



## MEMORANDUM

TO: Alcoholic Beverage Control Board

DATE: September 15, 2022

FROM: Audrey Saylor OLE

RE: #3999 The Draft House and Lodge

**Requested Action:** Transfer

**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 application with delegation.

**Background:** This is an application to issue a Beverage Dispensary – Tourism license to The Big Delta Brewing Company, LLC in the City of Delta Junction.

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.

This facility has 23 rooms with no kitchen facilities. There is a separate restaurant that is open six days a week with a full menu.

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



Alaska Alcoholic Beverage Control Board

**Form AB-37: 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 completed and submitted to AMCO’s Anchorage office before any tourism license application will be reviewed.

**Section 1 – Establishment Information**

Enter information for the licensed establishment or the business seeking to be licensed.

Doing Business As:	The Draft House and Lodge	License #:	3999
License Type:	Beverage Dispensary - Tourism		

**Section 2 – Tourism Statement**

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

We have motel rooms that encourage travelers to stay local and explore the local area. Additionally, the restaurant is a welcome location to stop while exploring Alaska.

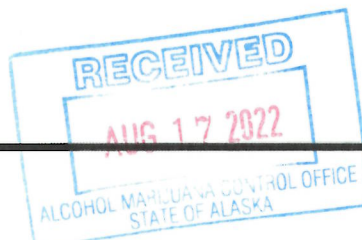
2.2. Explain how the facility was/will be constructed or improved as required by AS 04.11.400(d)(1):

The Draft House and Lodge will be renovating and update the kitchen, motel rooms as well as the banquet room in order to provide quality food and lodging experience.

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  
**Form AB-37: 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?

23

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)?

23

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".

There is a restaurant on the property that serves breakfast, lunch, and dinner. The restaurant currently holds 79 people at max capacity.

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".

None





Alcohol and Marijuana Control Office  
550 W 7<sup>th</sup> 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-37: Tourism Statement**

**Section 3 – Certification**

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

Initials

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

*AMB*

*Greenleaf Kendall m*  
Printed name of licensee/affiliate

*[Signature]*  
Signature of licensee/affiliate





Alaska Alcoholic Beverage Control Board

## Form AB-01: Transfer License Application

### Why is this form needed?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04 of Alaska Statutes** and **Chapter 304 of the Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.105.

This form must be completed and submitted to AMCO's Anchorage office, along with all other required forms and documents, before any license application will be considered complete.

### Section 1 – Transferor Information

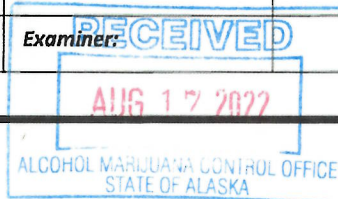
Enter information for the *current* licensee and licensed establishment.

Licensee:	Juice, Inc.	License #:	3999		
License Type:	Beverage Dispensary - Tourism	Statutory Reference:	04.11.400(d)		
Doing Business As:	Alaska Steakhouse and Motel				
Premises Address:	Milepost 265 Richardson Hwy				
City:	Delta Junction	State:	AK	ZIP:	99737
Local Governing Body:	City of Delta Junction				

### Transfer Type:

- Regular transfer  
 Transfer with security interest  
 Involuntary retransfer

OFFICE USE ONLY			
Complete Date:		Transaction #:	
Board Meeting Date:		License Years:	
Issue Date:		Examiner:	





Alaska Alcoholic Beverage Control Board

**Form AB-01: Transfer License Application**

**Section 2 – Transferee Information**

Enter information for the *new* applicant and/or location seeking to be licensed.

Licensee:	The Big Delta Brewing Company, LLC				
Doing Business As:	The Draft House and Lodge				
Premises Address:	Milepost 265 Richardson Hwy				
City:	Delta Junction	State:	AK	ZIP:	99737
Community Council:	The City				

Mailing Address:	PO Box 864				
City:	Delta Junction	State:	AK	ZIP:	99737

Designated Licensee:	Kendall and Barbara Greenleaf				
Contact Phone:	3157673469	Business Phone:	9078952222		
Contact Email:	kendall.greenleaf@gmail.com				

Seasonal License?    Yes     No     If "Yes", write your six-month operating period: \_\_\_\_\_

**Section 3 – Premises Information**

Premises to be licensed is:

an existing facility     a new building     a proposed building

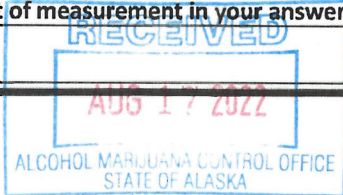
The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

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.

1.5 miles

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.

