
<tr>
<th>Licensee:</th>
<th>Asumaia LLC</th>
<th>License Number:</th>
<th>5986</th>
</tr>
</thead>
<tbody>
<tr>
<td>License Type:</td>
<td>Restaurant/Eating Place</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doing Business As:</td>
<td>Tatilani Restaurant</td>
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<td></td>
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<td>Premises Address:</td>
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<td></td>
<td>ZIP:</td>
<td>99503</td>
</tr>
</tbody>
</table>

[Form AB-02] (rev 06/24/2016)
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.
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.
6. Main Entrance, Sushi Bar w. Alcohol to left. Main Dining Areas to the right.

4. Sushi Bar with Alcohol storage + Keg taps

5. Hallway to Sushi Bar

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

2. Main Dining Area

1. Additional Alcohol Storage (locked at all times)
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.

<table>
<thead>
<tr>
<th>Licensee:</th>
<th>Asumaia LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>License Type:</td>
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<td>ZIP:</td>
<td>99503</td>
</tr>
<tr>
<td>Contact Name:</td>
<td>Gene Grey</td>
</tr>
<tr>
<td>Contact Phone:</td>
<td>(907) 744-0581</td>
</tr>
</tbody>
</table>

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):

1. [ ] Dining after standard closing hours: AS 04.16.010(c)
2. [x] Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)
3. [x] Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)
4. [x] 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.

[Form AB-03] (rev 4/16/2019)
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 un consumed alcohol beverages. Though, if no other staff over 21 years if available, staff under 21 and 16 age or above may clean tables that have containers with un consumed portions of alcoholic beverages, but the un consumed 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 304.010 for an establishment to qualify as a Bone Fide Restaurant, a Food Service Permit or (for licenses within the Municipality of Anchorage) corresponding Department of Health and Human Services documentation is required.

Please follow this link to the DEC Food Safety Website: http://dec.alaska.gov/eh/fss/food/ Please follow this link to the Municipality Food Safety Website: http://www.muni.org/Departments/health/Admin/environment/FSS/Pages/fssfood.aspx

IF you are unable to certify the below statement, please discuss the matter with the AMCO office: Initials

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

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

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 entertainment may occur:

Offerings of space reservations for birthday parties. Karaoke and Live Bands will be allowed as entertainment options during the hours listed below. Entertainment (allowed under AS 04.11.100) will only be provided on the licensed premises between the hours of 3:00pm and 11:00pm.

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:

N/A
Section 7 – Certifications and Approvals

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

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

I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons. This menu includes entrees that are regularly sold and prepared by the licensee at the licensed premises.

I certify that the license for which I am requesting designation is either a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license.

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

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

Signature of licensee:

Gene Grey

Printed name of licensee:

Notary Public in and for the State of Alaska

My commission expires: 1/1/2022

Subscribed and sworn to before me this 12th day of October, 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

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

______________________________  ______________________________
Signature of AMCO Director  Printed name of AMCO Director

Date

Limitations:
**STARTERS**

**POT-STICKERS**
Pan-fried or deep-fried veggie or pork dumplings. 9.00

**BANANA CHIPS**
Fried Banana chips with mashed avocado, crabmeat, tempura flakes, eel-lava sauce, spicy mayo. 10.00

**BAKED MUSSEL**
Bake mussel with tobiko, green onions, eel-lava sauce, sriracha. 13.00

**SHRIMP TEMPURA**
5pcs Shrimp and tempura sauce. 10.00

**FIREBALL BOMBERS**
Spicy tuna, crabmeat, cream cheese, jalapeno deep fried, eel-lava sauce, spicy mayo, tempura flakes. 14.00

