



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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 305 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, 3 AAC 305.045 and 3 AAC 305.060.

This form must be completed and submitted to AMCO's Anchorage 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:	SOBA LLC	License #:	5736		
License Type:	RESTAURANT/EATING PLACE	Statutory Reference:	AS.04.09.210		
Doing Business As:	SOBA				
Premises Address:	535 SECOND AVENUE, SUITE 106				
City:	FAIRBANKS	State:	ALASKA	ZIP:	99701
Local Governing Body/Bodies:	CITY OF FAIRBANKS /FNSB				

Transfer Type:

- Regular transfer
- Transfer with security interest
- Involuntary retransfer
- Controlling interest transfer
- Location transfer



OFFICE USE ONLY

Complete Date:		Transaction #:	100922094
Board Meeting Date:		License Years:	
Issue Date:		Examiner:	



Alaska Alcoholic Beverage Control Board

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Section 2 – Transferee Information

Enter information for the **new** applicant and/or location seeking to be licensed.

Licensee:	AK BURGER ZONE LLC				
Doing Business As:	AK BURGER ZONE				
Premises Address:	20 COLLEG RD SUITE 8E				
City:	FAIRBANKS	State:	ALASKA	ZIP:	99701
Community Council, (If applicable):					

Mailing Address:	1423 JOYCE DR				
City:	FAIRBANKS	State:	ALASKA	ZIP:	99701
Email:	edrg86@hotmail.com	Phone:	907-799-6802		

Designated Licensee:	EDUARDO RODRIGUEZ				
Contact Phone:	907-799-6802	Business Phone:			
Contact Email:	burgerZone20@outlook.com				

Seasonal License? Yes No If "Yes", write your six-month operating period: _____

Section 3 – Premises Information

Premises to be licensed is:

an existing facility a new building a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer (Must be in feet).

2640 FT

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer (Must be in feet.)

3168 FT





Alaska Alcoholic Beverage Control Board

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Section 4 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5.
 If more space is needed, please attach a separate sheet with the required information.
 The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: applicant affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:		Phone:			

This individual is an: applicant affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:		Phone:			

Section 5 – Entity Ownership Information

This section must be completed by any entity, 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 corporation, 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, vice-president, secretary, and managing officer*.
- If the applicant is a limited liability organization, 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 partnership, including a limited partnership, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.
- For any entity, identify all affiliates for your organization as defined at 3 AAC 305.950.

Entity Official:	EDUARDO RODRIGUEZ				
Title(s):	MANAGER MEMBER	Phone:	907-799-6802	% Owned:	60%
Address:	1423 JOYCE DR				
City:	FAIRBANKS	State:	ALASKA	ZIP:	99701
Email:	burgerZone20@outlook.com	Phone:	907-7996802		





Alaska Alcoholic Beverage Control Board

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Entity Official:	FATIMA N MUNOZ-REYNOSO				
Title(s):	MEMBER	Phone:	907-388-9747	% Owned:	40%
Address:	1423 JOYCE DR				
City:	FAIRBANKS	State:	ALASKA	ZIP:	99701
Email:	fatyrey14@hotmail.com	Phone:	907-388-9747		

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	
Email:		Phone:			

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	
Email:		Phone:			

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC). The registered agent is either an individual resident of the state or domestic corporation authorized to transact business in the state and whose business office is the same as the registered office.

CBPL Entity #:	10275601	AK Formed Date:	6/26/24	Home State:	AK
Registered Agent:	Eduardo Rodriguez	Agent's Phone:	907-799-6802		
Agent's Mailing Address:	1423 Joyce Dr.				
City:	Fairbanks	State:	AK	ZIP:	99701
Email:	burgerzone20@outlook.com	Phone:			

Residency of Agent: Yes No

Does your registered agent satisfy the requirement of AS 04.11.430?





Alaska Alcoholic Beverage Control Board

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Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses:

Yes No

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?

