Application for Food Establishment Permit

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

Permit ID: C17-1706

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: Anchorage Bowl LLC			AK Business License #: 1050006	
Business/Corporate Mailing Address: 4000 Spenard Road	City: Anchorage		State: Alaska	Zip: 99517
Business/Corporate Phone:	Email: Anchoragebowl420@Gmail.com			
Owner(s) or Corporate Officer(s) & Title(s) or Responsible Party: Shelton Landon			Fax:	
Type of Entity ☐ **Individual** ☐ **Partnership** ☒ **Corporation** ☐ **Other:**				

Establishment Information			
Establishment Name: Anchorage Bowl	Physical Location: 4000 Spenard Road	Nearest Community: AnchorageGo	
Establishment Mailing Address: 4000 Spenard Road	City: Anchorage	State: Alaska	Zip: 99517
Establishment Phone: 907-877-9415	Fax:	Contact Person: Shalton Landon	
Establishment Physical Address: 4000 Spenard Rd.	City: Anchorage	State: Alaska	Zip: 99517

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 / Manufacturing Facility / Prep and Production Kitchen

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:

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Form 18-31-APP.01 (Rev 4/13)

AMCO Received 11/26/2018

Plan Review Application

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

Permit ID: C17-1706

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: Anchorage Bowl LLC		Date November 26, 2018
Plan Review Contact Name Shelton Landon		
Phone Number 907-887-9415	Email Alaskawaterwalls@gmail.com	
Address 4000 Spenard Rd. Anchorage, AK 99517		
Operating Days/Hours Monday through Sunday / 6a.m/6p.m	Proposed Opening Date 2019	

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

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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 be using Muinicipalty of Anchorage Solid Waste Commerical Services

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

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

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