

Alcohol and Marijuan Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

alcohol.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Form AB-01: Transfer License Application

What is this form?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04** of **Alaska Statutes** and **Chapter 304** of the **Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 - Transferor Information Enter information for the current licensee and licensed establishment. Licensee: License #: 4772 TWO STAR, LLC **Statutory Reference:** License Type: Restaurant/Eating Place 04.11.100 **Doing Business As:** Chickentown Teriyaki **Premises Address:** 1454 South Cushman Street ZIP: State: City: AK 99701 Fairbanks **Local Governing Body:** ALASKA-ALCOHOLIC BEVERAGE CONTROL BOARD Transfer Type: Regular transfer Transfer with security interest

OFFICE USE ONLY			
Complete Date:	Transaction #:	100732503	
Board Meeting Date:	License Years:		
Issue Date:	BRE:		

Involuntary retransfer



https://w

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

	Section 2 – Trans	feree In	formation			
Enter information for the <i>ne</i>	w applicant and/or location seeking to	be licensed.				
Licensee:	JWDY LLC					
Doing Business As:	Chickentown Teriyaki					
Premises Address:	1454 South Cushman St	reet				
City:	Fairbanks	State:	AK	ZI	P: 9	9701
Community Council:						
Mailing Address	0					
Mailing Address:	Same as Above		1			
City:		State:		ZI	P:	
Designated Licensee:	WOON JANG					
Contact Phone:	907-888-8897	Business	Phone:	907-888-	8897	
Contact Email:	woon jang 2000 26	amai	licom			
Yes Seasonal License?	If "Yes", write your s	ix-month o _i	perating period	d:		
	Section 3 - Prem	ises Info	ormation			
Premises to be licensed is:						
an existing facility	a new building	a propose	ed building			
he next two questions mus	t be completed by <u>beverage dispensar</u>	y (including	tourism) and pa	ckage store ap	plicants (only:
	ne shortest pedestrian route from the the nearest school grounds? Include th				oosed pro	emises to
	ol Borough away 11 bloc		-			
What is the distance of the public entrance of the	ne shortest pedestrian route from the enearest church building? Include the	public entran	nce of the buildi	ng of your prop r answer.	osed pro	emises to
	st Church, away about 3					



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Section 4 - Sole Proprietor Ownership Information

This individual is an:	applicant affiliate	nsee and each affiliate (spouse).		
Name:				
Address:				
61-		State:	ZIP:	
City:				
-	applicant affiliate			
	applicant affiliate			
This individual is an:	applicant affiliate			

This section must be completed by any <u>entity</u>, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.

If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a <u>corporation</u>, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president*, *vice-president*, *secretary*, and *managing officer*.
- If the applicant is a <u>limited liability organization</u>, the following information must be completed for each *member with an ownership interest of 10% or more*, and for each *manager*.
- If the applicant is a <u>partnership</u>, including a <u>limited partnership</u>, the following information must be completed for each <u>partner</u> with an interest of 10% or more, and for each <u>general partner</u>.

Entity Official:	WOON JANG				
Title(s):	MEMBER	Phone:		% Owned:	100
Address:	6 HARRIET AVE				
City:	FAIRBANKS	State:	AK	ZIP: 99	701



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								T	
Title(s):			Phone	e:			% Owr	ned:	
Address:									
City:			State:				ZIP:		
Entity Official:									
			Phone	a.		T	% Owr	ned:	
Title(s):			Pilone				70 000	icu.	
Address:									
City:			State:				ZIP:		
Entity Official:									
Title(s):			Phone	e:			% Owr	ned:	
Address:						-			
City:			C				ZID.		
·			State:				ZIP:		
nis subsection must be compl anding with the Alaska Divisi	leted by any applicanion of Corporations (E	t that is a corp DOC) and have AK Formed	oration o a registe	or LLC.	Corporations a rent who is an in	ndividual	re requir	ed to be it of the sta	in goo
nis subsection must be compl anding with the Alaska Divisi aska.	on of Corporations (E	AK Formed	oration o a registe	or LLC. red ag	ent who is an i	ndividual	re requir resident	of the sta	in goo
nis subsection must be compl anding with the Alaska Divisi laska. DOC Entity #:	10209786	AK Formed	oration o a registe	or LLC. red ag	ent who is an i	ndividual	re requir resident	of the sta	in goo
nis subsection must be compl anding with the Alaska Divisi laska. DOC Entity #: Registered Agent:	10209786 WOON JANG	AK Formed	oration o a registe	or LLC. red ag	ent who is an i	ndividual	re requir resident	of the sta	ate of
nis subsection must be compl anding with the Alaska Divisi laska. DOC Entity #: Registered Agent: Agent's Mailing Address:	10209786 WOON JANG 0454 South C	AK Formed	oration o a registe	or LLC. red ag	ent who is an i	Home	re requir resident	AK	ate of



