



Document reference ID : 7397

Licensing Application Summary

Application ID:	7397
Applicant Name:	Nadon Family Home Llc
License Type applied for:	Golf Course License (GCL) (AS 04.09.300)
Application Status:	In Review
Application Submitted On:	08/24/2026 03:23 PM AKDT

Entity Information

Business Structure:	Limited liability company
FEIN/SSN Number:	[REDACTED]
Alaska Entity Number (CBPL):	10100497

Entity Contact Information

Mailing Address:	222 Front St, Fairbanks, AK, 99701, USA
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Tell Us About You

Authority Type:	I am authorized user by the designated licensee with binding authority
Prefix:	Mr
Legal First Name:	Raymond
Legal Last Name:	Nadon

Email Address: raynadon@gmail.com

Phone Number: 907-350-8702

Additional Authorized Users

Legal Name	Relation with Applicant
Jennifer Bozard	Executive Management
Clayton Nadon	Executive Management

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Nadon Family Home Llc	Raymond Nadon	Member	50
Nadon Family Home Llc	Stephany Nadon	Member	50

Premises Address

Address: 2721 E Sleepy Hollow Cir, Wasilla, AK, 99654-9015, USA

Does the proposed site include a valid street address? Yes

Basic Business information

Business/Trade Name: Sleepy Hollow Golf Course

What is your primary business at this location? Recreation

Premises Contact Details

Contact Person Name Raymond Nadon

Business Phone Number 907-350-8702

Email Address

raynadon@gmail.com

Local Government and Community Council Details

City/Municipality

No Local Government

Borough

Matanuska-Susitna Borough

Community Council Name

Tanaina

Property Ownership

Do you, the applicant, own the land, building, and/or warehouse at this proposed licensed location?

Yes

Property Utilization Status

An Existing Facility

Property Ownership Deed

[2721 Sleepy and connecting property Wasilla.pdf](#)

Premises Diagram

Will the license or permit embrace the entire premises address?

Yes

Premises Diagram

- [SHGC Diagrams with RE.pdf](#)

Security Plan

- [SHGC Outdoor Service Area Security Plan.pdf](#)

Upload a sample food menu as required by
AS 04.09.300

[Handhelds & Light Bites.png](#)

Other Licenses Involvement

Does any representative or owner named 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

Description

Nadon Family Home, LLC holds Golf Course License #5989 dba Midnight Sun Golf Course and Restaurant or Eating Place License #6065 dba Sleepy Hollow Golf Course.

Individual Certification and Financial Interest

I hereby certify that no person other than a proposed licensee listed on the liquor license application has a direct or indirect financial interest, as defined in AS 04.11.450(f) in the business for which a liquor license is being applied for.

I hereby certify that any ownership change shall be reported to the board as required under AS 04.11.040, AS 04.11.045, AS 04.11.050, and AS 04.11.055.

Public Notice Posting Attestation and Publishers Affidavit

Have you posted your application at both required locations for ten consecutive days?

Yes

What was the other conspicuous location of your post? (Please include the full address)

759 E Mountain Ash Loop,
Wasilla, AK 99654 (corner
of Mountain Ash Loop and
Sage Road in the
neighborhood the golf
course is located)

What was the first day you posted your application?

02/19/2026

If the newspaper advertisement was published did you advertise once a week for three consecutive weeks or if by radio twice week for three successive weeks? Yes

What was the final date your advertisement was published/broadcasted? 03/11/2026

Newspaper/Publishers Affidavit

[affidavit_3kcZ5EwfreT4j5i4htrz_48ee.064bb.pdf](#)

Upload Paper form Application

[#60624 New Application.pdf](#)

I attest that I have met the public posting notice requirement set forth under AS 04.11.310 by posting a copy of my application for the 10-day period at the location of the proposed licensed premises and at another conspicuous location in the area of the proposed premises as listed in this application.

I hereby attest 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.

Attestations

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

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 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.

I certify that all proposed licensees have been listed with Division of Corporation, Business, and Professional Licensing.

