



THE STATE  
of **ALASKA**  
GOVERNOR MIKE DUNLEAVY

Department of Commerce, Community,  
and Economic Development

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

August 21, 2024

From: [Alcohol.licensing@alaska.gov](mailto:Alcohol.licensing@alaska.gov) ; [amco.localgovernmentonly@alaska.gov](mailto:amco.localgovernmentonly@alaska.gov)

Licensee: Beak Llc

DBA: Beak Restaurant

VIA email: [Renee.Jakaitis@gmail.com](mailto:Renee.Jakaitis@gmail.com)

Local Government 1: City & Borough of Sitka

Local Government 2: N/A

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

Community Council: N/A

Via Email: N/A

RE: Restaurant/Eating Place License #4971 Combined Renewal Notice

<b>License Number:</b>	4971
<b>License Type:</b>	Restaurant/Eating Place
<b>Licensee:</b>	Beak Llc
<b>Doing Business As:</b>	Beak Restaurant
<b>Physical Address:</b>	2 Lincoln Street, Ste. 1A
<b>Licensee Contact Tel.</b>	303-478-2940, 907-966-2326

License Renewal Application

Endorsement Renewal Application

**Dear Licensee:**

Our staff has reviewed your application after receiving your application and required fees. Your renewal documents appear to be in order, and I have determined that your application is complete for purposes of AS 04.11.510, and AS 04.11.520.

Your application is now considered complete and will be sent electronically to the local governing body(ies), your community council if your proposed premises is in Anchorage or certain locations in the Matanuska-Susitna Borough, and to any non-profit agencies who have requested notification of applications. The local governing body(ies) will have 60 days to protest the renewal of your license.

Your application will be scheduled for the **September 10, 2024**, board meeting for Alcoholic Beverage Control Board consideration. The address and call-in number for the meeting will be posted on our home page. The

board will not grant or deny your application at the meeting unless your local government waives its right to protest per AS 04.11.480(a).

Please feel free to contact us through the [Alcohol.licensing@alaska.gov](mailto:Alcohol.licensing@alaska.gov) email address if you have any questions.

**Dear Local Government:**

We have received completed renewal applications for the above listed licenses within your jurisdiction. This is the notice required under AS 04.11.480. A local governing body may protest the issuance, renewal, relocation, or transfer to another person of a license with one or more endorsement, or issuance of an endorsement by sending the director and the applicant a protest and the reasons for the protest in a clear and concise statement within 60 days of the date of the notice of filing of the application. A protest received after the 60-day period may not be accepted by the board, and no event may a protest cause the board to reconsider an approved renewal, relocation, or transfer.

To protest any application(s) referenced above, please submit your written protest for each within 60 days to AMCO and provide proof of service upon the applicant and proof that the applicant has had reasonable opportunity to defend the application before the meeting of the local governing body.

If you have any questions, please email [amco.localgovernmentonly@alaska.gov](mailto:amco.localgovernmentonly@alaska.gov).

**Dear Community Council (Municipality of Anchorage and Mat-Su Borough only)**

We have received a completed renewal application for the above listed license (see attached application documents) within your jurisdiction. This letter serves to provide written notice to the above referenced entities regarding the above application, as required under AS 04.11.310(b) and AS 04.11.525.

Please contact the local governing body with jurisdiction over the proposed premises for information regarding review of this application. Comments or objections you may have about the application should first be presented to the local governing body.

If you have any questions, please email [Alcohol.licensing@alaska.gov](mailto:Alcohol.licensing@alaska.gov)

Sincerely,

A handwritten signature in blue ink that reads "Joan M. Wilson". The signature is written in a cursive, flowing style.

Joan M. Wilson, Director  
907-269-0350

## License Renewal

Is this application being made by you for the benefit of someone else? If "YES," indicate below or attach explanation.

No

Has the applicant, applicant's spouse, partner, officer, director or stockholders, of the licensed entity become disqualified by law or by facts and conditions from holding a license or permit under the Alcohol and Cannabis Control Information System Alcoholic Beverage Code ? If "YES," indicate below or attach explanation.

No

Have there been changes since your original application that have not been reported on this or previous applications ? If "YES," indicate below or attach explanation.

No

How many hours did you operate in 2022 as set forth in AS 04.11.330?

Operated to meet the minimum 240 hrs.

How many hours did you operate in 2023 as set forth in AS 04.11.330?

Operated to meet the minimum 240 hrs.

Are you a seasonal license and has your operation times/dates/seasons changed?

No

Has any person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2022 or 2023.?

No


Have any Notices of Violation been issued for this license in 2022 or 2023?

No

# License Number:  
4971

# License Expiration Date:  
12/31/2023

# License Trade Name:  
Beak Restaurant

Mailing Address:  
 2 Lincoln St. Ste. 1A  
Sitka , AK  
99835



Document reference ID : 1894

# Licensing Application Summary

**Application ID:** 1894

**Applicant Name:** Beak, Llc

**License Type applied for:** Restaurant Eating Place License (REPL) (AS 04.09.210)

**Application Status:** In Review

**Application Submitted On:** 12/29/2023

## Entity Information

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**Business Structure:** Limited liability company

**Alaska Entity Number (CBPL):** 10056808

## Entity Contact Information

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**Entity Address:** 692 Indian River Rd, Sitka, AK, 99835, USA

## Ownership / Principal Party Details

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Principal Parent Entity	Principal Party	Role	%Ownership
Beak, Llc	Renee Trafton	Member	100

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## Premises Address

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**Nearest municipality, city, and/or borough:** Sitka

**Country, State, Zip:** AK, United States,

## Basic Business information

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**Business/Trade Name:**

Beak Restaurant

## Local Government and Community Council Details

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**City/Municipality**

Sitka (City and Borough of)

## Restaurant Detail

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**Dining after standard closing hours: AS 04.16.010(c)**

No

**Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)**

Yes

**Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)**

Yes

**Employment for any persons under 21 years of age: AS 04.16.049(c)**

Yes

## Food Service Permit

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## Entertainment & Service

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## Public Notice Posting Attestation and Publishers Affidavit

### Attestations

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I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by

AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 305.700.

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

I hereby certify that I am the person herein named and subscribing to this application and 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.

I certify that all proposed licensees have been listed with Division of Corporation, Business, and Professional Licensing.

I certify that I and any individual identified in the business entity ownership section of this application, has or will read AS 04 and its implementing regulations.

## Signature

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Electronic Signature not collected; application submitted based on paper form.

## Payment Info

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Payment Type : CC

Payment Id: bc5ca2de-68ca-4b3e-8525-a902ffad59e6

Receipt Number: 100742628

Payment Date: 12/29/2023 7:43:20 AM