

Office of the Mayor and City Council

710 Mill Bay Road, Room 110, Kodiak, Alaska 99615

October 7, 2025

Sent electronically and via certified mail:

Alcoholic Beverage Control Board C/O Alcohol and Marijuana Control Office 550 West 7th Avenue, Suite 1600 Anchorage, Alaska 99501

Re: Protest, subject to rescission, Beverage Dispensary License No. 3299 Renewal Application and Transfer Application

To: The Alcoholic Beverage Control Board,

The City Council of the City of Kodiak protests renewal of beverage dispensary license #3299, subject to rescission of the protest if the applicant meets the conditions set forth below. The City Council also protests the license #3299 transfer application, subject to rescission of the protest if the applicant meets the Council's conditions.

City of Kodiak Code 5.12.030(d)(6) provides that the City Council may protest an application for an alcoholic beverage license when business's premises do not comply with municipal fire, health, or safety codes.

The Deputy Fire Marshal determined that the premises described in the renewal application, 402 Marine Way, Suite 100, are not code compliant. The deficiencies are identified in the Deputy Fire Marshal's August 27, 2025 letter, a copy of which is submitted with this protest.

The Deputy Fire Marshal also determined that the transfer application premises, 202 Rezanof Drive, are not code compliant. The deficiencies are identified in the Deputy Fire Marshal's August 26, 2025 letter, a copy of which is submitted with this protest.

The Council protests renewal and transfer of license #3299 because a beverage dispensary business should not be operated from unsafe premises. The Council requests that the board uphold the Council's protests, pursuant to 3 AAC 305.085(h), until the applicant meets the conditions set by the Council.

Protest of the license #3299 transfer application will be withdrawn upon the Fire Marshal's report that the premises deficiencies identified in the Deputy Fire Marshal's August 26, 2025 letter have been satisfactorily corrected and that the 202 Rezanof Drive premises comply with the City's fire, health, and safety codes.

Protest of the license #3299 renewal application will be withdrawn upon the Fire Marshal's report that the premises deficiencies identified in the Deputy Fire Marshal's August 27, 2025 letter have been satisfactorily corrected and that the 402 Marine Way, Suite 100 premises comply with the City's fire, health, and safety codes.

However, the City understands that the applicant does not intend to operate the license from 402 West Marine Way. Rather, if the license is renewed, it would then be transferred to 202 Rezanof Drive. If the license will *not* be operated from 402 Marine Way, the City will *not* require correction of those premises as a condition of withdrawing its protest of the renewal application. Thus, the City will withdraw its protest of the renewal application on the alternative condition that license #3299 be surrendered until the application to transfer license #3299 to 202 Rezanof Drive is approved.

Fundamentally, the Council's condition for rescinding its protests is that license #3299 be operated from premises that comply with the City's fire, health, and safety codes. If license #3299 would be operated from the 202 Rezanof Drive premises *only*, the 402 West Marine Way code-compliance issues need not prevent transfer of the license #3299 to the 202 Rezanof Drive premises.

Sincerely,

Pat Branson Mayor

Cc: El Chicano Mexican Restaurant

AMCO Liquor License Application Checklist

The City Clerk's office is in receipt of the application from the Alcohol and Marijuana Control office dated: <u>August 20, 2025</u>.