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

EDUARDO RODRIGUEZ HAS OWNERSHIP IN LIQUOR LICENSE #3376 OF GREENS BAR AND GRILL
HE ALSO HAS OWNERSHIP ON LIQUOR LICENSE #6110 OF FIRBANKS GOLF COURSE ALASKA

Section 7 – Authorization

Communication with AMCO staff:

Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

If "Yes", disclose the name of the individual and the reason for this authorization:

BENJAMIN BLACKBURN
PERSONAL REALTOR





Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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.

[Signature]
Signature of transferor
Stanislaw Gurtsev
Printed name of transferor



Subscribed and sworn to before me this 13 day of September, 2024.

[Signature]
Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 7/14/27

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this _____ day of _____, 20_____.

Signature of Notary Public

Notary Public in and for the State of _____.

My commission expires: _____





Alaska Alcoholic Beverage Control Board 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.

ER

I certify that all proposed licensees have been listed with the Division of Corporations.

ER

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.

ER

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.

ER

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

ER

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 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.

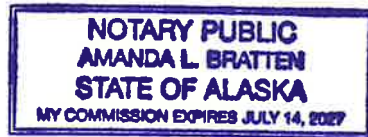
ER

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.

ER

Signature of transferee

Eduardo Rodriguez
Printed name



Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 7/14/2027

Subscribed and sworn to before me this 13 day of September, 2024.





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 follow a physical barrier (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
 - 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:	AK BURGER ZONE LLC	License Number:	5736
License Type:	RESTAURANT/EATING PLACE		
Doing Business As:	AK BURGER ZONE		
Premises Address:	20 COLLEG RD SUITE 8E		
City:	FAIRBANKS	State: ALASKA	ZIP: 99701





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.

SEE ATTACHMENT





CONCRETE FLOOR PLAN NOTE
 1. CONCRETE FLOOR AREAS INDICATED TO BE OPEN LAYOUT ARE SHOWN WITH A DOTTED LINE.
 2. FORM WALL TYPES SEE MARK.

REQUIREMENTS

1. PAINT RECEPTIVE
2. PAINT-TYPE COUNTER WITH HEIGHT LAMINATE AT 4'-0" MIN
3. HANDWASH SINK
4. TRASH BIN
5. GREY STORAGE
6. JURY BENCH
7. CLEANING SUPPLY STORAGE
8. BENCH
9. STORAGE BENCHES ABOVE
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FLOOR PLAN LEGEND

