

Department of Commerce, Community, and Economic Development

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

MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: June 8, 2022

FROM: Kristina Serezhenkov, OLE RE: #5772 Northern China Restaurant

Statutory & Regulation Authority:

AS 04.11.480(a) A local governing body may protest the issuance, renewal, relocation, or transfer to another person of a license by sending the board and the applicant a protest and the reasons for the protest within 60 days of receipt from the board of notice of filing of the application. A protest received after the 60-day period may not be accepted by the board, and in no event may a protest cause the board to reconsider an approved renewal, relocation, or transfer. The local governing body may protest the continued operation of a license during the second year of the biennial license period by sending the board and the licensee a protest and the reasons for the protest by January 31 of the second year of the license. The procedures for action on a protest of continued operation of a license are the same as the procedures for action on a protest of a renewal application. The board shall consider a protest and testimony received at a hearing conducted under AS 04.11.510(b)(2) or (4) when it considers the application or continued operation, and the protest and the record of the hearing conducted under AS 04.11.510(b)(2) or (4) shall be kept as part of the board's permanent record of its review. If an application or continued operation is protested, the board shall deny the application or continued operation unless the board finds that the protest is arbitrary, capricious, and unreasonable.

AS 04.11.510(b)(1): "if an application is denied, the notice of denial shall be furnished the applicant immediately in writing stating the reason for the denial in clear and concise language; the notice of denial must inform the applicant that the applicant is entitled to an informal conference with either the director or the board, and that, if not satisfied by the informal conference, the applicant is then entitled to a formal hearing conducted by the office of administrative hearings (AS 44.64.010); if the applicant requests a formal hearing, the office of administrative hearings shall adhere to AS 44.62.330 — 44.62.630 (Administrative Procedure Act); all interested persons may be heard at the hearing and unless waived by the applicant and the board, the formal hearing shall be held in the area for which the application is requested"

3 AAC 304.145(h) "The board may uphold a protest of an application or continued operation with a single abeyance period not to exceed 180 days if the local governing body indicates that the protest is subject to rescission and that it will be withdrawn if the applicant meets conditions set by the local governing body. If the local governing body notifies the board within the period of the abeyance that the protest has been removed, the application or continued operation is approved when all other applicable requirements have been met. If the local governing body has not notified the board within the period of the abeyance that it has removed the protest, the application or continued operation is denied. The period of abeyance may not be extended or renewed."

Background: This transfer of ownership application was deemed complete on April 21, 2022. On June 8, 2022, the Municipality of Anchorage protested the transfer application pending certification from the Anchorage Fire Department and payment in full of taxes owed to the Municipality.

Staff Recommendation: Consider the Municipality of Anchorage protest and determine if the protest is arbitrary, capricious and unreasonable. If the protest is deemed not to be arbitrary, capricious and unreasonable then deny the application with a 180-day abeyance.

Attachment:

Municipality of Anchorage Protest AB-01 AB-02 AB-03 P.O. Box 196650 Anchorage, Alaska 99519-6650 Telephone: (907) 343-4316 Fax: (907) 249-7533 www.muni.org/clerklicensing

Office of the Municipal Clerk Licensing

June 8, 2022

Ms. Carrie Craig Alaska Alcohol and Marijuana Control Office 550 W 7th Ave. Ste. 1600 Anchorage, Alaska 99501

RE: Anchorage Assembly Action on Liquor Licenses

Dear Ms. Craig:

The Anchorage Municipal Assembly at its regular meeting on June 7, 2022, took the following actions:

WAIVE OF PROTEST

Renewal Liquor License - AM 325-2022

- **Beverage Dispensary License:**
 - McGinleys Alaskan Pub, LL#4545;
- Restaurant/Eating Place License:

The Writer's Block Bookstore & Café, LL#5610: Guido's Pizza, LL#2636:

- Package Store License:
 - Crush, LL#4779;
 - Crush Bottle Shop, LL#4820;
- Wholesale-General License:
 - The Odom Corporation, LL#5714

PROTEST

Transfer Liquor License

Restaurant/Eating Place

Northern China Restaurant, LL#5772 - AR 2022-188

Pending certification from the Anchorage Fire Department and payment in full of taxes owed to the Municipality.