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

This application was digitally signed by : Raymond Nadon on 02/19/2026 08:44 AM AKST

Payment Info

Payment Type : CC

Payment Id: ef5299ca-cb2d-4cdb-b223-32984244af38

Receipt Number: 101285377

Payment Date: 03/16/2026 10:28 AM AKDT

Documents

#	File Name	Type	Added On
1	2721 Sleepy and connecting property Wasilla.pdf	License property ownership document	02/04/2026 10:45 AM AKST
2	Handhelds & Light Bites.png	Golf Sample Food Menu	02/11/2026 05:31 PM AKST
3	SHGC Outdoor Service Area Security Plan.pdf	License Location Diagram Security Plan Document	02/11/2026 05:31 PM AKST
4	affidavit_3kcZ5EwfreT4j5i4htrz_48ee.064bb.pdf	Publishers Affidavit	03/13/2026 07:02 PM AKDT

5	SHGC Diagrams with RE.pdf	License Location Diagram Document	08/24/2026 02:37 PM AKDT
6	SHGC Diagrams with RE.pdf	Golf Course Diagram Document	08/24/2026 02:37 PM AKDT
7	#60624 New Application.pdf	License Paper Form Application Document	08/24/2026 03:23 PM AKDT



Document reference ID : 7991

Licensing Application Summary

Application ID:	7991
Applicant Name:	Nadon Family Home Llc
License Type applied for:	Restaurant Endorsement (RE) (AS 04.09.450)
Application Status:	In Review
Application Submitted On:	08/13/2026 07:52 PM AKDT

Entity Information

Business Structure:	Limited liability company
FEIN/SSN Number:	[REDACTED]
Alaska Entity Number (CBPL):	10100497

Entity Contact Information

Mailing Address:	222 Front St, Fairbanks, AK, 99701, USA
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Tell Us About You

Authority Type:	I am authorized user by the designated licensee with binding authority
Prefix:	Mr
Legal First Name:	Raymond
Legal Last Name:	Nadon

Email Address: raynadon@gmail.com

Phone Number: 907-350-8702

Additional Authorized Users

Legal Name	Relation with Applicant
Jennifer Bozard	Executive Management
Clayton Nadon	Executive Management

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Nadon Family Home Llc	Raymond Nadon	Member	50
Nadon Family Home Llc	Stephany Nadon	Member	50

Premises Address

Address: 2721 E Sleepy Hollow Cir, Wasilla, AK, 99654-9015, USA

Does the proposed site include a valid street address? Yes

Primary license number

Primary License Information Application ID - 7397 - New Golf Course License
Application - In Review

Basic Business information

Business/Trade Name: Sleepy Hollow Golf Course

Local Government and Community Council Details

City/Municipality

No Local Government

Borough

Matanuska-Susitna Borough

Community Council Name

Tanaina

Premises Diagram

Will the license or permit embrace the entire premises address?

No

Premises Diagram

- [SHGC Diagrams for RE.pdf](#)
- [2721 Sleepy and connecting property Wasilla.pdf](#)

Security Plan

- [SHGC Outdoor Service Area Security Plan.pdf](#)

Restaurant Detail

Dining after standard closing hours: AS 04.16.010(c) No

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

Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3) Yes

Employment for any persons under 21 years of age: AS 04.16.049(c) Yes

List where within the premises minors are anticipated to have access in the course of either dining or employment. (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 only in the dining area, pro shop, golf course grounds, and kitchen/work areas when employed. Dining/Restaurant Area: Minors may dine with their families during regular business hours. Golf Course Grounds: Minors may be present as players or spectators during regular course play or tournaments. Kitchen and Food Service Areas: Certain minors may be employed in food preparation or service roles under adult supervision. Roadhouse (Our Pro Shop): Minors may enter to check in for tee times, purchase non-alcoholic beverages, or merchandise.

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.

Sleepy Hollow Golf Course maintains strick policies to prevent minors from accessing or consuming alcohol: ID Verification: Alcohol is served only to patrons aged 21 or older after verifying valid, unexpired identification. Server Training: All staff who serve or handle alcohol hold current TAP certifications. Supervision: When minors are employed (e.g., in kitchen, maintenance, or outdoor roles), an adult supervisor is always on site. Signage: "No Alcohol Service to Persons Under 21" signs are clearly posed at points of sale and in the dining area. Monitoring: Staff are trained to identify and immediately report any potential underage access or attempted purchase.

Is an owner, manager, or assistant manager who is 21 years of age or older always present on the premises during business hours? Yes

Food Service Permit

Is your license located in Municipality of Anchorage?	No
Do you have Approved food service permit for this premises?	Yes
Copy of the current food service permit for this premises OR the plan review approval.	DEC Permit.pdf

Entertainment & Service

Are any forms of entertainment offered or available within the licensed business or within the proposed licensed premises?	No
Food and beverage service offered or anticipated is:	Counter Service

Restaurant Declaration

Please upload the finalized or expected Food and Alcohol Menu.	Handhelds & Light Bites.pdf
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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, Beverage Dispensary Tourism, Club, Sporting Activity or Event License, Outdoor Recreation Lodge, Golf Course, Destination Resort, OR Restaurant or Eating Place, Seasonal REPL Tourism License.

