

Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

July 2, 2018

Kenai Peninsula Borough Attn: Borough Clerks

Via Email: joanne@borough.kenai.ak.us

jblankenship@borough.kenai.ak.us

kring@borough.kenai.ak.us

License Type:	Beverage Dispensary – Tourism	License Number:	897
Licensee:	The Place, Inc.		
Doing Business As:	The Place		
	<u> </u>		

☐ New Application	
☐ Transfer of Location Application	☐ Transfer of Controlling Interest Application

We have received a completed application for the above listed license (see attached application documents) within your jurisdiction. This is the notice required under AS 04.11.480.

A local governing body may protest the approval of an application(s) pursuant to AS 04.11.480 by furnishing the director **and** the applicant with a clear and concise written statement of reasons for the protest within 60 days of receipt of this notice, and by allowing the applicant a reasonable opportunity to defend the application before a meeting of the local governing body, as required by 3 AAC 304.145(d). If a protest is filed, the board will deny the application unless the board finds that the protest is arbitrary, capricious, and unreasonable. To protest the application referenced above, please submit your protest within 60 days and show proof of service upon the applicant.

AS 04.11.491 – AS 04.11.509 provide that the board will deny a license application if the board finds that the license is prohibited under as a result of an election conducted under AS 04.11.507.

AS 04.11.420 provides that the board will not issue a license when a local governing body protests an application on the grounds that the applicant's proposed licensed premises are located in a place within the local government where a local zoning ordinance prohibits the alcohol establishment, unless the local government has approved a variance from the local ordinance.

Sincerely,

Euha M'Connell

Erika McConnell
Director, ABC Board
amco.localgovernmentonly@alaska.gov



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u>

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

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.

nter information for the curr		tablishment.			
Licensee:	Jason J. Young		License #:		897
License Type:	Beverage Dispen	sary Tourism	Statutory Reference:	AS	04.11.400 (d
Doing Business As:	The Place Bar &	Motel			
Premises Address:	53791 Sparrow L	ane			
City:	Kenai	State:	AK	ZIP:	99611
Local Governing Body:	Kenai Peninsula	Borough			

OFFICE USE ONLY	
Transaction #:	1020513
License Years:	171,8
BRE:	Chi
	Transaction #: License Years:

[Form AB-01] (rev 10/10/2016)

X Regular transfer

Transfer with security interest

Involuntary retransfer





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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 new	w applicant and/or location seeking to	be licensed.			
Licensee:	The Place, Inc.				
Doing Business As:	The Place				
Premises Address:	53791 Sparrow Lane				
City:	Kenai	State:	AK	ZIP:	99611
Community Council:	Kenai Peninsula Bor	ough			
Mailing Address:	P.O. Box 1037				
City:	Kenai	State:	AK	ZIP:	99611
Designated Licensee:	Grant Gratrix				
Contact Phone:	503-467-8488	Business F	hone:	907-283-9	915
Contact Email:	grcg46@gmail.com		711		
Seasonal License?	No If "Yes", write your si			l:	
	Section 3 - Prem	ises Info	rmation		
Premises to be licensed is:					
X an existing facility	a new building	a proposed	d building		
	be completed by <u>beverage dispensar</u>				
the outer boundaries of the	e shortest pedestrian route from the page in the page is nearest school grounds? Include the	oublic entranguments	ce of the buildir surement in voi	ng of your proposed ur answer.	premises to
	Charter School / 4.7				
What is the distance of the the public entrance of the	e shortest pedestrian route from the p nearest church building? Include the	oublic entrandunit of measu	ce of the buildin	ng of your proposed	premises to
	ene Church / 0.1 mil				

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 4 - Sole Proprietor Ownership Information

If more space is needed, pl	ease attach a separate	rietor who is applying for a license. Entiti sheet with the required information. each licensee and each affiliate (spouse).	ies should skip to Section 5.	
This individual is an:	applicant	affiliate	¥	
Name:				
Address:				
City:		State:	ZIP:	
This individual is an:	applicant	affiliate		
Name:				
Address:				
City:		State:	ZIP:	

Section 5 - 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 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 <u>president</u>, <u>vice-president</u>, <u>secretary</u>, and <u>managing officer</u>.
- 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:	Grant Gratrix	:			
Title(s):	President	Phone:	907-283-9915	% Owne	ed: 50
Address:	53791 Sparrow	Lane			
City:	Kenai	State:	AK	ZIP:	99611

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Form AB-01: Transfer License Application

