



September 8, 2022

City and Borough of Sitka

VIA Email: [sara.peterson@cityofsitka.org](mailto:sara.peterson@cityofsitka.org); [jessica.earnshaw@cityofsitka.org](mailto:jessica.earnshaw@cityofsitka.org)

<b>License Type:</b>	Beverage Dispensary	<b>License Number:</b>	790
<b>Licensee:</b>	HPR Group Inc		
<b>Doing Business As:</b>	Halibut Point Crab and Chowder		
<b>Premises Address</b>	4513 Halibut Point Road Suite 102		

- New Application**
 **Transfer of Ownership 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,

Joan Wilson, Director

[amco.localgovernmentonly@alaska.gov](mailto:amco.localgovernmentonly@alaska.gov)



## 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.

### Section 1 – Transferor Information

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

Licensee:	DPJT, Inc.		License #:	790	
License Type:	Beverage Dispensary		Statutory Reference:	04.11.090	
Doing Business As:	Nugget Restaurant				
Premises Address:	600 Airport Rd, Ste. A				
City:	Sitka	State:	AK	ZIP:	99835
Local Governing Body:	Sitka				

### Transfer Type:

- Regular transfer
- Transfer with security interest
- Involuntary retransfer

#### OFFICE USE ONLY

Complete Date:	9/18/2022	Transaction #:	100373783
Board Meeting Date:	9/20/2022	License Years:	22-23
Issue Date:		BRE:	KRS



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 2 – Transferee Information

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

Licensee:	HPR Group, Inc				
Doing Business As:	Halibut Point Crab and Chowder				
Premises Address:	4513 Halibut Point Road, Suite 102				
City:	Sitka	State:	AK	ZIP:	99835
Community Council:					

Mailing Address:	P.O. Box 816				
City:	Sitka	State:	AK	ZIP:	99835

Designated Licensee:	Benjamin Hilberg				
Contact Phone:	253-405-0389	Business Phone:	253-405-0389		
Contact Email:	bhilberg@msn.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.

4.0 Miles

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.

3.7 Miles



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:  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 corporation, 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 limited liability organization, 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 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*.

Entity Official:	Andrew Friske				
Title(s):	Director, SH	Phone:	907 738 3141	% Owned:	25
Address:	420 Kramer Ave.				
City:	Sitka	State:	AK	ZIP:	99835



Alaska Alcoholic Beverage Control Board

**Form AB-01: Transfer License Application**

Entity Official:	Rebecca Friske				
Title(s):	Sec., SH, Treas.	Phone:	907 738 3811	% Owned:	25
Address:	420 Kramer Ave.				
City:	Sitka	State:	AK	ZIP:	99835

Entity Official:	Benjamin Hilberg				
Title(s):	President, SH	Phone:	253-405-0389	% Owned:	50
Address:	1840 Edgecumbe Drive				
City:	Sitka	State:	AK	ZIP:	99835

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

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) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10038782	AK Formed Date:	5/25/2016	Home State:	AK
Registered Agent:	Rebecca Friske	Agent's Phone:	907-738-3811		
Agent's Mailing Address:	420 Kramer Ave.				
City:	Sitka	State:	AK	ZIP:	99835

Residency of Agent: Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?



Alaska Alcoholic Beverage Control Board  
**Form AB-01: Transfer License Application**

**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):

Rest Eating Place #5510 Halibut Point Crab & Brew, for which this application will replace this license. Benjamin Hilberg owns & operates this license under "Trinity Business Services, LLC".

**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:

The Law Offices of Ernout & Coffey, P.C. is assisting with the transfer app

AMCO

APR 26 2022



Alaska Alcoholic Beverage Control Board  
**Form AB-01: Transfer License Application**

**Section B - Transferor Certifications**

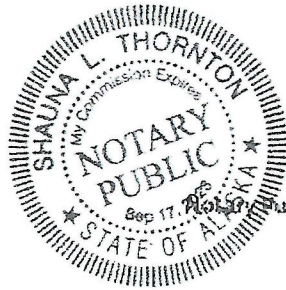
Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

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 of transferor  
Timothy Holder

Printed name of transferor

Subscribed and sworn to before me this 15 day of April, 2022



Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 9-17-23

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.



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



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 304.465.



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



As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete.

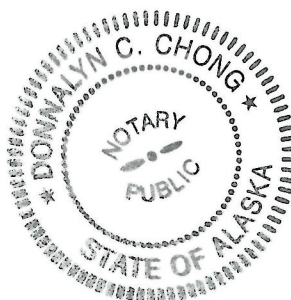
*Benjamin Hilberg*

Signature of transferee

Benjamin Hilberg

Printed name

Subscribed and sworn to before me this 18<sup>th</sup> day of April, 2022.



