



MEMORANDUM

TO: Alcoholic Beverage Control Board

DATE: April 28, 2022

FROM: Kristina Serezhenkov, OLE

RE: #950 Bristol Bay Red Dog Inn

Requested Action: Transfer Application

Statutory 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 04.11.470: "A person may object to an application for issuance, renewal, transfer of location, or transfer to another person of a license, or for issuance of a permit, by serving upon the applicant and the board the reasons for the objection. The board shall consider the objections and testimony received at a hearing conducted under AS 04.11.510(b)(2) when it considers the application..."

AS 04.11.510(b)(2): "The board may review an application for the issuance, renewal, transfer of location, or transfer to another person of a license without affording the applicant notice or hearing, except...(2) the board may, on its own initiative or in response to an objection or protest, hold a hearing to ascertain the reaction of the public or a local governing body to an application if a hearing is not required under this subsection;"

Staff Rec.: Hold a public hearing; consider the objection by K & L Distributors.

Background: This is a transfer of ownership and dba from Winifred M. Alford dba Naknek Red Dog Inn to Melissa D. Davis dba Bristol Bay Red Dog Inn. The response from the Bristol Bay Borough is still pending.

Attachment: K & L Distributors objection and attached billing statement.

AB-01

AB-02

AB-03



THE STATE
of **ALASKA**
GOVERNOR MIKE DUNLEAVY

Department of Commerce, Community,
and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE
550 West 7th Avenue, Suite 1600
Anchorage, AK 99501
Main: 907.269.0350

April 21, 2022

K & L Distributors

lindaolson@kldistributor.com

License Number:	950
License Type:	Beverage Dispensary
Transferor:	Alphua A & Winifred M. Alford
Transferor Doing Business As:	Naknek Red Dog Inn

☒ Transfer of Ownership Application

☐ Transfer of Controlling Interest

AS 04.11.360(4) requires that the board deny an application for transfer of a license to another person if the transferor has not paid all debts or taxes arising from the conduct of the business licensed under this title unless the transferor gives security for the payment of the debts or taxes satisfactory to the creditor or taxing authority. Our records indicate that you are listed as a creditor or taxing authority for the above license.

We have received an application for transfer of ownership for the above liquor license. For the purposes of AS 04.11.360(4) and in compliance with AS 04.11.280(b), this letter serves to provide written notice and request for status from the above referenced entity regarding the above application (see attached application documents for more information).

Please complete and return this form to the AMCO office at alcohol.licensing@alaska.gov.

NAME: K&L Distributors Linda Olson PHONE: 907-452-8271

Do you have an objection to the transfer of this license?

☒ Yes

☐ No

AMOUNT OWED: \$6,574.66 \$57,597.14

DATE: 4/28/22

COMMENTS: 3/31/22 statement attached

If you have any questions, please send them to alcohol.licensing@alaska.gov.

Sincerely,

Glen Klinkhart
Director, ABC Board

AMCO Received 4/28/22

Remit To:

K&L DISTRIBUTORS ALASKA
 K&L - SOUTHEAST
 945 ELIZABETH ST
 FAIRBANKS AK 99709
 907-452-8271

Statement of Account

Page: 1

Statement Date	3/31/22
Account No.	12275
Terms	CREDIT HOLD
Balance Due:	\$57,597.14
Payment Due:	3/31/22

Payment must be received within terms. Late charges
 month (18% per annum) will be charged to all past du

Statement To:

NAKNEK RED DOG INN
 ALPHUS & W ALFORD
 BOX 87
 NAKNEK AK 99633

Ship To:

NAKNEK RED DOG INN
 LOT 26 FELIX TONER PLT
 NAKNEK AK 99633

Current	31 - 60 Days	61 - 90 Days	91-120 Days	121 + Days
.00	.00	.00	.00	57597.14

Invoice	Date	Original Amt.	Payment/Adj.	Remainig Amt.	Days Over
276554	6/10/21	9067.90	1368.48CR	7699.42	0294
276555	6/10/21	14428.62	.00	14428.62	0294
277130	6/11/21	1765.64	.00	1765.64	0293
277129	6/11/21	4044.59	.00	4044.59	0293
284878	6/30/21	785.54	.00	785.54	0274
291677	7/16/21	1937.20	.00	1937.20	0258
291678	7/16/21	1595.94	.00	1595.94	0258
309886	8/31/21	4272.00	.00	4272.00	0212
310523	9/01/21	2279.50	.00	2279.50	0211
310524	9/01/21	18788.69	.00	18788.69	0211