-Per 3 AAC 304.145(d) the applicant was given the opportunity to defend their application by public hearing at the June 7, 2022 Assembly Meeting.

New Liquor License

Brewpub

Aviator, LL#6043 - AR 2022-189

Pending approval by the Assembly of a special land use permit.

-Per 3 AAC 304.145(d) the applicant was given the opportunity to defend their application by public hearing at the June 7, 2022 Assembly Meeting.

If you require additional information or if I can be of any assistance, please contact me.

Cordially,

Mandy Honest Mandy Honest Digitally signed by Mandy Honest DN: cn=Mandy Honest, o=Municipality of Anchorage, ou=Municipal Clerk's Office, email=miranda.honest@anchorageak.gov, c=US Date: 2022.06.08 10:15:49 -08'00'

Mandy Honest Business License Official

CC:

Ryan Yelle, Current Planning Above listed licensees.



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

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 304.105.

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 - Tran	sferor Inf	ormation		
Enter information for the cu	urrent licensee and licensed establishm	nent.			
Licensee:	MOON K HWANG		License #: 57	72	
License Type:	PESTOUVENH/Eating:	Place	Statutory Referen	ce:	04.11.100
Doing Business As:	Northern China P	estaur	ant		
Premises Address:	353 Muldon R				
City:	Anchorage	State:	Alaska	ZIP:	99504
Local Governing Body:	Municipality of	Ancho	wane		
Transfer Type:					
Regular transfer					
Transfer with secur	ity interest				
Involuntary retrans	fer				
*					
	OFFICE I	USE ONLY			
Complete Date:			action #:	00353	3247
Board Meeting Date:	4-11-22 6-28-22	License	e Years:	0 0353	2.7-

BRE:

Issue Date:



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

	Section 2 – Transferee Information
Enter information for the <i>ne</i>	w applicant and/or location seeking to be licensed.
Licensee:	SP LLC
Doing Business As:	Northern Ching Restaurant
Premises Address:	353 Muldoon Rd
City:	Anchorage State: Alaska ZIP: 09504
Community Council:	North East
Mailing Address:	353 Muldoon Rd
City:	ANCHOVAAL State: HASKA ZIP: 99504
Designated Licensee:	melinda Kittivaphanh
Contact Phone:	901-903-4878 Business Phone: 907-337-1912
Contact Email:	Kitty Caramelly Quahoo-com
Yes Seasonal License?	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 mus	t be completed by <u>beverage dispensary</u> (including tourism) and <u>package store</u> applicants only:
What is the distance of th	ne shortest pedestrian route from the public entrance of the building of your proposed premises to
the outer boundaries of t	he nearest school grounds? Include the unit of measurement in your answer.

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.

AMCC



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Section 4 – Sole Proprietor Ownership Information

Form AB-01: Transfer License Application

				ense. Entities should skip	to Sectio	n 5.
If more space is needed, The following information						
—		u for each licensee an	id each airmai	.e (spouse).		
This individual is an:	applicant	affiliate				
Name:						
Address:						
City:			State:		ZIP:	
This individual is an:	applicant	affiliate				
Name:						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Address:						
City:			State:		ZIP:	
partnership, that is apply If more space is needed, If the applicant is a content the stock in the corporate is a line ownership interest of If the applicant is a part with an interest of 10	pleted by any entiting for a license. So please attach a separation, the followation, and for each mited liability organ f 10% or more, and for more, and fo	le proprietors should arate sheet with the rowing information munt president, vice-president, the following for each manager. Is a limited partnership each general partnership.	ation, limited I skip to Section in the complet ident, secretary information in the following.	liability company (LLC), pa on 6. mation. ed for each stockholder wary, and managing officer. must be completed for each	ho owns . :h memb e	10% or more of er with an
Entity Official:	Melino	, ,	Man			
Title(s):	Manager	Member	Phone:	907-903-4578	% Owi	ned: 100%
Address:	353 M	- 10	1			·
City:	Prichov	are	State:	A-la (Ka	ZIP:	901.604