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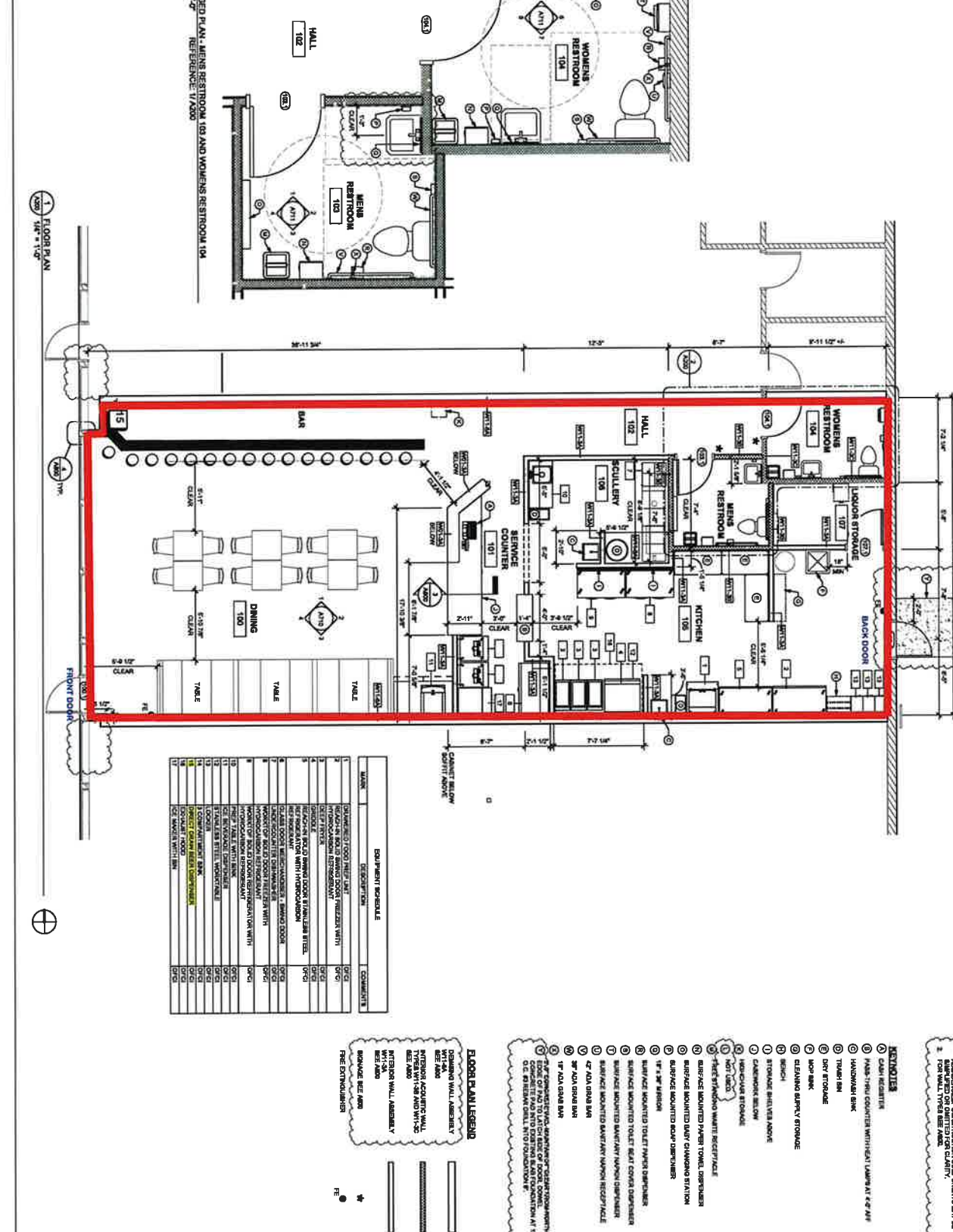
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MARK	DESCRIPTION	COMMENTS
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1. FLOOR PLAN - 1/8" = 1'-0"
 2. ENLARGED PLAN - MEN'S RESTROOM 103 AND WOMEN'S RESTROOM 104
 REFERENCE 1/8" = 1'-0"

AK Burger Zone

1. SEE COMMENTS 26 JUNE 2017

DATE: 26 APR 2017
 DRAWN BY: JAS
 CHECKED BY: JAS
 SCALE: 1" = 1'-0"

FLOOR PLAN

A200



AMCO used this as a **RESTAURANT QUESTIONNAIRE SUPPLEMENTAL FORM TO THE AB-01 AND NOT ASD A RE ENDORSEMENT APPLICATION. KRS 1.16.25**

Alcohol and Marijuana 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

Alaska Alcoholic Beverage Control Board
Restaurant Endorsement Application

This 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.

Section 1 – Establishment and Contact Information

Enter information for the **current** licensee and licensed establish.

Licensee:		License #:	
Doing Business As:		License Type:	
Licensee Mailing Address:		Phone Number:	
Full Premises Address:			
City:	State:	ZIP:	
Local Governing Body:	Email:		

Section 2 – Endorsement Requested

Restaurant Endorsement:	AS 04.09.450. A restaurant endorsement authorizes the holder of a beverage dispensary license, fair license, golf course license, sporting activity or event license, club license, outdoor recreation lodge license, destination resort license, or beverage dispensary tourism license. The biennial fee for a restaurant endorsement is \$200 with a \$25 application fee.
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An application for a restaurant endorsement must specify the establishment or portion of the establishment that constitutes a bona fide restaurant, that there is supervision on the premises adequate to reasonably ensure that a person under 21 years of age will not obtain alcoholic beverages. This **endorsement** application is for the request of a 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):

- Dining after standard closing hours: AS 04.16.010(c)
- Dining by persons 16 – 20 years of age: AS 04.16.049(a)
- Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)
- Employment for any persons under 21 years of age: AS 04.16.049(c)

NOTE: Under AS 04.16.049(d), a Department of Labor and Workforce Development work permit is not required to employ a person 18 - 20 years of age.

