

Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE 550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: August 1, 2023

FROM: Joan M Wilson Director RE: 4283 Pub House

Requested Action:

Transfer

Statutory and Regulatory Authority: AS 04.06.090(b): "The board shall review all applications for licenses made under this title and may order the director to issue, renew, revoke, transfer, or suspend licenses and permits authorized under this title."

AS 04.11.400(d): "The board may approve

- (1) the issuance of a new beverage dispensary or restaurant or eating place license without regard to (a) of this section if it appears that the issuance willencourage the tourist trade by encouraging the construction or improvement of
 - (A) a hotel, motel, resort, or similar business relating to the tourist trade with a dining facility or having kitchen facilities in a majority of its rental rooms and at least a minimum number of rental rooms required according to the population of the incorporated city, unified municipality, or population area established under (a) of this section in which the facility will be located, as follows:
 - (i) 10 rental rooms if the population is less than 1,501;
 - (ii) 20 rental rooms if the population is 1,501 2,500;
 - (iii) 25 rental rooms if the population is 2,501 5,000;
 - (iv) 30 rental rooms if the population is 5,001 15,000;
 - (v) 35 rental rooms if the population is 15,001 25,000;
 - (vi) 40 rental rooms if the population is 25,001 50,000; and
 - (vii) 50 rental rooms if the population is greater than 50,000; or
 - (B) an airport terminal; and"
- (2) the renewal or transfer of ownership of a beverage dispensary or restaurant or eating place license issued under (1) of this subsection if the
 - (A) holder of the license operates a hotel, motel, resort, or similar business relating to the tourist trade that
 - (i) has a dining facility on the licensed premises or kitchen facilities in a majority of its rental rooms; and

(ii) maintains at least the minimum number of rental rooms that the hotel, motel, resort, or similar business had at the time of initial licensure or that were required at the time of initial licensure; or

(B) licensed premises are located inside an airport terminal.

Staff Rec.: Approve with delegation

Background: This is an application to issue a Beverage Dispensary – Tourism license in the Municipality of Anchorage.

AS 04.11.400(d)(2)(A)(ii) requires that the facility must maintain at least the minimum number of rental rooms required at original licensure. Staff has determined that the license is compliant with the room number requirements.

The applicant offers 174 rental rooms. This establishment offers a full food menu.

Attachment: Tourism Statement

AB-01 AB-02 AB-03



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Alaska Alcoholic Beverage Control Board

Form AB-37: Tourism Statement

A new, transfer, or renewal application for a Beverage Dispensary – Tourism or Restaurant/Eating Place – Tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

eviewed.	mpieted and s	submitted to	AIVICO 3 A	nchorage o	ffice befor	e any tou	rism licens	se app	lication	will be
	Sec	ction 1 -	- Establ	lishmer	nt Info	rmatio	n			
Enter information for the lie	censed establi	ishment or th	ne business	seeking to	be licensed	d.				
Doing Business As:	Bistro I	T, LLC, c	dba Pub	house			Licens	e #:	4283	3
License Type:	Bevera	ge Dispe	nsary -	Tourism	1					
		Section	1 2 – To	urism \$	Statem	ent				
2.1. Explain how issuance o	of a liquor lice	nse at your e	establishme	nt has/wil	encourag	e tourism.				
"PubHouse" and oth	er location	S WIUIIIT U	ie noter p	лорену	anows c	15 10 0116	er touris		uli Se	IVICE
2.2. Explain how the facility The hotel property ar and window covering	nd restaura	ant have a	an ongoir					COVE	erings,	, flooring
2.3 Does the licensee or ap tourism facility in whic 2.4 If "no" who operates th	ch this license	is located?	nse also op	erate the				YES		NO 🗸
IIV WIIIV OPCIALCS LI	coarisiii iac	у.							nsee)	

[Form AB-37] (rev 2/28/2022)

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Form AB-37: Tourism Statement

2.5 Do you offer room rentals to the traveling public?	YES	NO
If "yes" answer the following questions:		
How many rooms are available?		
174		
How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink f with refrigeration and cooking appliance devices, including a microwave)?	or food prepara	ation along
174	-9%	
Do you stock or plan to stock alcoholic beverages in guest rooms?	YES	NO 🗸
If "no" is your facility located within an airport terminal?	YES	NO 🗸
2.6 If your establishment includes a dining facility, please describe that facility. If it does not please	write "none".	
The Pubhouse is a full service dinning facility located within the hotel propert	y.	
2.7 If additional amenities are available to your guests through your establishment (eg: guided tour guests, other activities that attract tourists), please describe them. If they are not offered, please w		l equipment for
None.		
	100,000	



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Form AB-37: Tourism Statement

Section 3 - Certification

Read the statement below, and then sign your initials in the box to the right of the statement:

Initials

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.