□Nev	VAPO P3	
recon Please	application is scheduled to go before the Council with a public hearing on <u>September 25, 202</u> and whether there is a non-objection, non-objection with conditions, or a protest we request a complete the checklist for current code compliance, draft ordinance compliance, and state addresses a non-objection with conditions or a protest, please further indicate how the applicant	your review of the application. ministrative code compliance. If
•	rotest. Please provide these recommendations in the section below.	it can remedy the conditions of
Pleas	e answer only those questions which are relevant to your department. If a question is not releva	nt please mark N/A.
	El Chicano Inc. DBA El Chicano Mexican Restaurant Beverage Dispensary License #3299	Please circle and initial
1	Is the applicant in compliance with all City permit or inspection requirements? (Building, Electrical, Plumbing permits in accordance with Kodiak City Code Title 14 Buildings and Construction) (Building Department)	Yes / No
2	Is the application in violation of any Fire Safety Inspections in accordance with Kodiak City Code Title 14 Buildings and Construction) (Fire Department)	Yes / No
3	Is the business operated under the license up to date on payment of sales tax? (Refer to Kodiak City Code 3.08 Revenue and Finance) (Finance Department)	Yes / No
4	Does the business operated in the license have a current City business license? (Refer to Kodiak City Code 5.02 Business Licenses and Regulations) (Finance Department)	Yes / No
5	Is the business operated under the license violating the Kodiak City Code 5.12? (Code attached) (Police Department)	Yes / No
6	Do you have any concerns that the business operated under the license is not compliance with 3 AAC 305.110? (Alaska Admin Code attached) (Police Department-Fire Department)	Yes / No
7	Is the business operated under the license in violation of any state or municipal safety code? (Refer to Kodiak City Code 8.44 Intoxicating Liquor) (Police Department)	Yes / No
8	Are there any other reasons for the protest of the liquor license application? (please list reasons below) (All Departments)	YES No
Rec	ommendations: - See Attatched letter-	
	Protest with Conditions	
Ky	le Alpineau Deputy Fire Marshal 8-26-	25

Date



Office of the Fire Marshal

219 Lower Mill Bay Road Kodiak, AK 99615

Kyle Papineau, Deputy Fire Marshal City of Kodiak Kodiak, AK 99615

8/26/25

City Clerk Office

El Chicano Mexican Restaurant AMCO Transfer Request

At this time, The Kodiak Fire Department, Office of the Fire Marshal is Protesting-With Conditions, the Transfer of Beverage Dispensary License #3299 for El Chicano Mexican Restaurant due to fire and life safety conditions. Business and building owner have been made aware of the sprinkler system deficiencies. Sprinkler is currently Status 2, Critical deficiencies classification. Fire inspection was completed on 8/25/25 with deficiencies found and reported. Fire extinguishers are past due for service. There is sheet rock that needs repair as part of fire separation and electrical safety issues. Once corrections are completed and signed off by this office, we will report satisfaction of repairs and code standard met, and change recommendation to No Protest.

Respectfully,

Kyle A. Papineau Deputy Fire Marshal Kodiak Fire Department



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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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 305** 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, 3 AAC 305.045 and 3 AAC 305.060.

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	on 1 - Trans	sferor Inf	ormation			
Enter information for the cu	rrent licensee and lic	ensed establishme	ent.				
Licensee:	810	hicano.	Inc	License #:	:		3299
License Type:	Bevero	ige Diffe	ensay	Statutory	Reference:		AS04.09.200
Doing Business As:	Elchi	caro m	evica	n Res	staur	ant	
Premises Address:	402	marine	/ -	Swife 10			
City:	Kediar	L	State:	ALL		ZIP:	99615
Local Governing Body/Bodies:	City of	Waliak	w	have I	Siarel	Bo	rugh
Regular transfer Transfer with securi Involuntary retrans Controlling interest Location transfer	sfer	OFFICE U	USE ONLY			MAY 1 Z of Cor AMC	mmerce
Consolisto Boto		OFFICE (
Complete Date:				action #:			
Board Meeting Date:			Licens	se Years:			
Issue Date:			Exami	iner:			



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

	Section 2 - Trans	feree Inf	ormation		
Enter information for the <i>new</i>	v applicant and/or location seeking to b	e licensed.			
Licensee:	Antonia Brawl]			
Doing Business As:	El Chicano M	exila	n Restau	uran	t
Premises Address:	202 Rezare				
City:	Kodiak	State:	AK	ZIP:	99615
Community Council, (If applicable):					
Mailing Address:	2336 Beauer	lake	Loup Roa	el	
City:	2336 Beauer	State:	AK	ZIP:	79615
Email:	Tonibrankokakeoutlooko			726	0
	No. 1 / 20 >				
Designated Licensee:	Ambria Bravo	ń .		4 (2)	
Contact Phone:	907-942-7266	Business I	Phone: 907	-486-	طاالها
Contact Email:	Tonibravo Kudian Za	Hook.	Com		
Yes Seasonal License?	No If "Yes", write your s				
	Section 3 - Prem	ises Info	ormation		
Premises to be licensed is: an existing facility	a new building	a propose	d building		
The next two questions must	t be completed by beverage dispensar	y (including to	ourism) and <u>package sto</u>	re applicants	only:
What is the distance of the outer boundaries of	ne shortest pedestrian route from the the nearest school grounds? Include t	public entran he unit of me	ce of the building of you easurement in your answ	r proposed p wer (Must be	remises to in feet).
0.5 mile	2,640 feet				
	ne shortest pedestrian route from the e nearest church building? Include th				
0.7 mi	3,696 feet			7.	



