



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 1 – Transferor Information

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

Licensee:	THE GALLEY RESTAURANT LLC		License #:	4117	
License Type:	BEVERAGE DISPENSARY		Statutory Reference:	04.09.200	
Doing Business As:	THE GALLEY RESTAURANT				
Premises Address:	485 KATLIAN ST.				
City:	SITKA	State:	AK	ZIP:	99835
Local Governing Body/Bodies:	CITY OF SITKA				

Transfer Type:

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

OFFICE USE ONLY

Complete Date:		Transaction #:	
Board Meeting Date:		License Years:	
Issue Date:		Examiner:	

RECEIVED

MAR 24 2023

ALCOHOL MARIJUANA CONTROL OFFICE  
STATE OF ALASKA



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:	UMBRIA SUNSET, LLC				
Doing Business As:	THE GALLEY RESTAURANT				
Premises Address:	485 KATLIAN ST.				
City:	SITKA	State:	AK	ZIP:	99835
Community Council, (If applicable):					

Mailing Address:	P.O. BOX 124				
City:	SITKA	State:	AK	ZIP:	99835
Email:	PATRICIA BUAK1@GMAIL.COM	Phone:	509-393-9510		

Designated Licensee:	PATRICIA BUAK			
Contact Phone:	509-393-9510	Business Phone:	509-393-9510	
Contact Email:	PATRICIA BUAK1@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

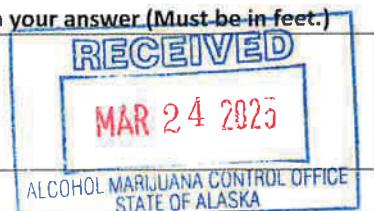
The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

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 (Must be in feet).

0.5 MILES

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer (Must be in feet.)

0.5 MILES





## Alaska Alcoholic Beverage Control Board

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## 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:	
Email:		Phone:			

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:		Phone:			

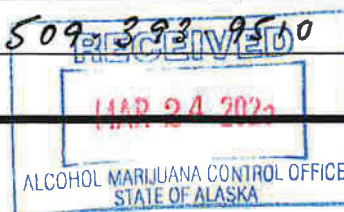
## Section 5 – Entity Ownership Information

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 application shall be executed by an authorized officer of the Corporation. Information must be completed below 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, whether manager managed or member managed, the following information must be completed for each **member with an ownership interest of 10% or more** and for each **manager regardless of ownership share**.
- 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**.
- For any entity, identify all affiliates for your organization as defined at 3 AAC 305.950.

Entity Official:	PATRICIA RUAK				
Title(s):	MEMBER	Phone:	509.393.9510	% Owned:	100
Address:	508 HALIBUT POINT RD. APT. A				
City:	SITKA	State:	AK	ZIP:	99835
Email:	PATRICIA RUAK 1@GMAIL.COM	Phone:	509.393.9510		





Alaska Alcoholic Beverage Control Board

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

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

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

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). The registered agent is either an individual resident of the state or domestic corporation authorized to transact business in the state and whose business office is the same as the registered office.

CBPL Entity #:	10298094	AK Formed Date:	1/18/25	Home State:	AK
Registered Agent:	REGISTERED AGENTS	Agent's Phone:	907.312.5564		
Agent's Mailing Address:	821 N. STREET SUITE 102				
City:	ANCHORAGE	State:	AK	ZIP:	99501
Email:	ALASKAREGISTEREDAGENT.COM	Phone:	907-312-5564		

Residency of Agent:

Does your registered agent satisfy the requirement of AS 04.11.430?



Yes No

☒ ☐





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):

PATRICIA BUAK  
FULL SERVICE RESTAURANT / BAYVIEW PUB LLC  
LIC #268 - BEVERAGE DISPENSARY

### 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:

THE LAW OFFICES OF ERNEST & COFFEY P.C.  
IS ASSISTING WITH THIS TRANSFER





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

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

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

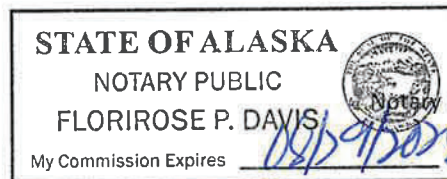
I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve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

James H. Heiser  
Signature of transferor

JAMES HEISER  
Printed name of transferor

Subscribed and sworn to before me this 27 day of January, 2025.