*Donnalyn C. Chong*

Signature of Notary Public

Notary Public in and for the State of ALASKA

My commission expires: 12-08-2024





## 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 second page 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:	HPR Group, Inc	License Number:	790		
License Type:	Beverage Dispensary				
Doing Business As:	Halibut Point Crab and Chowder				
Premises Address:	4513 Halibut Point Road, Suite 102				
City:	Sitka	State:	AK	ZIP:	99835

AMCO

APR 26 2022



Alaska Alcoholic Beverage Control Board

# Form AB-02: Premises Diagram

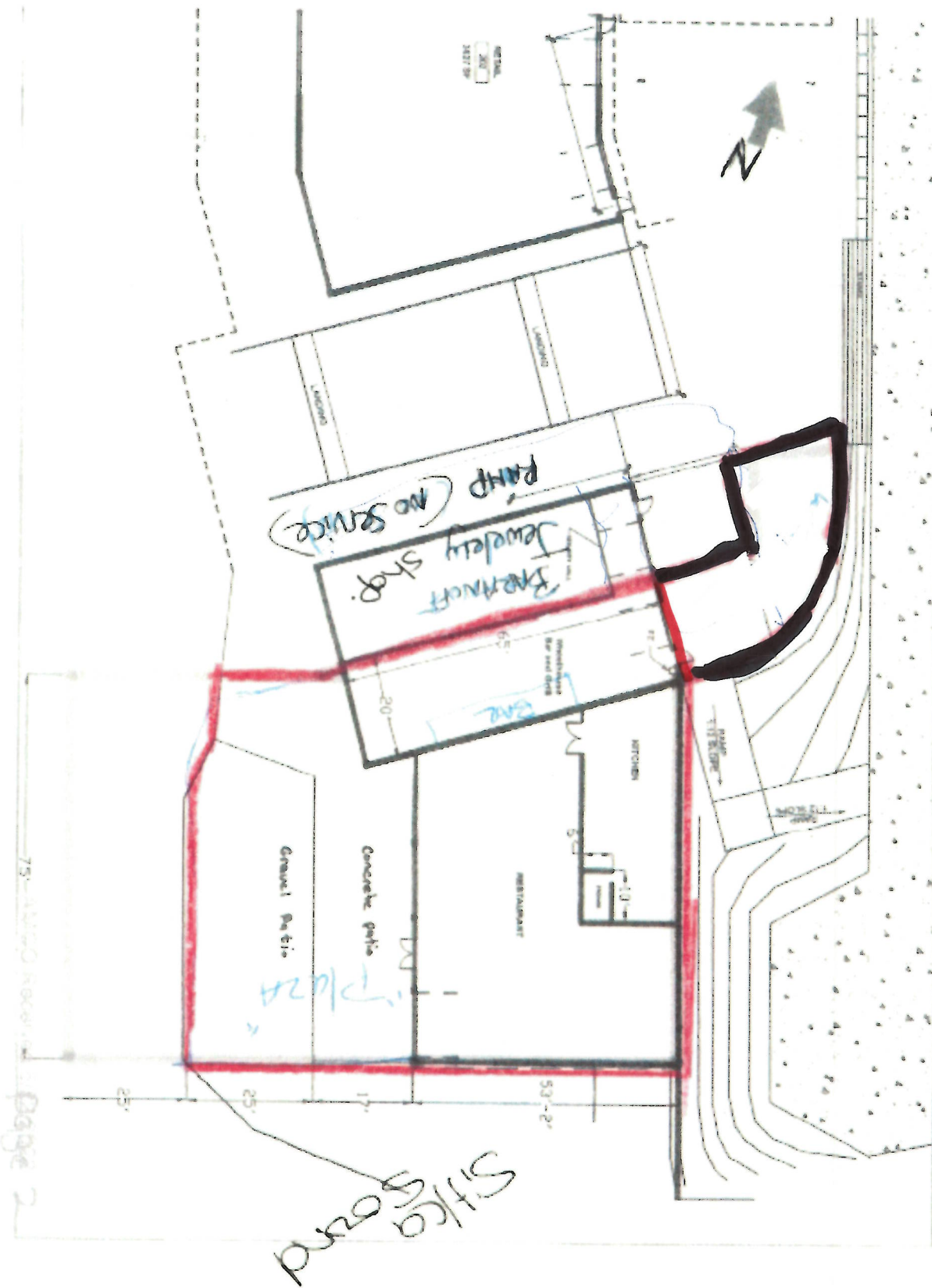
## Section 2 – Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, and fixtures, and outline in red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Include dimensions, cross-streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of this form.