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

ership and financial interest in other alcoholic beverage businesses:	Yes	N
Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?		[
'Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in A ense number(s) and license type(s):	Maska, wh	ich
Section 7 – Authorization		
	Yes	N
	Yes	N
Does any person other than a licensee named in this application have authority to discuss this license with	Yes	N [
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?	Yes	<u>N</u>



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Section 8 - Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

application, approve of the transfer of	this license, and find the information on the	nis application to be true, correct, and complete.
John Ca		
Signature of transferor		
John K	ee	4
Printed name of transferor	Subscribed and sworn to before me this	30 day of August 2023.
AMAN,	RATTENIA	Signature of Notary Public and for the State of My commission expires:
Signature of transferor		
Printed name of transferor	Subscribed and sworn to before me this	day of
		Signature of Notary Public
	Notary Public in	n and for the State of
		My commission expires:



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Form AB-01: Transfer License Application

Section 9 - Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:	Initials
I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.	ws
I certify that all proposed licensees have been listed with the Division of Corporations.	ws
I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.	WS
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.	in J
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	ws
As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 30 that this application, including all accompanying schedules and statements, is true, correct, and complete. Signature of transferee Subscribed and sworn to before me this day of 44945† SEBASTIAN PRENGER Notary Public State of Alaska My Commission Expires Apr 21, 2027 Notary Public in and for the State of Alaska My commission expires: 477.1 × 15	20 <u>3</u> Pry Public



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Form AB-02: Premises Diagram

What is this form?

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The <u>second page</u> of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's main office before any li	license application will be considered	complete
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	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.		V

Section 1 - Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	JWDY LLC License Number		Number:	er: 4722		
License Type:	Restaurant/Eating Place					
Doing Business As:	Chickentown Teriyaki					
Premises Address:	1454 South Cushman Street				2 =	
City:	Fairbanks	State:	AK	ZIP:	99701	



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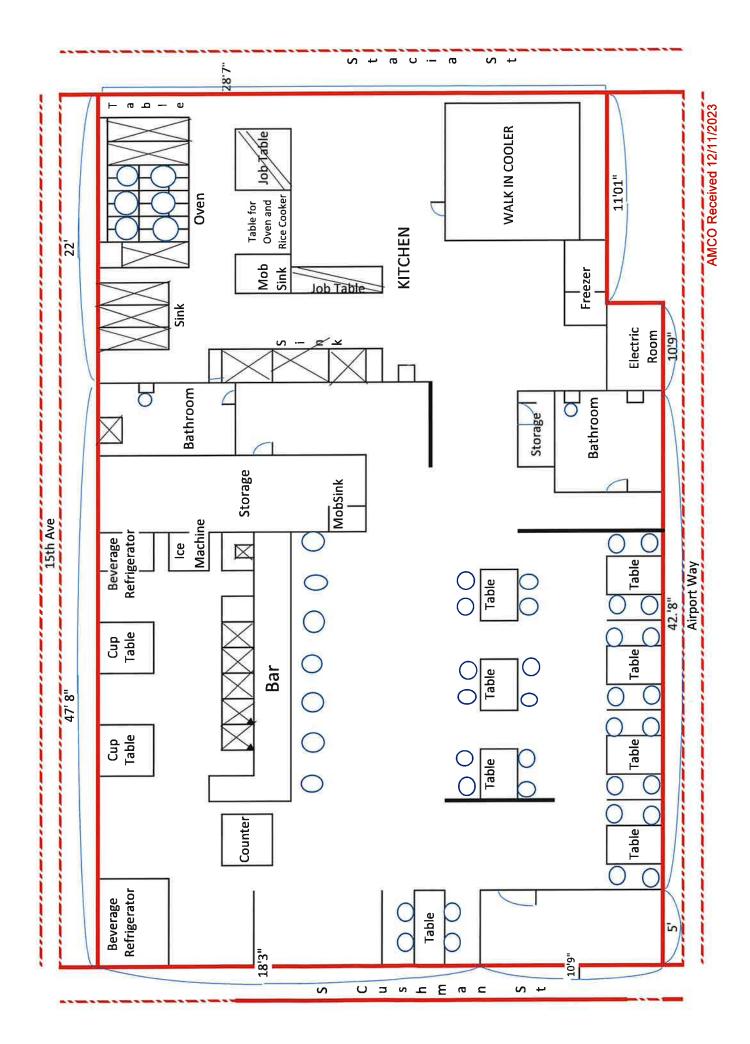
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Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