Entity Official:	Rossana Gra	trix							
I IT IS I S I	Secretary, Vice and Treasurer	e President	Phon	ne:	907-283-	9915	% Owi	ned:	50
	53791 Sparr	ow Lane					Lagorania		
City:	Kenai		State	e:	AK		ZIP:	996	11
Entity Official:									
Title(s):			Phon	e:			% Owi	ned:	
Address:					l				
City:			State	:			ZIP:		
Entity Official:									
Title(s):	(M. M.) (M. M.)		Phon	e:			% Owr	ned:	
Address:									
ils subsection must be comp	leted by any applican	nt that is a corpo	State	or LLC	Corporations a	and LLCs a	ZIP:	ed to be	in good
city: als subsection must be companding with the Alaska Divisaska. DOC Entity #:	eleted by any applicantion of Corporations (I	nt that is a corpo DOC) and have a AK Formed	oration c a registe	or LLC ered a	Corporations a gent who is an i	individual	re require	ed to be of the st	in good
els subsection must be comp anding with the Alaska Divis aska.	ion of Corporations (AK Formed	oration c a registe	or LLC ered a	igent who is an i	ndividual Home	re require resident	of the st	in good
nls subsection must be comp anding with the Alaska Divis aska. DOC Entity #:	ion of Corporations (I	AK Formed	oration c a registe	or LLC ered a	gent who is an i	ndividual Home	re require resident State:	of the st	in good
als subsection must be comp anding with the Alaska Divis aska. DOC Entity #: Registered Agent:	10070701 Grant Gratz	AK Formed	oration c a registe	or LLC ered a	/27/2017 gent's Phone:	ndividual Home	re require resident State:	of the st	ate of
als subsection must be comp anding with the Alaska Divis aska. DOC Entity #: Registered Agent: Agent's Mailing Address:	10070701 Grant Gratz P.O. Box 10	AK Formed	oration c a registe	10	/27/2017 gent's Phone:	Home	re require resident State:	AK	ate of
ols subsection must be companding with the Alaska Division aska. DOC Entity #: Registered Agent: Agent's Mailing Address: City:	10070701 Grant Gratz P.O. Box 10 Kenai	AK Formed cix 037 State:	pration caregiste	10 Ag	/27/2017 gent's Phone:	Home	re require resident State:	AK 915 9961	ate of



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Form AB-01: Transfer License Application

Yes	No
	х
laska, whi	ich
Yes	No
х	
A	
	laska, whi

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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

application, approve of the transfer of this license, and fi	nd the information on this application to be true, correct, and complete.
Signature of transferor	
Printed name of transferor Subscribed and so	worn to before me this 3 day of Francisco 2018.
2472	Baline
BARRY LYNN G NOTARY PUBLIC - N My Commission Expires	ILLESPIE Signature of Notary Public
Versional and the second and the sec	Notary Public in and for the State of
	My commission expires: 1/31/2020
Signature of transferor Printed name of transferor	
	vorn to before me this day of, 20
	Signature of Notary Public
	Notary Public in and for the State of
	My commission expires:
[Farm AR 03] (10/40/2045)	DEDENDES
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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Read each line below, and then sign your initials in the box to	the right of each statement:	Initials
certify that all proposed licensees (as defined in AS 04.11.260	0) and affiliates have been listed on this application.	re
certify that all proposed licensees have been listed with the I	Division of Corporations.	n
certify that I understand that providing a false statement on t for rejection or denial of this application or revocation of any li		12
certify that all licensees, agents, and employees who sell or se patron will complete an approved alcohol server education cou serving alcoholic beverages, will carry or have available to show certifying completion of approved alcohol server education cou	urse, if required by AS 04.21.025, and, while selling or was a current course card or a photocopy of the card	R
agree to provide all information required by the Alcoholic Bev	verage Control Board in support of this application.	re
As an applicant for a liquor license, I declare under penalty of phat this application, including all accompanying schedules and signature of transferee	perjury that I have read and am familiar with AS 04 and 3 AAC statements, is true, correct, and complete.	304, and
Printed name Subscribed and sworn t	to before me this 1st day of February	_ 20 <u>18</u>
NOTARY PUBLIC	Signature of No.	otary Public
EVA BELL STATE OF ALASKA My Commission Expires September 27, 2021	Notary Public in and for the State of <u>Haska</u> My commission expires: <u>9</u> –37	<u> </u>

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Alaska Alcoholic Beverage Control Board

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 license application will be considered complete.