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

	Section 4 -	Sole Proprieto	or Owner	rship Information	0	
If more space is need	led, please attach a se	eproprietor who is apper eparate sheet with the ed for each licensee and	required info		o Section 5.	
This individual is an:	applicant	affiliate				
Name:	Moh	ia Bravi)			
Address:	233(o Bearer	lake	2100pRd		
City:	Kodi	are	State:	Ak	ZIP: 9	9615
Email:	tonibrau	okolaucatlu	Phone:	907-942-	7266	2
This individual is an:	applicant	affiliate	0.0			
Name:						
Address:						
City:			State:		ZIP:	
Email:			Phone:			
	Section	n 5 – Entity Ov	vnership	Information		
If more space is neede If the applicant is must be complete president, vice-pr If the applicant is information must regardless of own If the applicant is with an interest of	pplying for a license. Seed, please attach a sep a corporation, the apped below for each stocresident, secretary, an a limited liability orgat be completed for each each enership share. a partnership, including 10% or more, and for	Sole proprietors should parate sheet with the replication shall be executively be becaused by the sheet who owns 10% and managing officer. Inization, whether many child member with an own own and the sheet with an own own and the sheet with an own own or the sheet with an own or the sheet with the respective sheet with the sheet wi	d skip to Secti equired informated by an auti or more of the mager managed enership interes p, the followings.	nation. horized officer of the Corp the stock in the corporation d or member managed, the est of 10% or more and for the information must be cor	poration. Infori on, and for eac ne following r each <i>manag</i> e	mation ch er
Entity Official:						
Title(s):			Phone:		% Owned:	
Address:						

State:

Phone:

ZIP:

City:

Email:



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Form AB-01: Transfer License Application

Entity Official:									
Title(s):			Phone	:		% Own	ed:		
Address:									
City:			State:			ZIP:			
Email:			Phone	:		·			
Entity Official:									
Title(s):			Phone	•		% Own	ed:		
Address:									
City:			State:			ZIP:			
Email:			Phone	:					
Entity Official:									
Title(s):			Phone	:		% Own	ed:		
Address:						,			
City:			State:			ZIP:			
Email:			Phone	:					
This subsection must be comp standing with the Alaska Divis domestic corporation authori	sion of Corporations (D	OC). The regis	stered age	ent is either an indiv	idual res	ident of th	ne state	e or	
CBPL Entity #:		AK Formed	Date:		Home	State:			
Registered Agent:				Agent's Phone:					
Agent's Mailing Address:									
City:		State:			ZIP:				
Email:				Phone:					
Residency of Agent:							Yes		No
Does your registered ag	Does your registered agent satisfy the requirement of AS 04.11.430?								



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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 Ala license number(s) and license type(s):	ska, whi	ch
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?		U
If "Yes", disclose the name of the individual and the reason for this authorization:		



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

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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.

	nts a controlling interest of the current licensee. I additionally certify ontrolling interest of the currently licensed entity) have examined this
	information on this application to be true, correct, and complete.
Signature of transferor	r. Ana Brain
Antonia Braw power of Att	towney For Ana Braw
	before me this 17 day of $April 2025$.
animumm _n ,	Main Bahh
Maria Brekkomm	Signature of Notary Public
Maria Brektoning No TAR L 9702 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Notary Public in and for the State of <u>Alaska</u> .
TO STEOF ALAST OF THE STATE OF	My commission expires: 09/28/26
A September 1	
Adams Boro	
Signature of transferor I O MENO - BRAUU	
Printed name of transferor Subscribed and sworn to	before me this 17 day of April , 20 25.
Maria Breking	Mari Rolch Signature of Notary Public
Maria Brekkommunda Brokkommunda	Notary Public in and for the State of
WALLO WAS SOLVED TO SELECT	My commission expires: 09/28/26
The Dires September	



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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 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 305.700.