Section 2 - Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, and fixtures, and outline in red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Include dimensions, cross-streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of this form.





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Form AB-03: Restaurant Designation Permit Application

What is this form?

A restaurant designation permit application is required for a licensee desiring designation under 3 AAC 304.715 – 3 AAC 304.795 as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049. Designation will be granted only to a holder of a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license, and only if the requirements of 3 AAC 304.305, 3 AAC 304.725, and 3 AAC 304.745, as applicable, are met. A menu or expected menu listing the meals, including entrees prepared onsite and offered to patrons, and copy of the DEC Food Service Permit (or corresponding DHHS documentation for licenses located in the Municipality of Anchorage) must accompany this form. Applicants should review AS 04.16.049 – AS 04.16.052 and 3 AAC 304.715 – 3 AAC 304.795. All fields of this form must be completed. The required \$50 permit fee may be made by credit card, check, or money order.

Section 1 - Establishment Information

Enter information for licensed establishment.

Licensee:	JWDY LLC				
License Type:	Restaurant Eating Place	License	Number:	4772	
Doing Business As:	Chickentown Teriyaki				
Premises Address:	1454 South Cushman Street				
City:	Fairbanks	State:	AK	ZIP:	99701
Contact Name:	Woon Jang	Contac	t Phone:		-RMI

Section 2 - Type of Designation Requested

This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

1.	V	Dining after standard closing hours: AS 04.16.010(c)
2.	/	Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)
3.	/	Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3
4.		Employment for persons 16 or 17 years of age: AS 04.16.049(c)

Transaction #:	Initials:	

NOTE: Under AS 04.16.049(d), this permit is not required to employ a person 18 - 20 years of age.



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Form AB-03: Restaurant Designation Permit Application

Section 3 - Minor Access

Review AS 04.16.049(a)(2); AS 04.16.049(a)(3); AS 04.16.049(c)

List where within the premises minors are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Minors will only be allowed in the dining area. OR Minors will only be employed and present in the Kitchen.)

Minors will only be allowed in the dining table and kitchen where don't sell or serve alcohol(s). Sushi Bar has a warning sign "No Person Under 21 Allowed" and "Persons Under 21 years of age not permitted on this Premise" on its Premise

Describe the policies, practices and procedures that will be in place to ensure that minors do not gain access to alcohol while dining or employed at your premises.

JWDY LLC put procedures in place to prevent underage drinking. Checking IDs are first procedures before servicing any alcohols. Of course, in order to ensure that each ID is checked thoroughly, JWDY LLC has trained that each employee would understand the consequences of serving alcohol to minors through proper training. Also, a manager of JWDY LLC would instruct employees to refuse service any time they are in doubt that a person is of age or sober. JWDY LLC would try to stay in compliance with State Alcohol & Marijuana Control Office.

Is an owner, manager, or assistant manager who is 21 years of age or older always present on the premises during business hours?

162	140
V	

Section 4 - DEC Food Service Permit

Per 3 AAC 304.910 for an establishment to qualify as a Bona Fide Restaurant, a Food Service Permit or (for licenses within the Municipality of Anchorage) corresponding Department of Health and Human Services documentation is required.

