RECEIVED 8/29/18

DHHS

Municipality of Anchorage
DEPARTMENT OF HEALTH AND HUMAN SERVICES
ENVIRONMENTAL SERVICES / FOOD SAFETY & SANITATION
825 L Street, P.O. Box 196650, Anchorage, Alaska 99519-6650
Telephone: (907) 343-6509 Fax: (907) 343-4786
www.muni.org

APPLICATION FOR PLAN REVIEW

☐ **Remodel/Upgrade** ☐ **New Construction/Existing Building** ☐ **New Construction/New Building**

Establishment Name: The Tree House AK			
Site Address: 341b Boniface Pkwy 99504	Mailing Address: PO Box 140494 Anch. 99504		
Owner Name: B2H, LLC	Address: PO Box 140494	Phone: 223-8351	Fax:
Email: b2hllc.thetreehouse@gmail.com			
Contact Name: Josh Boots / Nick Holbrook	Address: same as above	Phone: 223-8351	Fax:
Email: same as above			
Square feet: 2300	If Food, Menu Provided: ☐ Yes ☑ No		
Applicants Signature:	Application Date:		

Department Notes/Comments

OFFICE USE

Amount Received:	Payment Type:	Receipt Number:	Date Received:
330 -	CK (2259)	96580	8/29/18

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	(Date Paid)
Food: 1001-4000 sq. ft.:	$ 330.00	8/29/18 (Date Paid)
Food: 4001 sq. ft. +:	$ 550.00	(Date Paid)

Facility ID: _____

PE: AF21

Plan Review Project Number: _____

Plan Review: _____

72-038 Ver. 12_15*

Received by AMCO 9.12.18