Municipality of Anchorage
ıENT OF HEALTH AND HUMAN SERVICES
**ıAL SERVICES / FOOD SAFETY & SANITATION**
?.O. Box 196650, Anchorage, Alaska 99519-6650
ɔne: (907) 343-6509 Fax: (907) 343-4786
www.muni.org

DHHS

MOA DEPT OF H&HS
ENVIRONMENTAL SERVICES
825 L STREET
PHONE: 343-4200

10/5/2017 9:25:10 AM

Facility#FA000
Plan Review 0-1000 sq ft $220.00

Total $220.00

Check $220.00
Total Amt Tend $220.00
Change $0.00

Items 1
Clerk/5 94073 09:26

# ATION FOR PLAN REVIEW

ınstruction/Existing Building ☐ New Construction/New Building

ɔer on King

| | | |
|---|---|---|
| t. #1 | Mailing Address: 9525 King st #1 Anch. AK 99515 | |
| Address: PO Box 1452 | Phone: 382-8990 | Fax: |
| ahoo.com | | |
| Address: PO Box 1452 | Phone: 382-8990 | Fax: |
| ak_catman@yahoo.com | | |
| Square feet: 649 | If Food, Menu Provided: ☐ Yes ☒ No | |
| Applicant's Signature: | Application Date: 10/5/2017 | |

**Department Notes/Comments**

**OFFICE USE**

| Amount Received: | Payment Type: | Receipt Number: | Date Received: |
|---|---|---|---|
| 220 - | CK (1690) | 94073. | 10-5-17. |

**Fees:**

**Pool/Spa**

| | | |
|---|---|---|
| Spa: | $ 300.00 | (Date Paid) |
| Pool 0-1600 sq. ft.: | $ 500.00 | (Date Paid) |
| Pool 1600 sq. ft. +: | $ 750.00 | (Date Paid) |

**Food**

| | | |
|---|---|---|
| Food: 0-1000 sq. ft.: | $ 220.00 | 10/5/17 (Date Paid) |
| Food: 1001-4000 sq. ft.: | $ 330.00 | (Date Paid) |
| Food: 4001 sq. ft. +: | $ 550.00 | (Date Paid) |

Facility ID: _____

PE: AF20.

Plan Review Project Number: SR.

Plan Review: _____

72-038 Ver 12.15

Received by AMCO 11/3/17