[Signature]  
Signature of Notary Public



Notary Public in and for the State of Alaska

My commission expires: 08/29/2028

\_\_\_\_\_  
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.

P.B

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

P.B

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.

P.B

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.

P.B

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


P.B

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.

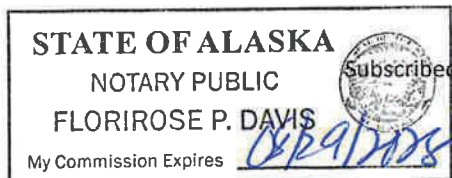
P.B

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.

P.B

  
Signature of transferee  
PATRICIA BUAK  
Printed name

  
Signature of Notary Public  
Notary Public in and for the State of Alaska  
My commission expires: 08/09/2028



Subscribed and sworn to before me this





## 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.

### Section 1 – Establishment and Contact Information

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

Licensee:	Umbria Sunset, LLC	License #:	4117		
Doing Business As:	The Galley Restaurant	License Type:	Beverage Dispensary		
Licensee Mailing Address:	PO Box 124 Sitka AK 99835	Phone Number:			
Full Premises Address:	485 Katlian Street				
City:	Sitka	State:	AK	ZIP:	99835
Local Governing Body:	City of Sitka	Email:	patriciabuaak1@gmail.com		

### Section 2 – Endorsement Requested

Restaurant Endorsement:	AS 04.09.450. A restaurant endorsement authorizes the holder of a beverage dispensary license, fair license, golf course license, sporting activity or event license, club license, outdoor recreation lodge license, destination resort license, or beverage dispensary tourism license. The biennial fee for a restaurant endorsement is \$200 with a \$25 application fee.
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An application for a restaurant endorsement must specify the establishment or portion of the establishment that constitutes a bona fide restaurant, that there is supervision on the premises adequate to reasonably ensure that a person under 21 years of age will not obtain alcoholic beverages. This **endorsement** application is for the request of a designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

- ☐ Dining after standard closing hours: AS 04.16.010(c)
- ☒ Dining by persons 16 – 20 years of age: AS 04.16.049(a)
- ☒ Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)
- ☒ 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.

### Section 3 – Access to Persons Under 21 Years of Age

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).

Minor customers will only be permitted in the dining area, including the deck area, and restrooms. Minor employees are permitted to be on the restaurant floor as well as the kitchen, they are just not permitted to work in the bar area, or handle or deliver alcoholic beverages.







## 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.

**Storage:** All alcohol will be locked in a secure storage closet. This will only be accessible by the restaurant owners, general manager and bar tender. Each of these individuals will be at least 21 years old and will hold on their persons a current TAP or eTIP card verifying that they have been trained to control the distribution and service of alcoholic beverages in Alaska.

**Access/service:** There will be no alcohol sales or delivery outside the building walls other than on the deck area which is a fenced off area. Dining guests must walk in and out the same door, which controls the transfer of alcohol. An owner or manager is always on site and monitors the consumption of alcohol.

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 – 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  
**P.B.**

*\*Note: If a plan review approval is submitted, a final permit will be required before finalization of any permit or license 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	5:00 AM	11:00 PM
Monday	5:00 AM	11:00 PM
Tuesday	5:00 AM	11:00 PM
Wednesday	5:00 AM	11:00 PM
Thursday	5:00 AM	11:00 PM
Friday	5:00 AM	11:00 PM
Saturday	5:00 AM	11:00 PM





## Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

### Section 6 – Areas Covered by Endorsement

Does the endorsement apply to your entire licensed premises as approved by the ABC Board?

Yes ☒

No ☐

Does the requested endorsement expand your currently licensed premises?