AMCO

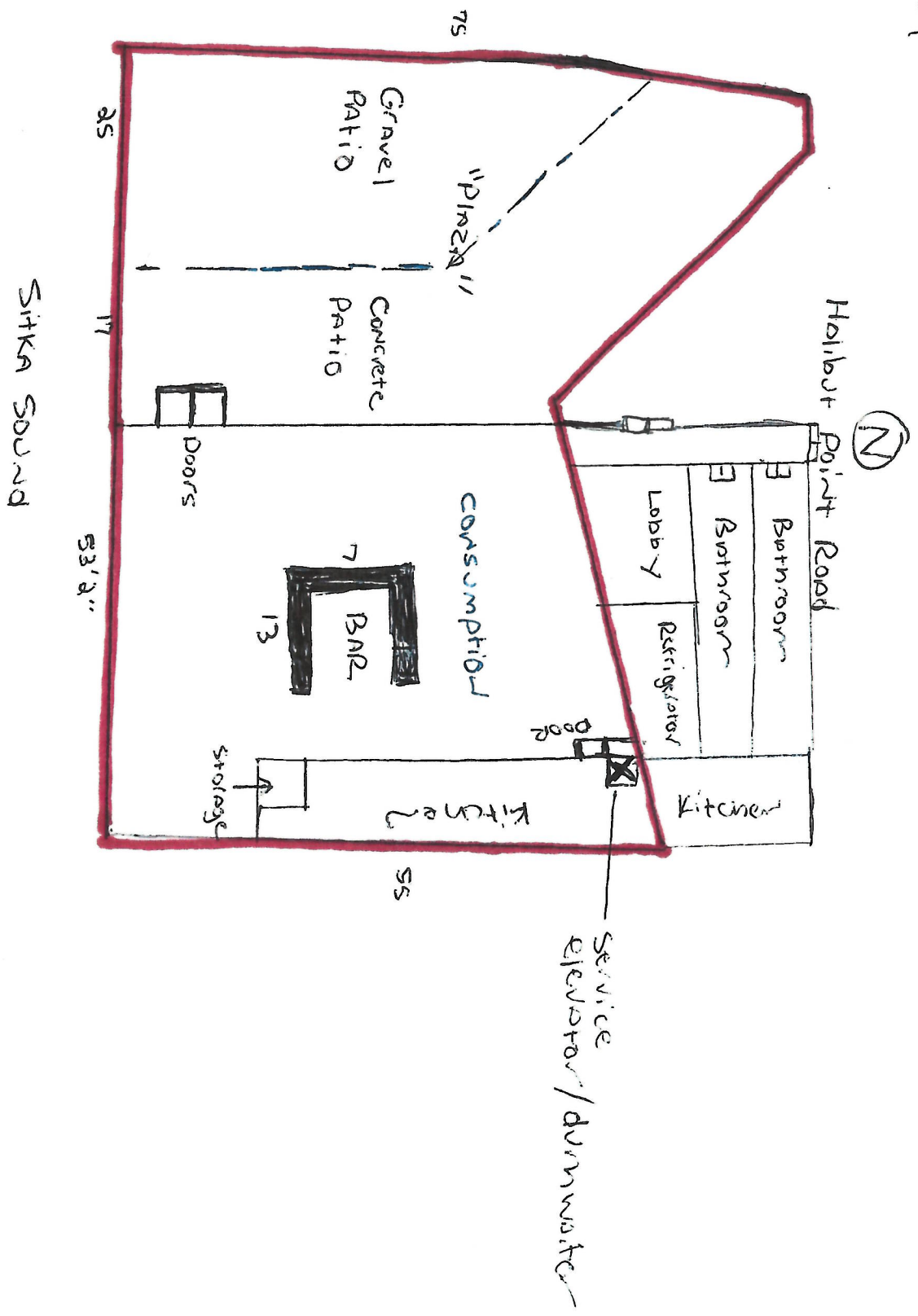
APR 26 2022

Halbout Point Rd.