RB Enterprises, LLC, by Bob Gross

Printed name of licensee/affiliate

Signature of licensee/affiliate



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Why is this form needed?

Enter information for the current licensee and licensed establishment.

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 Anchorage office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 - Transferor Information

	Licensee:	Bistro IT, LLC		License #:		4283
	License Type:	Beverage Dispensary - 7	ourism	Statutory Reference:		04.11.0400(d)
	Doing Business As:	PubHouse				
	Premises Address:	1020 W. 12th Ave.				
	City:	Anchorage	State:	AK	ZIP:	99501
-	Local Governing Body:	South Addition Commun	ity Cound	cil		
•	Transfer Type:					
	Regular transfer					
	Transfer with securi	ty interest				
	Involuntary retransf	er				
	-					
		OFFICE U	SE ONLY			
	Complete Date:		Transo	action #: 100	366	834
Accompany of the last	Board Meeting Date:		Licens	e Years:		•
	Issue Date:		Exami	ner:		



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 2 - Transferee Information

	w applicant and/or location seeking to	be licensed			6.4.		
Licensee:	Bistro IT, LLC						
Doing Business As:	PubHouse						
Premises Address:	1020 W. 12th Avenue						
City:	Anchorage	State:	AK		ZIP:	99501	
Community Council:	South Addition Commun	ity Cou	ncil				
Mailing Address:	205 E. Dimond #515						
City:	Anchorage	State:	AK		ZIP:	99515	
Designated Licensee:	Bob Gross						
Contact Phone:	(907) 360-3880	Business	Phone:	(907)	360-3880		
Contact Email:	bob.gross@inlettower.co	om					
	If "Yes", write your s Section 3 - Prem						
Premises to be licensed is:							
an existing facility	a new building	a propos	ed building				
	A be considered by become	a. lincludina					
The next two questions mus	it be completed by beverage dispensal	y (miciaamg	tourism) and <u>pa</u>	ckage stor	e applica	ints only:	
What is the distance of t	he shortest pedestrian route from the	public entra	nce of the build	ing of your	propose		
the outer boundaries of		public entra	nce of the build	ing of your	propose		
What is the distance of the outer boundaries of Inlet View Elem What is the distance of t	he shortest pedestrian route from the the nearest school grounds? Include th	public entra e unit of ma	ance of the build easurement in you	ing of your our answer	propose	d premises to	

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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:					
This individual is an: a	applicant affiliate								
Name:									
Address:									
City:		State:		ZIP:					

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

Entity Official:	RB Enterprises, LLC					
Title(s):	Member/Manager	Phone:	(907) 360-3880	% Ow	ned:	100
Address:	205 E. Dimond #515					
City:	Anchorage	State:	AK	ZIP:	995	15

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:	Bob Gross								
Title(s):	Member Represe	ntative	Phon	e:	(907) 360-	3880	% Ow	ned: 0	
Address:	205 E. Dimond	#515							
City:	Anchorage		State	: .	ΑK		ZIP:	9951	5
Entity Official:									
Title(s):			Phon	e:			% Ow	ned:	
Address:									
City:			State	:			ZIP:		
Entity Official:								γ	
Title(s):			Phon	e:			% Owi	ned:	
Address:									
City:			State	:			ZIP:		
This subsection must be comp standing with the Alaska Divi Alaska.	sion of Corporations (D	OC) and have	a registe	ered ag	gent who is an i				
DOC Entity #:	10000969	AK Formed	Date:	11/	2/2011	Home	State:	Alask	a
Registered Agent:	Bob A. Gross			Age	ent's Phone:	(907)	360-3	880	
Agent's Mailing Address:	205 E. Dimon	d #515							
City:	Anchorage	State:		AK		ZIP:		9951	5
Residency of Agent:								Yes	No
Is your corporation or L	LC's registered agent ar	n individual res	ident of	the st	ate of Alaska?			✓	



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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?		V
If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Ali license number(s) and license type(s):	aska, whi	ch

Section 7 – Authorization Communication with AMCO staff:	Yes	No
Section 7 – Authorization Communication with AMCO staff: Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?	Yes	No

