

alcohol.licensing@alaska.gov

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

Phone: 907.269.0350

#### Alaska Alcoholic Beverage Control Board

# Form AB-00: New License Application

#### Why is this form needed?

This application for a license is required for all individuals or entities seeking to apply for a new alcoholic beverage license. Applicants should review **Title 04** of **Alaska Statutes and Chapter 305** of the **Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260 and 3 AAC 305.045.

This form must be completed and submitted to AMCO's Anchorage office, along with all other required forms and fees before any license application will be considered complete and placed in the queue for a licensing examiner review.

Se	ection 1 - Esta	blishment	and	d Contact Info	rmatio	n	
Enter information for the bus	iness seeking to be licer	nsed.					
Applicant:	Achilles Inc	Achilles Inc AS04.				504.09.21	
License Type:	Restaurant / Eating Place Statutory			Statutory Re	eference:		AS 04.11.100
Doing Business As:	Meraki Afrah						
Premises Address:	12870 OLD SEWARD HWY, STE 103						
City:	Anchorage		State	tate: Alaska zı		ZIP:	99515
Local Governing Body/Bodies:	Municipality of Anchorage						
Community Council, (If applicable):							
Mailing Address:	401 W INTL A	IRPORT R	D S	STE 31			
City:	Anchorage		State	:: Alaska		ZIP:	99518
Designated Individual with Binding Authority to apply for this License:	Alfredo Garcia						
Contact Phone:	907-330-4923 Business Phone: 907-217-0435			35			
Contact Email:	merakialaska@	gmail.cor	n				
Yes Seasonal License?		', write your o <sub>l</sub> nths each year	_	ing period not exce	eding		
		OFFICE U	SE ON	LY			
Complete Date:		License Years:			Licens	ie #:	
Board Meeting Date:				Transaction #:	10	0827	486
Issue Date:				Examiner:	i i		
				RECEIVEL			21 2024

ALCOHOL MARIJUANA CONTROL OFFICE



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# **Alaska Alcoholic Beverage Control Board**

# Form AB-00: New License Application

	Section 2 – Pr	emises In	formation	
Premises to be licensed				
an existing facility	a new building	a propos	sed building	
package store applicant only:	be completed by an applicant for			
What is the distance of the sho outer boundaries of the near	ortest pedestrian route from the est school grounds? Include the	public entrance unit of measure	e of the building of your pro ement in your answer.	posed premises to the
	ortest pedestrian route from the t church building? Include the u			pposed premises to the
This section must be complete	ection 3 - Sole Propri ed by any <u>sole proprietor</u> who is	applying for a li	cense. Entities should skip t	
If more space is needed, plea	se attach a separate sheet with st be completed for each licensee	the required in and each affiliat	formation.	
If more space is needed, plea The following information mus This individual is an:	se attach a separate sheet with st be completed for each licensee oplicant affiliate	the required in and each affilia	formation.	
If more space is needed, plea The following information mus	st be completed for each licensee	the required in and each affiliat	formation.	
If more space is needed, plea The following information mus This individual is an: an  Name:	st be completed for each licensee	the required in and each affiliated affiliat	formation.	ZIP:
If more space is needed, plea The following information mus This individual is an: ap  Name: Address:	st be completed for each licensee	and each affiliat	formation. te (spouse).	ZIP:
If more space is needed, plea The following information mus This individual is an: ap  Name: Address: City: Email:	st be completed for each licensee	and each affiliate	formation. te (spouse).	ZIP:
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If more space is needed, plea The following information must This individual is an: ap  Name: Address: City: Email: This individual is an: ap	st be completed for each licensee	and each affiliate	formation. te (spouse).	ZIP:
If more space is needed, plea The following information must This individual is an: ap  Name: Address: City: Email: This individual is an: ap  Name:	st be completed for each licensee	and each affiliate	formation. te (spouse).  umber:	ZIP:

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#### **Alaska Alcoholic Beverage Control Board**

# Form AB-00: New License Application

#### Section 4 - Entity Ownership Information

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 5.

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

- If the applicant is a <u>corporation</u>, the application shall be executed by an authorized officer of the Corporation. Information must be completed below for each stockholder who owns 10% or more of the stock in the corporation, and for each president, vicepresident, secretary, and managing officer.
- If the applicant is a <u>limited liability organization</u>, whether manager managed or member managed, the following
  information must be completed for each *member with an ownership interest of 10% or more* and for each *manager*regardless of ownership share.
- 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>.
- For any entity, identify all affiliates for your organization as defined at 3 AAC 305.950.