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:							
Title(s):			Phone:			% Owne	ed:
Address:							
City:			State:			ZIP:	
Fusing Officials							
Entity Official:							
Title(s):			Phone:			% Owne	ed:
Address:							
City:			State:			ZIP:	
F. C.							
Entity Official:					×		
Title(s):			Phone:			% Owne	d:
Address:							
City:		4	State:			ZIP:	
This subsection must be compared that the Alaska Divi	sion of Corporations (DC	OC) and have	a registered a	agent who is an i	individua	l resident o	I to be in good f the state of
DOC Entity #:	10184181	AK Formed	0.	12 2022	Home	State:	HIUSKO
Registered Agent:	Mennaa P	ittivaph		gent's Phone:	001	-903-	4878
Agent's Mailing Address:	353 Mul	doon R	-0				
City:	Anchorage	State:	A	aska	ZIP:	(79504
Residency of Agent:	V			•			Yes No
Is your corporation or L	LC's registered agent an	individual res	ident of the s	tate of Alaska?			



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

nership 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?		
"Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Al cense number(s) and license type(s):	aska, whi	ich
Section 7 – Authorization		
nunication 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?	Yes	No.



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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. Signature of transferd Subscribed and sworn to before me this 2 day of January RICHARD R. HANSEN Signature of Notary Public **Notary Public** State of Alaska My Commission Expires Aug 17, 2025 Notary Public in and for the State of My commission expires: 02/17/2028Signature of transferor Printed name of transferor Subscribed and sworn to before me this _____ day of ______, 20_____. Signature of Notary Public

My commission expires:

AMCC

Notary Public in and for the State of ______.



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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 th	e right of each statement:	Initials
I certify that all proposed licensees (as defined in AS 04.11.260) a	nd affiliates have been listed on this application.	Mk
I certify that all proposed licensees have been listed with the Divi	sion of Corporations.	Me
I certify that I understand that providing a false statement on this for rejection or denial of this application or revocation of any licer		Mb
I certify that all licensees, agents, and employees who sell or server patron will complete an approved alcohol server education course serving alcoholic beverages, will carry or have available to show a certifying completion of approved alcohol server education course	e, if required by AS 04.21.025, and, while selling or current course card or a photocopy of the card	me
I agree to provide all information required by the Alcoholic Bevera	age Control Board in support of this application.	MK
As an applicant for a liquor license, I declare under penalty of perj that this application, including all accompanying schedules and sta		304, and
Signature of transferee May Lift Vayable Printed name Subscribed and sworn to be	pefore me this 21 day of Junay	, 20 <u>92</u> .
RICHARD R. HANSEN Notary Public State of Alaska	Signature of Nor Notary Public in and for the State of <u>Ales her</u> My commission expires: <u>08 / 17 / 1</u>	



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Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

What is this form?

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

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

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

	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.		

Section 1 – Establishment Information

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

Licensee:	SPLLC	License Number:		
License Type:	Restaurant Eating Place	2		
Doing Business As:	Northern China Zestam	4		
Premises Address:	353 muldian Rd			
City:	Anchorage	State:	ZIP:	99504