1.5 miles





Alaska Alcoholic Beverage Control Board

**Form AB-01: Transfer License Application**

**Section 4 – Sole Proprietor Ownership Information**

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5.  
 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

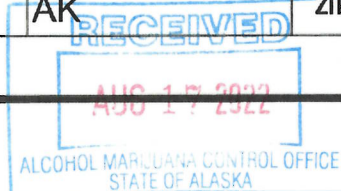
Name:					
Address:					
City:		State:		ZIP:	

**Section 5 – 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 6.  
 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:	Kendall Greenleaf				
Title(s):	Member	Phone:	907895222	% Owned:	50
Address:	PO Box 1532, Mile 265 Richardson Hwy				
City:	Delta Junction	State:	AK	ZIP:	99737







Alaska Alcoholic Beverage Control Board

**Form AB-01: Transfer License Application**

Entity Official:	Barbara E. Greenleaf				
Title(s):	Member	Phone:	907895222	% Owned:	50
Address:	PO Box 1532, Mile 265 Richardson Hwy				
City:	Delta Junction	State:	AK	ZIP:	99737

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

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 #:	10109830	AK Formed Date:	07/1/2019	Home State:	Alaska
Registered Agent:	Andrew Mitton	Agent's Phone:	9072505132		
Agent's Mailing Address:	405 W 36th Ave, Suite 200				
City:	Anchorage	State:	AK	ZIP:	99503

Residency of Agent:

Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?





Alaska Alcoholic Beverage Control Board  
**Form AB-01: Transfer License Application**

**Section 6 – Other Licenses**

Ownership and financial interest in other alcoholic beverage businesses:

Yes No

Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?

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):

5959 - Big Delta Brewing Company, LLC; Brewpub; Kendall and Barbara Greenleaf  
5997 - Big Delta Brewing Company, LLC; Restuarant EAting Place/Public Convenience; Kendall & Barbara Greenleaf

**Section 7 – 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:

Kendall Greenleaf kendall.greenleaf@gmail.com 315-767-3469  
Barbrara Greenleaf barbara.e.coe@gmail.com 720-326-5277





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

Alaska Alcoholic Beverage Control Board  
**Form AB-01: Transfer License Application**

**Section 8 - Transferor Certifications**

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a controlling interest of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

*Law O'Mallea*  
Signature of transferor

Law O'Mallea (President, Director, Shareholder, Secretary and Treasurer)  
Printed name of transferor

Subscribed and sworn to before me this 3<sup>rd</sup> day of May, 2022.

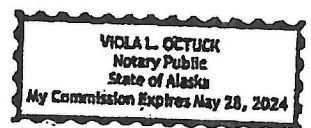
*Viola L. Octuck*  
Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 5-28-2024

*N/A Law*  
Signature of transferor

Printed name of transferor



Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

Notary Public in and for the State of \_\_\_\_\_.

My commission expires: \_\_\_\_\_





# Alaska Alcoholic Beverage Control Board Form AB-01: Transfer License Application

## Section 9 - Transferee 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.

KGB

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

KGB

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.

KGB

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.

KGB

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

KGB

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.

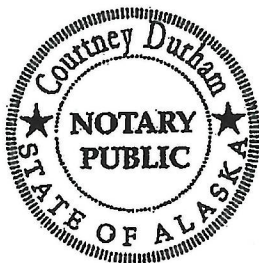
*Kendall Greenleaf*

Signature of transferee

**Kendall Greenleaf, Member**

Printed name

Subscribed and sworn to before me this 18 day of May, 2022.



*Courtney Durham*  
Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 5-23-2023





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

**Alaska Alcoholic Beverage Control Board**  
**Form AB-01: Transfer License Application**

**Section 9 – Transferee 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.

BB

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

BB

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.

BB

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.

BB

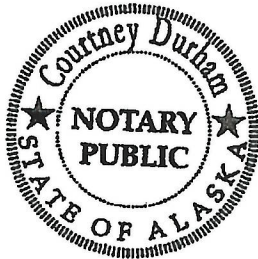
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

BB

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

BB

Barbara Greenleaf  
 Signature of transferee  
 Barbara Greenleaf, Member  
 Printed name

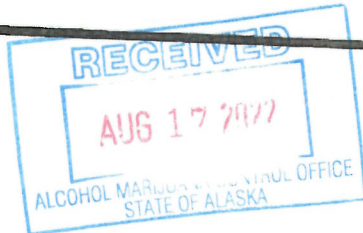


Courtney Durban  
 Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 5-23-2023

Subscribed and sworn to before me this 18 day of May, 2022





## Alaska Alcoholic Beverage Control Board Form AB-02: Premises Diagram

### Why is this form needed?

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 may not be 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 Anchorage office before any license application will be considered complete.

Yes No

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.