Entity Official:	Afrah Sinada					
Title(s):	Director, Secretary	Phone:	907-903-8535	% Ow	ned:	50
Address:	264 Dailey Ave					
City:	Anchorage	State:	Alaska	ZIP:	995	515
Email:	achilles@merakiafrah.com					
Entity Official:	Alfredo Garcia			-		
Title(s):	Director, President, Treasurer	Phone:	907-330-4923	% Ow	ned:	50
Address:	448 Pearl Dr					
City:	Anchorage	State:	Alaska	ZIP:	995	518
Email:	merakialaska@gmail.com					
Entity Official:			-			
Title(s):		Phone:		% Ow	ned:	
Address:						
City:		State:		ZIP:		
Entity Official:		·				
Title(s):		Phone:		% Ow	ned:	
Address:						
City:		State:		ZIP:		
L	ili.	,	DECENV	(OSI)		



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#### **Alaska Alcoholic Beverage Control Board**

# Form AB-00: New License Application

This subsection must be completed by any applicant that is a corporation or LLC or who has registered as a business entity with the Division of Corporations, Business, and Professional Licensing (CBPL). Any entity registered or required to be registered with CBPL must be in good standing and have a registered agent as defined at AS 04.11.430.

CBPL Entity #:	2182489	AK Formed Date:	6/26/2023	Home State:	Alaska	
Registered Agent:	Alfredo Garci	а	Agent's Phone:	907-330-49	23	
Agent's Mailing Address:	401 W INTL	401 W INTL AIRPORT RD STE 31				
City:	Anchorage	State:	Alaska	ZIP: 99518		
Email:	merakialaska@gmail.com					
Does your registered agent sa	tisfy the requirement	of AS 04.11.430?			Yes No	
	Sec	tion 5 – Other L	icenses			
Ownership and financial inter	est in other alcoholic l	peverage businesses.			Yes No	
Does any representative or ow alcoholic beverage business th			or indirect financial in	terest in any other		
number(s) and license type(s)						
		ction 6 – Autho	rization			
Communication with AMCO s	staff:				Yes No	
Does any person other than a staff?	licensee named in thi	s application have autho	ority to discuss this lic	ense with AMCO		
If "Yes", disclose the name of for this authorization:	the individual and co	ntact information for the ir	ndividual, including phor	ne number and emai	l, and the authori	
				and the second s		

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#### Alaska Alcoholic Beverage Control Board

# Form AB-00: New License Application

#### Section 7 – Attestations

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.



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 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.

AX.

rinted name of licensee

Signature of licensee





Alcohol and Marijuana Control Office \$50 W 7th Avenue, Suite 1600 Anchorage, AK 99501 alcohol.licensing@alaska.gov

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Alaska Alcoholic Beverage Control Board

# Form AB-00: New License Application

Section 7 - Attestations	
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.	
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.	AS AS
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.	AS
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	AS
I hereby certify that I am the person herein named and subscribing to this 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.	As
I certify that all proposed licensees have been listed with Division of Corporation, Business and Professional Licensing.	As
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.	As

Signature of licensee

Printed name of licensee



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#### **Alaska Alcoholic Beverage Control Board**

# Form AB-02: Premises Diagram

#### Why is this form needed?

A detailed diagram of the proposed licensed premises is required for all alcohol license applications, per AS 04.11.260, 3 AAC 305.630 and 3 AAC 305.660. 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.

This form must be completed and submitted to AMCO's Anchorage office before any license application will be considered complete. You may attach blueprints or other detailed drawings that meet the requirements of this form.