Balance Due: \$57,597.14

AMCO Received 4/28/22

From: [Linda Olson](#)
To: [Alcohol Licensing, CED ABC \(CED sponsored\)](#)
Subject: RE: #950 dba Naknek Red Dog Inn- Creditors Notice
Date: Thursday, April 28, 2022 5:42:44 PM
Attachments: [image001.png](#)
[SFairbanks22042815101.pdf](#)

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Linda Olson

Alaska Credit Manager

Office 907-328-0309

Cell 907-347-2242

Fax 907-456-5571

lindaolson@kldistributor.com



From: Alcohol Licensing, CED ABC (CED sponsored) <alcohol.licensing@alaska.gov>
Sent: Thursday, April 21, 2022 9:43 AM
To: Linda Olson <lindaolson@kldistributor.com>
Cc: Alcohol Licensing, CED ABC (CED sponsored) <alcohol.licensing@alaska.gov>
Subject: #950 dba Naknek Red Dog Inn- Creditors Notice

Good morning,

I have attached the Creditors Notice for the above referenced license and the AB-11 form for your consideration. Please return the creditors notice to our office when ready.

Thank you,

Kristina Serezhenkov
Licensing Examiner
Alcohol and Marijuana Control Office
th



Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 2800
Anchorage, AK 99501
Alcohol Licensing Division
www.alcoholcontrol.alaska.gov
Phone: 907.266.1256

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

What is this form?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review Title 04 of Alaska Statutes and Chapter 304 of the Alaska Administrative Code. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.125.

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 – Transferor Information

Enter information for the current licensee and licensed establishment.

Licensee:	Alvin A. & Winifred M. Alford	License #:	950
License Type:	Beverage Dispensary	Statutory Reference:	AS 04.11.090
Doing Business As:	Naknek Red Dog Inn		
Premises Address:	Lot 26 Felix Toner Plat		
City:	Naknek	State:	AK
		Zip:	99633
Local Governing Body:	Bristol Bay Borough		

Transfer Type:

- ☒ Regular transfer
☐ Transfer with security interest
☐ Voluntary retransfer

OFFICE USE ONLY

Complete Date:	4-21-22	Transaction #:	100061975, 61977
Board Meeting Date:	6-28-22	License Years:	21-22
Issue Date:		SR#:	KRS



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:	Melissa D. Davis				
Doing Business As:	Bristol Bay Red Dog Inn				
Premises Address:	Lot 26 Felix Turner Plat				
City:	Naknek	State:	AK	ZIP:	99633
Community Council:					

Mailing Address:	P.O. Box 324				
City:	Naknek	State:	AK	ZIP:	99633

Designated Licensee:	Melissa D. Davis			
Contact Phone:	(907) 469-3485	Business Phone:	(907) 469-4315	
Contact Email:	melissadavis@gmail.com : bristolbayred doginn@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 tavern) 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.

3,400 feet or .64 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.

1,350 feet or .25 miles



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

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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:	Mellisa D. Davis				
Address:	P.O. Box 324				
City:	Naknek	State:	AK	ZIP:	99633

This individual is an: ☐ applicant ☒ affiliate

Name:	Dylan M. Mancuso				
Address:	P.O. Box 324				
City:	Naknek	State:	AK	ZIP:	99633

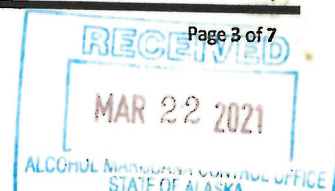
Section 5 – Entity Ownership Information

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





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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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

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

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

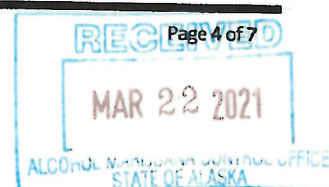
This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

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

Residency of Agent:

Yes No

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

☐ ☐



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Anchorage, AK 99501
alcohol.licensing@alaska.gov
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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):

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:

Lynn Johnson --- has been the manager of the licensed establishment since 1972



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.