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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 tr	ansfer of this license, and find the	information on this a	application to be true, cor	rect, and complete.
BIM	<u> </u>			
Signature of transferor				
RB Enterprises, LLC by Bob (Gross, Member			
Printed name of transferor	Subscribed and sworn t	to before me this 🏰	aday of March	, 20 23.
	NOTARY PUBLIC **		S	ignature of Notary Public Alaska 10/21/2(
	ent and Settlement Agreem	ient		
Signature of transferor				
Mystery Ranch, LLC by Jack	Barrett, Member			
Printed name of transferor	Subscribed and sworn t	o before me this	day of	, 20
			S	ignature of Notary Public
		Notary Public in an	d for the State of	
			My commission expires:	
				/



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 - Transferee Certifications

Read each line below, and then sign your initial	Is in the box to the right of each statement:	Initials
I certify that all proposed licensees (as defined i	n AS 04.11.260) and affiliates have been listed on this application.	89
I certify that all proposed licensees have been lis	sted with the Division of Corporations.	89
I certify that I understand that providing a false of for rejection or denial of this application or revo	statement on this form or any other form provided by AMCO is grounds cation of any license issued.	8 g
patron will complete an approved alcohol server serving alcoholic beverages, will carry or have av	s who sell or serve alcoholic beverages or check the identification of a reducation course, if required by AS 04.21.025, and, while selling or vailable to show a current course card or a photocopy of the card reducation course, if required by 3 AAC 304.465.	39
I agree to provide all information required by the	e Alcoholic Beverage Control Board in support of this application.	89
application, and I know the full content thereof. other documents submitted are true and correct response in this application, or any attachment, denying or revoking a license/permit. I further until 11.56.210 to falsify an application and commit the Signature of transferee RB Enterprises, LLC by Bob Gross Printed name	NOTARY PUBLIC Signature of Notary Public Notary Public in and for the State of	39
Subscribe	d and sworn to before me this SH day of Marth	, 20 <u>23</u> .



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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 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 may not be 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 Anchorage office before any license application will be considered complete.

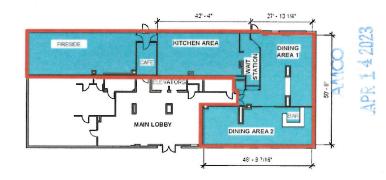
	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.	\checkmark	

Section 1 - Establishment Information

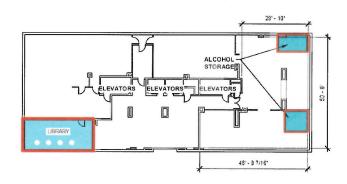
Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Bistro IT, LLC	License	Number:	4283	
License Type:	Beverage Dispensary - Tourism				
Doing Business As:	PubHouse				
Premises Address:	1020 W. 12th Ave.				
City:	Anchorage	State:	AK	ZIP:	99501

1) Site Plan



2 1st Floor Plan - Existing



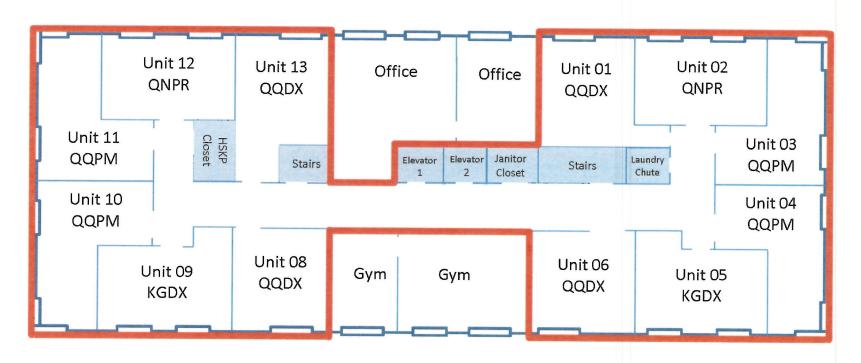
3 Basement Plan - Existing

Symbols:

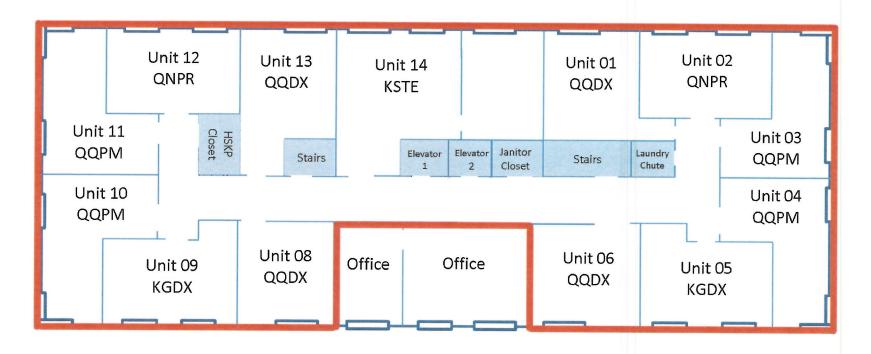
→ Table Top

Grass

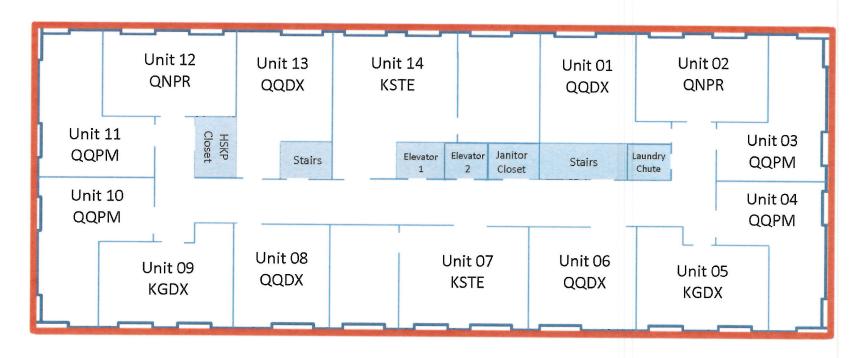
Inlet Tower Premises – 2nd Floor



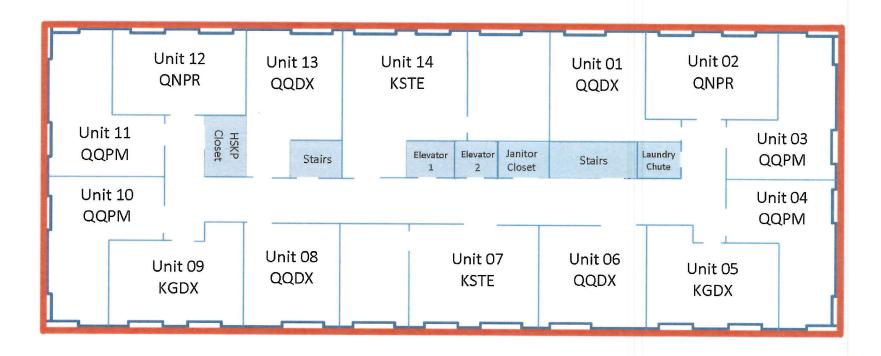
Inlet Tower
Premises – 3rd Floor



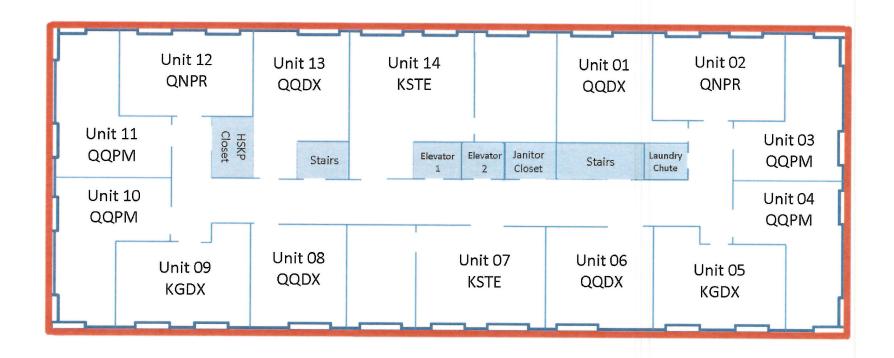
Inlet Tower Premises - 4th Floor



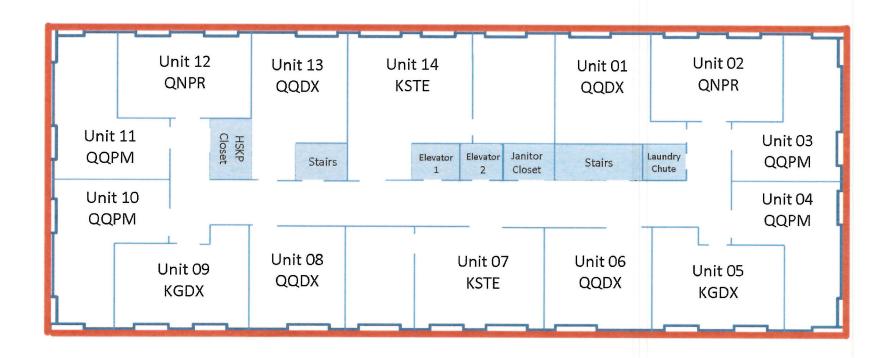
Inlet Tower Premises - 5th Floor



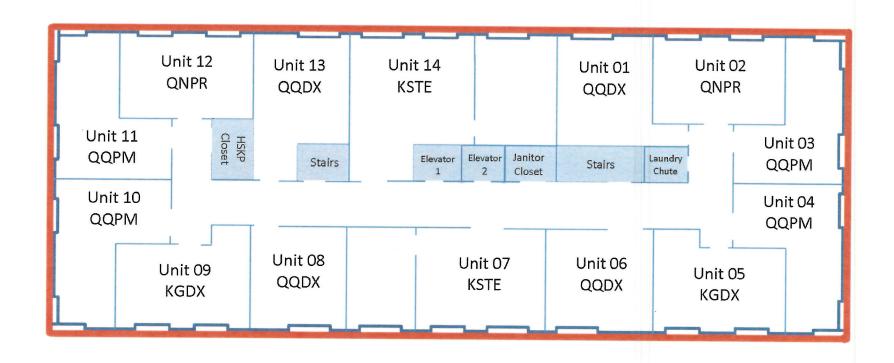
Inlet Tower Premises - 6th Floor



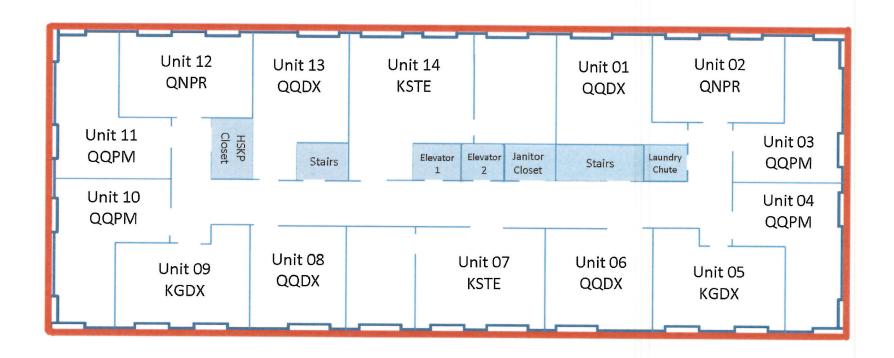
Inlet Tower Premises - 7th Floor



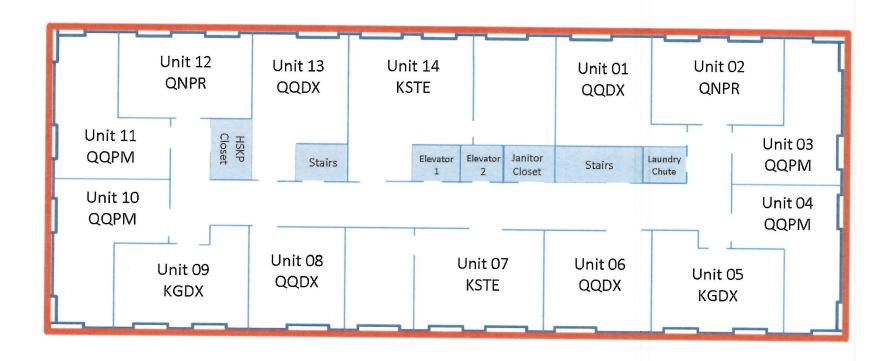
Inlet Tower Premises - 8th Floor



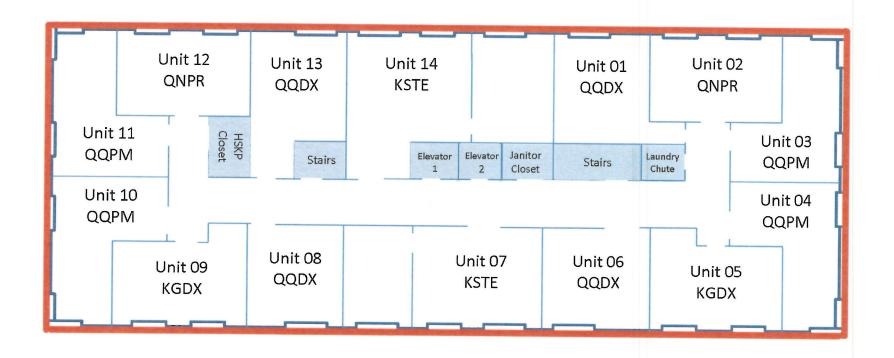
Inlet Tower Premises - 9th Floor



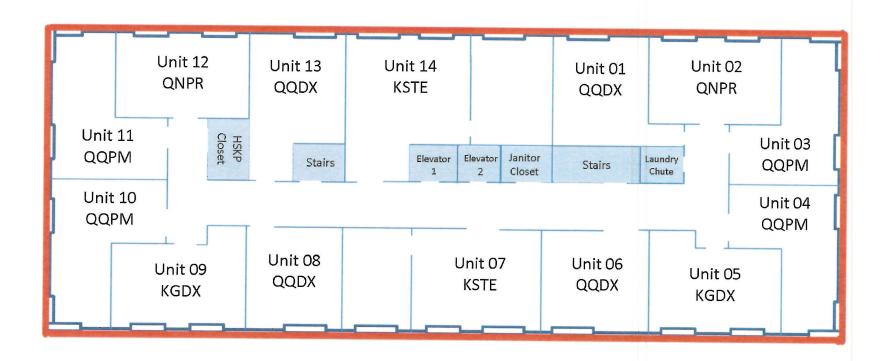