### Section 1 – Establishment Information

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

Licensee:	The Big Delta Brewing Company, LLC	License Number:	3999		
License Type:	Beverage Dispensary - Tourism				
Doing Business As:	The Draft House and Lodge				
Premises Address:	265 Richardson Hwy				
City:	Delta Junction	State:	AK	ZIP:	99737





Alcohol and Marijuana Control Office  
550 W 7<sup>th</sup> Avenue, Suite 1600  
Anchorage, AK 99501  
[alcohol.licensing@alaska.gov](mailto: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

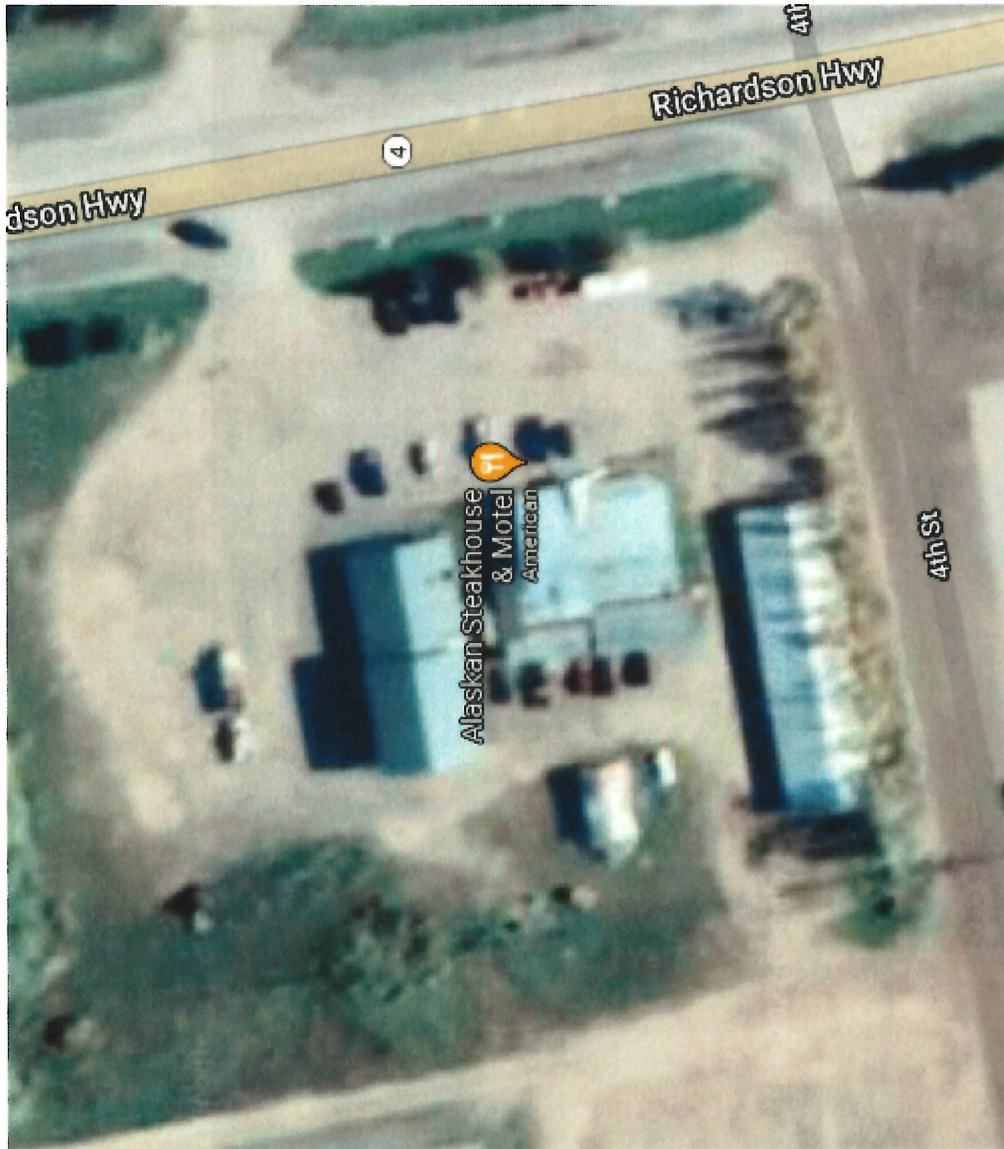
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### Section 2 – Detailed Premises Diagram

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.

