

Authorizing the Issuance of a Letter of Non-Objection to the Alcoholic Beverage Control Board Regarding Liquor License Transfer for Wall Enterprises, LLC

Item Type: Action Memorandum

Prepared For: Mayor Lord and City Council

Date: November 19, 2025

From: Amy Woodruff, City Clerk

Through: Melissa Jacobsen, City Manager

The City Clerk's Office has been notified by the AMCO Board of a Transfer of Ownership Applications for Liquor License Permits within the City of Homer for the following license:

Type: Restaurant or Eating Place

License #: 6040

DBA Name: Homeslice Pizza

Service Location: 4246 Homer Spit Rd, Homer, AK 99603

Owner: Voglco LLC
Mailing Address: 64310 Bridger Rd
Transferee: La Casa de Monana
Designated Licensee: Monica Romero-Curiel

RECOMMENDATION: Voice non objection and approval for the liquor license transfer of ownership application.

Fiscal Note: Revenues.



Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

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

November 13, 2025

City of Homer Kenai Peninsula Borough

VIA Email: mjacobsen@ci.homer.ak.us; rkrause@ci.homer.ak.us; clerk@ci.homer.ak.us; micheleturner@kpb.us; sessert@kpb.us; mjenkins@kpb.us; nscarlett@kpb.us; mboehmler@kpb.us; rraidmae@kpb.us; slopez@kpb.us; jrasor@kpb.us; hmills@kpb.us

License Type:	Restaurant or Eating Place	License Number:	6040
Licensee:	Wall Enterprises, Llc		
Doing Business As:	La Casa de Monana		
Premises Address	4246 Homer Spit Road #4, Homer, AK 99603		
Endorsement(s):	None/ n/a		

☐ 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 305.085(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,
Kristina Serezhenkov, Local Government Specialist
For,
Kevin Richard, Director
amco.localgovernmentonly@alaska.gov



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

alcohol.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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 305** 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, 3 AAC 305.045 and 3 AAC 305.060.

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.

before any license application	on will be considered com	plete.			
	Section 1	- Transferor Inf	ormation		
Enter information for the cur	rent licensee and licensed	establishment.	-		
Licensee:	Vogleo LLC		License #:	2040	
License Type:	Restaurant	or Eating Play	Statutory Refe	erence:	AS 04. D9.20
Doing Business As:	Homeslice P	izzg			
Premises Address:		ver Spit Road	1 #4		
City:	Homer	State:	AK	ZIP:	99603
Local Governing Body/Bodies:	City of	Homer			
Regular transfer Transfer with securit Involuntary retransf Controlling interest Location transfer	fer			MAY Dept. 0	1 8 2025 f Commerce
		OFFICE USE ONLY			
Complete Date:		Trans	action #:		
Board Meeting Date:		Licens	se Years:		
Issue Date:		Exam	iner:		



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

	Section 2 - Trans	feree Inf	ormation		
Enter information for the <i>new</i>	applicant and/or location seeking to b	e licensed.			
Licensee:	Wall Enterprise	s LU			
Doing Business As:	La Casa de Ma	onana			
Premises Address:	4246 Homer Spit				_
City:	Homer	State:	AK	ZIP:	99603
Community Council, (If applicable):	4 4				
Mailing Address:	64310 Bridger Rd				
City:	Homer	State:	AK	ZIP:	99603
Email:		Phone:			
B. d. and Misses		$\overline{}$			
Designated Licensee:	Monica Romero-		Ohana		
Contact Phone:		Business I	Pnone:		
Contact Email:					
Yes Seasonal License?	No If "Yes", write your s			<u>14 - C</u>	ctober
	Section 3 - Prem	ises Info	rmation		
What is the distance of th	a new building be completed by beverage dispensariae shortest pedestrian route from the the nearest school grounds? Include t	public entran	ourism) and package sto	ur proposed	d premises to
What is the distance of th the public entrance of th	e shortest pedestrian route from the e nearest church building? Include th	public entran e unit of mea	surement in your answ	er (Must be	in feet.)
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			0 YAM	8 2025	



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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). applicant This individual is an: affiliate Name: Address: ZIP: State: City: Phone: Email: affiliate applicant This individual is an: Name: Address: ZIP: State: City: Phone: Email:

Section 5 - Entity Ownership Information

This section must be completed by any <u>entity</u>, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.
If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a <u>corporation</u>, the application shall be executed by an authorized officer of the Corporation. Information must be completed below 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>, whether manager managed or member managed, the following
 information must be completed for each *member with an ownership interest of 10% or more* and for each *manager*regardless of ownership share.
- If the applicant is a <u>partnership</u>, including a <u>limited partnership</u>, the following information must be completed for each <u>partner</u> with an interest of 10% or more, and for each <u>general partner</u>.
- For any entity, identify all affiliates for your organization as defined at 3 AAC 305.950.