Floor 1

Halibut Point Crab / Chowder  
Restaurant



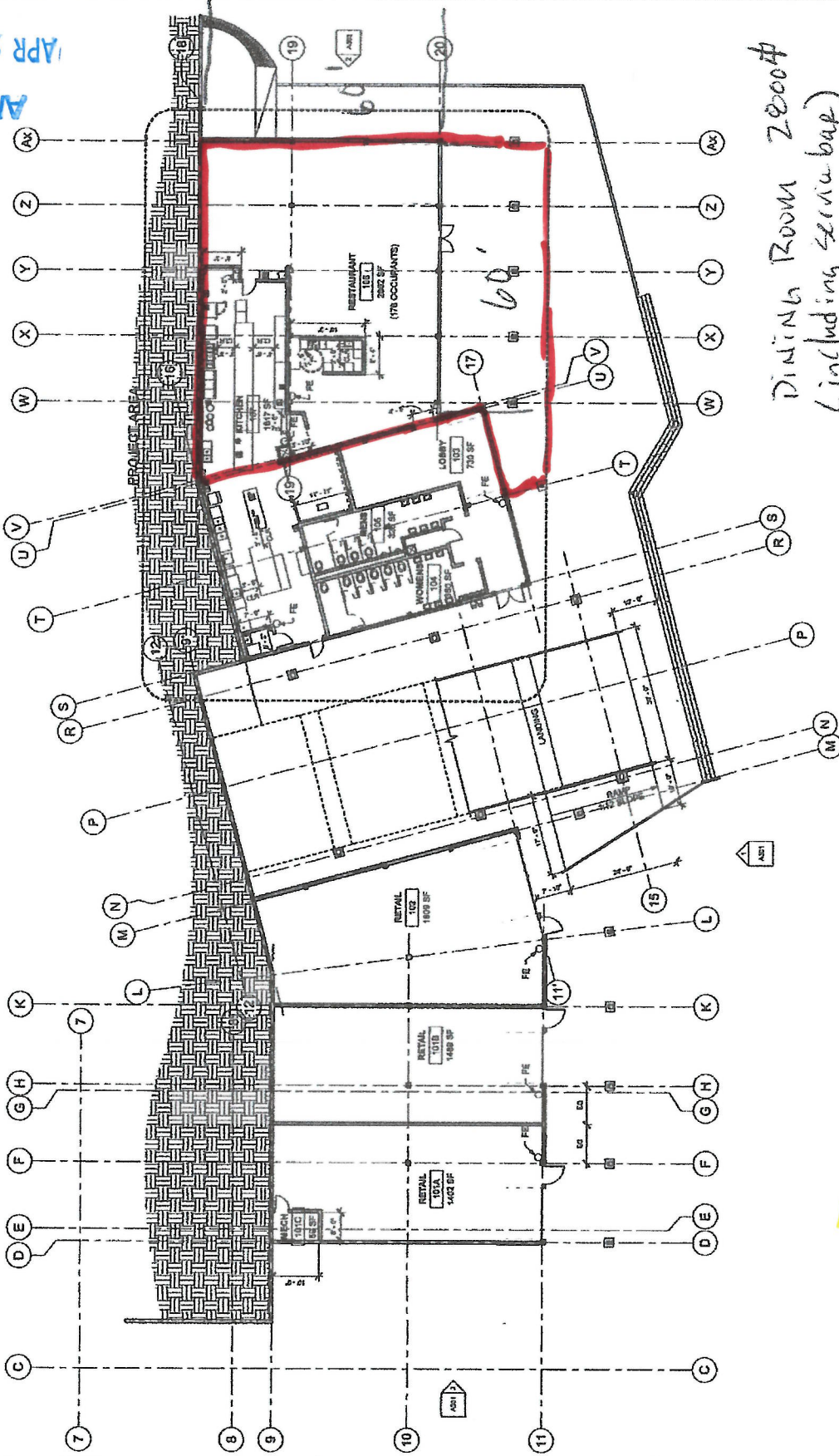
AMCO Received 9/7/22



APR 26 2022

AMCO

20' | 20' |



Dining Room 2000#  
 (including service bar)

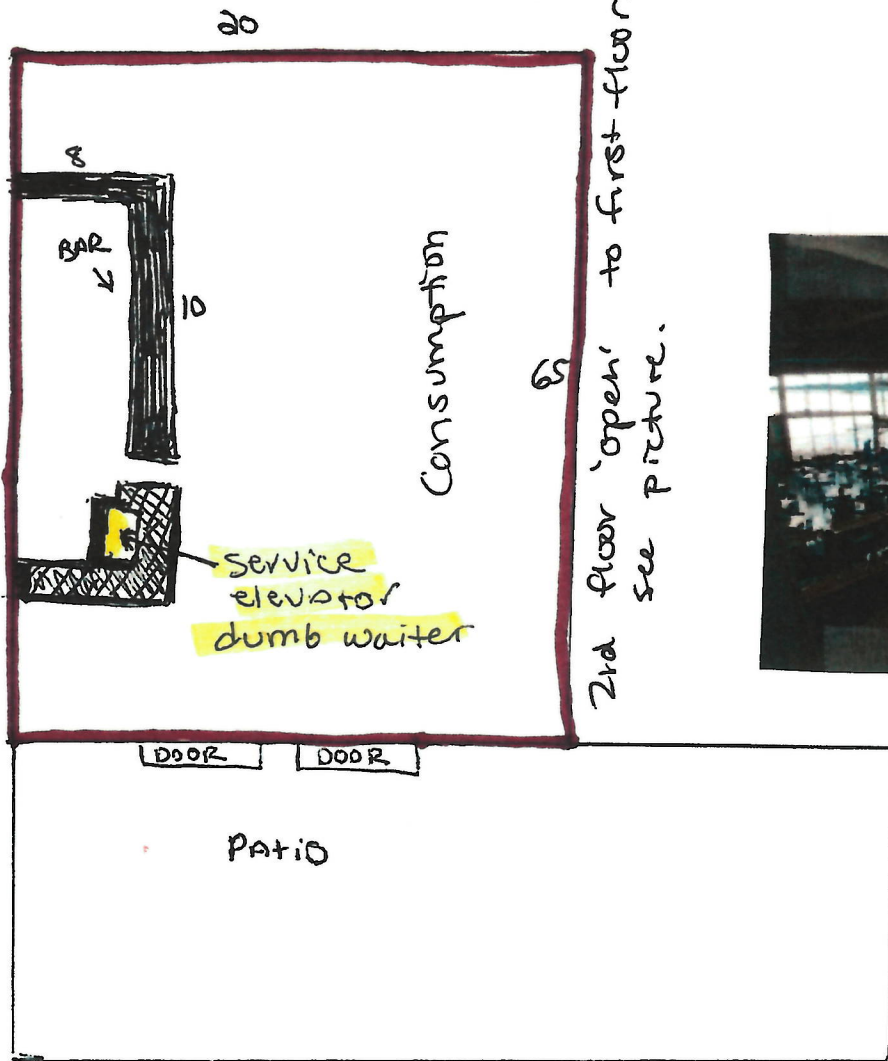
1 FIRST FLOOR PLAN - LEVEL "A" & "B"