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 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.



I certify that I and any individual identified in the business entity ownership section of this application, has, or will read AS 04 and its implementing regulations.

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 09/28

Subscribed and sworn to before me this 17 day of April



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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 alcohol license applications, per AS 04.11.260, 3 AAC 305.630 and 3 AAC 305.660. 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.

This form must be completed and submitted to AMCO's Anchorage office before any license application will be considered complete. You may attach blueprints or other detailed drawings that meet the requirements of this form.

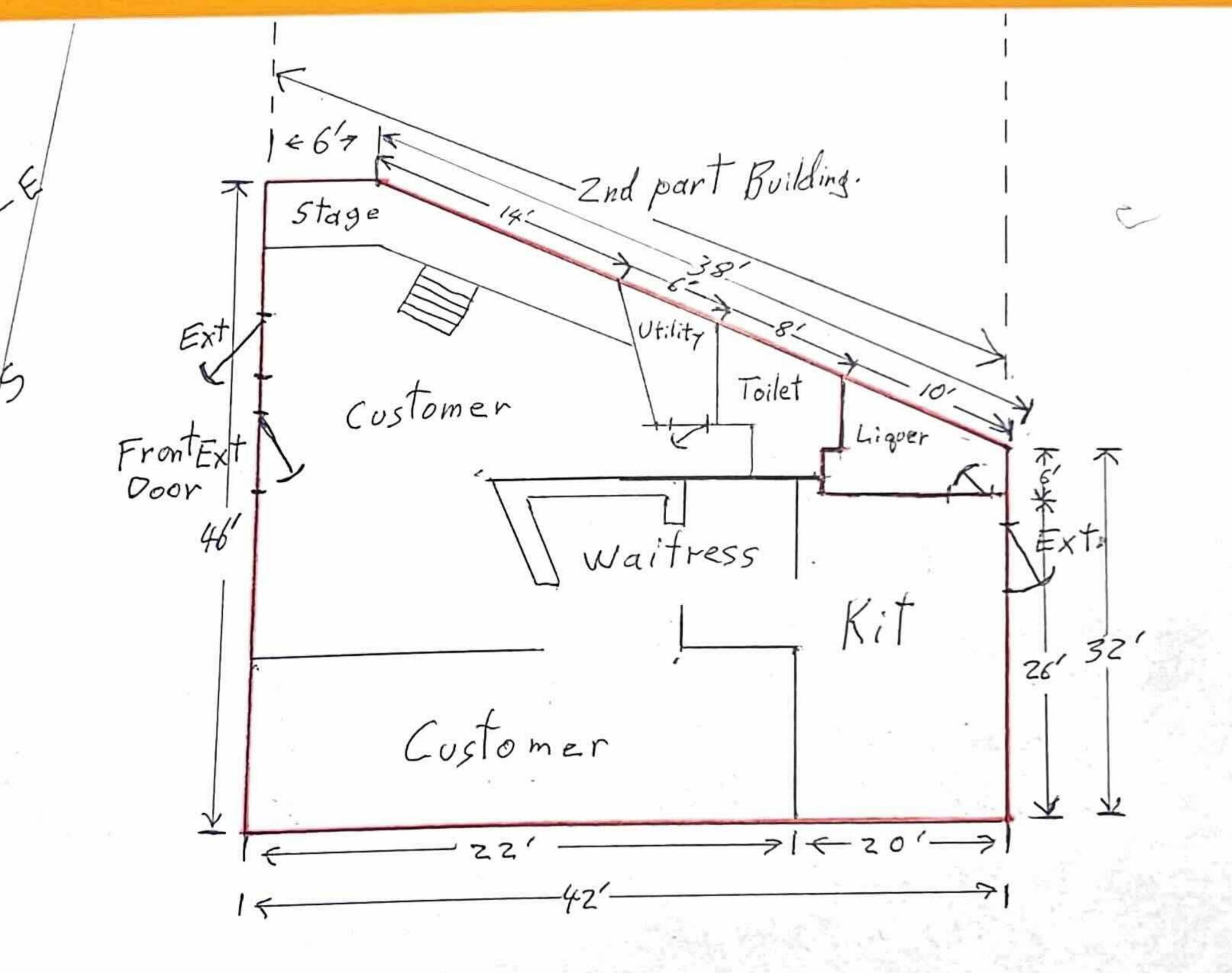
The diagram MUST include:

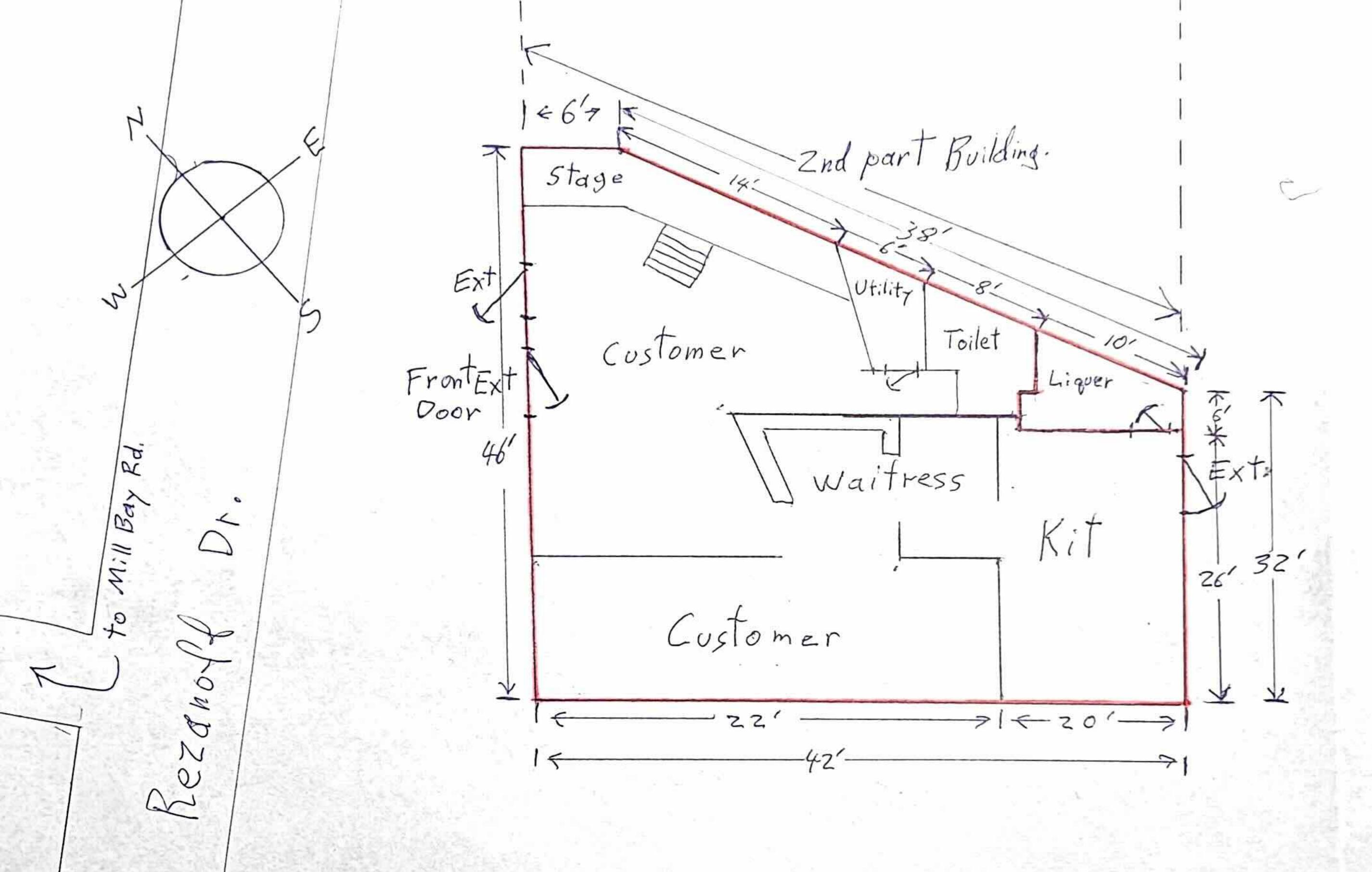
- You must use a solid, contiguous red line to outline the outer perimeter of your premises with no breaks or separations.
 - The red outline is required to follow a physical barrier (wall, fence and even across doorways).
 - There should be no red lines within the perimeter
- Each area should be clearly labeled in any color other than red where alcohol is:
 - Stored
 - Served/Sold
 - Manufactured
 - Consumed
- All diagrams must include:
 - Dimensions (AMCO does not accept diagrams drawn to scale)
 - Cross streets
 - Points of reference, such as a compass rose indicating True North
 - All entrances, exits, walls, bars, and fixtures
- If your premises include multiple floors, please include a separate diagram of each floor.
 - You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- If your premises includes multiple floors, please include a separate diagram of each floor. You must identify
 the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- 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.
- Any license applications that include outdoor space are required to submit a security plan that includes
 information about the barriers, practices, and personnel that are to be used to ensure that alcohol is not
 introduced or removed from the permitted premises and to prevent the access of alcohol by a minor during
 the permitted event. A security plan may be requested for other proposed locations on a case-by-case basis.