**NACHO POKE**
Ahi tuna Hawaiian poke chunks, nacho chips, spicy mayo, green onions, avocado, eel-lava sauce. 14.00

**SHRIMP TEMPURA MIXED PLATTER**
Tempura shrimp, vegetables, tempura sauce. 14.00

**VEGETABLES TEMPURA PLATTER**
5pc Tempura Vegetables and tempura sauce 7.00

**DEEP FRIED CALAMARI**
5pc 10.00

**SOUPS**

**PO-LENA SOUP**
Choice of chicken or beef soup, mix vegetables, noodles. 16.00

**SPICY MISO SEAFOOD SOUP**
Shrimp, mussel, calamari, mixed veggies, chili powder, spicy broth, Udon noodles 21.00

**TEMPURA UDON SOUP**
Side Shrimp, Veggie Tempura. 14.00

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**POLYNESIAN CUISINE**

**MAMOE/LAMB FLAPS (PER LB)** 10.00

**BAKED TARO (PER LB)** 10.00

**PANOPANO FISH**
(Fried or cooked in coconut cream) 21.00

**SAMOAN OKA**
8 oz bowl 10.00
(8 oz bowl) 23.00

**HAWAIIAN POKE**
8 oz bowl 10.00
(32 oz bowl) 23.00

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**TATILANI BURGERS**

**ALL AMERICAN DELUXE BURGER**
100% Angus beef with crisp lettuce, fresh tomato, onions, on a toasted bun, topped with American cheese, spicy mayo, fries. 13.00

**GREYTYNESS KATSU BURGER**
Japanese breaded boneless fried chicken, crisp lettuce, fresh tomato, onions, on a toasted bun, mayo, house katsu sauce, fries 15.00

