



Document reference ID : 885

## Licensing Application Summary

**Application ID:** 885

**Applicant Name:** Host Chen Anc Fb Llc

**License Type applied for:** Beverage Dispensary Tourism License (BDTL) (AS 04.09.350)

**Application Status:** In Review

**Application Submitted On:** 12/01/2023

### Entity Information

**Business Structure:** Limited liability company

**Alaska Entity Number (CBPL):** 10048595

### Entity Contact Information

**Entity Address:** 6905 Rockledge Drive, MS 7-1, Bethesda, MD, USA

### Ownership / Principal Party Details

| Principal Parent Entity | Principal Party        | Role   | %Ownership |
|-------------------------|------------------------|--------|------------|
| Host Chen Anc Fb Llc    | Chen Alaska Inc.       | Member | 12         |
| Host Chen Anc Fb Llc    | Host International Inc | Member | 88         |

### Premises Address

**Nearest municipality, city, and/or borough:** Anchorage, Muni. of

**Country, State, Zip:** AK, United States,

### Basic Business information

**Business/Trade Name:** Norton Sound Seafood House

### Local Government and Community Council Details

**City/Municipality** Anchorage (Municipality of)

### Ninety Day Sign Requirements

**Posted the 90 day sign:** No

## Restaurant Detail

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|  |     |
|--|-----|
| <b>Dining after standard closing hours: AS 04.16.010(c)</b>  | Yes |
| <b>Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)</b>  | Yes |
| <b>Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)</b> | Yes |
| <b>Employment for any persons under 21 years of age: AS 04.16.049(c)</b>   | No  |
| <b>Employment for any persons under 21 years of age: AS 04.16.049(c)</b>   | No  |

## Food Service Permit

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## Entertainment & Service

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## Public Notice Posting Attestation and Publishers Affidavit

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### Attestations

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I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

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.

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 305.700.

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

I certify that all proposed licensees have been listed with Division of Corporation, Business, and Professional Licensing.

I certify that I and any individual identified in the business entity ownership section of this application, has or will read AS 04 and its implementing regulations.

The proposed changes conform to all applicable public health, fire, and safety laws.

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

## Signature

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Electronic Signature not collected; application submitted based on paper form.

## Payment Info

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Payment Type : CC

PaymentId: 3dfc31c3-beed-4a69-b778-3cc3a007d2ed

Receipt Number:

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# License Renewal

## Subordinates

Drag a column header and drop it here to group by that column

| Select                              | L... ▼ | License Type ▼                               | Trade Name ▼                  | License Status ▼            | City ▼              |
|-------------------------------------|--------|--|-------------------------------|-----------------------------|---------------------|
| <input checked="" type="checkbox"/> | 5320   | Multiple Fixed Counter<br>Endorsement (MFCE) | Norton Sound Seafood<br>House | Active - Renewal<br>Pending | Anchorage, Muni. of |

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**Is this application being made by you for the benefit of someone else? If "YES," indicate below or attach explanation.**

No

**Has the applicant, applicant's spouse, partner, officer, director or stockholders, of the licensed entity become disqualified by law or by facts and conditions from holding a license or permit under the Alcohol and Cannabis Control Information System Alcoholic Beverage Code ? If "YES," indicate below or attach explanation.**

No

**Have there been changes since your original application that have not been reported on this or previous applications ? If "YES," indicate below or attach explanation.**

No

**How many hours did you operate in 0 as set forth in AS 04.11.330?**

Operated to meet the minimum 240 hrs.

**How many hours did you operate in 0 as set forth in AS 04.11.330?**

Operated to meet the minimum 240 hrs.

**Are you a seasonal license and has your operation times/dates/seasons changed?**

No

**Has any person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 0 or 0.?**

No

**Have any Notices of Violation been issued for this license in 0 or 0?**

No


**Supporting Additional Document**

- [ANC - \(Package\) Form AB and Supporting Documents \(Norton Sound 5320\).pdf](#)

**# License Number:**  
4988

**# License Expiration Date:**  
12/31/2023

**# License Trade Name:**  
Norton Sound Seafood House

**Mailing Address:**  
 6905 Rockledge Dr  
Bethesda , MD  
20817