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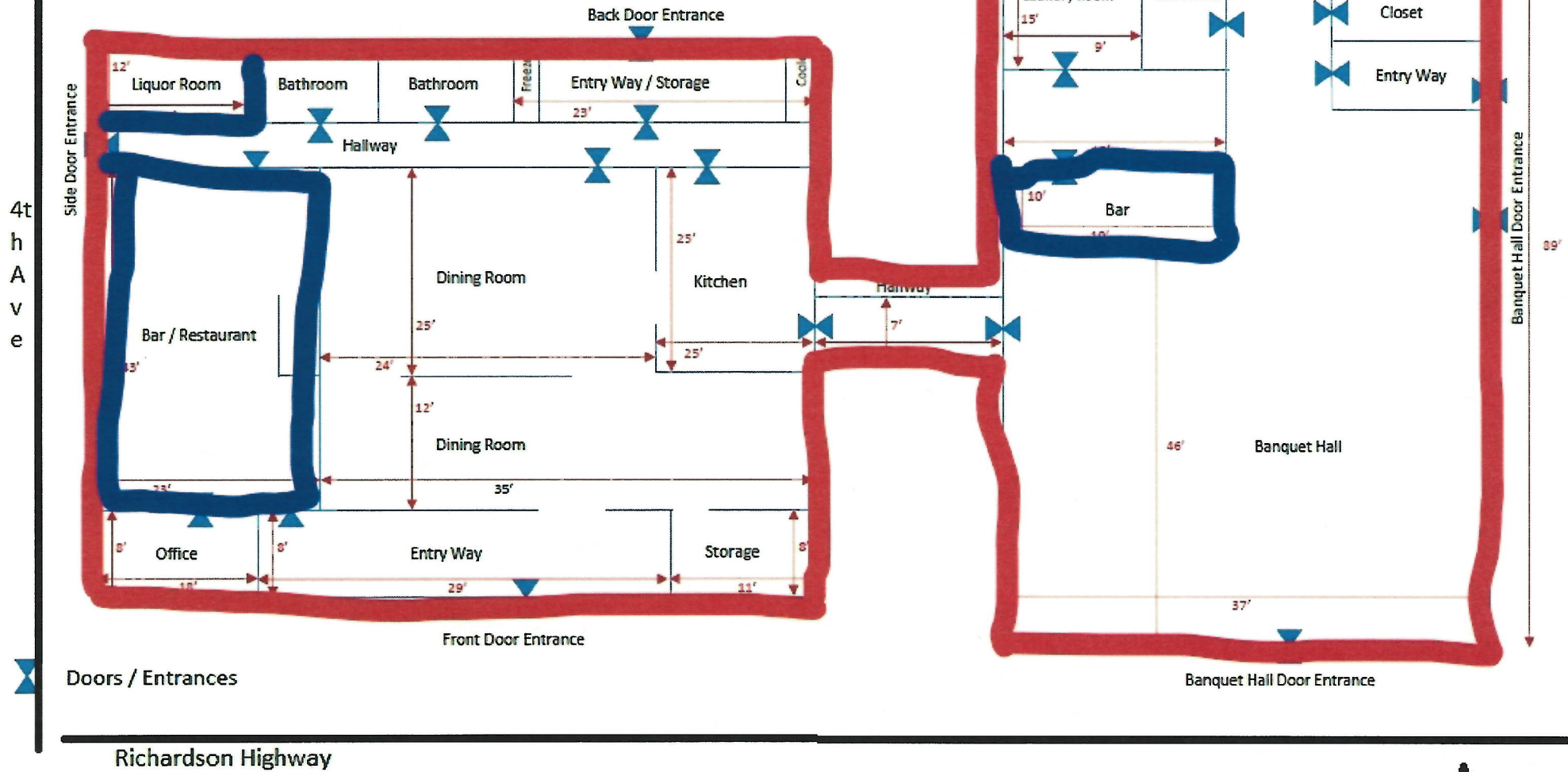


RECEIVED  
AUG 17 2022  
ALCOHOL MARCUANA CONTROL OFFICE  
STATE OF ALASKA





Juice, Inc. d/b/a Alaskan Steakhouse and Motel  
Liquor License # 3999





**Alaska Alcoholic Beverage Control Board**

**Form AB-03: Restaurant Designation Permit Application**

**Why is this form needed?**

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 entrées prepared on-site and offered to patrons, and copy of the DEC Food Service Permit (or corresponding DHHS documentation for licenses located in the Municipality of Anchorage) must accompany this form. Applicants should review AS 04.16.049 – AS 04.16.052 and 3 AAC 304.715 – 3 AAC 304.795. All fields of this form must be completed. The required \$50 permit fee may be made by credit card, check, or money order.

**Section 1 – Establishment Information**

Enter information for licensed establishment.

Licensee:	The Big Delta Brewing Company, LLC				
License Type:	Beverage Dispensary - Tourism	License Number:	3999		
Doing Business As:	The Draft House and Lodge				
Premises Address:	Milepost 265 Richardson Hwy				
City:	Delta Junction	State:	AK	ZIP:	99737
Contact Name:	Kendall Greenleaf	Contact Phone:	315-767-3469		

**Section 2 – Type of Designation Requested**

This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

- Dining after standard closing hours: AS 04.16.010(c)
- Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)
- Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)
- Employment for persons 16 or 17 years of age: AS 04.16.049(c)  
 NOTE: Under AS 04.16.049(d), this permit is not required to employ a person 18 - 20 years of age.