Section 1 - Establishment Information

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

Licensee:	Antonia Braun	License Number:	32	99
License Type:	Beverage Dispersary			
Doing Business As:	El Chicano Mex		taur	int
Premises Address:	2002 Rezanof dri	ve		
City:	Kodiak	State:	ZIP:	99615







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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Restaurant Endorsement Application

This endorsement application form is required to apply for a restaurant endorsement to support your underlying license or pending license application. Applicants should review and become familiar with AS 04.09.450, Title 04 of Alaska Statutes and Chapter 305 of the Alaska Administrative Code. This form must be completed and submitted along with all other required forms and documents before any endorsement application will be considered complete and placed in the queue for our licensing examiners review.

Se	ection 1 – Establishment an			ng examiners retrieve
	rent licensee and licensed establish.			
Licensee:	Antonia Bravo		License #:	13200
Doing Business As:	El Chicanomexican R	estarant		Beverage disansa
Licensee Mailing Address:	2336 Beaux lake 100	PRI	Phone Number:	Beverage dispensar 907-942-7266
Full Premises Address:	202 Rezard Driv			
City:	Kodian	State:	Arc ZI	P: 99615
Local Governing Body:	City of Kalian	Email:	Tonibracoke	odiak Coutlook.com
	Section 2 – Endorsem		STATE OF STREET CASE AND STREET STATE OF	
An application for a restau	license, golf course license, sporting active lodge license, destination resort license, The biennial fee for a restaurant endorser urant endorsement must specify the estaurant endorsement	or beverage of ment is \$200 w	dispensary tourism l with a \$25 application	license. n fee.
constitutes a bona fide result under 21 years of age will as a bona fide restaurant, following designation(s) (constitutes)	staurant, that there is supervision on the not obtain alcoholic beverages. This er hotel, or eating place for purposes of AS	ne premises a ndorsement a S 04.16.010(c	dequate to reason	nably ensure that a person ne request of a designation
2. Dining by pers	ons 16 – 20 years of age: AS 04.16.049)(a)		
3. Diving by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)				
4. Employment fo	or any persons under 21 years of age: /	AS 04.16.049	(c)	
	9(d), a Department of Labor and Work			it is not required to employ
	Section 3 – Access to Perso	ns Unde	r 21 Years of	FAge
		THE PARTY OF THE P		

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

Be specific in your list where within the premises persons under 21 years of age are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Persons under 21 years of age will only be allowed in the dining area OR will only be employed and present in the kitchen).

Employees under 21 will have theces to man entrance dinning area, the back canter, kitchen that way to bathroom, which has a don't to back togo
Entrance dinning area, the back Canter, Kitchen
Han voy to bathrook, which has a down to back togo
arca. Inder 21 Cuestomers dire in aline con eat in Entance
Dinning area only. If with 21 & older person they condi
in any area.



