Application for Food Establishment Permit

Alaska Department of Environmental Conservation
Division of Environmental Health
Food Safety and Sanitation Program

Permit ID: _____

Section 1- GENERAL INFORMATION *(All applicants complete entire section – please print).*

Purpose (check one) ☒ New ☐ Information Change ☐ Extensive Remodel ☐ Change of owner/operator ☐ Reactivate

Owner/Business Information				
Name of Entity or Owner Responsible for Food Service: Turnagain Manufacturing Company			AK Business License #: 1052630	
Business/Corporate Mailing Address: PO Box 994	City: Girdwood		State: AK	Zip: 99587
Business/Corporate Phone: 833.425.9333	Email: molen.seth@turnagainherbco.com			
Owner(s) or Corporate Officer(s) & Title(s) or Responsible Party: Seth Molen, President			Fax:	
Type of Entity ☐ Individual ☐ Partnership ☒ Corporation ☐ Other:				

Establishment Information				
Establishment Name: Turnagain Manufacturing Company	Physical Location: 524 E 48th Ave		Nearest Community: Midtown	
Establishment Mailing Address: PO Box 994	City: Girdwood		State: AK	Zip: 99587
Establishment Phone: 833.425.9333	Fax:		Contact Person: Seth Molen	
Establishment Physical Address: 524 E 48th Ave	City: Girdwood		State: AK	Zip: 99587

SEATING: (Food Service Only) ☒ N/A ☐ 25 or less ☐ 26-100 ☐ > 101

TYPE OF OPERATION *Please describe the type of facility you plan to open below (i.e. restaurant, bar, grocery store, etc.)*

Marijuana Product Manufacturing Facility

SECTION 2 – NEW OR EXTENSIVELY REMODELED FACILITIES

a. A plan review will be required if your facility has never been permitted by the Alaska's Food Safety and Sanitation Program; has not had an active permit in the last five years; will be extensively remodeled; or is a new construction. If any of these apply, a Plan Review Application is required to process your application. Have you attached the Plan Review Application? ☒ Yes ☐ No

SECTION 3 – COMPLETE FOR ALL FOOD ESTABLISHMENTS *(Check all that apply)*

FOOD SERVICE ESTABLISHMENTS

a. A copy of your menu will be required. Have you attached a copy of the proposed menu? ☒ Yes ☐ No

b. Attach appropriate label, placard, or menu notation for the consumer advisories if you serve:
☐ Wild Mushrooms ☐ Unpasteurized juices ☐ Farmed halibut, salmon, or sablefish
☐ Raw/undercooked animal foods such as beef, shell eggs, lamb, pork, poultry, seafood, and shellfish.

c. Methods of food preparation (check the one that most closely describes the establishment:
☒ Assembly of Ready to Eat Foods ☐ Cook and Serve
☐ Hot or cold Service for 2 hours or more is done
☐ Complex (Preparation 1 day or more in advance, cooling and reheating is done).

d. Style of Service: ☐ Counter Service ☐ Self Service (i.e. buffet line, salad bar) ☐ Table Service
☒ Other: Packaged food items for wholesale.

e. Do you plan to operate as a caterer? ☐ Yes ☒ No
If ***yes***, list all the equipment used to protect food from contamination and maintain product temperature during:
Transportation: Hot or Cold Holding:

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Food Safety Program

Received by AMCO 09.07.17

Plan Review Application

Alaska Department of Environmental Conservation
Division of Environmental Health
Food Safety and Sanitation Program

Permit ID: _____

Section A- General Information *(All applicants complete entire section – please print).*

Purpose (check one) ☐ **New Construction** ☒ **Remodel of Existing Structure** ☐ **Reactivation**

General Information		
Establishment Name: Turnagain Manufacturing Company		Date August 17, 2017
Plan Review Contact Name Seth Molen		
Phone Number 907.306.0905	Email Molen.Seth@TurnagainHerbCo.com	
Address 524 E 48th Ave Anchorage, AK 99503		
Operating Days/Hours Mon-Fri 9am-5pm	Proposed Opening Date October 1, 2017	

If you are proposing to build a new food establishment or extensive remodeling of an existing food establishment in Alaska (except in the Municipality of Anchorage), you must submit a **completed Plan Review Packet 30 days prior to construction**. Additional information regarding calculations and drawings can be found in the Plan Review Guide.

Please Note: Failure to provide all the required information may delay the plan review process and permit issuance.

REQUIRED DOCUMENTATION LIST (*Include the following in your packet)*

☒ Food Establishment Application
☒ Fees
☒ Plot Plan
☒ Floor Plan
☒ Plumbing Schematic
☒ Complete list of equipment (including manufacturer's specifications)

SECTION B – REQUIRED DOCUMENTATION

a. **Potable Water Supply.** Have plans been submitted to the Drinking Water Program as required by 18 AAC 80?

☐ **Yes*** ☐ **No** ☒ **N/A** (Municipal Water Supply) ***Specify in comments.***

Comments: Municipal Water Supply

Attach a confirmation email or letter from the Drinking Water Program stating that the system has been approved.

b. **Wastewater Disposal System.** Have plans been submitted to the Wastewater Program as specified by 18 AAC 72?

☐ **Yes*** ☐ **No** ☒ **N/A** (Municipal System) ***Specify in comments.***

Comments: Municipal System

Attach a confirmation email or letter from the Wastewater Program stating that the system has been approved.

c. **Solid Waste Disposal.** Please describe how you plan to dispose of your solid waste:

Solid waste will be disposed of through Alaska Waste.

d. **Plot Plan.** Have you included a detailed to scale drawing of the plot plan including: ☒ **Yes** ☐ **No**

☒ All buildings
☒ Refuse storage site
☒ Potable water supply
☒ Identify nearby roads, streets, other landmarks, and/or give GPS coordinates
☒ Outside walk-in cooler(s)/freezer(s)
☒ Outside storage areas
☒ Oil/Fuel tanks
☒ Access for deliveries
☒ Sewage disposal system

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