OFFICE USE ONLY	
Transaction #:	Initials:





Alaska Alcoholic Beverage Control Board

**Form AB-03: Restaurant Designation Permit Application**

**Section 3 – Minor Access**

Review AS 04.16.049(a)(2); AS 04.16.049(a)(3); AS 04.16.049(c)

List where within the premises minors are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Minors will only be allowed in the dining area. OR Minors will only be employed and present in the Kitchen.)

Minors will only be allowed in the dining area with a guardian or adult, over the age of 21. A Licensed manager will be present at all times. Alcohol will be locked up so that minors cannot access it.

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.

Lock up alcohol to prevent access by customers. Prepare drinks for both servers and customers at the bar only. Wait staff will have appropriate training and only those 18 and over can serve. Cameras are also installed in the restaurant. All managers and servers will be TAM or TIPS certified.

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

Yes  No

**Section 4 – DEC Food Service Permit**

Per 3 AAC 304.910 for an establishment to qualify as a Bona Fide Restaurant, a Food Service Permit or (for licenses within the Municipality of Anchorage) corresponding Department of Health and Human Services documentation is required.

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

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

Initials

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

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





Alaska Alcoholic Beverage Control Board

**Form AB-03: Restaurant Designation Permit Application**

**Section 5 – Hours of Operation**

Review AS 04.16.010(c).

Enter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/pm:

Monday: Closed  
Tuesday: 6:00am to 3:00pm  
Wednesday: 6:00am to 3:00pm  
Thursday: 6:00am to 3:00pm; Bar open 2:00pm to 7:00pm  
Friday: 6:00am to 3:00pm; Bar open 2:00pm to 7:00pm  
Saturday: 6:00am to 3:00pm  
Sunday: 6:00am to 3:00pm

**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:

Music, TV, Paint Nights

Food and beverage service offered or anticipated is:

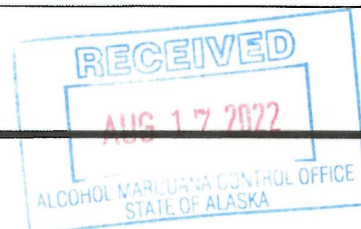
table service

buffet service

counter service

other

If "other", describe the manner of food and beverage service offered or anticipated:





Alaska Alcoholic Beverage Control Board  
**Form AB-03: Restaurant Designation Permit Application**

**Section 7 – Certifications and Approvals**

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

Initials

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

WJ

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

WJ

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.

WJ

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.)*

WJ

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

WJ

**Kendall Greenleaf**

Printed name of licensee

*[Handwritten Signature]*  
Signature of licensee

**Local Government Review (to be completed by an appropriate local government official):**

Approved

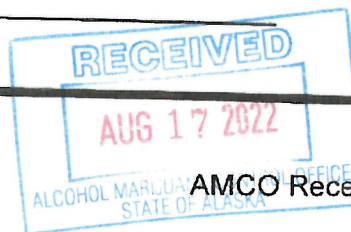
Denied

Signature of local government official

Date

Printed name of local government official

Title



AMCO Received 6/22/22



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:**





## Alaskan Steakhouse

### Lunch Menu

<b>BLT - Applewood Smoked Bacon, Lettuce, Tomato and Mayo</b>	<b>\$13.00</b>
<b>California BLT - Classic BLT with Avocado and Garlic Lime Aioli</b>	<b>\$14.00</b>
<b>Alaskan Club - Ham, Turkey, Bacon, Cheddar and Swiss Cheeses with Lettuce, Tomato and Mayo on Your Choice of Bread</b>	<b>\$16.00</b>
<b>Grilled Chicken Breast Sandwich with Lettuce, Tomato and Mayo</b>	<b>\$16.00</b>
<b>Chicken Wrap - Grilled Chicken Breast, Bacon, Cheddar Cheese, Lettuce, Microgreens, Tomato and Red Onions with your choice of Ranch, Boom Boom, Siracha Ranch or Garlic Lime Aioli Sauce</b>	<b>\$18.00</b>
<b>Big D Burger - 1/2 Pound Patty on a Spent Grain Bun, Local Microgreens, Avocado, Tomato, Pickled Red Onions, Applewood Smoked Bacon, Cheddar Cheese And Garlic Lime Aioli</b>	<b>\$17.00</b>
<b>The Brew Burger - 1/2 Pound Patty, BBQ Sauce, Applewood Smoked Bacon, Cheddar Cheese and Beer Battered Jalapenos</b>	<b>\$17.00</b>
<b>Meatloaf Burger - 1/2 Pound Patty, Sauteed Onions and a Brown Sugar/Ketchup Glaze</b>	<b>\$17.00</b>
<b>The Bourbon Burger - 1/2 Pound Patty, Swiss Cheese and a Bourbon/Bacon Jam</b>	<b>\$17.00</b>
<b>AK Slammer - 1/2 Pound Ground Beef with Bacon, Onions, Mushrooms, Cheddar Cheese Topped with our AK Slammer Sauce. Served on a Hoagie Roll</b>	<b>\$17.00</b>
<b>Build Your Own Burger</b>	<b>\$14.00</b>
1/2 Patty with Lettuce, Tomato, Onions and Pickles	
Add Ons	
Egg \$1.50      Bacon \$2.00	
Mushrooms, Jalapenos OR Avocado \$.25	
Cheddar, Swiss OR Pepper Jack \$1.00	
Guacamole, Boom Boom, Siracha Ranch or Garlic Lime Aioli Sauce \$.25	

