

CLERK'S OFFICE

**APPROVED**

Date: 10-26-10

Submitted by: ASSEMBLY CHAIR TRAINI,  
VICE CHAIR FLYNN, AND ASSEMBLY  
PUBLIC SAFETY  
COMMITTEE CHAIR HONEMAN

Prepared by: Municipal Clerk  
For reading: October 26, 2010

**ANCHORAGE, ALASKA  
AR NO. 2010-304**

**A RESOLUTION OF THE ANCHORAGE MUNICIPAL ASSEMBLY STATING ITS  
PROTEST REGARDING A NEW RESTAURANT EATING PLACE LIQUOR LICENSE  
# 5011 AND RESTAURANT DESIGNATION PERMIT FOR TROPICAL SPANISH FOOD  
dba TROPICAL SPANISH FOOD, LOCATED AT 341 BONIFACE PARKWAY #B, AND  
AUTHORIZING THE MUNICIPAL CLERK TO TAKE CERTAIN ACTION.**

WHEREAS, Tropical Spanish Food has made an application with the Alcoholic Beverage Control (ABC) Board and has paid the required fee for a new Restaurant/Eating Place Liquor License # 5011 and Restaurant Designation Permit, to be used for Tropical Spanish Food, located at 341 Boniface Parkway, Anchorage, Alaska; and

WHEREAS, the Assembly must enter any protest to the ABC Board within 60 days following receipt of the application; and

WHEREAS, the Anchorage Municipal Clerk received a copy of this application on August 27, 2010 and has determined that the last day for the Assembly to file a protest is October 26, 2010 and

WHEREAS, the Assembly Meeting on October 26, 2010 is the last scheduled regular meeting of the Anchorage Assembly prior to the expiration of the protest period; and

WHEREAS, the Municipal Clerk reports the following status concerning this location:

1. No ABC Board violations and/or incidents that would lead to an ABC Board violation;
2. No taxes owing to the Municipality of Anchorage;
3. Anchorage Fire and Building Safety Departments approval has been received;
4. Administrative site plan review, required by AMC 21.50.500, **has been completed;**
5. Approval from the Municipal Health & Human Services Department **has not been received;** and

WHEREAS, protest by the Assembly is in order pending Municipal Clerk confirmation that outstanding items required for this location have been completed;

NOW, THEREFORE, THE ANCHORAGE ASSEMBLY RESOLVES:

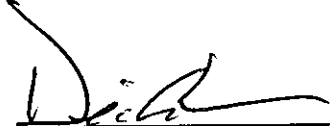
Section 1. The Anchorage Assembly hereby enters its PROTEST for a new Restaurant Eating Place Liquor License # 5011 and Restaurant Designation Permit until these conditions are met:

- Approval from the Municipal Health & Human Services is received and confirmed by the Municipal Clerk.


Section 2. A copy of this Assembly Resolution may be presented to the Alcoholic Beverage Control Board as proof that the Anchorage Assembly, as the local governing body, has stated its protest in order to allow the Director of the Alcoholic Beverage Control Board to hold processing of Restaurant Eating Place Liquor License # 5011 and Restaurant Designation Permit under local protest, until receipt by the Director of confirmation from the Municipal Clerk that the conditions in Section 1 have been met, and this protest is lifted as authorized by this Assembly Resolution.

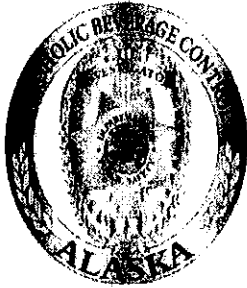
Section 3. The Anchorage Assembly hereby authorizes the Municipal Clerk, upon Municipal Clerk confirmation that all conditions in Section 1 have been met, to provide written notification to the Alcoholic Beverage Control Board that this protest by the Anchorage Assembly is lifted, without further action by the Assembly.

PASSED AND APPROVED by the Anchorage Assembly this 26<sup>th</sup> day of October, 2010.

  
Chair

ATTEST:

  
Municipal Clerk



# State of Alaska

Department of Public Safety

## Alcoholic Beverage Control Board

Sean Parnell, Governor  
Joseph A Masters, Commissioner

August 27, 2010

Municipality of Anchorage  
Barbara Gruenstein  
P.O. Box 196650  
Anchorage, Alaska 99519

**Re: Tropical Spanish Food – License # 5011 - Restaurant Designation Permit Application enclosed.**

We have received the enclosed application for a new liquor license within the **Municipality of Anchorage**. This is the notice as required under AS 04.11.520. Additional information concerning filing a "protest" by a local governing body under AS 04.11.480 is included in this letter.