#### The diagram MUST include:

- You must use a solid, contiguous red line to outline the outer perimeter of your premises with no breaks or separations.
  - The red outline is required to <u>follow a physical barrier</u> (wall, fence and even across doorways).
  - There should be no red lines within the perimeter
- Each area should be clearly labeled in any color other than red where alcohol is:
  - Stored
  - o Served/Sold
  - Manufactured
  - Consumed
- All diagrams must include:
  - Dimensions (AMCO does not accept diagrams drawn to scale)
  - Cross streets
  - Points of reference, such as a compass rose indicating True North
  - All entrances, exits, walls, bars, and fixtures
- If your premises include multiple floors, please include a separate diagram of each floor.
  - You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- If your premises includes multiple floors, please include a separate diagram of each floor. You must identify
  the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- 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.
- Any license applications that include outdoor space are required to submit a security plan that includes
  information about the barriers, practices, and personnel that are to be used to ensure that alcohol is not
  introduced or removed from the permitted premises and to prevent the access of alcohol by a minor during
  the permitted event. A security plan may be requested for other proposed locations on a case-by-case basis.

#### **Section 1 - Establishment Information**

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

Licensee:	Achilles Inc		License Number:	2182489	
License Type:	Restaurant / Eating Place				
Doing Business As:	Meraki Afrah				
Premises Address:	12870 Old Seward Hv	wy Ste 103			
City:	Anchorage	RECEIVED	State: AK	99515	

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STATE OF ALASKA

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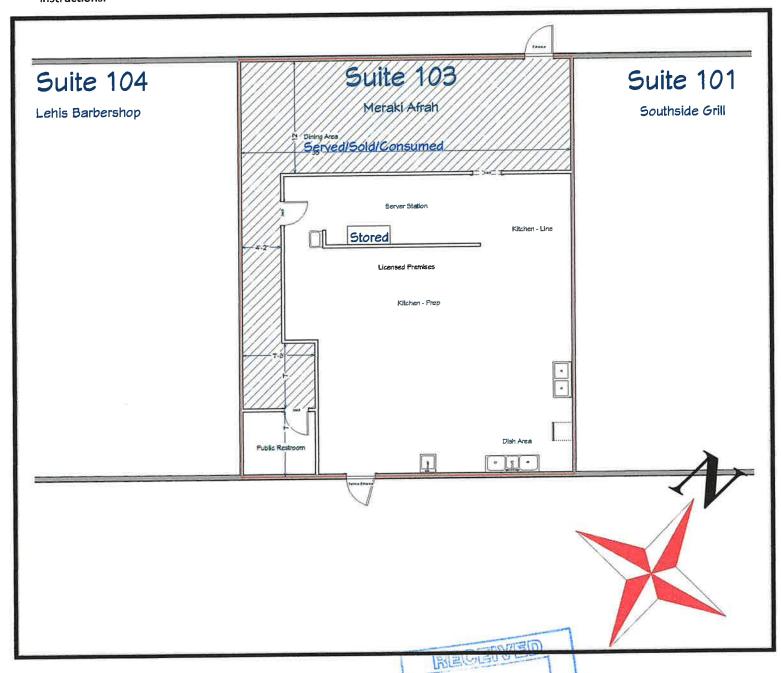
Phone: 907.269.0350