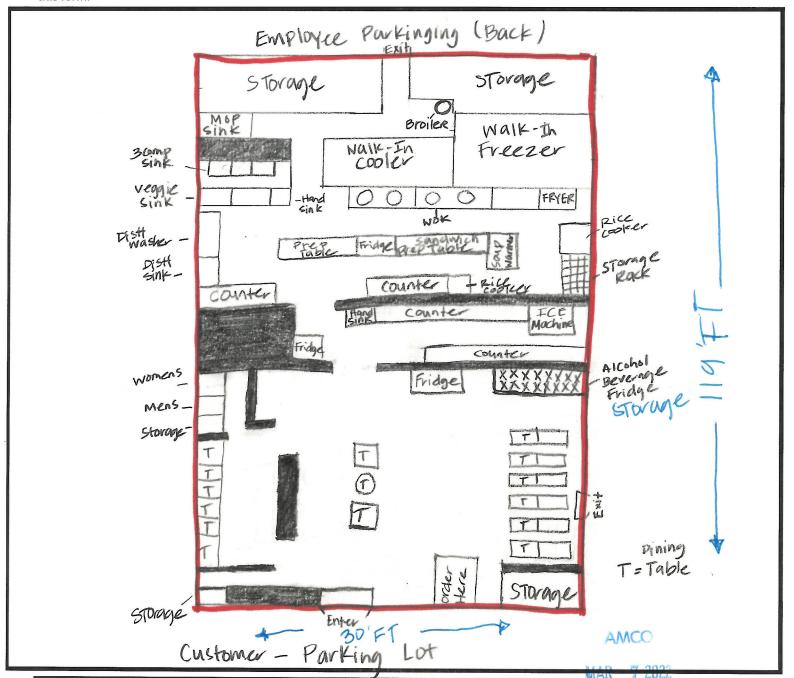
https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

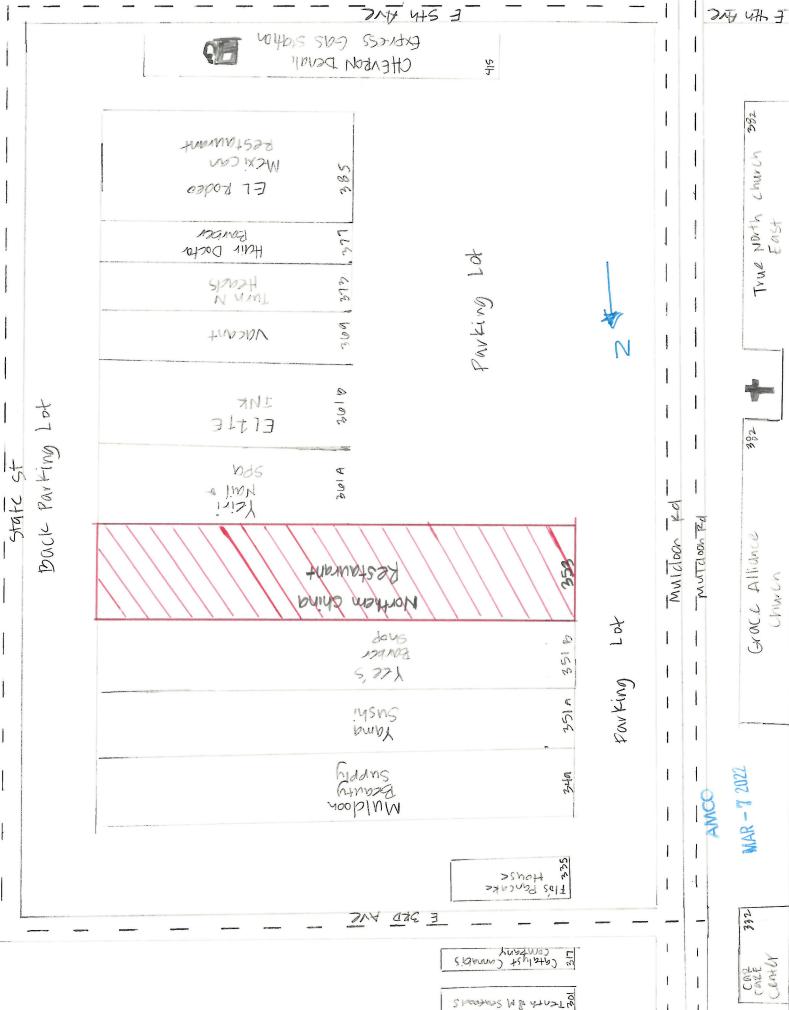
Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

Section 2 - Detailed Premises Diagram

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





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Alaska Alcoholic Beverage Control Board