Section 3 – Access to Persons Under 21 Years of Age

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

Be specific in your list where within the premises persons under 21 years of age are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Persons under 21 years of age will only be allowed in the dining area OR will only be employed and present in the kitchen).



Alaska Alcoholic Beverage Control Board **Restaurant Endorsement Application**

Describe the policies, practices and procedures that will be in place to ensure that persons under 21 years of age do not gain access to alcoholic beverages while dining or employed at your premises. Outline how and where alcoholic beverages are stored on premises. Acknowledge that employees who sell and serve alcoholic beverages must have a current Server Education Card.

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 – Food Service Establishment 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:

Initials

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

**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	From Time of Day	To Time of Day
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		



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

- 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 application that includes 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 7 – Entertainment & Service

Are any forms of entertainment offered or available within the licensed business or within the proposed licensed premises?

Yes No

If yes, describe the entertainment offered or available and the hours in which the entertainment may occur.

Entertainment as described by AS 04.09.210, includes dancing, karaoke, live performances, or similar activities, but does not include recorded or broadcast performances without live participation.

Food and beverage service offered or anticipated is:

Table Service Buffet Service Counter Service Other: _____



Alaska Alcoholic Beverage Control Board **Restaurant Endorsement Application**

Section 8 – 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.

Initials

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 3AAC 305.340.

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 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

Date

BURGERS

BURGER ZONE 13.95

American Cheese, Mayo, Lettuce
Tomatoes, Onions and Pickles

DOUBLE ZONE 17.95

Double Patty, American Cheese, Mayo,
Lettuce, Tomatoes, Onions and Pickles

BACON BURGER ZONE 15.95

Bacon, Cheese, Mayo, Lettuce,
Tomatoes, Onions and Pickles

JALAPEÑO 15.95

Pepper Jack, Jalapeño Popper, Bacon, Mayo,
Lettuce, Tomatoes, Onions and Pickles

DIABLO 15.95

Pepper Jack Cheese, Jalapeño Popper, Diablo
Sauce, Mayo, Lettuce, Tomatoes, Onions and Pickles

MUSHROOM SWISS 15.95

Mushrooms, Swiss Cheese, Mayo Lettuce,
Tomatoes, Onions and Pickles

SAY CHEESE 15.95

Swiss Cheese, American Cheese, Pepper Jack
Cheese, Cheese Sauce, Mayo, Lettuce,
Tomatoes, Onions and Pickles

All our burgers are made with our specialty
blend of brisket, short rib and chuck

All burgers comes with fries or tots
onion rings **Extra**

GUACAMOLE 15.95

Guacamole, Mayo, Bacon, Lettuce, American
Cheese, Tomatoes, Onions and Pickles

BREAKFAST BURGER 13.95

Sausage Patty, Mayo, Over Medium Egg,
Slice of Potato, American Cheese

VEGGIE BURGER 15.95

Veggie Patty, Lettuce, Tomatoes, Onions and Pickles

CHICKEN ZONE

Home made ground chicken Pattie grilled
or deep fried, Swiss cheese, lettuce,
onions, tomato and pickles 15.95