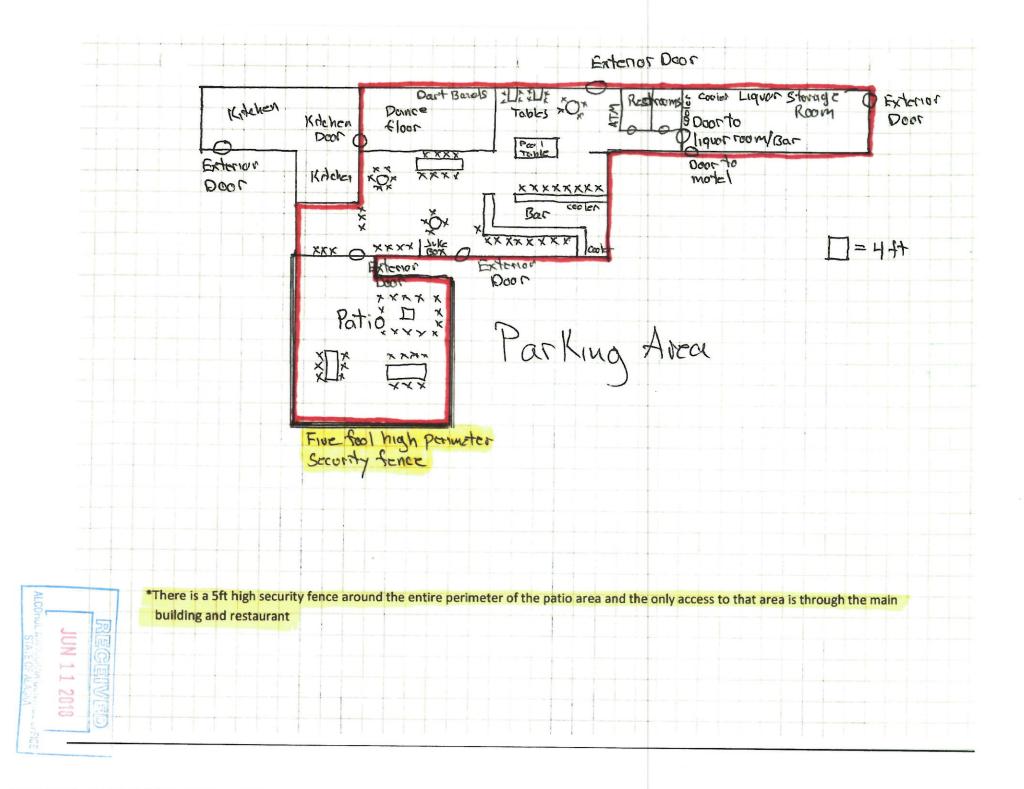
	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.		

Section 1 - Establishment Information

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

Licensee:	The Place, Inc.	License Number:	897
License Type:	Beverage Dispensory/Tour	ism AS 04.11.	400(d)
Doing Business As:	The Place		
Premises Address:	53791 Sparrow Laye		
City:	Kenai	State: AK	ZIP: 9961)

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Alaska Alcoholic Beverage Control Board

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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 **detailed floor plan** of the proposed designated and undesignated areas of the licensed business and a **menu** or expected menu listing the meals to be offered to patrons 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: The Place, Inc. **License Type:** Beverage Dispensary Tourism License Number: 897 **Doing Business As:** The Place **Premises Address:** 53791 Sparrow Lane City: Kenai State: AK ZIP: 99611 **Contact Name:** Grant Gratrix **Contact Phone:** (907) 283-7034 Section 2 - Type of Designation Requested

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)(2) Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3) Employment for persons 16 or 17 years of age: AS 04.16.049(c)

This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of

OFFICE USE ONLY					
Issue Date:	Transaction #:	BRE:	CDC.		

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

[Form AB-03] (rev 10/10/2016)

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Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 3 - Additional Information Enter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/pm: Monday - Thursday Ham to 10pm, Friday and Saturday Ham to midnight Sunday 12 moon to 8 pm Are any forms of entertainment offered or available within the licensed business or on the proposed designated portions of the premises? If "Yes", describe the entertainment offered or available: Dart boards, pool table, juke box, pinball machine, Karaoke, and live music, Food and beverage service offered or anticipated is: table service buffet service counter service other If "other", describe the manner of food and beverage service offered or anticipated: No Is an owner, manager, or assistant manager 21 years of age or older always present on the premises during business hours? Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the third page of this form.

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the third

[Form AB-03] (rev 10/10/2016)

page of this form that meet the requirements of this form.

JUN 1 1 2018

ALCOPIUL MARIANA OFFICE



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Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 4 - Detailed Floor Plan