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Alaska Alcoholic Beverage Control Board

Restaurant Endorsement Application

Describe the policies, practices and procedures that will be in place to ensure that persons under 21 years of age do not gain access to alcoholic beverages while dining or employed at your premises. Outline how and where alcoholic beverages are stored on premises. Acknowledge that employees who sell and serve alcoholic beverages must have a current Server Education Card.

	and the a current server Education Card.
Front glass averwill	Store Alchor, owner or
marager or site along	- with Employee who is
at will only saces of	Lerve drinks. Owners
will ansure that ever on site will have a vali	y one over 21 who is
on site will have a vali	d tam care-unusulment
will be locked up in Stora	se arca designated back in kitchen
s an owner, manager, or assistant manager who is 21 years of age of during business hours?	or older always present on the premises

Section 4 - Food Service Establishment Permit

Per AS 04.21.080(b) 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.

Link to the Alaska Department of Environmental Conservation (ADEC) Food Safety Website: http://dec.alaska.gov/eh/fss/food/

Link to the Municipality of Anchorage 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:

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

Initials

*Note: If a plan review approval is submitted, a final permit will be required before finalization of any permit or likense application.

Section 5 - Hours of Operation

Review AS 04.16.010(c).

Include variances in weekend/weekday hours, and indicate AM/PM:

Days/Hours of Operation

Weekday	From Time of Day	To Time of Day
Sunday	Closed	Crosed
Monday	Man 2: oupm	5:w-8'00 pm
Tuesday	A CONTRACTOR OF THE PARTY OF TH	5:00-8:00 pm
Wednesday	1	5:00-12:00pm
Thursday	The state of the s	5:00-12:00 pm
Friday	The state of the s	5:00-12:00pm
Saturday		5:00-12:00 pm



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

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Alaska Alcoholic Beverage Control Board

Restaurant Endorsement Application

Section 6 – Areas Covered by Endorsement	t	
Does the endorsement apply to your entire licensed premises as approved by the ABC Board? Does the requested endorsement expand your currently licensed premises?	Yes V	No No
 If no, attach the approved diagram, no larger than 8 1/2" x 11" of the layout, and ident covered by various requested endorsements. You must use a solid, contiguous colored l outline the outer perimeter of the area of the premises covered by the requested endorse 	line in any col ement(s).	lor other than red to
 If endorsements are overlapping, provide a conspicuous means to distinguish each endorser map with varying colors for each requested endorsement. 	ment from th	e other (e.g., keyed
 Your drawing MUST include: Dimensions in feet not square feet of all exterior walls and major interior of diagrams drawn to scale) Include cross-streets A north arrow, and any significant geographical features. Points of reference North. All entrances, exits, walls, bars, and fixtures If your premises includes multiple floors, please include a separate diagram of each the stairs between each floor, and each hallway/corridor that leads to each set of stairs between application that includes outdoor space are required to submit information about the barriers, practices, and personnel that are to be used to ensure or removed from the permitted premises and to prevent the access of alcohol by a event. A security plan may be requested for other proposed locations on a case-by- 	e, such as a constairs. a security porter that alcoholisminor during	compass showing a must identify lan that includes ool is not introduced ng the permitted
Section 7 – Entertainment & Service		
Are any forms of entertainment offered or available within the licensed business or within the particle of the entertainment offered or available and the hours in which the entertainment entertainment as described by AS 04.09.210, includes dancing, karaoke, live performances, or strecorded or broadcast performances without live participation.	nt may occu	r.
Food and beverage service offered or anticipated is: Table Service Buffet Service Counter Service Other:		

12/27/2024 rev2



Alcohol and Marijuana Control Office https://www.commerce.alaska.gov/web/amco

550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 alcohol.licensing@alaska.gov

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Restaurant Endorsement Application

Section 8 - Attestations

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.

Initials

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 3AAC 305.340.



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 of 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, and or endorsement. I further understand that this is a Class A misdemeanor under AS 11.56.210 to falsify an application and commit the crime of unsworn falsification.