**All Burgers Served with Local Grown Ground Beef**

<b>Chicken Tender Basket</b>	<b>\$14.00</b>
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**Above Menu Items Served with Choice French Fries, Side Salad, Cup of Soup, Macaroni or Potato Salad. Sub Curly Fries for \$1.00**

#### Kids Menu

<b>Jr Burger - 5oz Local Grown Beef with Lettuce, Tomato and Pickles</b>	<b>\$10.00</b>
<b>Chicken Tender Basket</b>	<b>\$7.50</b>
<b>Grilled Cheese - Cheddar Cheese on Your Choice of Bread</b>	<b>\$6.00</b>
<b>Peanut Butter &amp; Jelly Sandwich</b>	<b>\$5.00</b>

**Public Health Advisory: Eggs and Burgers May be Cooked to Order. Consuming Raw or Undercooked Meats, Poultry or Eggs May Increase Your Risk of Food Borne Illness**



### Side Orders

Cup or Bowl of Soup with a Roll	\$4/\$6
Cup of Potato or Macaroni Salad	\$4.00
Basket of Fries or Curly Fries	\$4/\$5
Side Salad	\$4.00

### Beverages

Coffee	\$2
Iced Tea - Sweet and Unsweet	\$2.50
Hot Tea	\$2.50
Hot Chocolate	\$2.50
Milk	\$1.50/\$2.00
Chocolate Milk	\$2.50/\$3.00
Juice (Apple, Orange, Cranberry or Pineapple)	\$3.00/\$4.50
Soda (Pepsi, Diet Pepsi, Mt Dew, Sierra Mist and Lemonade)	\$2.00/\$2.50
Moose Tooth Root Beer (Can)	\$2.00
49 <sup>th</sup> State Cream Soda - Wild Blueberry or Spruce Tip (Can)	\$3.00







## Alaskan Steakhouse

### Breakfast Menu

All Breakfasts are Made with Local Farm Fresh Eggs

Ham Steak and 2 Eggs	\$15.00
Applewood Smoked Bacon and 2 Eggs	\$15.00
Sausage and Eggs - Choice of Links or Local Grown Pork Patties	\$15.00
Corned Beef Hash and 2 Eggs	\$15.00
Country Fried Steak and 2 Eggs	\$16.00
Two Egg Breakfast	\$10.00
Three Egg Breakfast	\$11.00

Garbage Omelet - Three Egg Omelet with Bacon, Ham, Sausage, Green Peppers, Onions, Mushrooms, Tomatoes and Cheddar Cheese	\$17.00
Veggie Omelet - Three Egg Omelet with Green Peppers, Onions, Mushrooms, Tomatoes, Spinach and Cheddar Cheese	\$15.00
Denver Omelet - Three Egg Omelet with Ham, Green Peppers, Onions and Cheddar Cheese	\$14.00

Above Served with Choice of Home Fries, Hash Browns or Grits and Toast or 1 Biscuit & Gravy

#### Build Your Own Omelet or Bowl (3 Eggs) \$13.00

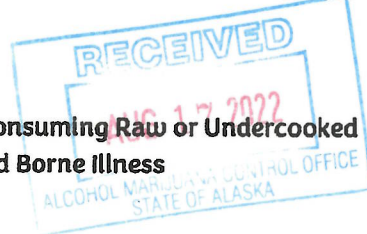
Meats: Ham, Applewood Smoked Bacon or Local Grown Pork Sausage	\$1.00
Veggies: Green Peppers, Onions, Mushrooms, Tomatoes, Avocado, Spinach, Green Chillis or Jalapenos	\$.25
Cheeses: Cheddar, Swiss, or Pepper Jack	\$.50
Sauces: Guacamole, Siracha Ranch, Salsa or Sour Cream	\$.25

Omelets and Bowls are Served with Choice of Home Fries or Hash Browns and Toast or 1 Biscuit & Gravy.

