



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:	Humdingers Gourmet Pizza Co LLC	License #:	3767
License Type:	Restaurant Eating Place	Statutory Reference:	
Doing Business As:	Humdingers Gourmet Pizza Co		
Premises Address:	173 S Valley Way		
City:	Palmer	State:	AK
		ZIP:	99645
Local Governing Body:	City of Palmer		

### Transfer Type:

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

OFFICE USE ONLY			
Complete Date:		Transaction #:	100753790
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:	Sweet Gypsy LLC				
Doing Business As:	Sweet Gypsy				
Premises Address:	173 S Valley Way				
City:	Palmer	State:	AK	ZIP:	99645
Community Council:	City of Palmer				

Mailing Address:	173 S Valley Way				
City:	Palmer	State:	AK	ZIP:	99645

Designated Licensee:	Janelle Fox				
Contact Phone:	907-414-0214	Business Phone:	907-414-0214		
Contact Email:	sweetgypsyllc@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.

0.6 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.

900 feet





## 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 with over 10% ownership 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:	Janelle Fox				
Title(s):	Sole Member	Phone:	907-414-0214	% Owned:	100
Address:	12326 E Scott Rd				
City:	Palmer	State:	AK	ZIP:	99645





## 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 #:	2180659	AK Formed Date:	05/20/2023	Home State:	AK
Registered Agent:	Janelle Fox	Agent's Phone:	907-414-0214		
Agent's Mailing Address:	12326 E Scott Rd				
City:	Palmer	State:	AK	ZIP:	99645

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):

### 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:





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.

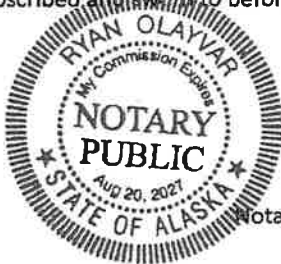
Gordon N. Fletcher Jr.

Signature of transferor

GORDON N FLETCHER JR.

Printed name of transferor

Subscribed and sworn to before me this 4 day of December, 2023.



[Signature]  
Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 8/20/27

\_\_\_\_\_  
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.



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



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



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



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



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.



Signature of transferee

Janette R. Fox

Printed name

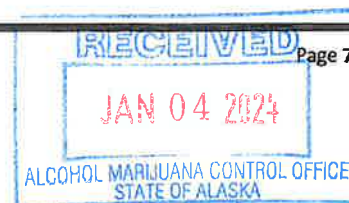


Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 8/20/2027

Subscribed and sworn to before me this 4 day of December, 2023.





## 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.



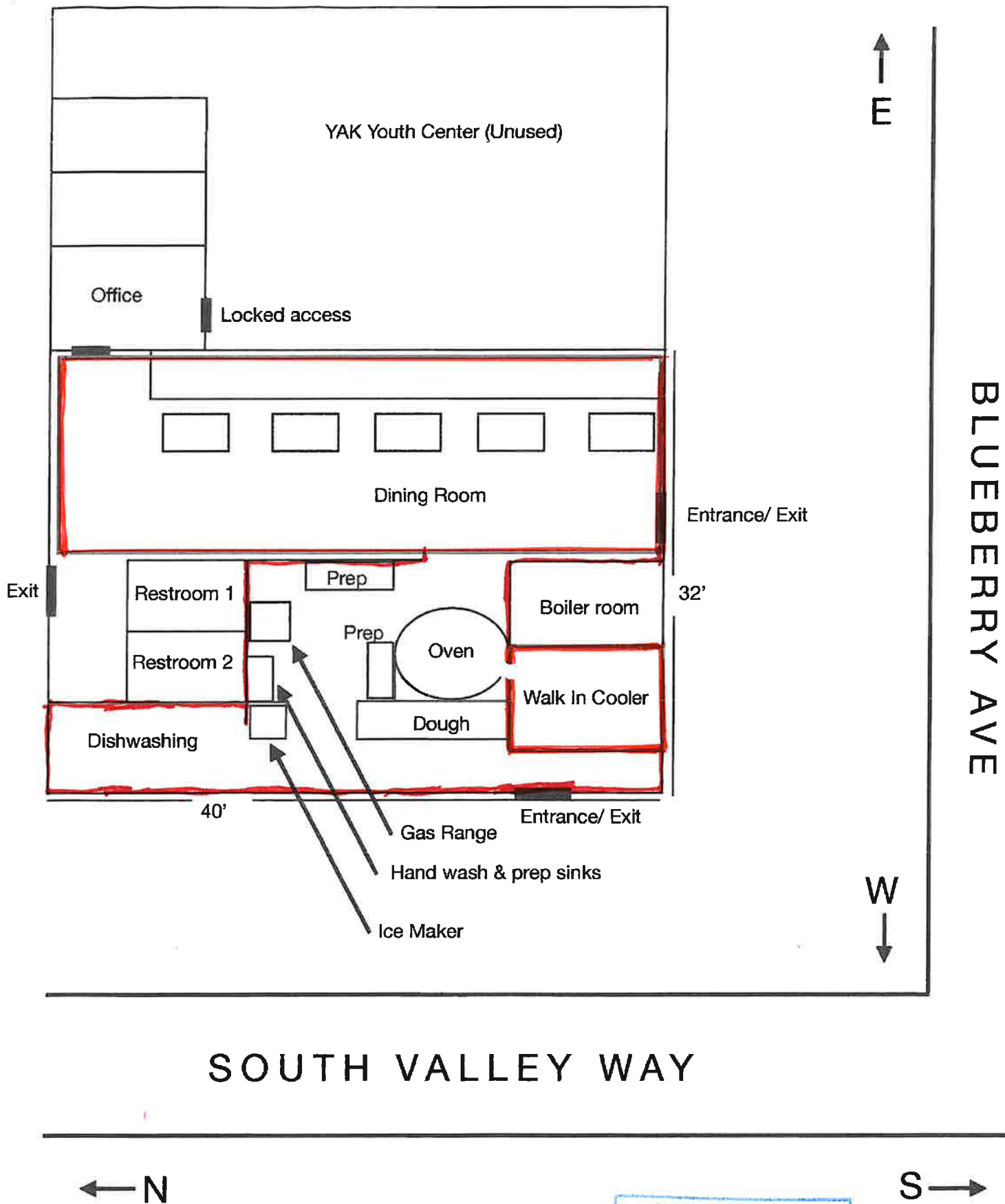
## Section 1 – Establishment Information