A local governing body as defined under AS 04.21.080(11) may protest the approval of an application(s) pursuant to AS 04.11.480 by furnishing the board and the applicant with a clear and concise written statement of reasons in support of a protest within 60 days of receipt of this notice. If a protest is filed, the board will not approve the application unless it finds that the protest is "arbitrary, capricious and unreasonable". Instead, in accordance with AS 04.11.510(b), the board will notify the applicant that the application is denied for reasons stated in the protest. The applicant is entitled to an informal conference with either the director or the board and, if not satisfied by the informal conference, is entitled to a formal hearing in accordance with AS 44.62.330-44.62-630. **IF THE APPLICANT REQUESTS A HEARING, THE LOCAL GOVERNING BODY MUST ASSIST IN OR UNDERTAKE THE DEFENSE OF ITS PROTEST.**

Under AS 04.11.420(a), the board may not issue a license or permit for premises in a municipality where a zoning regulation or ordinance prohibits the sale or consumption of alcoholic beverages, unless a variance of the regulation or ordinance has been approved. Under AS 04.11.420(b) municipalities must inform the board of zoning regulations or ordinances which prohibit the sale or consumption of alcoholic beverages. If a municipal zoning regulation or ordinance prohibits the sale or consumption of alcoholic beverages at the proposed premises and no variance of the regulation or ordinance has been approved, please notify us and provide a certified copy of the regulation or ordinance if you have not previously done so.

Protest under AS 04.11.480 and the prohibition of sale or consumption of alcoholic beverages as required by zoning regulation or ordinance under AS 04.11.420(a) are two separate and distinct subjects. Please bear that in mind in responding to this notice.

AS 04.21.010(d), if applicable, requires the municipality to provide written notice to the appropriate community council(s).

If you wish to protest the application referenced above, please do so in the prescribed manner and within the prescribed time. Please show proof of service upon the applicant. For additional information please refer to 15 AAC 104.145, Local Governing Body Protest.

**Note:** Applications applied for under AS 04.11.400(g), 15 AAC 104.335(a)(3), AS 04.11.090(e), and 15 AAC 104.660(e) must be approved by the governing body.

**Alcoholic Beverage Control Board**

**5848 E Tudor Rd - Anchorage, AK 99507 - Voice (907) 269-0350 - Fax (907) 272-9412**

Alcoholic Beverage Control Board  
5848 E Tudor Rd  
Anchorage, AK 99507

## New Liquor License



PAGE 1 OF 2

(907) 269-0350  
Fax: (907) 272-9412  
www.dps.state.ak.us/abc

This application is for:

- ☐ Seasonal -- Two 6-month periods in each year of the biennial period beginning \_\_\_\_\_ and ending \_\_\_\_\_  
Mo/Day Mo/Day
- ☐ Full 2-year period

#6524

SECTION A. LICENSE INFORMATION. Must be completed for all types of applications.			FEEs
License Year: <u>2010/2011</u>	License Type: <u>Restaurant/Eating Place</u> <u>Beer and Wine</u>	Statute Reference Sec. 04.11. <u>100</u>	License Fee: \$ <u>800</u>
(Office Use Only) License #: <u>5011</u>			Filing Fee: \$100.00
Local Governing Body: (City, Borough or Unorganized) <u>Municipality of Anchorage</u>	Community Council Name(s) & Mailing Address:		Fingerprint: (\$54.25 per person) <u>34.25</u>
Name of Applicant <u>Maria del Carmen Rodriguez</u> (Corp/LLC/LLP/Individual/Partnership):	Doing Business As (Business Name): <u>Tropical Spanish Food</u>		Total Submitted: \$ <u>804.25</u>
	Business Telephone Number: <u>907 729 5172</u>		
Mailing Address: <u>945 15th Ave</u>	Street Address or Location of Premise: <u>341 Boniface Plwy #B</u>		Fax Number:
City, State, Zip: <u>Anchorage AK 99501</u>	<u>Alaska 99501</u>		Email Address:

SECTION B. PREMISES TO BE LICENSED. Must be completed.	
Closest school grounds <u>2 mile away</u>	Distance measured under: <input checked="" type="checkbox"/> AS 04.11.410 OR <input type="checkbox"/> Local ordinance No.
Closest church: <u>2 mile away</u>	Distance measured under: <input checked="" type="checkbox"/> AS 04.11.410 OR <input type="checkbox"/> Local ordinance No.
Premises to be licensed is: <input type="checkbox"/> Proposed building <input checked="" type="checkbox"/> Existing facility <input type="checkbox"/> New building	<input type="checkbox"/> Premises is GREATER than 50 miles from the boundaries of an incorporated city, borough, or unified municipality. <input type="checkbox"/> Premises is LESS than 50 miles from the boundaries of an incorporated city, borough, or unified municipality. <input checked="" type="checkbox"/> Not applicable  <input type="checkbox"/> Plans submitted to Fire Marshall (required for new & proposed buildings) <input checked="" type="checkbox"/> Diagram of premises attached

### SECTION C. Individual, corporate officer, limited liability organization member, manager or partner background.

Does any individual, corporate officer, director, limited liability organization member, manager or partner named in this application have any direct or indirect interest in any other alcoholic beverage business licensed in Alaska or any other state?

☐ Yes ☒ No If Yes, complete the following. Attach additional sheets if necessary.

Name	Name of Business	Type of License	Business Street Address	State

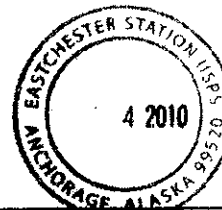
Has any individual, corporate officer, director, limited liability organization member, manager or partner named in this application been convicted of a felony, a violation of AS 04, or been convicted as a licensee or manager of licensed premises in another state of the liquor laws of that state?

☐ Yes ☒ No If Yes, attach written explanation.

Date Approved

Director's Signature

# Liquor License



**Corporations, LLCs, LLPs and LPs must be registered with the Dept. of Community and Economic Development.**

Name of Entity (Corporation/LLC/LLP/LP) (or N/A if an Individual ownership) <u>N/A</u>		Telephone Number <u>929-5172</u>	Fax Number _____
Corporate Mailing Address: <u>945 E 5th Ave</u>	City <u>Anchorage</u>	State <u>Alaska</u>	Zip Code <u>99501</u>
Name, Mailing Address and Telephone Number of Registered Agent <u>945 E 5th Ave</u>		Date of Incorporation OR Certification with DCED _____	State of Incorporation _____
Is the Entity in compliance with the reporting requirements of Title 10 of the Alaska Statutes? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, attach written explanation. Your entity <b>must</b> be in compliance with Title 10 of the Alaska Statutes to be a valid liquor licensee.			

Entity Members (Must include President, Secretary, Treasurer, Vice-President, Manager and Shareholder/Member with at least 10%)					
Name	Title	%	Home Address & Telephone Number	Work Telephone Number	Date of Birth
<u>Maria Rodriguez</u>			<u>725 Irwin St #3</u>	<u>929-5172</u>	<u>12-30-63</u>

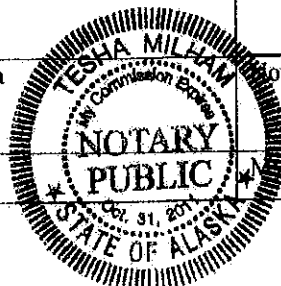
**NOTE: On a separate sheet provide information on ownership other organized entities that are shareholders of the licensee.**

Individual Licensees/Affiliates (The ABC Board defines an "Affiliate" as the spouse or significant other of a licensee. Each Affiliate must be listed.)					
Name: <u>Maria del Carmen Rodriguez</u>	Applicant <input checked="" type="checkbox"/> Affiliate <input type="checkbox"/>	Name: _____	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>		
Address: <u>725 Irwin St Apt #3</u> <u>Anchorage, 99508</u>	Date of Birth: <u>12/30/63</u>	Address: _____	Date of Birth: _____		
Home Phone: <u>907 278 0307</u>		Home Phone: _____			
Work Phone: <u>907 929 5172</u>		Work Phone: _____			
Name: _____	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>	Name: _____	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>		
Address: _____	Date of Birth: _____	Address: _____	Date of Birth: _____		
Home Phone: _____		Home Phone: _____			
Work Phone: _____		Work Phone: _____			

**Declaration**

- I declare under penalty of perjury that I have examined this application, including the accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete, and this application is not in violation of any security interest or other contracted obligations.
- I hereby certify that there have been no changes in officers or stockholders that have not been reported to the Alcoholic Beverage Control Board. The undersigned certifies on behalf of the organized entity, it is understood that a misrepresentation of fact is cause for rejection of this application or revocation of any license issued.
- I further certify that I have read and am familiar with Title 4 of the Alaska statutes and its regulations, and that in accordance with AS 04.11.450, no person other than the licensee(s) has any direct or indirect financial interest in the licensed business.
- I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