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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

nter information	on for ficens							
Licensee:		SP	LLC					
License Type	e:	Restau	vant/ta	ring Place	License	Number:	1	
Doing Busin	ess As:	Novthe	un Chi	na pesta		<u></u>		
Premises Ad	ldress:	353	1 .	on Rd				
City:		Ancho	vane		State:	AK	ZIP:	99504
Contact Nan	ne:	Melind	a leithi	raphanh	Contac	t Phone:	907-	903-4378
		Saction	n 2 – Type	of Designati	on Regue	ested		
		Count		or pesignati	JII IZCYW	COLCH		
			_	bona fide restaura				•
S 04.16.010(c	c) or AS 04	.16.049, and	_	of the following de			that appl	y):
S 04.16.010(d	c) or AS 04	.16.049, and	for the request	of the following de			that appl	•
S 04.16.010(d	c) or AS 04 ling after s	.16.049, and tandard clos sons 16 – 20	for the request ing hours: AS 04 years of age: AS	of the following de	signation(s	(check all	that appl	v): vnco R - 7 2022
S 04.16.010(d	ing after s ing by per	16.049, and tandard clos sons 16 – 20 sons under t	for the request ing hours: AS 04 years of age: AS	of the following de 3.16.010(c) 5.04.16.049(a)(2) ars, accompanied I	esignation(s	(check all	that appl	v): vnco R - 7 2022
S 04.16.010(d	ing after s ing by per ing by per ployment	.16.049, and tandard clos sons 16 – 20 sons under t for persons 1	for the request ing hours: AS 04 years of age: AS he age of 16 yea	of the following do	esignation(s) by a person (c)	over the ag	that appl	y): NCO R - 7 2022 AS 04.16.049(a)(
S 04.16.010(d	ing after s ing by per ing by per ployment	.16.049, and tandard clos sons 16 – 20 sons under t for persons 1	for the request ing hours: AS 04 years of age: AS he age of 16 yea l6 or 17 years of	of the following de 16.010(c) 5 04.16.049(a)(2) ars, accompanied I f age: AS 04.16.049	esignation(s) by a person (c)	over the ag	that appl	y): NCO R - 7 2022 AS 04.16.049(a)(

Form AB-03] (rev 4/16/2019 Page 1 of 5



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

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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 during area. Except for employees. Employees le-20 will be allowed in the during area. Except for diving and either area.
diving and kitchen area.
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.
Employees ages 16-20 May Not Serve al Cohol. Under age employees
Employees ages 16-20 May Not Serve al Cohol. Under age employees may clear tables of and wash dishes of empty or partially
emptied alcoholic Containers. Any remaining alcohol is immediately
dumped into waste drain or waste container. Employees age 14-20
must be supervised by an employee that is 21 years or older
emptied alcoholic Containers. Any remaining alcohol is immediately dumped into waste drain or waste container. Employees age le-zo must be supervised by an employee that is 21 years or older an Taps Certified when performing these duties. Employees must physically cheek ID of anyone ordering an alcoholic leverage that does not appear to be well over the age of 21.
Is an owner, manager, or assistant manager who is 21 years of age or older always present on the premises during business hours?
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.

MAZ

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

Page 2 of 5



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Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 5 – Hours of Operation
Review AS 04.16.010(c).
inter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/pm:
Monday-Friday 11AM-10 PM Saturday 12PM-9:30PM Sunday-Closed
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?
ood and beverage service offered or anticipated is:
table service counter service other
f "other", describe the manner of food and beverage service offered or anticipated:

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



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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.	ME
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.	MK
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.	MK
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.)	MK
I declare under penalty of perjury that this form, including all attachments and accompanying schedules and statements, is to correct, and complete. Signature of licensee Signature of Notary Public Notary Public in and for the State of Alaska Printed name of licensee	rue,
My commission expires: <u>6/26/2024</u>	
STATE OF ALASKA NOTARY PUBLIC	20 <u>22</u> .
Local Government Review (to be completed by an appropriate local government official): Approved D	enied
Signature of local government official Date	
Printed name of local government official Title	