Yes ☐

No ☒

- If no, attach the approved diagram, no larger than 8 1/2" x 11" of the layout, and identify the portions of the premises covered by various requested endorsements. You must use a solid, contiguous colored line in any color other than red to outline the outer perimeter of the area of the premises covered by the requested endorsement(s).
- If endorsements are overlapping, provide a conspicuous means to distinguish each endorsement from the other (e.g., keyed map with varying colors for each requested endorsement).
- Your drawing **MUST** include:
  - Dimensions in feet **not** square feet of all exterior walls and major interior walls (we do not accept diagrams drawn to scale)
  - Include cross-streets
  - A north arrow, and any significant geographical features. Points of reference, such as a compass showing North.
  - All entrances, exits, walls, bars, and fixtures
- 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.
- Any endorsement application that includes 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 7 – Entertainment & Service

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.

*Entertainment* as described by AS 04.09.210, includes dancing, karaoke, live performances, or similar activities, but does not include recorded or broadcast performances without live participation.

Food and beverage service offered or anticipated is:

☒ Table Service

☐ Buffet Service

☐ Counter Service

☒ Other:

To go available (food only)





**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

P.B.

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.

P.B.

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

P.B.

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.

P.B.

**Patricia Buak**

Printed name of licensee

  
Signature of licensee

**2/20/2025**

Date



# MENU

## APPETIZERS

BLACK COD TIPS	\$25
ALASKAN BLACK COD TIPS TOPPED WITH ASIAN SAUCE & SESAME CARROT SALAD.	
GAMBAS AL AJILLO	\$28
SPOT PRAWN, SEASONED WITH SPICES, GARLIC, OLIVE OIL AND BAKED IN A TERRACOTTA BOWL, SERVED WITH CROSTINI BREAD.	
HALIBUT NUGGETS	\$28
GENEROUS PORTION OF ALASKAN HALIBUT NUGGETS SERVED WITH OUR HOUSE MADE TARTAR SAUCE. PERFECT FOR SHARING.	
STEAMER CLAMS	\$27
LITTLENECK CLAMS WITH A DELICIOUS BROTH THAT INCLUDES, CILANTRO, TOMATO, GARLIC, LINGUICA, BUTTER AND BEER. SERVED WITH CROSTINI BREAD.	
HALIBUT CEVICHE <b>GF</b>	\$28
FRESH ALASKAN HALIBUT, FRESH SQUEEZED CITRUS JUICE AND PICO DE GALLO, SERVED WITH HOUSE MADE CORN CHIPS.	
SPICY POKE	\$25
KING SALMON, SOY SAUCE, SESAME OIL, BLACK SESAME SEEDS, SRIRACHA, SCALLIONS, PICKLED GINGER, SERVED WITH CROSTINI BREAD.	

## SALAD AND CHOWDER

CAESAR SALAD	\$11/17
CRISPY ROMAINE HEARTS, PARMESAN, CAESAR DRESSING, AND CROUTONS.	
GALLEY SALAD	
MIX OF GREENS, STRAWBERRIES, CARAMELIZED PECAN, GOAT CHEESE AND HOUSE MADE BALSAMIC VINAGRETTE.	\$12/18
ADD HALIBUT OR KING SALMON \$18 (BLACKENED OR GRILLED)	
HALIBUT CHOWDER (CUP, BOWL)	\$13/19
FRESH HALIBUT, YELLOW CORN, CARROTS, RED PEPPER, POTATOES, HERBS AND SPICES.	
CHOWDER AND SALAD	\$25

\*CONSUMING RAW OR UNDERCOOKED MEATS, POULTRY, SEAFOOD, SHELLFISH, OR EGGS MAY INCREASE YOUR RISK OF FOODBORNE ILLNESS.