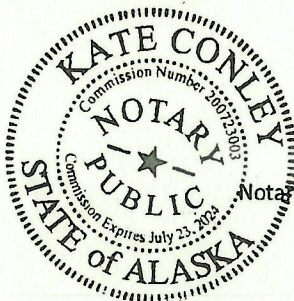
[Handwritten signature]

Signature of transferor

Winifred ALFORD

Printed name of transferor

Subscribed and sworn to before me this 6 day of November, 20 20.



[Handwritten signature]

Signature of Notary Public

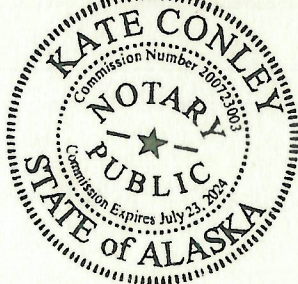
Notary Public in and for the State of Alaska

My commission expires: 7/23/2024

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this 6 day of November, 20 20.



[Handwritten signature]

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 7/23/2024



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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.

nda

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

nda

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.

nda

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.

nda

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

nda

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.

Mellisa Davis
Signature of transferee

Mellisa Davis
Printed name

Subscribed and sworn to before me this 16th day of November, 2020.



[Signature]
Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 7/23/2024





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

Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

What is this form?

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

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

Yes No

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

☒ ☐

Section 1 – Establishment Information

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

Licensee:	Mellisa D. Davis	License Number:	950
License Type:	Beverage Dispensary		
Doing Business As:	Bristol Bay Red Dog Inn		
Premises Address:	Lot 26 Felix Toner Plat		
City:	Naknek	State:	AK
		ZIP:	99633



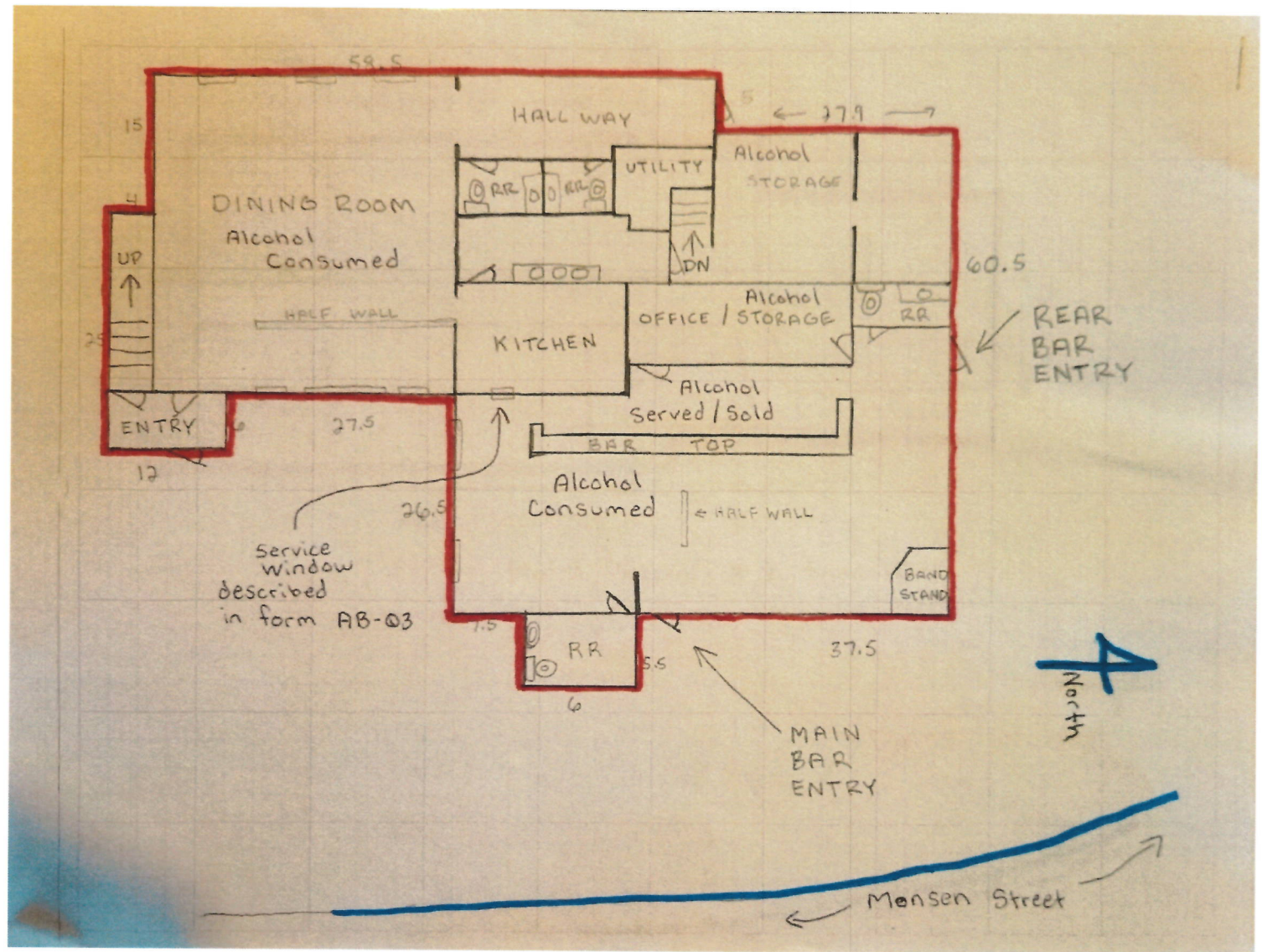
Alcohol and Marijuana Control Office
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Phone: 907.269.0350