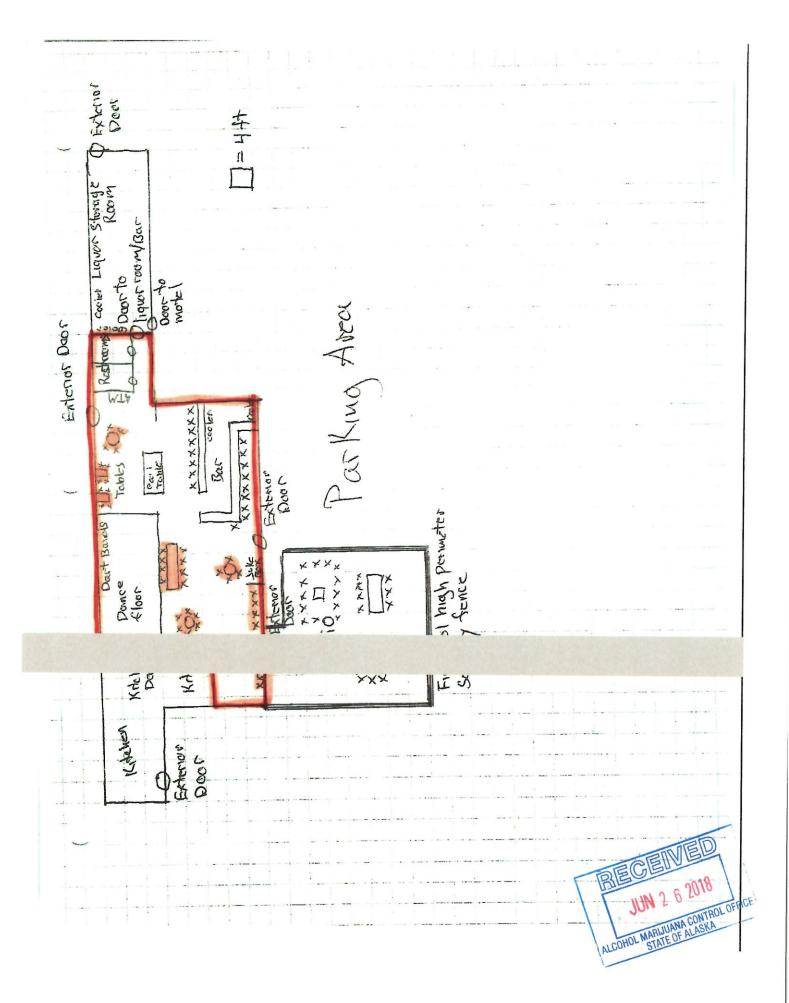
Provide a detailed floor plan that meets the requirements listed in Form AB-02 and clearly indicates the proposed designated and undesignated areas of the licensed business for purposes of this permit application.

See Attached

[Form AB-03] (rev 10/10/2016)

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ALCOHUL MARTUMANA CONTINUE OFFICE





[Form AB-03] (rev 10/10/2016)

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Form AB-03: Restaurant Designation Permit Application

Section 5 - Certifications and Approvals Read each line below, and then sign your initials in the box to the right of each statement: Initials I have included with this form a detailed floor plan of the proposed designated and undesignated areas of the licensed business for purposes of this application. I understand that this diagram is different than my licensed premises diagram. I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons. I certify that the license for which I am requesting designation is either a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license. I declare under penalty of perjury that this form, including all attachments and accompanying schedules and statements, is true, correct, and complete. Signature of licensee Signature of Notary Public The Place, Inc. Grant Gratrix, President Notary Public in and for the State of Printed name of licensee My commission expires Subscribed and sworn to before me this NOTARY PUBLIC MARIE L. KIVI STATE OF ALASKA My Commission Expires August 01, 2020 Local Government Review (to be completed by an appropriate local government official): Approved Disapproved Signature of local government official Date Printed name of local government official Title

JUN 11 2018

ALCOHUL MARIUMA CUNAND OFFICE
STATE OF ALASKA



Alaska Alcoholic Beverage Control Board

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Form AB-03: Restaurant Designation Permit Application

MCO Enforcement Review:			
gnature of AMCO Enforcement Supervisor	Printed name of AMCO Enforcement Supervisor		
forcement Recommendations:			
ICO Director Review:		Approved	Disapproved
nature of AMCO Director	Printed name of AMCO Director		
te			
nitations:			

[Form AB-03] (rev 10/10/2016)



THE PLACE

MOTEL BAR & GRILL

STARTERS





BURGERS

All served with fries or tots upgrade to onion rings Add cheese Add bacon	\$1.50 \$1 \$1
HOUSE BURGER LTO, house sauce, pickles	\$11
BBQ BURGER Housemade BBQ sauce, crispy onion straws, LT	\$13
MUSHROOM BURGER Grilled onions & mushrooms, swiss cheese	\$13
FRIED CHICKEN BURGER LTO, house sauce, choice of	\$12

FILIPINO DISHES

PANSIT \$12.50

Noodle dish with vegetables
Choice of chicken or pork

ADOBO \$13

Pork marinated overnight in traditional Filipino spices

Served with rice & vegetables

LUMPIA \$10.50

Ground beef egg rolls with vegetables

SHANGHAI \$10.50
Ground pork egg rolls with vegetables

SANDWICHES

cheese

SANDWICH OF THE DAY Ask Your Server for Our Daily Specials