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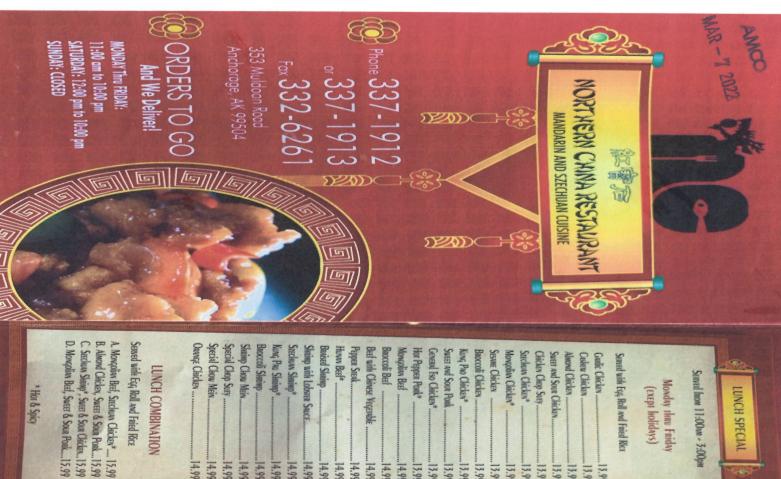
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

AMCO Enforcement Review:	Enforcement Recommendation:	Approve	Deny
Signature of AMCO Enforcement Supervisor	Printed name of AMCO Enforcement Supervisor		
Date			
Enforcement Recommendations:			
AMCO Director Review:		A	Device
AIVICO DIFECTOL REVIEW:		Approved	Denied
Signature of AMCO Director	Printed name of AMCO Director		
Date			
Limitations:		·	
	*		

AMCC



Orange Chicken ... Special Chow Mein Special Chop Sury Shainp Chow Mein Lung Pau Shrimpi ZECHUAN SHRIMP* for Papper Pork* BEF with Chinese Vegerable longolian Beef JENERAL TSO CHICKEN* SEAME CHICKEN ... Szechuw Chickey* Chickey Chop Sury. WEET AND SOUR PORK ung Pao Chicken* Cushew Chicken Served with Egg Roll and Fried Ricz MAD WITH LODSIER SAUCE noccoli Chicken SWEET AND SOUR CHICKEN. Gudic Chickey. word Chicken ngoliw Chickey* .14.99 .14.99 .14.99 .. 14.99 14.99 14.99 14.99 13.99 14.99 13.99 13,99 13,99

Brossoli Bref	Snow Peas with Beel17.9	Szechuw Beef*17.9	Hum Beg*17.9	Princess Beeft (Szechun))	Pepper Steak	Beef with Chivese Vegenble	Moxcolian Beel	BEEF	Shrainp Noodle Soup	Beef Noodle Soup	Ponk Noodle Soup	CHICACH INDUITE JUDI
17.9	17.9	17.9	17.9	17.9	17.9	17.9	. 17.9		14.9	14.9	14.9	manual T. J

Vegenote haist litte

22.99

	ALL A LA CARTE SERVED WITH STEAMED RICE "Steamed nice can be substituted to finied nice with additional change"
-22.99 -10.99 -12.99 -12.99 -12.99 -12.99 -14.99 -14.99	

DINNER MENU

...15.99

15.99

..15.99

.18.99

M E Chicken Mongo Sweet & Sc 19	G fay but Orden find fire beef with Vegetables Section Orden 19.99	A Gg fall Order fried fice Haggian Bed Section Order 1999	
M Egg foll Chicken Fried Rice Mongolian Beef Sweel & Sour Chicken 19.99	H Egg Roll Chicken Fried Ros Shrimp willob Souce Hal Pepper Pork 20,99	8 figs fall Almond Chicken Sweet & Sour Park Chicken Fried Rice 1999	0
N E Chicken Mongo Seanne	L Egg foll Chiclen Fried Rice Mangolian Beef Sweet & Sour Park 19.99	C Egg Rdll Oricien Fried Rice Saechorn Shrimp Sweet & Sour Oricien 20.99	COMBINATION DINNER FOR ONE
N - Egg Roll Chicken Fried Rice Mongolian Beef Sesome Chicken 19.99	J tigg flot Cricken Find Rice Mangolan Beef Almond Cricken 20.99	D tog kall Hunan ber Sweet & Sour Pork Chicken Fried Rice 19.99	DINNER FOR O
O Egg Roll Chiduen Fried R Mongolian Chid Brozonli Beri 20.99	K tigg hall Oriclen Fried Rice Sweel & Sour Pork Sweel & Sour Chicken 19.99	E tog kall Oriden Fried Rice Brossed Skrimp Stechnon Oriden 20,99	A A
O Egg Roll Ciniden Fried Ree Mangolan Citiden Brocolli Beef 20.99	L Sig Mil Chiden Fried Rea Mangolan Berl Sauchaon Shrinp 20.99	F 5gg hal Oriden Fried Rice Mangalan Berl Oriden Graw Nein 20.99	