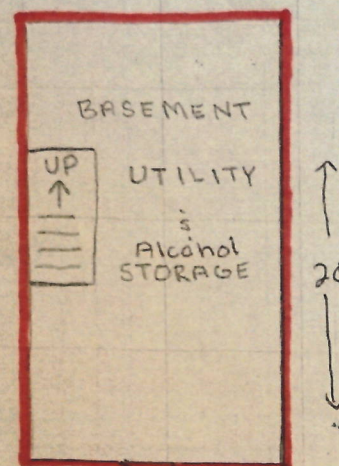
Alaska Alcoholic Beverage Control Board
Form AB-02: Premises Diagram

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.

A large, empty rectangular box with a black border, intended for the user to draw the premises diagram.





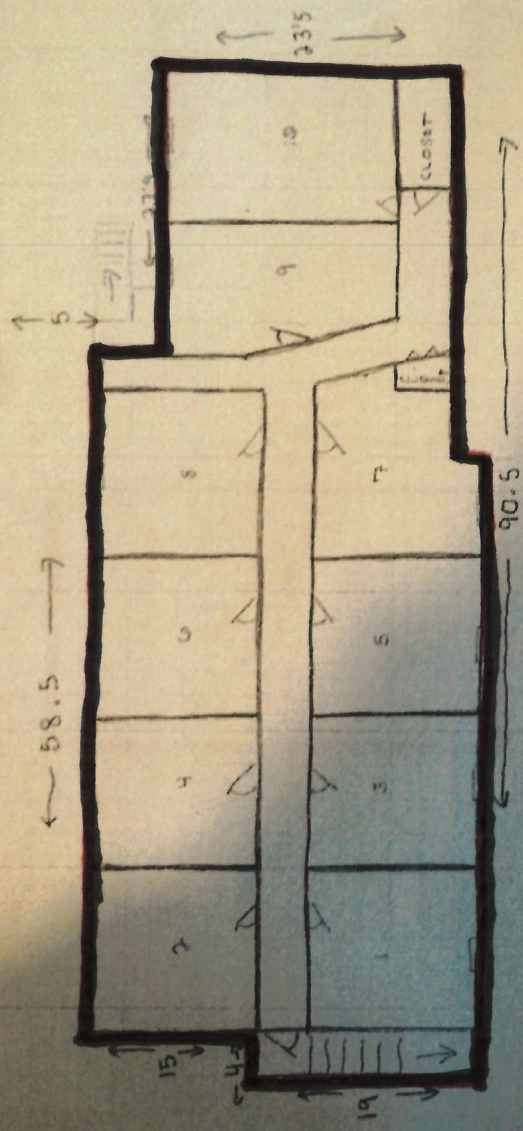
← 19'2 →

Basement is partially below ground.
With all the utility works (boiler, hot water heater,
pressure tank etc.)

It is difficult to get a precise measurement

Dimensions are measured
on the interior

← MONSEN STREET →



2nd Floor
Hotel Rooms #1 thru #10

4
North

MONSEN STREET



Alaska State
ALASKA STATE

RECEIVED

MAR 22 2021

ALASKA STATE CONTROL OFFICE
STATE OF ALASKA



RECEIVED

MAR 22 2021

ALCOHOL AND DRUG CONTROL OFFICE
STATE OF ALASKA



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

Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

What is this form?