# FLOOR 2 DETAIL

Wheelhouse Bar & Grille at Halibut Point

Halibut Point Road

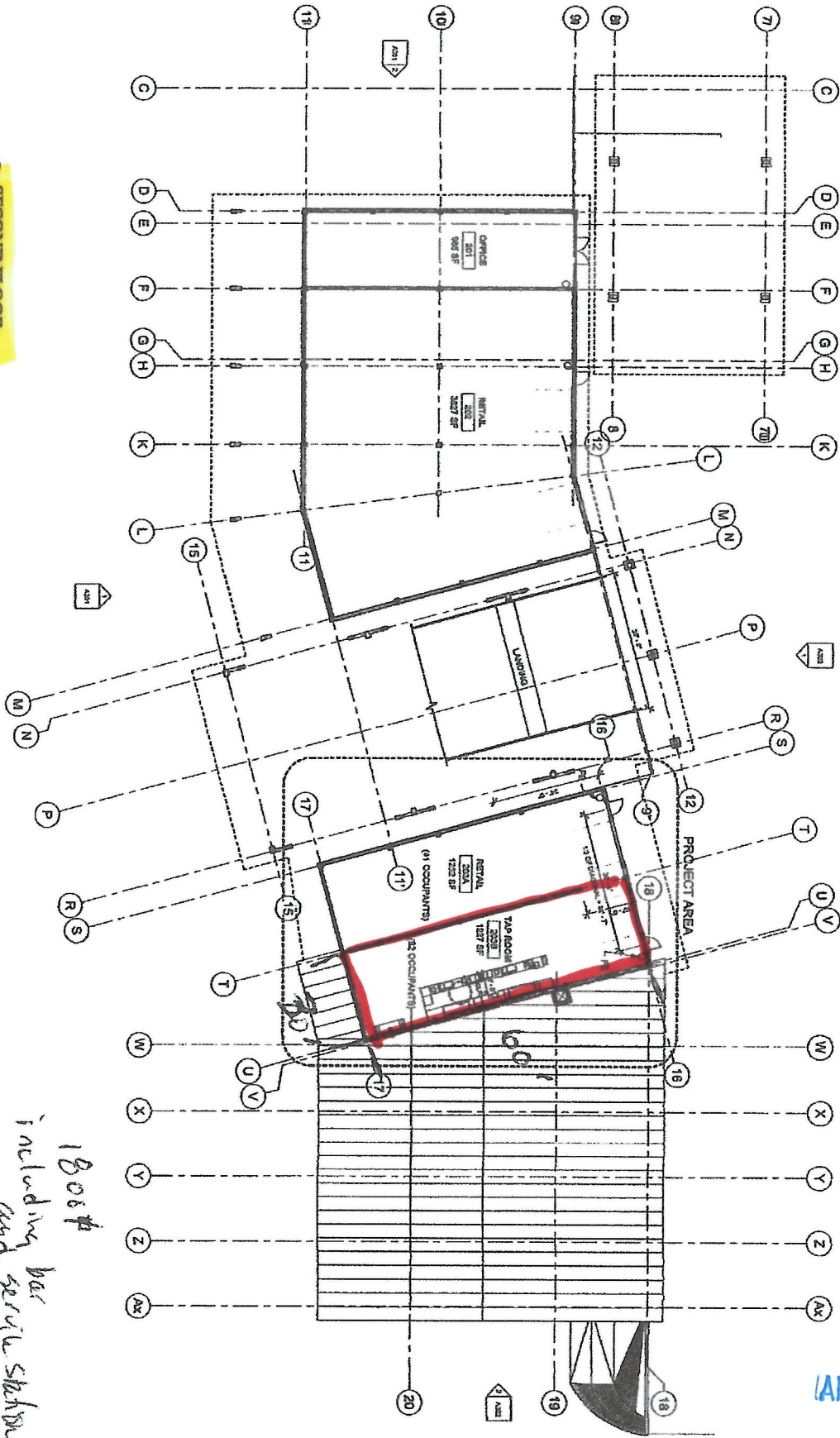


SITKA SOUND

Services by common kitchen, dispensing facilities, etc located on 1st floor

The Beer is pumped to bar from Kitchen area and food is sent up on dumbwaiter

**1 SECOND FLOOR**  
Overview



AMCO

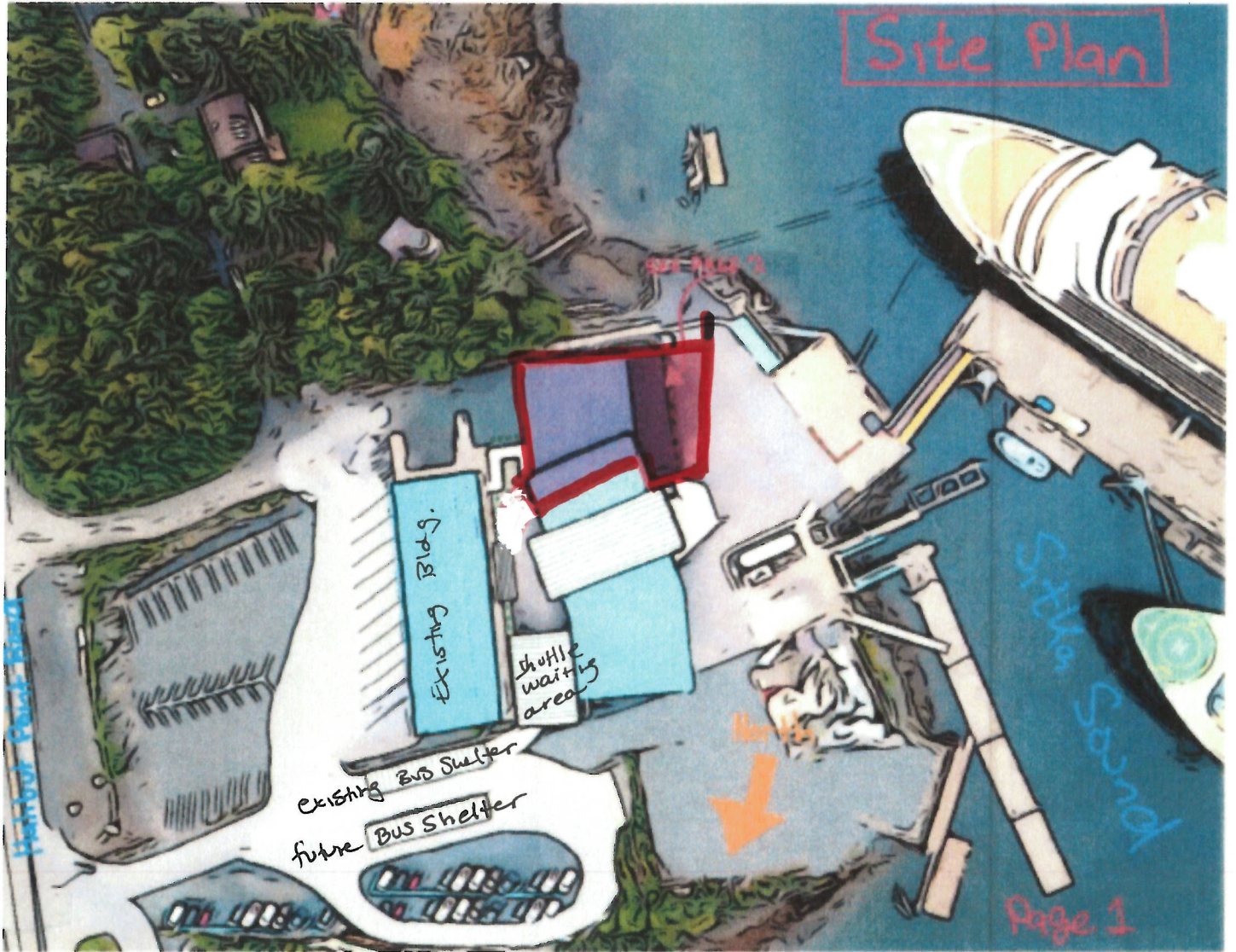
APR 26 2022

DATE: 04/13/21  
 TIME: 2:51:00 PM  
 PROJECT: SECOND FLOOR  
 PLAN: A202

MCG CONSTRUCTION  
 HALIBUT POINT MARINE  
**BAR & RESTAURANT TI**  
 Sitka, Alaska



Jensen Yorba Wall Inc.  
 6800 West 12th Street  
 Anchorage, Alaska 99515  
 Phone: (907) 562-1100  
 Fax: (907) 562-1101  
 Email: jensy@jensenyorbawall.com





## **Halibut Point Crab and Chowder Restaurant** **Outdoor Area Security Plan**

Guests that order alcohol will be required to present valid ID prior to the purchase of alcoholic beverages. Staff will monitor the outdoor premise to ensure that the attempt of any adult to pass any sort of beverage to a minor will lead to the appropriate authorities being notified, and the patron being escorted out of the premise and prosecuted to the fullest extent of the law.

These rules, along with all the mandated signs will be posted outside the entrance to our establishment. They will be clearly visible to any customer prior to being able to place any order for food, drinks or otherwise.

There is a fence around the outside patio/plaza area that is roughly 42 inches high to enclose the area so no-one can exit with alcohol. There is also a 5 ft straight drop retaining wall on the south side and portions of the north and west sides of the patios.

All servers are TAP certified and will monitor the service area at all times. Besides emergency exit gates along the fence, all patrons will have to enter the outdoor area via the front door, requiring them to walk through the interior of our premise, where we'll have additional staff monitoring the patrons.