Sizzling Beef. DROCCOII BEEL

20.99

* Hor & Spicy

Basics Shaips	Seer and Sone Sheinp	SEA FOOD	Hor Spiced Pask with Guild Stuce*	PORK Special Volume Pork	101 ***********************************	Maria (D)	FOWL RECIW Syll)
Bed Faid Rice	Special Field Rice	Bef Egg Foo Yong	EGG FOO YONG Pook Egg Foo Yong Clicker Egg Foo Yong	Bed Clop SteyShebip Clop Stey	CHOP SUEY Clicker Chop Sury	BEE Clow Meis Prod Clow Meis Clickes Clow Meis Shainy Clow Meis Solit Noode eras droog \$2.00	VEGETABLES Numbers Syde Viscoulies Misdenow, Burbon Shons with Svew Pass, Water Cleavers. Misdenow and Burbon Shons. Boccold with Oyean Succ. CHOW MEIN Special Cleav Mein

16.99



Municipality of Anchorage DEPARTMENT OF HEALTH AND HUMAN SERVICES ENVIRONMENTAL SERVICES / FOOD SAFETY & SANITATION

825 L Street, P.O. Box 196650, Anchorage, Alaska 99519-6650 Telephone: (907) 343-4200 Fax: (907) 343-4786

www.muni.org/EHonline



APPLICATION FOR HEALTH PERMIT

Food Establishment	t Catering		☐ Cott	age Food	☐ Retail Ma	arijuana
☐ Pool/Hot Tub	☐ Beauty/I	Barber Shop	☐ Pest	Control		
Facility Name:	ina Rest	aurant	If Change of Owner, P	revious Facility Name:		
Owner's Name(s):			Name of Person To C	ontact: KILHVA	phanh	
Site Address: 353 MUIDO	on Rd	Anchor	MAR	Phone: 907- 91 Email: 4144 (aramelly	ex:
Mailing Address:	on Rd	City:	age	State: Alaska	QZ	1504
Certified Manager's Name:	Manager PMAN 21	Certificate # Certif		Operating Days/Hours	MAM - 10 Th	77
		IF TEMPORARY FO	OD, PROVIDE THE FOL	LOWING		
Event & Loc	ation	Date(s)) Hrs	s. of Operation	Approved Kitch Commissary	
Foods To Be Served						
			L, PROVIDE THE FOLL	.OWING		
Pesticide applicant will co Equipment to be used • Pes Copy of liability insurance p	ticides/Chemicals u	nce requirement	ts in AMC 15.75		re application or	ccurs
· Equipment to be used · Pes	ticides/Chemicals u policy pplicable Anchorage M	nce requirement used & method of a	ts in AMC 15.75 application • Descrip	otion of area(s) whe		
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Equipment to be used • Pes Copy of liability insurance p I Certify that I am familiar with ap accordance with said Ordinances Applicant's Signature: Facility ID: District # Change of Owner Late Fee	ticides/Chemicals upolicy eplicable Anchorage M epiicable PE:	once requirement used & method of a unicipal Code of Ord Owner ID: Chec	ts in AMC 15.75 application · Descrip linances and that the all Change: New Permit R	Date: Owner Name enewal M	ishment will be op	erated and maintained in