Printed name of licensee

Signature of licensee

Include Rice & Beans. Enchide's Combo (2) Bed Or Checker, certifieds succe, milled cheese on the wife claims. Charese Enchidade Combo (2) Enchided Succe, milled cheese on the wifehadro & soites. Charese Enchidade Combo (2) Enchided Succe, milled cheese on the wifehadro & soites. Soites Soites Charese Ordy 8455 Cheese Ordy 8455 Bed for Shredded Chiden 8600

Enchilada Combos

Chile Relleno Combo
Chile Relleno Austrian Combo #20
Includes Rice & Bouns: Beef Hard Shell Taco

Single Chile Relleno

\$7.50

Sides

	Little 2	
Side	of Rice & Beans/full order	\$6.00
Sma	I Rice	\$4.00
Sma	l Beans	\$4.00
Side	of Sour Cream	\$3.00
Side	of Guacamole	\$6.00
Side	of Pico De Gallo	\$6.00
Chip	& House Salsa	\$6.00
Chip	& Guacamole	\$9.00
Chip	& Sour Cream	\$6.00
Chip	& Pico	\$9.00
Side	of Cheese/One size	\$6.00
Side	of Lettuce/One size	\$4.00
Extra	Guacamole	\$2.00

Hours Of Operation

Day Hours

Monday 11:00am - 2:00pm & 5pm-8pm

Tuesday 11:00am - 2:00pm & 5pm-8pm

Wednesday 11:00am - 2:00pm

& 5pm-8pm
Thursday 11:00am - 2:00pm

Thursday 11:00am - 2:00pi & 5pm-8pm

Friday 11:00am - 2:00pm & 5pm-8pm

Saturday 5pm-8pm Only Sunday Closed

Please Note Summer Hours May vary!!!!!



Original Recipe Salsa Available , Mason Jar Sizes

AMCO Received 8

El Chicano Me<mark>xican</mark> Restaurant

Togo Menu



Call 907-486-6116 Togo Or Dine In



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Extra Sour Cream

	NACHOS					
	Famous El Chicano Nachos Fully	\$16.50				
	Loaded, Beans, cheese, sour, guacamole					
	Nachos, chips & cheese	\$14.50				
	Black & Gold Nachos, Jack Cheese,	\$17.50				
	black beans, sour cream, guacamole, Topped w/Pico De Gallo					
	Add Meat to any Nachos Listed above,	1				
	extra meat is an extra charge.	11				
	Ground Beef, Shredded Chicken	\$3.00				
	Carne Asada, Pork Carnitas	\$4.00				
	Tacos					
1	acos Hard Shell, Beef or Chicken,	\$4.00				
I	ettuce, cheese					
1	acos Soft Shell, Corn or Flour, Beef,	\$4.50				
(Chicken, lettuce, cheese					
1	lampiro Taco!	\$6.00				

Fach

\$6.00

Each

\$6,00

Fach

\$16.50

Burritos

Famous License Plate Burrito Filled with rice, beans, cheese, guacamole, sour cream, cilantro & onions, meat choice, Melted cheese on top w/sauce	\$17.50
Boca Burrito Large Hand held sluffed w/Rice & Beans, cheese, guacamole, sour cream. Any Meat Choice, Beef, Chicken, Park Carnitas, Carne Asada (Steak)	\$16.50
Burrito-Beef, bean, cheese Extra-Add Sauce & Cheese on top-\$2.00	\$12.00
Bean & Cheese Burrito (No Sauce) Tostada	\$10.00
Loaded Tostada Meat Choice Beef/Chicken/Pork Carnitas,Topped w/beans, lettuce,	\$12.00

Quesadilla

Large Quesadilla, melled cheese. \$14.00 garnished w/sour cream on the Large Quesadilla-Metted cheese. \$18.50 Carne Asada (Steak), garnished

Small Quesadilla- Melted Cheese. \$12.50 garnished w/sour cream

Extra Charge-Add Meat Reef or Shredded Chicken \$3.00 Asada or Pork Carnitas \$4.00

w/sour cream

Salad \$16.50 Fiesta Taco Salad

Filled w/heef or shredded Chicken, Beans, lettuce, cheese, sour cream, guacamole, olives when available

> \$15.50 Healthu Choices Spinach Wrap

Filled w/black beans, grilled marinated chicken, brown rice. Pico De Gallo, fresh avocado

**Also Available in a Rowl



Crilled Corn Tortilla w/melted jack

cheese, filled with Pork Carnitas. quacamole, cilantro & onions

Guacamole, cilantro & onions

Tortilla w/lettuce, cheese

Pork Carnitas Tacos

(3) To an order

Grilled Marinated Chicken, soft flour

Carne Asada Taco

Chicken Taco



cheese, sour cream, quacamole,

cilantro & onions