Please follow this link to the DEC Food Safety Website: http://dec.alaska.gov/eh/fss/food/Please follow this link to the Municipality Food Safety Website: http://www.muni.org/Departments/health/Admin/environment/FSS/Pages/fssfood.aspx

IF you are unable to certify the below statement, please discuss the matter with the AMCO office:	Initials
I have attached a copy of the current food service permit for this premises OR the plan review approval.	
*Please note, if a plan review approval is submitted, a final permit will be required before finalization of any permit or license application.	

[Form AB-03] (rev 4/16/2019



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Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 5 - Hours of Operation Review AS 04.16.010(c). Enter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/pm: 11:00 am to 9:00 pm Monday - Friday 12:00 pm to 9:00 pm Saturday & Sunday Section 6 - Entertainment & Service Review AS 04.11.100(g)(2) Are any forms of entertainment offered or available within the licensed business or within the proposed licensed premises? If "Yes", describe the entertainment offered or available and the hours in which the entertainment may occur: Food and beverage service offered or anticipated is: buffet service counter service other table service If "other", describe the manner of food and beverage service offered or anticipated:



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Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 7 - Certifications and Approvals

Read each line below, and then sign your initials in the l	ox to the right of each statement:	Initials
There are tables or counters at my establishment for cor	suming food in a dining area on the premises.	ws
I have included with this form a menu, or an expected m This menu includes entrees that are regularly sold and p	enu, listing the meals to be offered to patrons. repared by the licensee at the licensed premises.	w
I certify that the license for which I am requesting design golf course, or restaurant or eating place license.	ation is either a beverage dispensary, club, recreational site,	us
I have included with this application a copy of the most (AB-03 applications that accompany a new or train not be required to submit an additional copy of the	sfer license application will	nz
I declare under penalty of perjury that this form, including correct, and complete.	g all attachments and accompanying schedules and statements, is t	rue,
Signature of ticensee	Signature of Notary Public	
Samo	Notary Public in and for the State of ACAS KA	
Not Stat My Commission	IAN PRENGER ary Public of Alaska Expires Apr 21, 2027 2919	1151,20
Subscribed and s	worn to before me this day of	, 20 <u>~ /</u> .
Local Government Review (to be completed by an appr	opriate local government official): Approved	Denied
		\sqcup
Signature of local government official Da	ce	
Printed name of local government official Tit	e	



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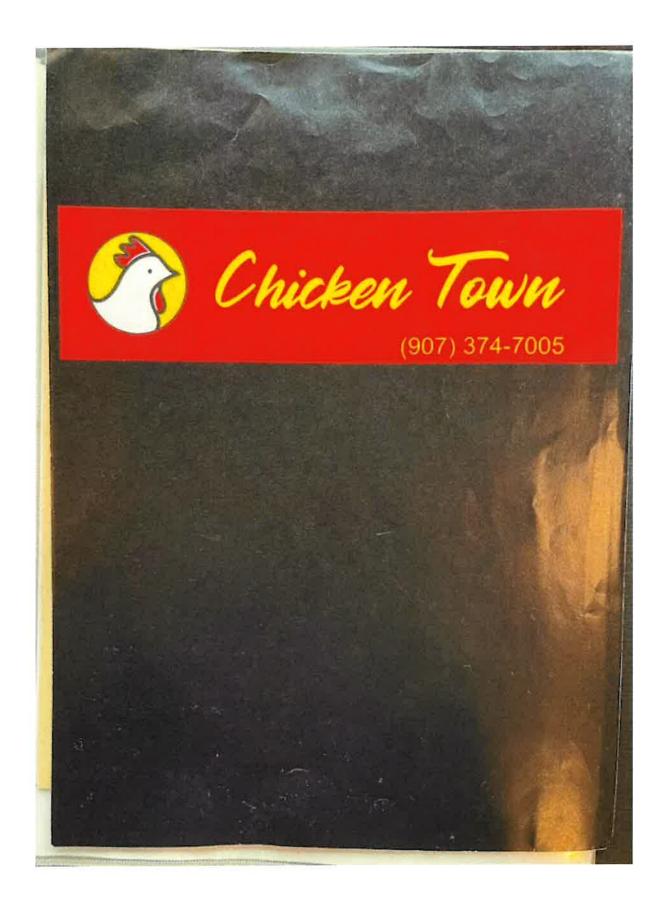
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Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