Hours Of Operation

Sunday	09:00 AM - 08:00 PM
Monday	09:00 AM - 08:00 PM
Tuesday	09:00 AM - 08:00 PM
Wednesday	09:00 AM - 08:00 PM
Thursday	09:00 AM - 08:00 PM
Friday	09:00 AM - 08:00 PM
Saturday	09:00 AM - 08:00 PM

Attestations

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

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 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.

I certify that all proposed licensees have been listed with Division of Corporation, Business, and Professional Licensing.

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.

I certify I have provided a menu of a variety of types of food appropriate for meals that are prepared on the licensed premises.

I certify that non-employees under 21 years of age will not enter and remain on the licensed premises except for the purposes of dining only.

I certify that the sale and service of food and alcoholic beverages and any other business on the licensed premises is under the sole control of the licensee.

I certify the licensed premises is a bona fide restaurant as defined in AS 04.21.080(b).

I certify there is supervision on the licensed premises adequate to reasonably ensure that a person under 21 years of age will not gain access to alcoholic beverages.

Signature

This application was digitally signed by : Raymond Nadon on 08/13/2026 07:51 PM AKDT

Payment Info

Payment Type : CC

Payment Id: 95c23cb0-5909-4c74-b41f-687fa39e742e

Receipt Number: 101339548

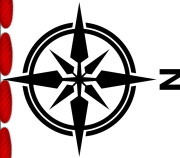
Payment Date: 08/13/2026 07:53 PM AKDT

Documents

#	File Name	Type	Added On
1	SHGC Diagrams for RE.pdf	License Location Diagram Document	08/12/2026 05:43 PM AKDT

2	SHGC Outdoor Service Area Security Plan.pdf	License Location Diagram Security Plan Document	08/12/2026 05:43 PM AKDT
3	DEC Permit.pdf	LicenseRestaurantDetailFoodServicePermitDocumen t	08/12/2026 05:49 PM AKDT
4	Handhelds & Light Bites.pdf	LicenseRestaurantDeclarationFoodAlcoMenuDocume nt	08/12/2026 05:51 PM AKDT
5	2721 Sleepy and connecting property Wasilla.pdf	License Location Diagram Document	08/12/2026 05:56 PM AKDT

Sleepy Hollow Golf Course Alcohol License Premises Diagram 2721 E Sleepy Hollow Cir Wasilla, AK 99654

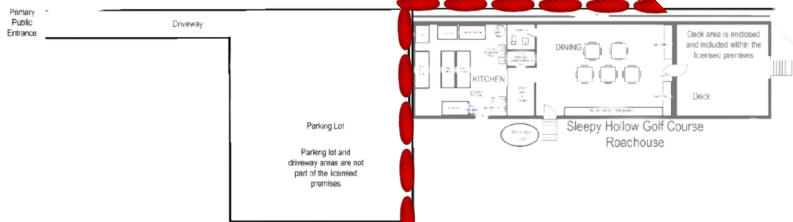


Licensed Premises Boundary: Alcoholic beverages may be stored, served, possessed, and consumed only within the licensed premises boundary shown.

Alcohol service may occur via beverage carts operated by trained staff within the licensed premises boundary.