Signature of Licensee(s)		Signature	
<u>Maria del Carmen Rodriguez</u>		_____	
Name & Title (Please Print) <u>Maria del Carmen Rodriguez owner</u>		Name & Title (Please Print) _____	
Subscribed and sworn to before me this <u>27th</u> day of <u>April</u> , <u>2010</u> .		Subscribed and sworn to before me this _____ day of _____, _____	
Notary Public in and for the State of Alaska <u>[Signature]</u>		Notary Public in and for the State of Alaska _____	
My commission expires: <u>10/31/2011</u>		My commission expires: _____	



STATE OF ALASKA  
ALCOHOLIC BEVERAGE CONTROL BOARD  
APPLICATION FOR RESTAURANT DESIGNATION PERMIT - AS 04.16.049 & 13 AAC 104.715-794  
FEE: \$50.00

The granting of this permit allows access of persons under 21 years of age to designated licensed premises for purposes of dining, and persons under the age of 19 for employment. If for employment, please state in detail, how the person will be employed, duties, etc. (13 AAC 104.745)

This application is for designation of premises where: (please mark appropriate items).

- 1 ☒ Under AS 04.16.010(c) Bona fide restaurant/eating place.
- 2 ☒ Persons age 16 to 20 may dine unaccompanied.
- 3 ☒ Persons under 16 may dine accompanied by a person 21 years or older.
- 4 ☒ Persons between 16 and 19 years may be employed. (See note below).

LICENSEE: Maria del Carmen Rodriguez

D/B/A: Tropical Spanish Food

ADDRESS: 341 Boniface Pkwy Anchorage, AK 99501

1. Hours of Operation: 11A to 9pm Telephone # 907 929 5172
2. Have police ever been called to your premises by you or anyone else for any reason: ☐ Yes ☒ No  
If yes, date(s) and explanation(s).

3. Duties of employment: prep cook, wait staff, dishwasher, cashier

4. Are video games available to the public on your premises? no

5. Do you provide entertainment: ☐ Yes ☒ No If yes, describe.

6. How is food served? ☒ Table Service ☐ Buffet Service ☐ Counter Service ☐ Other\*

7. Is the owner, manager, or assistant manager always present during business hours? ☒ Yes ☐ No

\*\*\* A MENU AND A DETAILED LICENSED PREMISES DIAGRAM MUST ACCOMPANY THIS APPLICATION \*\*\*

This permit remains in effect until the liquor license is transferred OR at the discretion of the Alcoholic Beverage Control Board. (13 AAC 104.795)

I certify that I have read AS 04.16.049, AS 04.16.060, 13 AAC 104.715-795 and have instructed my employees about provisions contained therein.

[Signature]  
Applicant(s) signature

Subscribed and sworn to before me this 27th day of April, 2010

[Signature]  
Notary Public in and for Alaska

Notary Public Commission Expires 10/31/2011



Application approved (13 AAC 104.725(e))  
Governing Body Official

Date: \_\_\_\_\_

Director, ABC Board

Date: \_\_\_\_\_

\* AS 04.16.049(c) requires that written parental consent and an exemption by the Department of Labor must be provided for the licensee by the employee who is under 19 years of age. Persons 19 and 20 years of age are not required to have consent or exemption.

\* Describe how food is served on back of form.

STATE OF ALASKA  
ALCOHOL BEVERAGE CONTROL BOARD  
Licensed Premises Diagram

INSTRUCTIONS: Draw a detailed floor plan of your present or proposed licensed premises on the graph below; show all entrances and exits, and all fixtures such as tables, booths, games, counters, bars, coolers, stages, etc.