#### Pancakes and French Toast

Cinnamon Chip French Toast - Served with Strawberries, Blueberries and Fresh Whipped Cream	\$12.00
Regular Pancakes - Regular Stack (3 Cakes) or Short Stack (2 Cakes)	\$8.00/\$6.00
Alaska Flour Company Barley Pancakes - Regular Stack or Short Stack	\$11.00/\$9.00
French Toast (3 Slices)	\$9.00
Kids Cakes (2 Baby Cakes)	\$3.00
Kids French Toast (2 Slices)	\$7.00

Public Health Advisory: Eggs and Burgers May be Cooked to Order. Consuming Raw or Undercooked Meats, Poultry or Eggs May Increase Your Risk of Food Borne Illness



## Sides

Old Fashioned Oats	\$5.50
Alaska Flour Company Hot Barley Cereal	\$6.00
Biscuits & Gravy - Full (4 Biscuits) Half (2 Biscuits) Kids (1 Biscuit)	\$10/\$6/\$3
Egg & Cheese Breakfast Sandwich	\$4.50
Add Bacon, Ham or Sausage	\$1.00
Fruit Parfait - Strawberries and Blueberries, Homemade Granola and Greek Yogurt	\$7.00
Fresh Fruit Cup	\$4.00
Toast	\$2.00
Side of Home Fries, Hash Browns or Grits	\$5.50
Cup of Breakfast Gravy	\$3.00
Applewood Smoked Bacon - 4 Slices or 2 Slices	\$5.00/\$2.50
Local Grown Sage Pork Sausage Patties - 2 Patties or 1 Patty	\$5.00/\$2.50
Sausage Links - 4 Links or 2 Links	\$5.00/\$2.50
Ham Steak - Full Steak or Half Steak	\$5.00/\$2.50

Please Ask Your Server About Our Fresh Pastries

## Beverages

Coffee	\$2.00
Hot Tea	\$2.50
Hot Chocolate	\$2.50
Milk	\$1.50/\$2.00
Chocolate Milk	\$2.50/\$3.00
Juice (Apple, Orange, Cranberry or Pineapple)	\$3.00/\$4.50
Iced Tea - Sweet or Unsweet	\$2.50
Soda (Pepsi, Diet Pepsi, Mt Dew, Sierra Mist and Lemonade)	\$2.00/\$2.50
Moose Tooth Root Beer (Canned)	\$2.00
49 <sup>th</sup> State Cream Soda - Wild Blueberry or Spruce Tip (Canned)	\$3.00





# Application for Food Establishment Permit

Alaska Department of Environmental Conservation  
Division of Environmental Health  
Food Safety and Sanitation Program



Permit ID: 6601, 6602

## Section 1- GENERAL INFORMATION (All applicants complete entire section – please print).

Purpose (check one)  New  Information Change  Extensive Remodel  Change of owner/operator  Reactivate

Owner/Business Information	Name of Entity or Owner Responsible for Food Service <b>THE BIG DELTA BREWING COMPANY LLC</b>		AK Business License # <b>2156513</b>	
	Business/Corporate Mailing Address <b>PO BOX 864</b>		City <b>DELTA JUNCTION</b>	State <b>AK</b>
	Business/Corporate Phone <b>315-767-3469</b>		Email <b>bigdeltabrewingcompany@gmail.com</b>	
	Owner(s) or Corporate Officer(s) & Title(s) or Responsible Party <b>Kendall &amp; Barbara Greenleaf</b>		Fax <b>N/A</b>	
Type of Entity <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Other:				
Establishment Information	Establishment Name <b>THE DRAFT HOUSE AND LODGE</b>		Physical Location <b>1205 RICHARDSON HWY</b>	
	Establishment Mailing Address <b>PO BOX 864</b>		City <b>DELTA JUNCTION</b>	State <b>AK</b>
	Establishment Phone <b>907-895-2222</b>		Contact Person <b>KENDALL GREENLEAF</b>	
	Establishment Physical Address <b>1271 RICHARDSON HIGHWAY</b>		City <b>DELTA JUNCTION</b>	State <b>AK</b>

SEATING: (Food Service Only)  N/A  25 or less  26-100  > 101

**TYPE OF OPERATION** Please describe the type of facility you plan to open below (i.e. restaurant, bar, grocery store, etc.)