#### **Alaska Alcoholic Beverage Control Board**

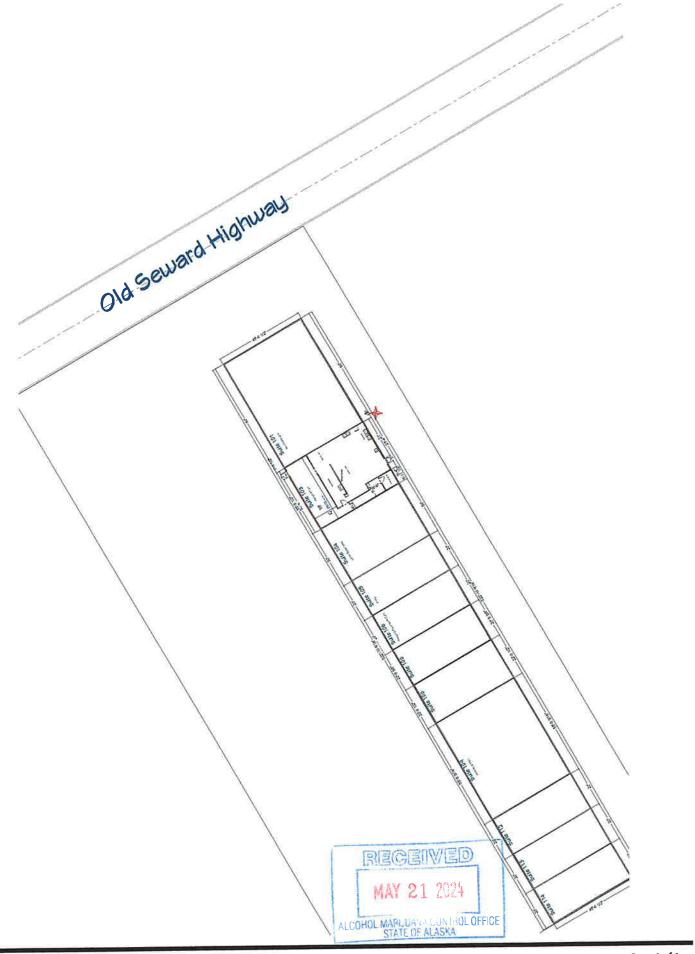
# Form AB-02: Premises Diagram

#### **Section 2 - Detailed Premises Diagram**

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. See above for detailed instructions.



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# Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

The new endorsement application form is required to apply for a restaurant endorsement to support your underlying license or pending license application. Applicants should review and become familiar with AS 04.09.450, **Title 04** of **Alaska Statutes** and **Chapter 305** of the **Alaska Administrative Code**. This form must be completed and submitted along with all other required forms and documents before any endorsement application will be considered complete and placed in the queue for our licensing examiners review.

Licensee:	rent licensee and licensed establish.  Achilles Inc		License #:			
License Type:	Restaurant / Eating Place	Doing Business As	: Meraki Afrah			
Licensee Mailing Address:	401 W Intl Airport Rd Ste 31, Anchorage, AK 99518					
Full Premises Address:	12870 Old Seward HwySte 103					
City:	Anchorage			zip: 99515		
Local Governing Body:	MOA	merakialaska@g	mail.com			
	Section 2 – Endorsement	t Requ	ested			
onstitutes a bona fide res nder 21 years of age will s a bona fide restaurant, ollowing designation(s) (c		t is \$200° shment emises a sement a	with a \$25 application or portion of the adequate to reaso pplication is for th	on fee. establishment that enably ensure that a perso de request of a designation		
. Dining after sta	andard closing hours: AS 04.16.010(c)					
2. Dining by pers	ons 16 – 20 years of age: AS 04.16.049(a) ons under the age of 16 years, accompanie	d by a po	erson over the age	of 21: AS 04.16.049(a)		
Dining by personal Dining By Per	ons <b>16 – 20 years of age:</b> AS 04.16.049(a)			of 21: AS 04.16.049(a)		
Dining by persons.  Dining by persons.  Employment for	ons 16 – 20 years of age: AS 04.16.049(a)  ons under the age of 16 years, accompanies  or any persons under 21 years of age: AS 04.16.049(a)	1.16.049	(c)			

Be specific in your 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).

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STATE OF ALASKA

Minors will be only allowed in dining areas and public corridor to the restrooms.

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| JUL 18 2024 | MAY 21 2924

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HOL MARLILIANA CONTROL



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# **Alaska Alcoholic Beverage Control Board**

# **Restaurant Endorsement Application**

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. Outline how and where alcohol is stored on premises. Acknowledge that employees who sell and serve alcohol must have a current Server Education Card.

Identification Policy: All employees and patrons should be required to provide valid identification showing they are of legal drinking age. This includes a strict policy of checking IDs for anyone who appears to be under a certain age, typically 40 or younger.

Training Programs: Employees should undergo training for alcohol professionals provided by AlaskaCHARR. Ensuring employees are current on alcohol laws, responsible service practices, and how to properly check IDs.

Minors' Access Restrictions: Implement measures to prevent minors from accessing areas where alcohol is served or stored through controlled access points to storage areas located in kitchen reachin cooler.

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

# Yes No

#### Section 4 - ADEC Food Service Permit

Per AS 04.21.080(b) 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.

Link to the Alaska Department of Environmental Conservation (ADEC) Food Safety Website:

http://dec.alaska.gov/eh/fss/food/

Link to the Municipality of Anchorage 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:

I have attached a copy of the current food service permit for this premises OR the plan review approval.

Initials

\*Note: If a plan review approval is submitted, a final permit will be required before finalization of any permit or license application.

#### **Section 5 – Hours of Operation**

Review AS 04.16.010(c).