A restaurant designation permit application is required for a licensee desiring designation under 3 AAC 304.715 – 3 AAC 304.795 as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049. Designation will be granted only to a holder of a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license, and only if the requirements of 3 AAC 304.305, 3 AAC 304.725, and 3 AAC 304.745, as applicable, are met. A menu or expected menu listing the meals, including entrees prepared onsite and offered to patrons, and copy of the DEC Food Service Permit (or corresponding DHHS documentation for licenses located in the Municipality of Anchorage) must accompany this form. Applicants should review AS 04.16.049 – AS 04.16.052 and 3 AAC 304.715 – 3 AAC 304.795. All fields of this form must be completed. The required \$50 permit fee may be made by credit card, check, or money order.

Section 1 – Establishment Information

Enter information for licensed establishment.

Licensee:	Mellisa D. Davis		
License Type:	Beverage Dispensary	License Number:	950
Doing Business As:	Bristol Bay Red Dog Inn		
Premises Address:	Lot 26 Felix Toner Plat		
City:	Naknek	State:	AK
		ZIP:	99633
Contact Name:	Mellisa Davis	Contact Phone:	907 469 2735

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. ☒ Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)
3. ☒ 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. ☒ 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:



Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

alcohol.licensing@alaska.gov

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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 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, as guests, will be allowed in the dining room only.
Employed Minors will have access to the dining room and Kitchen only.

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.

* Alcohol is only served in the dining area thru a service window to the bar by a Char/TAP certified bartender, trained to check IDs

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>

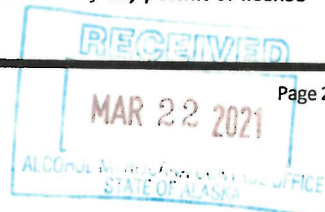
IF you are unable to certify the below statement, please discuss the matter with the AMCO office:

Initials

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

Wdd

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



Form AB-03: Restaurant Designation Permit Application

Section 3 – Minor Access

List where within the premises minors are anticipated to have access in the course of either dining or employment as designated in Section 2.

In reference to the main floor and basement of the Premises Diagram in submitted form AB-02, minors have potential access to alcohol in the storage room behind the bar- thru the kitchen, and in the basement. Only employees are allowed in the back, and any minors employed (as dishwashers/bussers/food servers) will be under the supervision of CHARR/TAP certified adults. Furthermore, all alcohol stored is monitored under 24hr video surveillance.

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.

Minors employed in the dining room/kitchen will only have access to alcohol stored in the basement and storage room as described in the diagram attached to submitted form AB-02. All underage employees in the dining room/kitchen will be supervised by CHARR/TAP certified adult employee at all times.

Minors will not be allowed to take the order of, sell, or serve alcohol, nor buss or retrieve empty vessels that contained alcohol.

All orders for alcohol in the dining room will be served by CHARR/TAP certified adults thru the service window shown in the diagram in form AB-02.

Minors as guests are allowed, unaccompanied, in the dining room only. Minors, with a legal guardian may dine in the barroom between the hours of 12pm and 9pm. After 9pm, minors are not allowed in the barroom at all.

Minors as guests will be allowed in the dining room only. Minors accompanied by a legal guardian will be allowed to dine in the barroom between the hours of 12pm till 9pm. After 9pm minors are not allowed in the barroom at all.

Minors in our employ will be supervised at all times by a CHARR/TAP certified adult. Alcohol inventory where minors have potential access is tallied daily and all alcohol storage is under 24hr video surveillance as well.



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:

The Restaurant Dining Room hours of operation are 12pm to 9pm Tuesday thru Sunday. Closed on Mondays.

Food Service in the Bar Room hours are 12pm til 12am, Tuesday thru Sunday.

The Kitchen is closed on Mondays.

The Bar itself is open Monday thru Sunday, 12pm til 2am.

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:

We have a bandstand in the Bar and host open mics where various artists and musicians perform, Friday's and Saturday's, 7pm til 12am.

We haven't yet, but in the summer months, plan on hosting a simular open mic in the Restaurant side that could be all ages, Friday's and Saturdays, 7pm to 9pm and dinner matinee's with just one performer Friday's and Saturday's, 4pm til 7pm.