The outside <sup>patio</sup> deck will operate the summer months typically between May and September weather permitting.

### **Plaza/Patio: (deck)**

Customers will be permitted in this area during operating hours (daylight)  
The entire service area will be clearly marked by a barrier that will clearly define the area and be signed clearly that Alcohol is not permitted beyond the barriers

### **Ramp Areas:**

Alcohol not permitted on any of the walkway or entry way ramps.



Alaska Alcoholic Beverage Control Board

Alcohol and Marijuana Control Office  
550 W 7th Avenue, Suite 1600  
Anchorage, AK 99501  
alcohol.licensing@alaska.gov  
https://www.summitcpa.alaska.gov/web/amco  
Phone: 907.269.0350

## 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 menu or expected menu listing the meals, including entrees prepared onsite 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

Enter information for licensed establishment.

Licensee:	HPR Group, Inc		
License Type:	Beverage Dispensary	License Number:	790
Doing Business As:	Halibut Point Crab and Chowder		
Premises Address:	4513 Halibut Point Road, Suite 102		
City:	Sitka	State:	AK ZIP: 99835
Contact Name:	Benjamin Hilberg	Contact Phone:	253-405-0389

### 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 persons 16 or 17 years of age: AS 04.16.049(c)  
NOTE: Under AS 04.16.049(d), this permit is not required to employ a person 18 - 20 years of age.

OFFICE USE ONLY	
Transaction #:	Initials:



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.)

Minor customers will only be permitted in the dining area, outside deck area and restroom areas. Minor employees are permitted in the dining area, outside deck area, restroom area, and kitchen areas. They are not permitted behind the bar.

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.

Storage: All alcohol will be locked in secure storage. This will only be accessible by the restaurant owners, general manager and bar tender. Each of these individuals will be at least 21 years old and will hold on their persons a current TAP or eTIP card verifying that they have been trained to control the distribution and service of alcoholic beverages in Alaska.  
Access/Service: There will be delivery of alcohol on the deck area outside only and it is a fenced off area. Dining guests must walk in and out the same door, which controls the transfer of alcohol. An owner or manager is always on site and monitors the consumption of alcohol.

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 – DEC Food Service Permit**

Per 3 AAC 304.910 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.

Please 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.*



Alaska Alcoholic Beverage Control Board

**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/pm:

Monday through Sunday: 7am to 10pm

**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?

Yes

No

If "Yes", describe the entertainment offered or available and the hours in which the entertainment may occur:

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:

AMCO

APR 26 2022



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 7 - Certifications and Approvals

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

Initials

There are tables or counters at my establishment for consuming food in a dining area on the premises.

I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons. This menu includes entrees that are regularly sold and prepared by the licensee at the licensed premises.

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 have included with this application a copy of the most recent AB-02 or AB-14 for the premises to be permitted. (AB-03 applications that accompany a new or transfer license application will not be required to submit an additional copy of their premises diagram.)

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

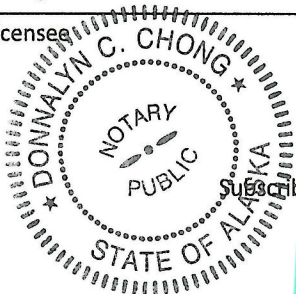
Benjamin Hilberg

Printed name of licensee

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 12-08-2024



Subscribed and sworn to before me this 18<sup>th</sup> day of April, 2022.

Local Government Review (to be completed by)

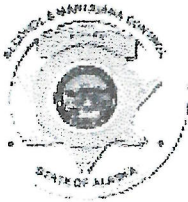
Signature of local government official

Printed name of local government official

Approved

Denied

See attached addth page for initials in box.



Alcohol and Marijuana Control Office  
 450 W 7th Avenue, Suite 1600  
 Anchorage, AK 99501  
[www.ak.gov/amco](http://www.ak.gov/amco)  
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

**Form AB-03: Restaurant Designation Permit Application**

**Section 7 – Certifications and Approvals**

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

Initials

There are tables or counters at my establishment for consuming food in a dining area on the premises.



I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons. This menu includes entrees that are regularly sold and prepared by the licensee at the licensed premises.



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 have included with this application a copy of the most recent AB-02 or AB-14 for the premises to be permitted. (AB-03 applications that accompany a new or transfer license application will not be required to submit an additional copy of their premises diagrams.)



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

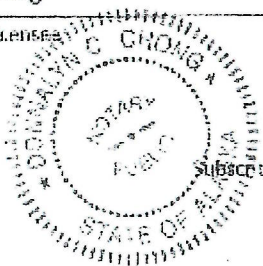
Benjamin Hilberg

Printed name of licensee

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 12/31/2024



Subscribed and sworn to before me this 15th day of April, 2022.