# MENU

## MAIN ENTREES

MISO BLACK COD	
8 OZ. ALASKAN BLACK COD, MISO AND VEGETABLE BROTH SERVED ON RICE WITH BOK CHOY.	\$45
GALLEY RIBEYE	GF
BONELESS 12 OZ RIBEYE COOKED TO PERFECTION, HOUSE MADE CHIMICHURRI AND CHEF'S CHOICE FRESH VEGETABLES.	\$54
SEAFOOD PARPADELLE	
HALIBUT, SALMON, LINGCOD AND BLACK COD WITH LEMON CREAM SAUCE, CILANTRO, ENGLISH PEAS, PARPADELLE AND GRATED PARMESAN.	\$40
MACADAMIA NUT HALIBUT	
MACADAMIA CRUSTED HALIBUT, SERVED WITH RICE, CHEF'S CHOICE FRESH VEGETABLES AND A DELICIOUS LEMON BUTTER SAUCE. HOUSE FAVORITE	\$48
FISH -N-CHIPS	\$30L/\$38 H
BEER-BATTERED FRESH CHOICE OF LINGCOD OR HALIBUT, WITH CRISPY SEASONED FRIES, SLAW SALAD AND HOUSE MADE TARTAR DRESSING.	
FISH BURGER	\$35
FRESH HALIBUT OR KING SALMON BLACKENED OR GRILLED, TOPPED WITH LTO, SLAW SALAD, CRISPY SEASONED FRIES AND HOUSE MADE TARTAR DRESSING.	
GALLEY BURGER	\$25
1/3 POUND WAGYU SMASH BURGER WITH GALLEY HOUSE DRESSING, LTO, CHOICE OF CHEESE, SERVED WITH CRISPY SEASONED FRIES.	
ADD BACON \$4    ADD SPOT PRAWNS \$10	

## DESSERT

CREME BRULEE	GF
DELICIOUS CUSTARD TOPPED WITH A CRISPY LAYER OF CARAMELIZED SUGAR	\$15
BROWNIE ICE CREAM SUNDAE	
DELICIOUS HOMEMADE BROWNIE TOPPED WITH ICE CREAM, CHOCOLATE SYRUP AND WHIPPED CREAM.	\$15
CHURROS AND ICE CREAM	
FRIED PASTRIES FILLED WITH CREAM, WITH CINNAMON AND SUGAR WITH ICE CREAM.	\$15

# BAR MENU

## WINES

### RED

	GLASS/ BOTTLE
HOUSE RED NAPA VALLEY CABERNET	\$8
J LOHR SEVEN OAKS CABERNET PASO ROBLES CA	\$14/\$54
HEDGES FAMILY ESTATE CMS BLEND COLUMBIA VALLEY WA	\$12/46
COPPOLA DIAMOND CABERNET	\$54
HEDGES FAMILY ESTATE RED MOUNTAIN BLEND WA	\$72
SUBSTANCE CABERNET SAUVIGNON COLUMBIA VALLEY	\$54
E GUIGAL COTES DU RHONE FRANCE	\$56
FONSECA PORT BIN 27 RESERVE -PORTUGAL - PORT WINE	\$58

### WHITE

HOUSE WHITE - CALIFORNIA PINOT GRIGIO	\$8
LA CREMA CHARDONNAY SONOMA CA	\$14/\$54
KENDALL JACKSON GRAND RESERVE CHARDONNAY CA	\$54
KING ESTATE PINOT GRIS WILLAMETTE VALLEY OR	\$54
ALLEN SCOTT SAUVIGNON BLANC NEW ZEALAND	\$54
MARTIN CODAX ALBARIÑO-NORTHERN SPAIN	\$48
J VINEYARDS PINOT GRIS CA	\$52

### ROSE

G BERTRAND COTE DES ROSES - FRANCE	\$52
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### SPARKLING

LA MARCA PROSECCO -ITALY	\$56
J'CATTIN CREMANT D' ALCASE FRANCE	\$46

# BAR MENU

## BEER

### DOMESTIC

\$7

12 oz cans

RANIER

COORS LIGHT

BUD LIGHT

### GUINNESSS IRISH PUB

\$9

15.9 oz cans

GUINNESS BLACK

HARP LAGER

SMITHWICKS RED ALE

### IMPORTS

\$8

12 oz cans

CORONA

HEINEKEN

### DRAFT BEER

\$8

16 oz glass

HARBOR MTN

(LOCAL BREWERY)