Include variances in weekend/weekday hours, and indicate AM/PM:

#### **Days/Hours of Operation**

Weekday	Hours	Hours	
Sunday	Closed	Closed	
Monday	Closed	Closed	
Tuesday	11AM	7PM	
Wednesday	11AM	7PM	
Thursday	11AM	7PM	
Friday	11AM	7PM	
Saturday	11AM	7PM	



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#### Alaska Alcoholic Beverage Control Board

#### Restaurant Endorsement Application

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. Outline how and where alcohol is stored on premises. Acknowledge that employees who sell and serve alcohol must have a current Server Education Card.

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Minors' Access Restrictions: Implement measures to prevent minors from accessing areas where alcohol is served or stored through controlled access points to storage areas located in kitchen reachin cooler.

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

Yes

No

#### Section 4 - ADEC Food Service Permit

Per AS 04.21.080(b) 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.

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rat. AG

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Saturday	11AM	7PM	





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# Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

# Section 6 - Areas Covered by Endorsement

Does the endorsement apply to your entire licensed premises as approved by the ABC Board? Yes No Does the requested endorsement expand your currently licensed premises? Yes No Does the requested endorsement expand your currently licensed premises?

- If No, attach the approved diagram, no larger than 8 1/2" x 11" of the layout, and identify the portions of the premises covered by various requested endorsements. You must use a solid, contiguous colored line in any color other than red to outline the outer perimeter of the area of the premises covered by the requested endorsement(s).
- If endorsements are overlapping, provide a conspicuous means to distinguish each endorsement from the other (e.g., keyed map with varying colors for each requested endorsement.
- Your drawing MUST include:
  - Dimensions in feet not square feet of all exterior walls and major interior walls (we do not accept diagrams drawn to scale)
  - Include cross-streets
  - A north arrow, and any significant geographical features. Points of reference, such as a compass showing North.
  - All entrances, exits, walls, bars, and fixtures
- If your premises includes multiple floors, please include a separate diagram of each floor. You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- Any endorsement applications that include outdoor space are required to submit a security plan that includes
  information about the barriers, practices, and personnel that are to be used to ensure that alcohol is not introduced
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  event. A security plan may be requested for other proposed locations on a case-by-case basis.

# **Section 7 - Attestations**

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.

Miliais

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

16

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 of 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, and or endorsement. I further understand that this is a Class A misdemeanor under AS 11.56.210 to falsify an application and commit the crime of unsworn falsification.

Printed name of licensee

Signature of licensee

COHOL MA. JUANA CONTROLLEFFICE / 2.7



# Meraki افراچ



# Soft Opening Menu

Meraki:(v.) To do something with soul, creativity, or love; to put something of yourself into your work. Afrah:(n.) Joy or happiness.

# **APPETIZERS**

# Tzatziki Dip: \$14

Made from Greek "strained" yogurt (FAGE), fresh cucumber, garlic and dill served with pita.

#### Tvrokafteri: \$15

Spicy feta dip, Hellenic feta, grilled chilies, olive oil with pita.

#### Hummus: \$12

Chickpeas, tahini, lemon juice, light garlic and olive oil Served with pita.

# Roasted Eggplant Dip: \$12

Roasted eggplant, garlic, onion, yogurt & olive oil with pita.

# Halloumi (When available): \$14

Grilled served with honey and sesame.

# Feta and Olives: \$14

Imported feta, Kalamata olives and tomato served with pita.

# Feta Fries: \$11

Fries topped with Hellenic feta, olive oil and oregano.

# Mediterranean Dips: \$21

Homemade tzatziki, feta, hummus, roasted eggplant & pita.

#### Zucchini Bites: \$15

Zucchini, carrot, mint, parsley, feta cheese, flash fried with tzatziki.

# Char-Grilled Peppers: \$8

Grilled over open flame, served with garlic, red wine vinegar, and extra virgin olive oil.

#### Calamaraki: \$17

Flash fried calamari served with lemon and tzatziki.

# Grilled Octopus: \$21

Char-grilled over open flame octopus, served over Hummus with olive oil, vinegar and oregano.

#### **SALADS**

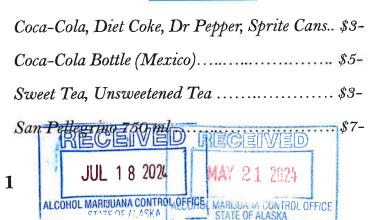
#### Roka Salad: \$17

Fresh arugula, spinach, lettuce, sun dry tomato, golden raisins, grana padano parmesan, balsamic honey vinaigrette.