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:



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

Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 7 – Certifications and Approvals

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

Initials

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



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.



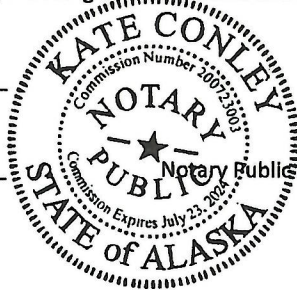
I have included with this application a copy of the most recent AB-02 or AB-14 for the premises to be permitted.
(AB-03 applications that accompany a new or transfer license application will not be required to submit an additional copy of their premises diagram.)



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

Printed name of licensee



Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 7/23/2024

Subscribed and sworn to before me this 6th day of November, 2020.

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





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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

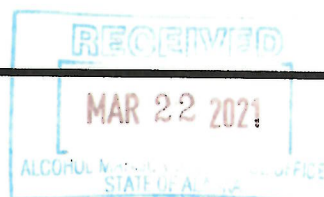
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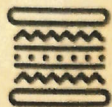
Signature of AMCO Director

Printed name of AMCO Director

Date

Limitations:





RED DOG KITCHEN

BANGIN BURGERS

Bacon Cheese Burger	\$15
Four Cheese Burger	\$15
Blue Cheese Burger	\$15
Mushroom Swiss Burger	\$15
Max's Aloha Burger	\$15

ADD FRIES
TOTS

OR

O'RINGS
TO ANY
BURGER OR
SANDWICH

\$3

SUPER SANDWICHES

Chicago Style Italian Beef	\$15
Shrimp Po Boy	\$20
Philly Cheese Steak	\$15
Fried Chicken Club	\$15
Buffalo Chicken Club	\$15
BLT	\$15
Grilled Ham & Cheese	\$15

SNACKS

Mozzarella sticks	\$12
French fries	\$6
Tots	\$6
Onion Rings	\$7
Loaded Fries or Tots	\$12
Teddy's Tasty Tots	\$20
Chicken Nuggets	\$12
Chicken strips	\$15
Small Soup	\$6
Large Soup	\$12

EAT YOUR GREENS

ALL SALADS \$20

GRILLED CHICKEN
CRISPY CHICKEN
GRILLED SHRIMP
CRISPY SHRIMP

ALL SALADS ARE SERVED OVER A BED OF MIXED GREENS
TOMATOES PEPPERS CUCUMBER
RED ONION CHEDDAR CHEESE & BACON
RANCH BLUE CHEESE ITALIAN 1000 ISLAND

FEELING EXTRA

Extra Bacon	\$4
Extra Ham	\$4
Extra Burger Pattie	\$6
Extra Cheese	\$3
Extra Mushroom	\$3
Side Ranch	\$.75
Side Blue Cheese	\$.75
Side BBQ	\$.75
Side Cheese Sauce	\$2.00

FEED THE KIDS!

ALL KID MEALS COME WITH FRIES!

Grilled Cheese	\$8
Hamburger	\$8
Cheeseburger	\$10
6 piece Chicken Nuggets	\$8

THE RED DOG
KITCHEN
OPEN!

TUESDAY-SUNDAY

4-10PM

CLOSED MONDAYS

CALL 246 4215

FOR TAKE OUT!

CONSUMING RAW OR UNDERCOOKED MEATS, POULTRY, SEAFOOD, SHELLFISH, OR EGGS
MAY INCREASE YOUR RISK OF FOODBORNE ILLNESS ESPECIALLY IF YOU HAVE MEDICAL
CONDITIONS.





**Alaska Food Code
2021 Establishment Permit**

Division of Environmental Health
Food Safety & Sanitation Program

Permit Number: 6334
Issued to: ALPHUS & WINNIE ALFORD
For: Red Dog Restaurant
For Operation of: FF-1 Food Service
Located at: 2 Monsen ST Naknek, AK 99633

This permit, issued under the provisions of 18 AAC 31, is valid until the noted expiration date or unless suspended or revoked by the department.

This permit is not transferable for change of ownership, facility location, or type of operation. It must be posted in plain view in the establishment and is the property of the State of Alaska.

Expiration Date:
December 31, 2021

Program Manager:

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

1-87-SAFE-FOOD

(in Anchorage call 334-2560)