Local Government Review (to be completed by an appropriate local government official):

Approved Denied



Signature of local government official

Date

Printed name of local government official

Title



APR 26 2022



Alaska Alcoholic Beverage Control Board

**Form AB-03: Restaurant Designation Permit Application**

AMCO Enforcement Review: \_\_\_\_\_ Enforcement Recommendation: Approve Deny

\_\_\_\_\_  
Signature of AMCO Enforcement Supervisor

\_\_\_\_\_  
Printed name of AMCO Enforcement Supervisor

\_\_\_\_\_  
Date

**Enforcement Recommendations:**

AMCO Director Review: \_\_\_\_\_ Approved Denied

\_\_\_\_\_  
Signature of AMCO Director

\_\_\_\_\_  
Printed name of AMCO Director

\_\_\_\_\_  
Date

**Limitations:**

AMCO  
APR 26 2022

## CRAB SHACK 2022 MENU

### APPETIZERS

MODIFER 1

MODIFER 2

MODIFER 3

ADD \$

- Crab Cocktail  
Dungeness crab served with coleslaw  
Cocktail sauce  
Fresh lemon  
**Fresh Dungeness Crab meat on a bed of our house made slaw with cocktail sauce and a lemon Wedge**
- Prawn Cocktail  
Prawns served with zesty broth  
Avocado  
Lemon  
Crackers  
**Locally Harvested Alaska Spot prawns served in a zesty cold broth with celery, fresh avocado, lemon and specialty cracker**
- Chowder  
Homemade  
Bread Bowl      Bowl      Cup  
**Our own special, and secret, recipe developed 45 years ago. A Favorite!**

### SEAFOOD

- Halibut & Chips  
Fries  
**Our Halibut is harvested right here in our "front yard" lightly breaded, and served with our own Alaskan Sourdough Fritters or French Fries, Housemade Cole Slaw, Fresh Lemon and our own tarter sauce**
- Cod & Chips  
Fries  
**Plagiaries from above**
- Black & Chips  
Fries  
**Plagiaries from above**
- Salmon & Chips  
Fries  
**same**
- Fish Sampler  
1 piece of each fish  
**A portion of Halibut, Cod, Salmon and Black Cod served with your choice of our own Alaskan Sourdough Fritters or Fries, Housemade Cole Slaw, Fresh Lemon and our own tarter sauces**
- Rock Fish Tacos  
3 fish tacos  
**Locally caught Rock Fish is seasoned and sauteed, served on a bed of cabbage with our own Pico de Gallo**
- Salmon Burger  
Coho Filet  
**Thanks to our local fisherman we are provided with the freshest and best Coho Salmon, served on a toasted Bun with your French Fries, Lettuce, Tomato, Onion, Pickles and condiments on the side**
- Miso Black Cod  
Marinated Black Cod      Sub fries for rice      Sub fries for veg  
Pilaf  
Vegetables  
**Locally Harvested Black Cod is marinated in our own creation, served with Rice Pilaf and Fresh Vegetable Medley**
- Herbed Halibut  
Oven baked with fresh herbs      Sub fries for rice      Sub fries for veg  
Pilaf  
Vegetables  
**Local Halibut lightly seasoned with our own blend and baked to perfection. Served with rice Pilaf and Fresh Vegetable Medley**

AMCO

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Veggies

- NY Strip  
Fries (baker in PM)  
Veggies

Rare/Med/Well

Sub fritter for fries   Sub fritter for veg

### **BEVERAGES**

- Coke                      No ice
- Diet Coke                No ice
- Sprite                      No ice
- Orange                    No ice
- Root Beer                No ice
- Ginger Ale                No ice
- Bottled Water
- Sparkling Water

### **BEER/WINE**

- Baranof Beer                      Pint                      Mug                      Schooner
- Alaskan Beer                      Pint                      Mug                      Schooner
- Bottled Beer  
Names of beer
- Premium Beer  
Names of beer
- House Wine                      Chard/Gris/Pinot/Cab Sav/Blend
- Premium Wine  
Names of wine

### **COCKTAILS**

- Screwdriver
- Bloody Mary
- Bloody Baranof
- Margarita
- Cuba Libre
- Gin & Tonic
- Gin & Sprite
- Vodka Tonic

**AMCO**

**APR 26 2022**



## Alaska Food Code 2022 Establishment Permit

Division of Environmental Health  
Food Safety & Sanitation Program

Permit Number: 11646  
Issued to: **HPR GROUP INC.**  
For: **Halibut Point Crab and Chowder**  
For Operation of: **FF-6 Deli/Takeout/Drive-in Food Service**  
Located at: **4513 Halibut Point RD Sitka, AK 99835**

This permit, issued under the provisions of 18 AAC 31, is valid until the noted expiration date or unless suspended or revoked by the department.

This permit is not transferable for change of ownership, facility location, or type of operation. It must be posted in plain view in the establishment and is the property of the State of Alaska.

Expiration Date:  
**December 31, 2022**

Program Manager:

A handwritten signature in black ink, appearing to read "Amaly 801", is written over the printed name of the Program Manager.

**If you have questions or concerns regarding  
safe food handling practices call toll free:**

# 1-87-SAFE-FOOD

**(in Anchorage call 334-2560)**