APPETIZERS

CHICKEN WINGS 13.95

Buffalo, BBQ, Raspberry Habanero

MOZZARELLA STICKS 11.95

Classic mozzarella sticks

DIABLO FRIES 7.95

French fries with Cheese Diablo Sauce

DEEP FRIED PICKLES 10.95

DEEP FRIED MAC N CHEESE 10.95

JALAPEÑO POPPERS 10.95

Deep fried breaded jalapeño filled with cheese

CHILLI FRIES 8.95

Chilli Cheese and Onions

ZONE

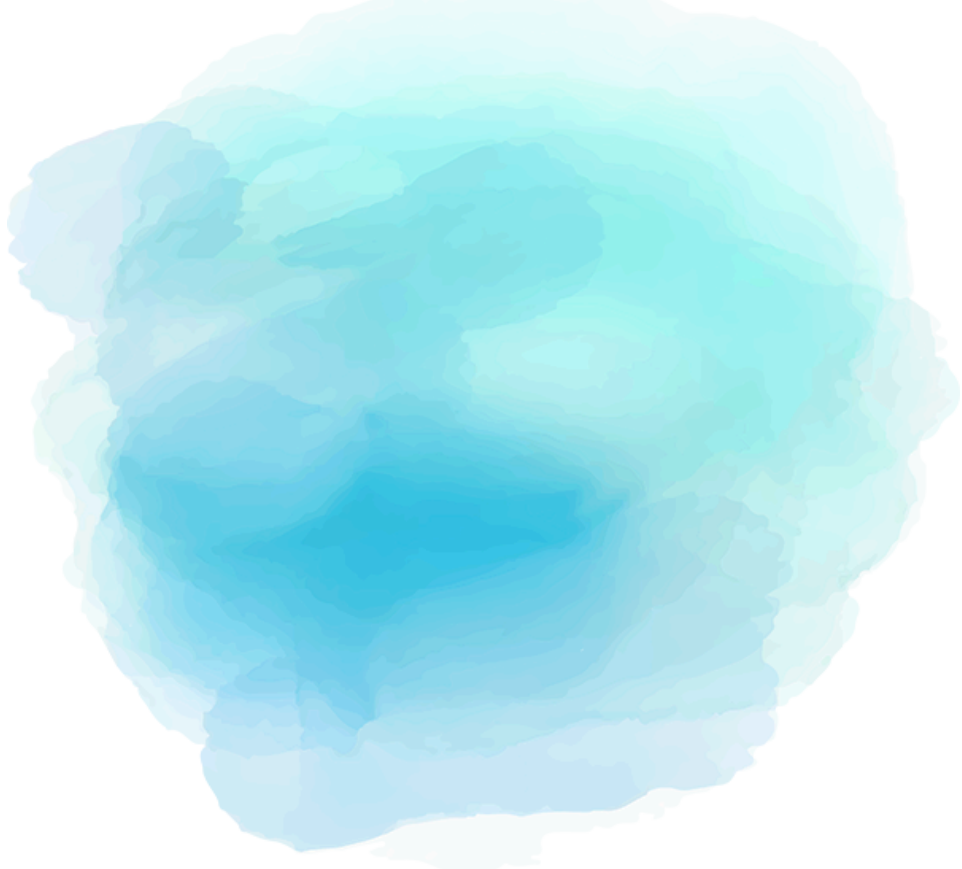
MEETS THE BURGER

CRISPY JALAPEÑO CHICKEN BURGER 15.95

Homemade Chicken Patty, Pepper Jack Cheese, Crispy Jalapeños, Mayo, Lettuce, Tomatoes, Onions and Pickles

SANTAFE CHICKEN BURGER 15.95

Homemade Chicken Patty, Pepper Jack Cheese, Anaheim Peppers, Lettuce, Tomatoes, Onions and Pickles



CLUB CHICKEN BURGER 15.95

Homemade Chicken Patty, American Cheese, Bacon, Mayo, Lettuce, Tomatoes, Onions and Pickles

HEART ATTACK 17.95

Brisket, Crispy Bacon, Burger Patty, American Cheese, Mayo, Lettuce, Tomatoes, Onions and Pickles

EXTREME BURGER ZONE 21.95

Double Patty, Bacon, Brisket or Pulled Pork, Two Slices of Onions Rings, American Cheese, Mayo, Lettuce, Tomatoes, Onions and Pickles

WESTERN BURGER ZONE 16.95

Patty, Brisket and Onion Rings, Mayo, American Cheese, Lettuce, Tomatoes, Onions and Pickles