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**KIDS MENU**

**CHICKEN TERIYAKI**
Comes with tempura veggies, rice 13.00

**S&S ORANGE CHICKEN**
House Sesame chicken, rice 14.00

**CHEESEBURGER & FRIES**
11.00

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**DRINKS**

**CAN DRINKS**
2.00

**BOTTLE DRINKS**
3.50

**COFFEE OR HOT TEA**
3.00

**KOKO SAMOA**
5.00

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**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.**
<table>
<thead>
<tr>
<th><strong>LUNCH MENU</strong> (11:00AM-3:00PM)</th>
<th><strong>DINNER</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CHOICE OF 1-4 SERVED WITH 2PCS POTSTICKERS AND 4PCS SUSHI ROLL</strong></td>
<td><strong>GLAZE CHICKEN TERIYAKI</strong> 17.00</td>
</tr>
<tr>
<td>1. Glaze Chicken Teriyaki</td>
<td>Grilled Chicken Teriyaki, rice.</td>
</tr>
<tr>
<td>2. Chicken Katsu</td>
<td><strong>MR. ASUMAIA SWEET BEEF</strong> 19.00</td>
</tr>
<tr>
<td>4. Asumaia Sweet Beef</td>
<td><strong>TAB’S SHORT RIBS</strong> 29.00</td>
</tr>
<tr>
<td><strong>TAB’S SHORT RIBS</strong> Kaibi, cabbage, rice</td>
<td></td>
</tr>
<tr>
<td><strong>BEEF TERIYAKI</strong> 18.00</td>
<td><strong>CHICKEN KATSU</strong> 18.00</td>
</tr>
<tr>
<td>Grilled, cut steak in teriyaki sauce</td>
<td>Breaded fried chicken, katsu sauce, rice.</td>
</tr>
<tr>
<td><strong>YAKISOBA NOODLES W/ MIXED VEGETABLES</strong></td>
<td>**<strong>LIMU POKE SALAD</strong> 14.00</td>
</tr>
<tr>
<td>Chicken</td>
<td>Romaine Lettuce, raw poke tuna, crabmeat, seaweed salad, cucumber, avocado, spicy mayo.</td>
</tr>
<tr>
<td>Beef</td>
<td><strong>POLY BENTO BOX</strong> 21.00</td>
</tr>
<tr>
<td><strong>Shrimp</strong></td>
<td>Choice of Chicken Teriyaki or Beef Teriyaki (+3), 4pcs sushi rolls, deep-fried potstickers, shrimp veggie tempura mixed, rice.</td>
</tr>
<tr>
<td><strong>House</strong></td>
<td><strong>S&amp;S SESAME CHICKEN</strong> 18.00</td>
</tr>
<tr>
<td><strong>POLY LUNCH BOX</strong> 16.00</td>
<td>House Sesame Chicken, rice.</td>
</tr>
<tr>
<td>Choice of Chicken Teriyaki OR Beef Teriyaki (+3), 4pcs sushi rolls, 2pcs fried potstickers, shrimp/veggies tempura mix, rice.</td>
<td>**<strong>GARLIC BUTTER SHRIMP</strong> 16.00</td>
</tr>
<tr>
<td><strong>FRIED RICE</strong></td>
<td>6pc shrimp sauteed w/ butter</td>
</tr>
<tr>
<td>Chicken</td>
<td><strong>BEEF TERIYAKI</strong> 22.00</td>
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<tr>
<td>Beef</td>
<td>Grilled, thinly cut steak in teriyaki sauce</td>
</tr>
<tr>
<td><strong>Shrimp</strong></td>
<td><strong>FISH &amp; CHIPS</strong> 18.00</td>
</tr>
<tr>
<td><strong>House</strong></td>
<td>4pc Deep Fried Halibut on French Fries</td>
</tr>
<tr>
<td><strong>DESSERTS</strong></td>
<td><strong>TEMPURA DINNER</strong> 24.00</td>
</tr>
<tr>
<td>FRIED OREOS</td>
<td>Shrimp and Veggie Tempura 12pc</td>
</tr>
<tr>
<td>TEMPURA ICE CREAM</td>
<td><strong>YAKISOBA NOODLES W/ MIXED VEGETABLES</strong> 15.00</td>
</tr>
<tr>
<td>TEMPURA CHEESECAKE</td>
<td>Chicken</td>
</tr>
<tr>
<td>TEMPURA BANANA</td>
<td>Beef</td>
</tr>
<tr>
<td>VAIFALA (PINEAPPLE SMOOTHIE)</td>
<td><strong>Shrimp</strong> 17.00</td>
</tr>
<tr>
<td>POI FA’I (BANANA SMOOTHIE)</td>
<td><strong>House</strong> 18.00</td>
</tr>
<tr>
<td><strong>SIDES</strong></td>
<td><strong>FRIED RICE</strong> 15.00</td>
</tr>
<tr>
<td>SEAWEED SALAD</td>
<td>Chicken</td>
</tr>
<tr>
<td>STEAM RICE</td>
<td>Beef</td>
</tr>
<tr>
<td>STEAM VEGGIES</td>
<td><strong>Shrimp</strong> 16.00</td>
</tr>
<tr>
<td>MISO SOUP</td>
<td><strong>House</strong> 17.00</td>
</tr>
<tr>
<td>SIDE TARO (PER LB)</td>
<td>18.00</td>
</tr>
<tr>
<td>9.00</td>
<td>4.00</td>
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<tr>
<td>4.00</td>
<td>6.00</td>
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<tr>
<td>6.00</td>
<td>4.00</td>
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</table>
| 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.**

AMCO Received 3/18/2022
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

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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 tuafine" 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)!!!

@Tatilani Restaurant  @TatilaniRestaurant907  @Tatilani Restaurant  @TatilaniRestaurant907
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) Merlot..............$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
Municipality of Anchorage

DEPARTMENT OF HEALTH & HUMAN SERVICES PERMIT

FA0016700

FACILITY NAME
TATILANI RESTAURANT
ASUMAIA LLC
3002 SPENARD RD

OWNER'S NAME:
LOCATION:

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

THIS CERTIFICATE AND PERMIT IS NOT TRANSFERABLE
AND IS THE PROPERTY OF THE MUNICIPALITY OF ANCHORAGE
Municipality of Anchorage
DEPARTMENT OF HEALTH & HUMAN SERVICES
PERMIT

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