# Authentic Hellenic Salad: \$25

Tomato, green pepper, onion, cucumber, imported feta, Kalamata olives, imported extra virgin olive oil, oregano, and fleur de sel (Sea Salt).

# BEVERAGES





# Meraki





# YERROS/WRAPS Served with Salad

# Pork yerros: \$17.95

Traditional spit fired pork yerros, sliced and built in-house served on grilled pita with onions, tomato, tzatziki, and fries inside.

#### Kebab: \$17.95

Traditional ground lamb / beef mixture, char-grilled on a skewer, served on pita with onions, tomato, tzatziki, parsley, and fries inside.

# Chicken yerros: \$17.95

Traditional spit fired chicken yerros. Cut marinated and built in-house. Served on grilled pita, with onions, tomato, lettuce, fries inside and our honey Dijon.

# Chicken Kalamaki (Skewer): \$17.95

Grilled chicken skewers served on grilled pita with onions, tomato, lettuce, fries inside and our honey Dijon.

# Grilled Hallumi Yerros: &17.95

Grilled Hallumi Cheese, arugula, onions, tomato, fries inside, tzatziki, and Dijon.

# Veggie Yerros: \$17.95

Fried Zucchini bites, arugula, tomato, onion, and fries, dijon and Tzatziki.

# Spicy Pork Yerros: \$17.95

Shaved pork yerros, sririacha, BBQ sauce, onions, tomatoes, lettuce, and fries inside.

#### <u>PLATTERS</u>

#### Pork Yerros Platter: \$25

Vertical rotisserie shaved pork yerro meat served with fresh onion, tomato, pita, tzatziki, and steak fries.

#### Kebab Platter: \$26

Two Kebabs, fresh onions, whole grilled roma tomato, grilled Anaheim pepper, pita, tzatziki, and steak fries.

#### Chicken Yerros Platter: \$25

Vertical rotisserie shaved chicken yerro, served with fresh onion, tomato, pita, dijon sauce and steak fries.

# Chicken Kalamaki (Skewer) Platter: \$26

Char-grilled chicken skewer served with fresh onion, tomato, pita, dijon sauce and steak fries.

# Hellenic Mix Grill: \$45

Kebab, chicken souvlaki skewer, shaved pork yerro, fresh onion, grilled Anaheim pepper, whole grilled roma tomato, pita, tzatziki, dijon and steak fries.

# **SIDES**

Tzatziki\$2.5-	Steak fries\$7-
Pita\$2-	French fries\$6-
Dinner Salad\$6-	Kalamata Olives\$8-
Mini Hellenic Salad	\$12-
Extra Meat (chicken yerr	ro, pork, Kebab)\$11-
Chicken Kalamaki (Skew	per) RECEIVIESO-
	MAY 21 2624

ALCOHOL MARLINA VA CONTROL OFFICE STATE OF ALASKA

<sup>\*</sup> Address: 12870 Old Seward High Way.

<sup>\*</sup>Phone orders: 907-217-0435

<sup>\*</sup>We are applying 3% cards fees.

THIS PERMIT MUST BE CONSPICUOUSLY POSTED IN A PUBLIC PLACE IN THE ESTABLISHMENT

# Municipality of Anchorage DEPARTMENT OF HEALTH & HUMAN SERVICES

PERMIT

FACILITY NAME OWNER'S NAME: MERAKI AFRAH

ACHILLES INC.

LOCATION:

12870 OLD SEWARD HWY

PERMIT NO.

FA0018805

ISSUED BY THE DEPARTMENT OF HEALTH & HUMAN SERVICES AND SUBJECT TO THE ANCHORAGE MUNICIPAL CODE OF ORDINANCES TITLES 15 AND 16. UNLESS THE OWNERSHIP CHANGES, THIS PERMIT IS VALID FROM 1/1/2024 TO 12/31/2024

MERAKI AFRAH 12870 OLD SEWARD HWY ANCHORAGE, AK 99515

70-031 Ver. 9\_02 \*

THIS CERTIFICATE AND PERMIT IS NOT TRANSFERABLE AND IS THE PROPERTY OF THE MUNICIPALITY OF ANCHORAGE



