RECEIVED

SEP 1 9 2017

State Of Alaska
DEC Wasilla Alaska 99654

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: Matanuska Cannabis Company	Date 9/18/17
Plan Review Contact Name: Chad Ragsdale	
Phone Number: 360-991-4631	Email: tokawer@outlook.com
Address: 3550 S Old Glenn Hwy Palmer AK 99645	
Operating Days/Hours:	Proposed Opening Date: Jan/Feb 2018

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 p

Chad Ragsdale
360-991-4631

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

- ☒ Food Establishment Application
- ☒ Fees
- ☒ Plot Plan
- ☒ Floor Plan
- ☒ Plumbing Schematic
- ☒ Complete list of equipment (including r...

Pls call for Payment.

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:

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:

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:
Will go to Matsu Borough Waste Disposal

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

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: Matanuska Cannabis Company		AK Business License #: 109 MM	
Business/Corporate Mailing Address: 4584 W Museum Dr	City: Wasilla	State: AK	Zip: 99623
Business/Corporate Phone: 360 991-4631	Email: tokawear@outlook.com		
Owner(s) or Corporate Officer(s) & Title(s) or Responsible Party: Chad Ragsdale Manager		Fax:	

Type of Entity ☐ Individual ☐ Partnership ☒ Corporation ☐ Other:

Establishment Information

Establishment Name: Matanuska Cannabis Company	Physical Location:	Nearest Community: Butte / Palmer	
Establishment Mailing Address: 4584 W Museum Dr	City: Wasilla	State: AK	Zip: 99623
Establishment Phone: 360-991-4631	Fax:	Contact Person: Chad Ragsdale	
Establishment Physical Address: 3550 S Old Glenn Hwy	City: Palmer	State: AK	Zip: 99645

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.)*

Retail Marijuana Store

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:

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:

RECEIVED
AUG 19 2017
State of Alaska DEC
Food Safety Program