### DOMESTIC CRAFT

\$8

12 oz cans

ALASKAN AMBER

ALASKAN ICY BAY

ALASKAN IPA

ALASKAN PILSNER

ALASKAN HAZY IPA

### ALASKAN HARD SELTZER \$8

- LEMON LIME
- MANGO PEACH
- MIXED BERRY
- CHERRY

## HOUSE COCKTAILS

ESPECIAL

ESPECIAL

ESPECIAL

ESPECIAL

ESPECIAL

ESPECIAL

## GALLEY LIQUOR

### VODKA

TITOS

GREY GOOSE

H

P

### WHISKEY

JAMESON

JOHNNY WALKER RED SCOTCH

JACK DANIELS

CROWN ROYAL

TEMPLETON 4 YEAR RYE

GLENLIVET 12 YEAR SCOTCH

H

H

H

P

TS

TS

### BOURBON

MAKERS MARK

BULLEIT

KNOB CREEK

WOODFORD RESERVE

BASIL HAYDON'S STRAIGHT

H

H

P

P

P

### GIN

TANQUERAY

HENDRICKS GRAND CABARET

HENDRICKS

H

P

P

### TEQUILA

SAUZA HORNITOS

15 ANEJO

15 REPOSADO

PATRON

H

H

H

TS

### RUM

BACARDI

CAPTAIN MORGAN SPICED

ZACAFA CENTENARIO RUM

H

H

TS

### AFTER DINNER

CAROLYN'S IRISH CREAM LIQUOR

LIMONCELLO

15 IRISH CREAM LIQUOR

APEROL

GRAND MARNIER ORANGE LIQUOR

H

H

H

H

P

HOUSE \$12  
PREMIUMS \$14  
TOP SHELF \$18



## 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.**

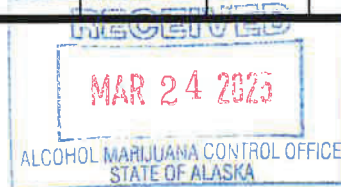
**The diagram MUST include:**

- 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.
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- 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:	Umbria Sunset, LLC	License Number:	4117
License Type:	Beverage dispensary		
Doing Business As:	The Galley Restaurant		
Premises Address:	485 Katlian Street		
City:	Sitka	State:	AK
		ZIP:	99835