RESTAURANT WITH BAR

## SECTION 2 – NEW OR EXTENSIVELY REMODELED FACILITIES

a. A plan review will be required if your facility has never been permitted by the Alaska's Food Safety and Sanitation Program; has not had an active permit in the last five years; will be extensively remodeled; or is a new construction. If any of these apply, a Plan Review Application is required to process your application. Have you attached the Plan Review Application?  Yes  No

## SECTION 3 – COMPLETE FOR ALL FOOD ESTABLISHMENTS (Check all that apply)

### FOOD SERVICE ESTABLISHMENTS

a. A copy of your menu will be required. Have you attached a copy of the proposed menu?  Yes  No

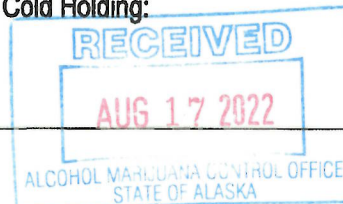
b. Attach appropriate label, placard, or menu notation for the consumer advisories if you serve:  
 Wild Mushrooms  Unpasteurized juices  Farmed halibut, salmon, or sablefish  
 Raw/undercooked animal foods such as beef, shell eggs, lamb, pork, poultry, seafood, and shellfish.

c. Methods of food preparation (check the one that most closely describes the establishment):  
 Assembly of Ready to Eat Foods  Cook and Serve  
 Hot or cold Service for 2 hours or more is done  
 Complex (Preparation 1 day or more in advance, cooling and reheating is done).

d. Style of Service:  Counter Service  Self Service (i.e. buffet line, salad bar)  Table Service  
 Other:

e. Do you plan to operate as a caterer?  Yes  No

If yes, list all the equipment used to protect food from contamination and maintain product temperature during:  
Transportation: Hot or Cold Holding:



Permit ID(s) \_\_\_\_\_

Establishment Name(s) \_\_\_\_\_

f.	Will your food establishment be a <u>kiosk</u> or <u>mobile unit</u> ?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Are employee toilets available within 200 feet? <i>If you have an agreement with another business to use their restrooms, please attach written verification.</i>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	Portable water tanks, plumbing, and hoses are NSF or FDA approved components?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If you have a kiosk, is it located outside of a building?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Will you have a service provide water or remove wastewater? <i>If yes, provide a letter of agreement from water hauler or wastewater hauler outlining services provided and frequency.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

g. Will another permitted food establishment (commissary) provide support to your facility? If yes, attach a copy of the Commissary Agreement.  Yes  No

**FOOD PROCESSORS**

a. A copy of a label for each type of product you will produce is required. Have you attached food labels of each product to be produced?  Yes  No

b. Describe who you will be distributing your product to (i.e. grocery stores, etc):

c. Will you be doing any of the following processes? Check all that apply.

<input type="checkbox"/> Reduced Oxygen Packaging	<input type="checkbox"/> Smoking	<input type="checkbox"/> Other:	
<input type="checkbox"/> Low Acid Canned Foods	<input type="checkbox"/> Curing		
<input type="checkbox"/> Shelf Stable Acidified Foods	<input type="checkbox"/> Dehydrating		

*Be sure to check with your local Environmental Health Officer for any applicable forms and FDA requirements.*

d. Do you have a HACCP Plan?  Yes  No  N/A  
*Required for high hazard food processors such as smoking, curing, acidifying, dehydrating, thermally processing low acid foods, reduced oxygen packaging, etc.*

e. You are required to have a product coding system and a recall plan. Have you attached a copy of the coding system and recall procedures?  Yes  No

**MOBILE RETAIL VENDOR SELLING SEAFOOD**

a. A list of products that you will be selling is required. Have you attached a copy of the list of products?  Yes  No

b. Provide names of suppliers where you will be purchasing your product:

c. Will *all* of your product be prepackaged?  Yes  No

d. Will another permitted food establishment (commissary) provide support to your facility? If yes, attach a copy of the Commissary Agreement.  Yes  No

**MACHINES VENDING POTENTIALLY HAZARDOUS FOODS**


a. Have you attached the label that will be affixed to the front of each machine with name, physical address, and phone number of the permitted food establishment servicing the machine?  Yes  No

**SECTION 4 – Food Managers Certification/Alaska Safe Food Worker Card**

a. Have you attached a copy of a Food Manager's Certification?  Yes  No  N/A  
*The operator of a food establishment that serves and prepares unwrapped or unpackaged food, except for a bar, tavern, or limited food service, must have at least one Certified Food Protection Manager who is involved in the daily operations of the establishment.*

b. Does everyone who works or will work at the food establishment have a Food Worker Card?  Yes  No  N/A  
*An operator of a food establishment shall keep on file a copy of the Food Worker Card issued by the department for each employed food worker and make the copy available to the Department upon request.*

*I declare, under penalty of unsworn falsification, that this application (including any accompanying statements) has been examined by me and to the best of my knowledge and belief is true, correct, and complete. I agree to pay all fees before operating.*

Applicant's Signature  Date 16 Aug 2022

Applicant's Printed Name KENDALL GREENLEAF Title OWNER