Inlet Tower Premises - 10th Floor



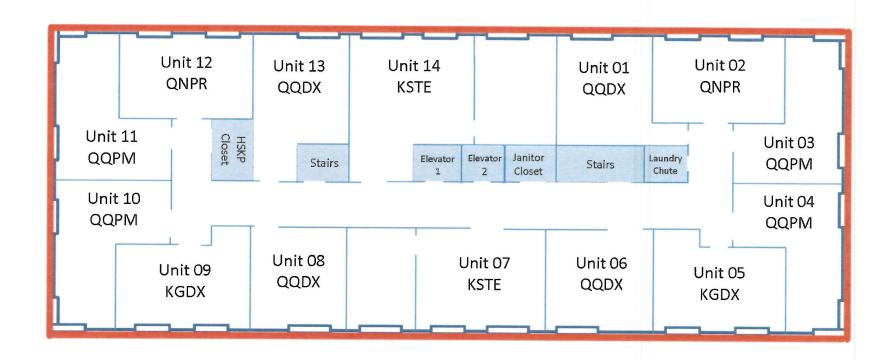
Inlet Tower Premises -11th Floor



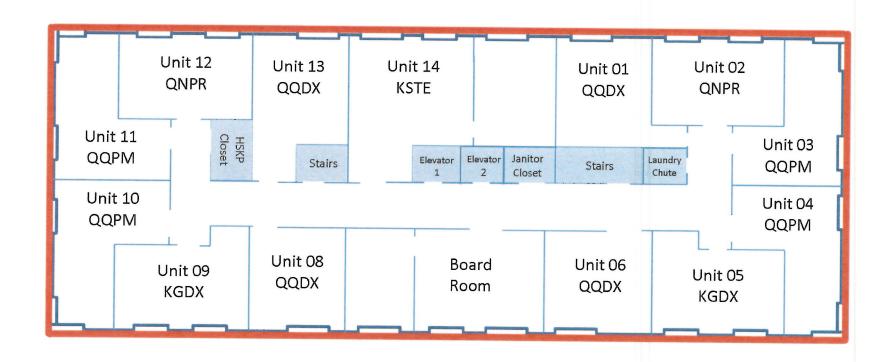
Inlet Tower Premises - 12th Floor



Inlet Tower Premises - 14th Floor



Inlet Tower Premises - 15th Floor



Security Plan for Outdoor Service Area

During operating hours, the Gate Entrance (5-foot gate and fencing) will be staffed full time by a server with a current alcohol Server Education Card. 100% of guests will be carded. All servers will be TAP certified. Employees will be instructed to ask for the identification of all persons accessing the premises. Employees who violate this policy will be disciplined progressively and/or terminated and will be instructed so upon employment. Further, managers and all serves will be trained and reminded to access the condition of drinkers as enumerated in the TAP training to prevent the service of alcohol to drunken persons. Further, for the protection of patrons, the Inlet Tower Hotel and Bistro IT employees will patrol the parking lot and grounds, as needed, to ensure the minimization of loitering, and will work with surrounding neighbors, community councils and service patrols to combat any problems that arise in or near the premises.



Alaska Alcoholic Beverage Control Board

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Form AB-03: Restaurant Designation Permit Application

Why is this form needed?

Enter information for licensed establishment.