DBA: TROPICAL SPANISH Food

PREMISES LOCATION: Unit B CF 341 Bonifacio PARKWAY

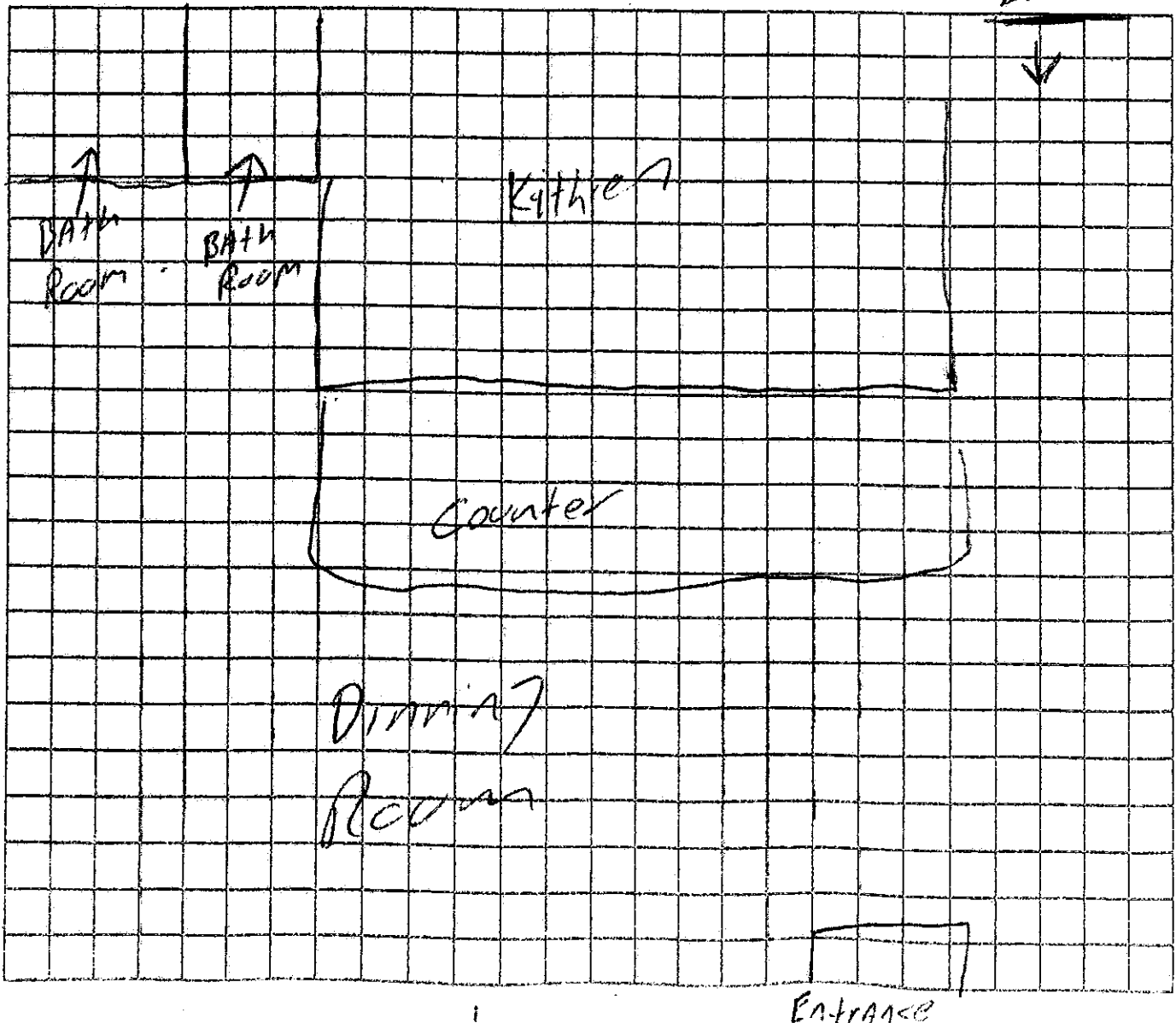
Indicate scale by x after appropriate statement or show length and width of premises.

SCALE A: \_\_\_\_\_ 1 SQ. = 4 FT.

SCALE B: 2400 1 SQ. = 1 FT.

Length and width of premises in feet:

Outline the area to be designated for sale service storage and consumption of alcoholic beverages in red  
DO NOT USE BLUE INK OR PENCIL ON THIS DIAGRAM.





Fireooved C

Caribou Dr

Taku Dr

Dr

Camelot Dr

Boniface Pkwy

E 4th Ave

© 2010 Navtec  
© 2010 Microsoft

**Preparamos Comida para ocasiones**

**Especiales: Bodas, Cumpleaños, Bautizos,**

**Reuniones Sociales, Etc**

**We prepared Food for all Special  
occasions Weddings, Birthday,  
Baptisms etc.**



**Tropical Latin**  
"Hispanic Food"

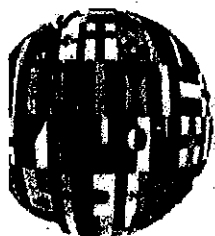
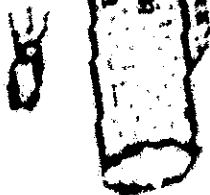