Driving Range
& Practice Area

Sleepy Hollow Golf Course



Legend

 Licensed Premises
Boundary Line

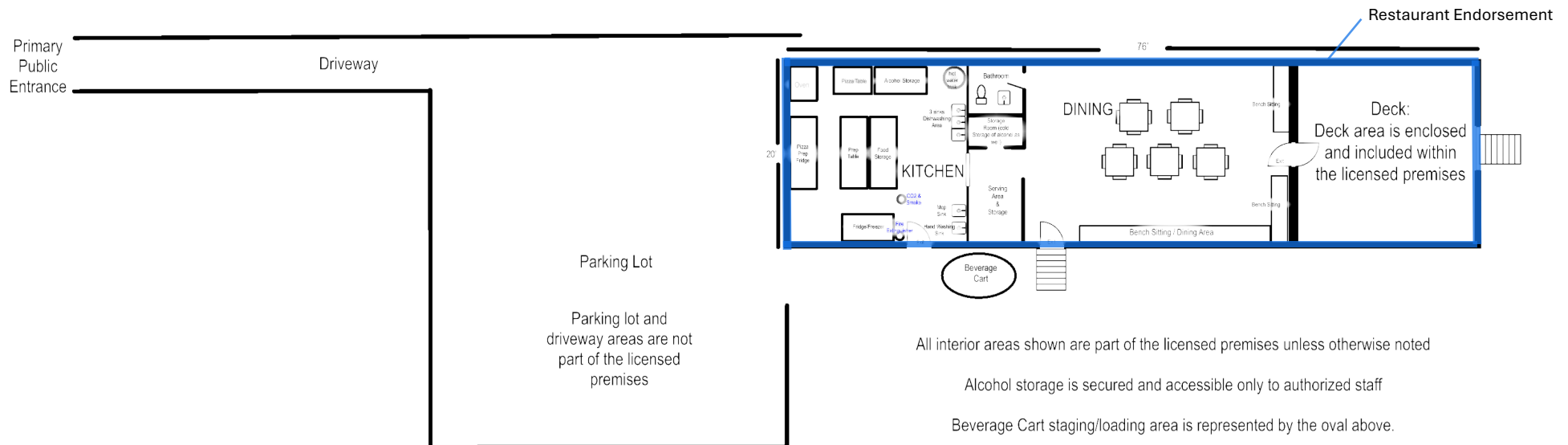


Sleepy Hollow Golf Course

2721 E Sleepy Hollow Cir

Wasilla, AK 99654

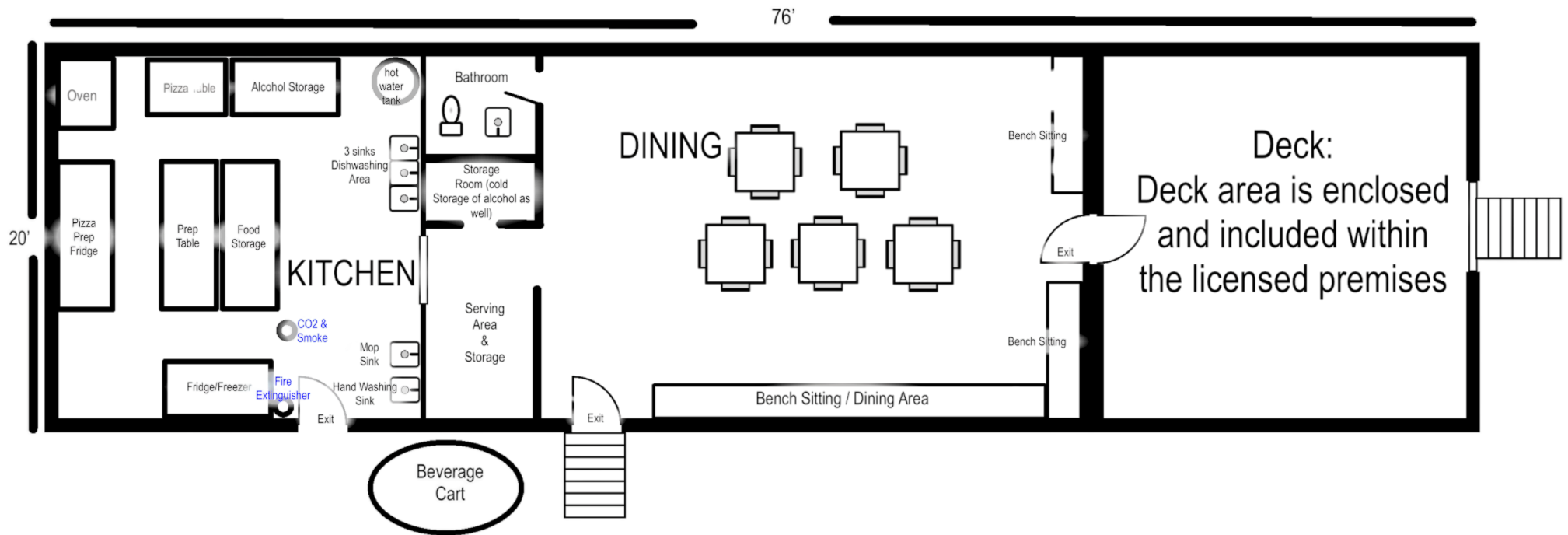
Primary Entrance and Parking Lot Area





Sleepy Hollow Golf Course Roadhouse

2721 E Sleepy Hollow Cir, Wasilla, AK 99654



All interior areas shown are part of the licensed premises unless otherwise noted

Alcohol storage is secured and accessible only to authorized staff

Beverage Cart staging/loading area is represented by the oval above.