Licensee:

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

Section 1 - Establishment Information

Bistro IT, LLC **License Type:** Beverage Dispensary - Tourism License Number: 4283 **Doing Business As:** PubHouse **Premises Address:** 1020 W. 12th Ave. City: Anchorage State: AK ZIP: 99501 **Contact Name: Bob Gross Contact Phone:** (907) 360-3880 Section 2 - Type of Designation Requested This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply): 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 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. OFFICE USE ONLY Transaction #: Initials:



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

Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 3 – Minor Access
Review AS 04.16.049(a)(2); AS 04.16.049(a)(3); AS 04.16.049(c)
List where within the premises minors are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Minors will only be allowed in the dining area. OR Minors will only be employed and present in the Kitchen.)
Minors will be allowed in the dinning and kitchen areas, but they will not be allowed to sit at the bar. Minors between the ages of 16 and 20 will also be employed and present in all areas of thelicensed premises.
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.
Minors employed by licensee will be supervised at all times by a person over the age of 21.
A manager over the age of 21 will be present at all times to ensure that minors dining at the licensed premises do not have access to alcoholic beverages. Alcohol wil be securely stored on the premises and monitored by a restaurant manager.
All employees serving alcohol will have current Taps/Tips server cards.
Yes No Is an owner, manager, or assistant manager who is 21 years of age or older always present on the premises
during business hours?
Section 4 – DEC Food Service Permit
er 3 AAC 304.910 for an establishment to qualify as a Bona Fide Restaurant, a Food Service Permit or (for licenses within ne Municipality of Anchorage) corresponding Department of Health and Human Services documentation is required.
lease follow this link to the DEC Food Safety Website: http://dec.alaska.gov/eh/fss/food/

Please follow this link to the Municipality Food Safety Website: http://www.muni.org/Departments/health/Admin/environment/FSS/Pages/fssfood.aspx

IF you are unable to certify the below statement, please discuss the matter with the AMCO office:

Initials

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

*Please note, if a plan review approval is submitted, a final permit will be required before finalization of any permit or license application.

[Form AB-03] (rev 10/27/2022)

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Alaska Alcoholic Beverage Control Board

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

Form AB-03: Restaurant Designation Permit Application

Section 5 – Hours of Operation	
Review AS 04.16.010(c).	
Enter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/p	m:
Sunday - Saturday 4:30 p.m. to 12 a.m.	
Section 6 – Entertainment & Service	
Review AS 04.11.100(g)(2)	
Are any forms of entertainment offered or available within the licensed business or within the proposed licensed premises?	No
If "Yes", describe the entertainment offered or available and the hours in which the entertainment may occur:	
Live entertainment is provided in the PubHouse and outdoor area eating area between the hours 7 p.m. and 10 p.m.	s of
Food and beverage service offered or anticipated is:	
table service buffet service counter service other	
f "other", describe the manner of food and beverage service offered or anticipated:	

[Form AB-03] (rev 10/27/2022)

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Section	7 – Certifications and Approvals		
Read each line below, and then sign your initi	als in the box to the right of each statement:		Initials
There are tables or counters at my establishme	ent for consuming food in a dining area on the premise	es.	89
I have included with this form a menu, or an e This menu includes entrées that are regularly	xpected menu, listing the meals to be offered to patron sold and prepared by the licensee at the licensed prem	ns. nises.	8 g
I certify that the license for which I am request golf course, or restaurant or eating place licens	ting designation is either a beverage dispensary, club, r se.	ecreational site,	89
I have included with this application a copy of	the most recent AB-02 or AB-14 for the premises to be	permitted.	80
(AB-03 applications that accompany a n not be required to submit an additional			
complete application, and I know the full cont and evidence or other documents submitted a misrepresentation of any item or response in application, is sufficient grounds for denying o misdemeanor under Alaska Statute 11.56.210 falsification.	amed and subscribing to this application and that I have ent thereof. I declare that all of the information container true and correct. I understand that any falsification this application, or any attachment, or documents to sor revoking a license/permit. I further understand that it to falsify an application and commit the crime of unsw	ined herein, or upport this it is a Class A	89
RB Enterprises LLC, by Bob	Gross Bob Gross		
Printed name of licensee	Signature of licensee	_	
Local Government Review (to be completed by	y an appropriate local government official):	Approved	Denied
Signature of local government official	Date		
Printed name of local government official	Title		
Form AB-03] (rev 10/27/2022)			Page 4 of 5

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Printed name of AMCO Enforcement Supervisor		
Printed name of AMCO Enforcement Supervisor		
	Approved	Denied
rinted name of AMCO Director		



SOUPS & SALADS

SEAFOOD CHOWDER

ALASKAN SMOKED SALMON & FISH, CLAMS, AND BACON, SERVED WITH OYSTER CRACKERS

10

CAESAR SALAD

ROMAINE, ROMA TOMATOES, FRESH PARMESAN, GARLIC CROUTONS, WITH CAESAR DRESSING

MEDITERRANEAN SALAD

FRESH SPINACH, GREEN OLIVES, KALAMATA OLIVES, ROMA TOMATOES, RED BELL PEPPERS, CUCUMBER, CHICKPEAS, FETA, ITALIAN DRESSING