AMCO Enforcement Review:	Enforcement Recommendation:	Approve	Deny
Signature of AMCO Enforcement Supervisor	Printed name of AMCO Enforcement Supervisor		
Date			
Enforcement Recommendations:			
AMCO Director Review:		Approved	Denied
Signature of AMCO Director	Printed name of AMCO Director		
Date			
Limitations:			



Ramen (spley or mild)

Ramen	accommendate of 14 %.5
Rice Calse Ramen	\$18.95
Beef Romen Creamy truth selected took bodied any cooking corect, orion, manifessors,	\$17.95
Dumpling Romen.	,:
Shrimp Romen	\$17.95
Korean Army Ramen	S19.95
Cheese Ramen	\$15.95
Bacon Ramen	
Numeri Ramen accounts and account acco	

"We will work hard to develop more fresh and nutritious menus and make the restourant happy and enjoyable for our customers."

Romen

Physicas Skipmen

Horson Army Roman

Open Hour IIAm - 9Pm (Tuesday Closed) (907) 374-700s

CI	icken To	wii	A 100	*
		1	W. W.	
BEST Chicken 1		834.95		N.
Holf & Hoth		-	10 May 18	
Bonless Half & Half		\$34.95	为6.46。 安准	
BEST Chicken 2				£ "
Colden Fried Chicken	194H0\$96.95 (W	No. 533.95	AND DESCRIPTION OF THE PERSON	1
Boroom Craiton Fried Chicken	90666_\$98.95 (4)	Nation \$33.95	Half and Half	
Sweet Clared Fried Chicken				
Baneless Sweet Glazed Fred	10 mm 117.95 cm	hold \$35.95	一个是	
Spicy Hot Glazed Fried Chicles	ES _0400 NS 05 (4	S35.95		è
Spicy Hot Glazed Fr	ed leaster to the	hore \$35.95	-11	ß
Buffalo Chicken Wing		\$15.95		-
Decre of Second on Par Wing Claps		29.95		
Chicken Leg (sp)		- \$1X95	Golden Fried Chicle	
Soy Garlic				
Horseless Say Cork	\$17.95	Naio \$35,55		
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Entree (west min & solos)

Fried Chicken Katsu	
Fried Chicken Katsu & Japchae	**************************************
Chicken Breast Katsu	319 5 5

Sweet & Sour Chicken 57 %



Chichen Sheart Filthin



Sweet and Sour Chicken



Chicam Note:

Side Menu

Rice	12.00
Japchae	56.95
House salad	54.00



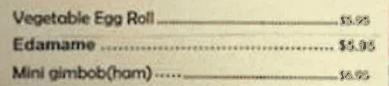
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\$6.95
12.52
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\$7.95
95.95

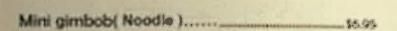


Fried Yam.





Sausage Stick \$6.95





Mini Gimbob (Hami)







Korean Rice Bowls (CUPBOB) Contains white nice. letture, choice of meat, and lower

Bulgogi Cupbob

Fried Chicken Cupbob

Terlyaki Chichen Cupbob

Pork Cupbob S15 % Sept S16.95

(Every Mark \$2.50 / Combo meet \$3.00 / boded egg \$3.50)



Director Coptable



" when CAM CARRED



Chicken Snoot Kirks Durger

Burger

Chicken breast Katsu burger______S13.95

BEVERAGE

Red Wine

CAHERNET	Gbm \$12.00	Bottle 545.00
MERIO	Glass S12.00	Bottle 545.00
REDBIEND	Oless \$12.00	Bombr 545.00
PINOT NOIR	Gleen \$11.00	(Nonte \$44.00)
MALBEC	Class \$11.00	Shortle \$44.00

White Wine

Sauvignes Hara	Catalana \$12 (1)	Bomle \$45.00
Persist Cerus	Colons Ville	Booke \$44.00
Chardonnas	Californ S. L. C.	Beetle \$64.00
Ricsims	Class \$11.00	Bottle \$44.00

House SAKE

(Only Hot Sake) Small \$8 000 Earle \$15

Soft Drink

	84 79
Can Devid	\$2.50
A August Pers	\$1.95
Small im Moneral Water	\$8.40
Hot les	\$1.55
Loughed Water	43.04
for las	\$2.09

