Appendix A - MODEL PLAN REVIEW APPLICATION FOR FOOD ESTABLISHMENTS

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TYPE OF APPLICATION: ☒ New ☐ Remodel ☐ Conversion	**Projected Start Date:** 15-11-2019 **Projected Completion Date:**
TYPE OF FOOD OPERATION: ☒ Retail Marijuana Store	

MARIJUANA RETAIL ESTABLISHMENT INFORMATION

Name of Establishment: Mile High Alaska			
Establishment Address: 910 W. International Airport Rd suit B	**City:** Achorage	**State:** AK	**ZIP:** 99518

OWNERSHIP INFORMATION

Name of Owner: T&D Resources, LLC DBA Mile High Alaska			
Address: ~~910~~ 11900 W. F South Lewis loop	**City:** Wasilla	**State:** AK	**ZIP:** 99623
Email: Sweepint@yahoo.com	**Phone Number:** 907-232-0912		

ARCHITECT/ENGINEER INFORMATION

Applicant Name: Daniel Clift	**Contact Person:** Daniel Clift		
Applicant Mailing Address: 903 W. Northern light Blvd Ste 200	**City:** Achorage	**State:** AK	**ZIP:** 99503
Email: determinedesign.com	**Phone Number:** 903. 339. 9100		

FOOD OPERATION INFORMATION

Hours/Days of Operation	Square Feet of Facility:	Type of Service (check all that apply)	Employees
☒ Sun: ☒ Mon: ☒ Tues: ☒ Wed: ☒ Thurs: ☒ Fri: ☒ Sat:	606.3	☐ Off-site consumption ☐ Single-use utensils ☒ Multi-use utensils ☒ Other: Scale	Max per shift: 6

Designated Point of Contact for questions or additional needed information:
Name: Travis E Owen,
Phone Number: 907-232-0912
Sweepint@yahoo.com

The following documents must be submitted along with this application:
Proposed list of marijuana consumables, concentrates and beverages to be offered

- Plans must be clearly drawn to scale (minimum 11 x 14 inches in size) and include these items below:
- The floor plan must identify: retail sales area, restrooms, office, employee change room, storage, warewashing, janitorial and trash area. Include location of any outside equipment or facilities (dumpsters, well, septic system-if applicable).
- Provide equipment layout and specifications, clearly numbered and cross-keyed with the equipment list.

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Elevation drawings may be requested by the Regulatory Authority.

- Identify handwashing, warewashing and/or three compartment sinks.
- Provide plumbing layout showing the sewer lines, cleanouts, floor drains, floor sinks, vents, hot and cold water lines, and direction of flow to sanitary sewer.
- Provide water heater, hand washing sink, and three-compartment sink specification sheets.
- Provide exhaust ventilation layout including location of hood and make-up air returns and ducts, if applicable.
- Lighting plan, indicating the exact foot candles for each area as required.
- Finish schedule showing floor, coved base, wall and ceilings for each area shown on the plans.

Note: A color coded flow chart may be requested by the Regulatory Authority demonstrating flow patterns for: receiving, storage, glassware (clean, soiled, cleaning, storage); trash (service area, holding, storage, disposal).

Signature:	**Date:** 25 09 2019
Print Name: Travis E Owen	**Title:** Owner

Additional Required Documents:

- Copy of valid business license
- Copy of completed food handlers card
- Design plans for the facility
- All specification sheets:
  - ✓ 3 Compartment Sink
  - ✓ Hand washing sink
  - ○ Refrigerator(s) – commercial grade only N/A
  - ○ Water heater specification sheet
  - ○ Freezer, etc... N/A

Office Use Only			
Fees: 220.00	**Payment Type:** C/Card		**Receipt #:** 99443
Marijuana Retail Stores		**Date Paid:** Oct 1, 2019	Facility ID:
0-1000 sq. ft:	$220.00	PE: AF20	
1001-4000 sq ft.	$330.00	Plan Review Project #	
4001+ sq ft.	$550.00	Plan Review:	

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Shelley A. Griffith, MPH, RPS

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