BBQ BURGER 14.95

Your choice of Brisket or Pulled Pork, Mayo and Pickles

BBQ BURGER ZONE 16.95

Burger Patty, your choice of Brisket or Pulled Pork, Mayo and Pickles

Kids MENU

KIDS BURGER 9.50

5 oz Patty, Lettuce, Tomatoes and Mayo

KIDS CHEESE BURGER 9.95

5 oz Patty, American Cheese, Lettuce, Tomatoes and Mayo

6 PC CHICKEN NUGGETS 10.99

COCA COLA PRODUCTS

Small 2.95 Medium 3.95 Large 4.95

FLOATS WITH CHOICE OF SODA

FROSTEE

BLENDED VANILLA ICE CREAM WITH CHOICE OF SODA

MILKSHAKES

AND MALTS

SMALL 16 OZ 7.00 LARGE 32 OZ 14.00

- | | |
|----------------------|-----------------------|
| BANANA | M&M |
| BLUEBERRY | HOT FUDGE |
| BUTTERSCOTCH | MANGO |
| CHERRY | PEACH |
| CHOCOLATE | BLUE RASPBERRY |
| STRAWBERRY | MACADAMIA NUT |
| VANILLA | |
| PINEAPPLE | |
| PEANUT BUTTER | |
| OREO | |
| RASPBERRY | |
| CARAMEL | |
| COFFEE | |
| BUTTERFINGER | |

SMOOTHIES

SMALL 16 OZ 6.00

LARGE 32 OZ 11.00

- | | |
|--------------------|------------------|
| MANGO | PEACH |
| RASPBERRY | BLUEBERRY |
| STRAWBERRY | LEMONADE |
| PIÑA COLADA | |



Food Establishment Inspection
Alaska Department of Environmental Conservation
Division of Environmental Health
Food Safety & Sanitation



Permit ID 16751	Establishment Name AK BURGER ZONE	Type of Operation FF-6 Deli/Takeout/Drive-in Food Service	
Establishment Mailing Address PO BOX 71250	City Fairbanks	State AK	Zip 99707
Physical Location 20 College RD STE 8E Fairbanks, AK 99701		Telephone 9073281719	
Responsible Party AK BURGER ZONE LLC	Email edrg86@hotmail.com	Person in Charge Eduardo Rodriguez	

Purpose of Inspection Pre-Op	Permit Posted Yes
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FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS
 Risk Factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury.
 Public Health Interventions are control measures to prevent foodborne illness or injury.

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark "X" in appropriate box COS and / or R
 IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable COS = corrected on-site during inspection R = repeat violation

Compliance Status	COS	R	Compliance Status	COS	R
Employee Knowledge			Potentially Hazardous Food Time/Temperature		
1	In	Certified Food Protection Manager on staff	14	N/O	Proper cooking time and temperatures
2	In	Person in Charge appropriate knowledge, performs duties	15	N/O	Proper reheating procedures for items to be hot held
3	N/O	Food Worker Cards for all food workers	16	N/O	Proper cooling times and temperatures
Employee Health			17	N/O	Proper hot holding temperatures
4	In	Proper reporting, restriction, and exclusion	18	In	Proper cold holding temperatures
Preventing Contamination by Hands			19	N/A	Proper use of time as a control; procedures & records
5	In	Hands cleaned and properly washed	Consumer Advisories		
6	N/O	No bare hand contact w/ ready to eat foods	20	In	Consumer advisory for raw or undercooked food
7	In	Hand washing facilities supplied and accessible	Highly Susceptible Population		
Approved Source			21	N/A	Pasteurized food used, prohibited foods not offered
8	In	Food/water obtained from approved source	Chemical		
9	N/O	Food in good condition, safe & unadulterated	22	N/A	Food additives: approved, proper used
10	N/A	Shellstock Tags & Parasite Destruction: Required Records	23	In	Toxic substances properly identified, stored, used
Protection from Contamination			Conformance with Approved Procedures		
11	In	Food-contact surfaces properly cleaned and sanitized	24	N/A	Compliance with variance, HACCP plan
12	N/O	Food separated and protected	25	N/A	Compliance with Required Food Safety Management System
13	N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food			