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

Licensee:	Sweet Gypsy LLC	License Number:	3767		
License Type:	Restaurant Eating Place				
Doing Business As:	Sweet Gypsy				
Premises Address:	173 S Valley Way				
City:	Palmer	State:	AK	ZIP:	99645









## 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:	Sweet Gypsy LLC				
License Type:	Restaurant Eating Place	License Number:	3767		
Doing Business As:	Sweet Gypsy				
Premises Address:	173 S Valley Way				
City:	Palmer	State:	AK	ZIP:	99645
Contact Name:	Janelle Fox	Contact Phone:	907-414-0214		

**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 any persons under 21 years of age: AS 04.16.049(c)  
NOTE: Under AS 04.16.049(d), a Department of Labor and Workforce Development work 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 are anticipated to have access to both dining area as well as the walk in cooler.

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.

Management will not allow minors to process orders, handle alcoholic beverages or dispose of unsued/ unfinished containers.

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 through Saturday 8am to 10pm

**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:

Live music, interactive on screen, non-wagered games, theatrical movies, poetry and art.

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:

Private events and parties.





## 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 entrées 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 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.



Janella R. Fox

Printed name of licensee

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







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:





## **Alaska Food Code 2024 Establishment Permit**

Division of Environmental Health  
Food Safety & Sanitation Program

Permit Number: 15444  
Issued to: JANELLE FOX  
For: Sweet Gypsy  
For Operation of: FF-1 Food Service  
Located at: 173 S Valley WAY STE 13 Palmer, AK 99645

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, 2024

Program Manager:

A handwritten signature in black ink, appearing to read "Kimberly S. O'Neil", is written over a horizontal line.

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

# 1-87-SAFE-FOOD

**(in Anchorage call 334-2560)**



par bake  
Take home

## Pizza

H  
pep pile 18<sup>50</sup>  
T-REX 21<sup>00</sup>  
Bruschetta chicken 18<sup>50</sup>  
Thai chick 18<sup>50</sup>  
Home on the Range 20<sup>50</sup>  
Alcha Alcha 18<sup>50</sup>  
Tour de WS 18<sup>50</sup>

Sweet Bixy  
Veggie 19<sup>50</sup>  
Margherita 18<sup>50</sup>  
19<sup>00</sup>  
Mushroom, onion  
pineapple, Green Peppers  
5 Banana peppers

## SOUPS

Loaded Baked Pot  
Zuppa  
- Bread Bowl 9<sup>50</sup>  
- Bowl 6<sup>50</sup>  
- Cup 4<sup>35</sup>  
cup soup & Half sandwich  
+ side 9<sup>00</sup>

## Panini's

- Turkey Trot 11<sup>00</sup>  
Turkey, cream cheese,  
orange cranberry compot,  
Arugula

- Fall Vibe 11<sup>00</sup>  
maple sausage,  
Apples, squash,  
white cheese.

- Veggie 11<sup>00</sup>

Zucchini, mushrooms,  
Garlic, Red peppers,  
caramelized onions,  
white cheese.

- cheese - 3 cheese 8<sup>00</sup>

monterey, cheddar,  
moz.

- Pickled Piggy 11<sup>00</sup>

Polish sausage  
country pots - (potatoes)  
Honey mustard  
Red pepper flakes  
monterey Jack cheese

## Brunch

• Eggs Benedict  
- Classic 13<sup>75</sup>  
- Veggie 13<sup>00</sup>

• French Toast Bake 12<sup>00</sup>  
- peach cobbler bake.

• Sweet potato hash 12<sup>00</sup>

• Bisquets + Gravy

- Veggie 13<sup>00</sup>

- Sausage 13<sup>00</sup>

~~French Toast~~ ?

• Huevos Rancheros 12<sup>00</sup>

Homemade Bean, Fried Egg, Salsa (In House)

corn tortilla, Cilantro (avocado - Monterey Jack)

## overnight oats

Peach cobbler

Apple Spice

(will have a  
variety of toppings)

## Panini/soup sides

• coleslaw

• mac salad

• pot salad

To Buy Individually  
3<sup>50</sup>

RECEIVED

JAN 04 2024

ALCOHOL MARIJUANA CONTROL OFFICE  
STATE OF ALASKA