Outdoor Service Area Security Plan

Sleepy Hollow Golf Course

2721 E Sleepy Hollow Cir, Wasilla, AK 99654

Sleepy Hollow Golf Course includes outdoor service areas within the licensed premises consisting of the golf course grounds, driving range and practice area, and the enclosed Roadhouse deck. The following security measures and operational practices will be implemented to prevent the transfer of alcohol outside the licensed premises boundary and to prevent access to alcohol by minors.

Personnel and Supervision

All alcohol service will be conducted by employees who are 21 years of age or older and trained in responsible alcohol service practices. Staff responsible for alcohol service will monitor guest behavior, verify identification, and ensure compliance with Alaska alcohol laws and regulations. Beverage cart operators will also be trained in responsible alcohol service and will maintain direct control of all alcoholic beverages while operating throughout the licensed premises.

Staff will actively monitor patron movement near the licensed premises boundary and will intervene if alcohol is observed approaching or leaving the licensed area. Staff are trained to refuse service to any individual who is unable to present valid identification or appears intoxicated.

Barrier Description and Premises Boundaries

The Roadhouse deck is enclosed by permanent railing that provides a physical barrier separating the licensed outdoor service area from surrounding unlicensed areas. The railing meets standard deck enclosure height and restricts uncontrolled access. Entry and exit points to the deck are limited and visible to staff working inside the Roadhouse.

The golf course grounds, including the driving range and practice areas, are defined by the licensed premises boundary shown on the submitted premises diagram. While these areas are open recreational spaces, alcohol service and possession is controlled through staff supervision, controlled distribution, and operational policies described below.

Parking lot and driveway areas are clearly outside the licensed premises boundary. Signage will be posted reminding patrons that alcoholic beverages may not be taken into these areas.



Management and Control Practices

Alcoholic beverages will only be distributed through the Roadhouse service counter or through authorized beverage carts operated by trained staff. Patrons are not permitted to self-serve alcohol or transport alcohol outside the licensed premises boundary.

Beverage carts will maintain inventory control and will not serve individuals who appear under the age of 21 without verifying valid identification. Beverage carts will not operate within the parking lot or other unlicensed areas. Alcohol inventory on beverage carts will remain under the direct supervision of trained staff at all times.

Alcohol storage areas within the Roadhouse are secured and accessible only to authorized staff. Beverage cart loading and staging occurs at a designated area near the Roadhouse entrance where staff can monitor inventory transfer and ensure proper control.

Prevention of Minor Access

All staff serving alcohol will check identification for any patron appearing under the age of 30. Acceptable identification will follow Alaska statutory requirements. Alcohol service will be refused if valid identification is not presented. Staff will immediately confiscate or dispose of alcohol observed in the possession of a minor and will notify management if necessary.

Signage

Signage will be posted at entrances, on beverage carts, and near the parking lot boundary stating that alcohol must remain within the licensed premises and that service is restricted to individuals 21 years of age or older.

Conclusion

Sleepy Hollow Golf Course maintains active staff supervision, controlled alcohol distribution, defined premises boundaries, physical barriers at designated outdoor service areas, and clear signage to ensure alcohol remains within the licensed premises and to prevent access by minors.



Pizzas

CHEESE\$13

CLASSIC PEP
ADD HOT HONEY?\$14

CHICKEN BACON RANCH ★
RANCH BASE, ONION, BACON CHICKEN
.....\$17

MEAT MEAT MEAT
PEPPERONI, SAUSAGE, BACON, MARINARA
.....\$18

BBQ CHICKEN
.....\$17

DILL PICKLE
RANCH, BACON, PICKLES, DILL
.....\$16

NIGHT RIDER
MARINARA, PEP, SAUSAGE, BACON,\$21
ONION, OLIVES, MUSHROOMS

Handhelds & Light Bites

CHICKEN SALAD SANDWICH.....\$10

 **STAFF FAVORITE**
CHICKEN BACON RANCH MELT \$10

HOT DOG\$3

CHIPS & SALSA.....\$3





Alaska Food Code 2026 Establishment Permit

Division of Environmental Health
Food Safety & Sanitation Program

Permit Number: 12887
Issued to: **NADON FAMILY HOME LLC**
For: **HEADLESS HORSEMAN**
For Operation Of: **FF-6 Deli/Takeout/Drive-in Food Service**
Located at: **2721 E Sleepy Hollow CIR Wasilla, AK 99654**

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, 2026

Program Manager:

A handwritten signature in black ink, appearing to read "J. J. J.", is written over a horizontal line.

**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/)**