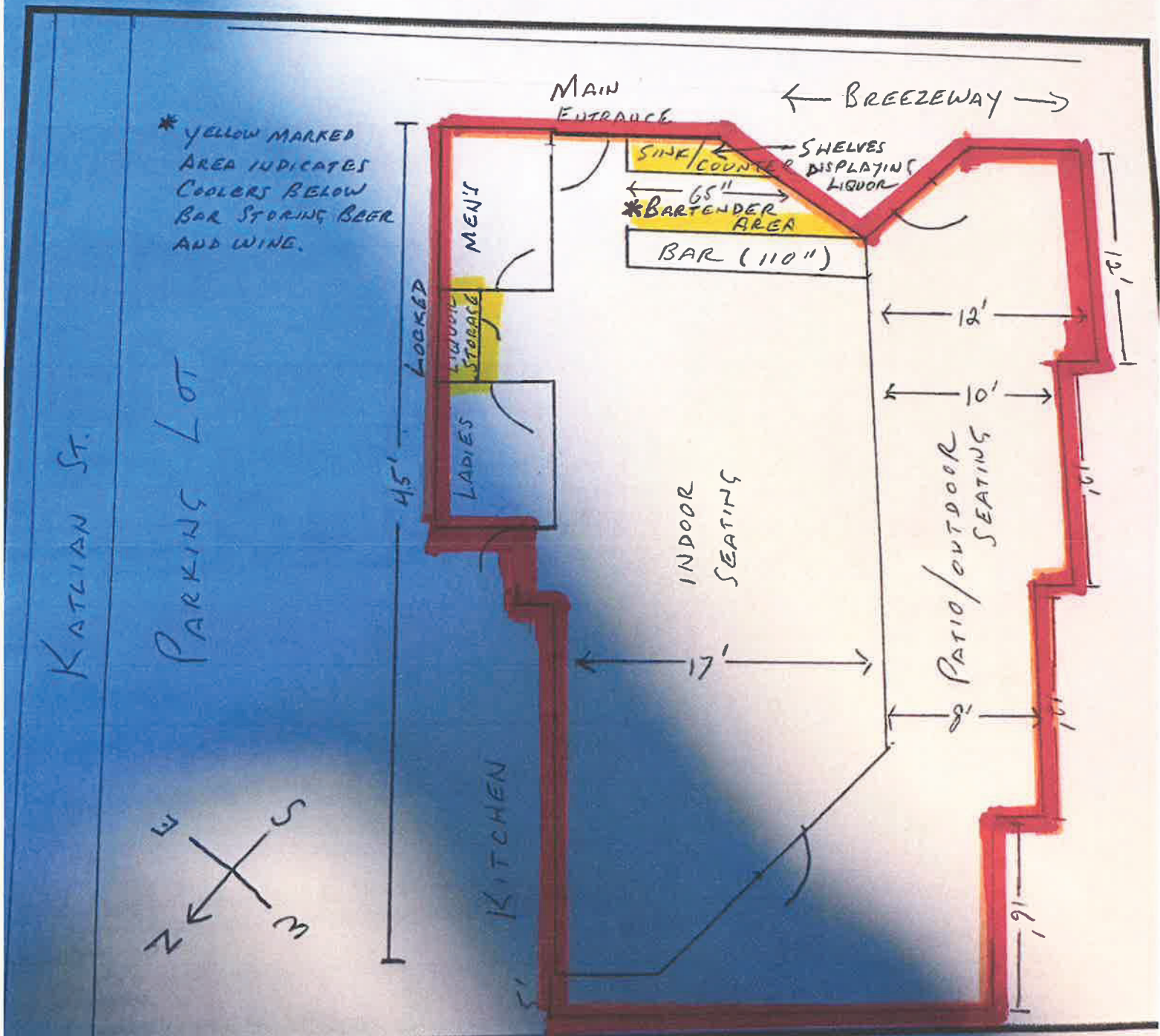




Alaska Alcoholic Beverage Control Board  
**Form AB-02: Premises Diagram**

**Section 2 - Detailed Premises Diagram**

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. See above for detailed instructions.



**Umbria Sunset, LLC**  
**Outside Security Plan**

Umbria Sunset, LLC d.b.a. The Galley Restaurant is located at 485 Katlian Street, Sitka, Alaska 99835. **The outside deck/patio portion of the premises is lifted from the ground about 2 and half feet and has a handrail that goes all the way around the deck area.**

Service for this deck will be through the dining area only which will be monitored by staff.

There will be a manager on site at all times, and when the outdoor serving area is open (weather and staffing dependent), there will be waiting staff walking between the indoor seating area, and outdoor area to monitor alcohol consumption. When the indoor seating area is open and the outdoor seating area is closed, doors to the outdoor seating area will be closed and used only for emergency egress. Waiting staff in the indoor seating area will monitor to ensure patrons do not attempt to use the outside area when it is closed.



## Alaska Food Code 2025 Establishment Permit

Division of Environmental Health  
Food Safety & Sanitation Program

Permit Number: 17315  
Issued to: **UMBRIA SUNSET LLC**  
For: **THE GALLEY RESTAURANT**  
For Operation Of: **FF-1 Food Service**  
Located at: **485 Katlian ST Sitka, AK 99835**

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, 2025**

Program Manager:

A handwritten signature in black ink, appearing to read "Kimberly S. Brown", is written over the printed name of the Program Manager.

**If you have questions or concerns regarding safe food handling practices call or text  
907-764-9825 or visit our website to file a complaint  
([dec.alaska.gov/eh/fss/report-illness-issue/](https://dec.alaska.gov/eh/fss/report-illness-issue/))**





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