TEMPERATURE OBSERVATIONS			
Item	Location	Other Description	Temp
Other	Refrigerator	meat fridge amb	37°F
Other	Refrigerator	low boy for excess potato products	37°F
Other	Prep Area	prep line for toppings amb	36°F
Other	Refrigerator	sauce fridge amb	38°F
Other	Refrigerator	low boy for excess prep items	38°F
Other	Other	heat dishwasher puck reading	158°F

CHEMICAL SANITIZER OBSERVATIONS

Chemical	Concentration(PPM)	Chemical	Concentration(PPM)
Quat ammonia	400 ppm		

By _____

ADEC Food Establishment Inspection

Establishment Name: AK BURGER ZONE

Permit ID: 16751

GOOD RETAIL PRACTICES

**Good Retail Practices are preventive measures to control the addition of pathogens, chemicals, and physical objects into foods.
***Designates violation may contribute to Imminent Health Hazard**

**Mark "X" in box if numbered item is not in compliance. Mark "X" in appropriate box for COS and/or R
COS=corrected on-site during inspection R=repeat violation**

Compliance Status		COS	R	Compliance Status		COS	R
Food Temperature Control				Proper Use of Utensils			
26	Adequate equipment for temperature control			37	In-use utensils; properly stored		
27	Approved thawing methods used			38	Utensils, equipment, linens: properly stored, dried and handled		
28	Thermometers provided, calibrated, accurate and used			39	Single use and single service articles; properly used and stored		
Food Identification				Utensils and Equipment			
29	Food properly labeled; original container			40	Gloves used properly		
30	Wild/Farmed Fish properly labeled			41	Food & non-food contact surfaces cleanable, properly designed, constructed, and used		
31	Placards provided for notification properly displayed			42	Warewashing facilities: installed, maintained, and used; test kits provided and used		
Prevention of Contamination				Physical Facilities			
32	No insects, rodents, animals or unauthorized persons			43	Non-food contact surfaces clean		
33	Contamination prevented during food preparation, storage and display			44	Plumbing designed, installed; proper backflow devices		
34	Personal cleanliness maintained, employees using good hygienic practices			45	Toilet facilities: properly constructed, supplied, cleaned		
35	Wiping cloths: properly used and stored			46	Garbage, refuse properly disposed; facilities designed and maintained		
36	Proper washing fruits and vegetables			47	Physical facilities installed, maintained, and clean		
				48	Adequate ventilation and lighting; designated areas used		
				Water and Wastewater			
				49	Water systems designed, installed, and operated as required		
				50	Wastewater systems designed, installed, & operated as required		

NUMBER OF RISK FACTOR / INTERVENTIONS: 0

NUMBER OF GOOD RETAIL PRACTICES: 0

OBSERVATIONS AND CORRECTIVE ACTIONS			
Item Number	Violation of Code	Violations cited in this report must be corrected within the time frames listed below, or as stated in section 18 AAC 31.900(e).	Correct By Date

Inspection Published Comment:



This was a pre-operational inspection which took place prior to this establishment being open. Facility had all equipment operational at the time of inspection.

This facility has a 3 comp sink and a heat dishwasher. Dishwasher will be used for plates and serving utensils for the sanitization step. pots and pans will be run through the 3 comp sink, with a Quat sanitization step. When sani buckets are used to wipe down tables these will be a chlorine solution.

At this point in time the PIC will be smoking brisket at one of the other permitted kitchens within the network of restaurants the PIC over sees, though the PIC stated they may look into a smoker for this establishment, at which time they may begin cooking and cooling in advance.

Burgers will be cooked to temp, and while one burger offers an egg on top, this egg will be fried over hard.

Food to be received from US food and sysco.

Visit Date	Received By (Printed Name)	Received By (Signature)	Date	Inspected By	Inspected By (Signature)	Sig. Date	Time In	Time Out
09/26/2024	Eduardo Rodriguez		9/26/2024	Holden Fleming		9/26/2024	9:50 AM	10:40 AM