8 / 11

ADD TO ANY SALAD:

GRILLED CHICKEN - 8, PUB STEAK - 12, SALMON - 15, FRIED ROCKFISH - 12, TOFU - 6, AVOCADO - 3

APPETIZERS

CHARCUTERIE PLATE

ASSORTMENT OF CURED MEATS & CHEESES, WITH ACCOMPANIMENT, SERVED WITH WARMED PITA 19

ANTIPASTO PLATE

MARINATED MOZZERELLA & OLIVES, ROMA TOMATOES. CUCUMBERS, DRIZZLED WITH BALSAMIC & SUMAC OLIVE OIL. SERVED WITH WARM PITA, AND GOUDA ROASTED **ARTICHOKES**

17

GRILLED THAI PORK SKEWERS

TENDER PORK, LEMONGRASS MARINADE, PEANUT SAUCE. SERVED WITH PITA

16

CLASSIC POUTINE

BEER BATTERED FRIES, BEEF GRAVY, AND CHEDDAR CHEESE CURDS

12

KIDS OPTION

SALMON AND RICE - 20

CHICKEN AND MASH - 12

MAC AND CHEESE 9

BUTTERED PASTA 7

ENTRÈE

ALASKAN KING CRAB DINNER

ONE POUND OF KING CRAB POACHED IN CREOLE SEASONINGS. SERVED WITH GARLIC BUTTER, MASHED POTATOES AND GRILLED BROCCOLINI

MARKET PRICE

GRILLED RIB-EYE

1402 RIB-EYE & HERBED BUTTER, GARLIC MASHED POTATOES, AND GRILLED BROCCOLINI

MUSHROOM GOUDA RAVIOLI

LOCALLY MADE RAVIOLI, BRUSSELS SPROUTS, CHARRED TOMATO, SPINACH, RED BELL PEPPER, MUSHROOMS FROM AK & BEYOND, WITH **GARLIC ALFREDO SAUCE**

PINEAPPLE RED CURRY

SAUTÉED BRUSSELS, AK MUSHROOMS, RED BELL PEPPER, FRESH BASIL. SERVED WITH JASMINE RICE AND CHILI CUCUMBER PROTEIN OF CHOICE: CHICKEN - 22, SALMON - 35, MARINATED PORK - 22, FRIED TOFU - 21

PUB PLATES

PUBHOUSE BURGER

HOUSEMADE RIB-EYE BURGER PATTY, LETTUCE, TOMATOES, ONIONS, PICKLES, AND MAYO. SERVED WITH PUB FRIES CHOICE OF: CHEDDAR, SWISS, BLEU CHEESE, OR PEPPERJACK

17 CHICKEN BLT

HERB MARINATED CHICKEN, BACON, LETTUCE, TOMATO, AND MAYO SERVED WITH PUB FRIES

16

JASON'S SPICY BBQ RIBS

CRISPY HALF RACK OF RIBS TOSSED IN SPICY BBQ SAUCE, GARLIC MASHED POTATOES, AND BROCCOLINI

ALASKAN ROCKFISH AND CHIPS

TEMPURA BEER BATTERED ROCKFISH, HOUSE TARTAR, AND LEMON. SERVED WITH PUB FRIES

23

ADD TO ANY ENTRÈE:

ALASKAN MUSHROOM - 2, GRILLED ONION - 2, GRILLED CHICKEN - 8, PUB STEAK- 12, FRIED ROCKFISH - 12, SALMON - 15. 1/2 LB KING CRAB - MARKETPRICE

AMCO

SANDWICH / BURGER ADD ONS:

AVOCADO - 3, BACON - 3, ALASKA MUSHROOMS - 2, EGG - 2. JALAPENO - 2, SUB SWEET POTATO FRIES - 3

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:

PUBHOUSE

BISTRO IT, LLC

LOCATION:

1020 W 12th AVE

PERMIT NO.

FA0008890

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 1/1/2023 TO 12/31/2023

PUBHOUSE 205 E DIMOND BLVD 515 ANCHORAGE, AK 99515

70-031 Ver. 9_02 *

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

LOUNGE

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: **PUBHOUSE**

BISTRO IT, LLC

PERMIT NO.

LOCATION:

1020 W 12TH AVE

FA0008888

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 1/1/2023 TO 12/31/2023

PUBHOUSE 205 E DIMOND BLVD 515 ANCHORAGE, AK 99515

70-031 Ver. 9_02 *

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RESTAURANT