**Horario (Business Hours)**  
**Lunes-Viernes 10:00am-10:00pm**

**Monday-Thursday 10:00am-10:00pm**

**Viernes-Sunday 10:00am-10:00pm**

**Friday-Sunday 10:00am-10:00pm**



**Desde America Latina para Alaska  
(From Latin America to Alaska)**

**Tropical Latin**  
"Hispanic Food"



**MENU**

**Para disfrutar de todo el sabor criocho de la  
cocina Hispana.  
to enjoy all the flavor of the Hispanic food.**

**Servicio a Domicilio  
Fast Delivery**

**Tropical Latin Food**









**341 Boniface Parkway  
Anchorage Alaska 99504**

**Phone: 987-929-5172**



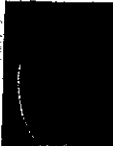
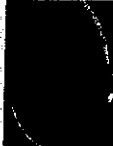


**Alaska**



# **MENU**

Carne Guisada (Beef Stuffed in Caribbean Sauce)	10.00	
Beef Encebollado (Beef Stuffed in Caribbeons)	10.00	
Carne de Cerdo Guisada (Pork Stuffed in Caribbean Sauce)	10.00	
Perrill de Cerdo (Seasoned Roasted Pork)	10.00	
Costilla de Cerdo (Seasoned Pork Ribs)	10.00	
Pollo guisado (Chicken in Caribbean Sauce)	10.00	
Pollo Frito (Seasoned Fried Chicken)	10.00	
Pollo Hornado (Seasoned Roasted Chicken)	10.00	

• Tostones - Fried Plantains

Sopa de Pollo (Chicken Soup)	7.99	
Arroz con habichuelas (Rice and Beans)	10.00	
Moro de Guandul (Rice and Pigeon Peas)	10.00	
Sancocho (Caribbean Beef or Pork Stew)	15.00	
Patties de Cerdo guisadas (Pig Feet in Caribbean Sauce)	10.00	
Pescado Frito (Fried Fish)	13.00	

Sandwich Cubano Cuban Sandwich	7.99
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Todos los Servicios incluyen :  
All Services Include:  
• Arroz, Habichuelas y Ensalada  
• Rice, Beans and Salad

Mango - Mashed Plantains

Mofoengo - Mashed Fried Plantains

Mofoengo - Tripe Soup

## **SIDE ORDERS**

Tostones (Fried Plantains)	5.00
Mango/Mofoengo (Seasoned Mashed then Fried Plantain)	15.00
Yuca Costida (Boiled Casaba)	4.00
Ensalada de Pulpo (Squid Salad)	5.00

## **BEBIDAS ( BEVERAGES )**

Sodas ( Soft Drinks )	2.00
Agua (Water)	1.00

## **JUGOS NATURALES ( NATURAL JUICE )**

Lemon (Papeya)	5.00
Menté Sufiente (To Die Dreaming) (Lemon and Ice)	5.00
Limonada (Lemonade)	5.00
Guanabana (Sweet Sourness)	5.00
Mango	5.00
Cedra (Pineapple)	5.00
Pina (Pineapple)	5.00
Batida de Frutas (Smoothie Fruits)	5.00

**Content ID:** 009513**Type:** AM\_OtherServices - Other Services Memorandum

A RESOLUTION OF THE ANCHORAGE MUNICIPAL ASSEMBLY STATING ITS PROTEST REGARDING A NEW RESTAURANT EATING PLACE LIQUOR LICENSE # 5011 AND RESTAURANT DESIGNATION PERMIT FOR TROPICAL

**Title:** SPANISH FOOD dba TROPICAL SPANISH FOOD, LOCATED AT 341 BONIFACE PARKWAY # B, AND AUTHORIZING THE MUNICIPAL CLERK TO TAKE CERTAIN ACTION. Assembly Chair Traini, Vice Chair Flynn, and Assembly Public Safety Committee Chair Honeman.

**Author:** moserak**Initiating Dept:** Muni\_Clk**Date Prepared:** 10/15/10 11:58 AM**Assembly Meeting Date:** 10/26/10

<b>Workflow Name</b>	<b>Action Date</b>	<b>Action</b>	<b>User</b>	<b>Security Group</b>	<b>Content ID</b>
Clerk_Admin_SubWorkflow	10/15/10 1:28 PM	Exit	Amanda Moser	Public	009513
OtherServicesAMWorkflow	10/15/10 1:28 PM	Checkin	Amanda Moser	Public	009513