Entity Official:	Monica Romero - (ivriel			
Title(s):	Member	Phone:		\\ P P	ned: 50
Address:	64310 Bridger	- Rd.			
City:	Homer	State:	AK	MAY 0 8 2945:	99603
Email:				Tierran des ess se	
	· · · · ·		4	AMCO	



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Anchorage, AK 99501 alcohol.licensing@alaska.gov

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:	Daniel U	Jall					
Title(s):	Member		Phone	:	% 0)wned:	50
		Bridger	- Rd				
City:	Homer	0	State:	AK	ZIP:	90	1603
Email:							
		7.					
Entity Official:					1		1
Title(s):			Phone	:	% C)wned:	
Address:							
City:			State:		ZIP:	:	
Email:			Phone	:			
Entity Official:			I		T		1
Title(s):			Phone	:	% C)wned:	
Address:					r		
City:			State:		ZIP:	:	
Email:			Phone	:			_
is subsection must be compl anding with the Alaska Divis	ion of Corporations (DOC). The regis	stered ago	LLC. Corporations ent is either an ind	ividual resident o	of the sta	te or
carporation authorize	10305636	AK Formed			Home State		4K
omestic corporation authoriz	10305636	T			Home State		
omestic corporation authoriz	10305636 Daniel 1	AK Formed	Date:	Agent's Phone:	Home State		
CBPL Entity #: Registered Agent: Agent's Mailing Address:	10305636	AK Formed	Date:	Agent's Phone:	Home State	: <i>f</i>	
CBPL Entity #: Registered Agent: Agent's Mailing Address:	10305636 Daniel 1	Nall Bridge	Date:	Agent's Phone:	Home State	: <i>f</i>	
CBPL Entity #: Registered Agent: Agent's Mailing Address: City: Homer	10305636 Daniel 1	Nall Bridge	Date:	Agent's Phone:	Home State)3	łĸ



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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?		Ø
If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Ala license number(s) and license type(s):	ska, whic	:h
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?		\boxtimes
If "Yes", disclose the name of the individual and the reason for this authorization:		



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Dept. of Commerce



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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.

Signature of transferor Maky K Vog L Printed name of transferor	Subscribed and sworn to Subscribed and sworn to Subscribed and sworn to	before me this day of Way 20 25. Signature of Notary Public Notary Public in and for the State of My commission expires: 5-6-20
Signature of transferor EVAN J V () (~) Printed name of transferor	Subscribed and sworn to Subscribed and sworn to	before me this day of

MAY 0 8 2025





AMCO accepted signed by Daniel Wall/Initialled by Marie Romero-Crubinel 907.269.0350

Alaska Alcoholic Beverage Control Board .krs

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.	MRC
I certify that all proposed licensees have been listed with the Division of Corporations.	MPC
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.	ME
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	Mec
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.	MPC
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 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.	MBC
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.	Wer
Signature of transferee Panie 5. hall Notary Public in and for the State of	(a4/28
ANGEL BONILLA Notary Public State of Alaska My Commission Expires Aug 14, 2028 Subscribed and sworn to before me thisday of	_, 20

MAY 0 8 2025



USED as Restaurant Questionnaire, amco krs

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AB-03 Form retired as RDP no longer in use.

Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Why is this form needed?

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 Enter information for licensed establishment. Licensee: Enter prises License Number: License Type: 6040 Restaurant or Eating **Doing Business As:** Casa de #4 **Premises Address:** Homer ZIP: State: 99603 City: 4-K Homer **Contact Phone:** onica Romero-Curie Contact Name: 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 the trapply): Dining after standard closing hours: AS 04.16.010(c) 1. MAY 0 8 2025 Dining by persons 16 - 20 years of age: AS 04.16.049(a)(2)Dept. of Commerce Dining by persons under the age of 16 years, accompanied by a person over the age of 21: 45 64:16.049(a)(3) 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:



Alaska Alcoholic Beverage Control Board

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Phone: 907.269.0350

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 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 only be allowed in designated dining areas. Hiring policies are that all dining staff shall be TAP trained and legal serving age. Minors shall only be employed in the kitchen areas and shall not be allowed access to dining areas.
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.
All dining areas and all access points are always in full view of all staff. All outside dining access points have chain barriers at 36 " height with directional signage for guest entry through main doors and " No Alcohol Beyond this Point ". Non-entry points have existing rail barriers.
House policies include mandatory TAP training for all dining area staff.
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
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:
I have attached a copy of the current food service permit for this premises OR the plan review approvant. of Commercal Commerc
*Please note, if a plan review approval is submitted, a final permit will be required before finalization of any permit or license

[Form AB-03] (rev 4/16/2019

application.

Page 2 of 5



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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 Ac	cess
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 consection 2. (Example: Minors will only be allowed in the dining area. OR Minors	urse of either dining or employment as designated in will only be employed and present in the Kitchen.)
	5
Describe the policies, practices and procedures that will be in place to ensure dining or employed at your premises.	that minors do not gain access to alcohol while
	MAY 0 8 2025
	Dept. of Commerce
*	AMCO
	Yes No
Is an owner, manager, or assistant manager who is 21 years of age or older alduring business hours?	
Section A DEC Food Sons	ice 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.



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

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Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

	Section 5 -	Hours of Operat	ion	
Review AS 04.16.010(c):			Marian Marian a	
Inter all hours that your establishment			end/weekday hours, and i	ndicate am/pm:
7 days a week	8am –	10 pm		
	Section 6 – E	Entertainment &	Service	9.7
Review AS 04.11.100(g)(2)				(A)
Are any forms of entertainment offere within the proposed licensed premises If "Yes", describe the entertainment of the entertainment o	s?			Yes No
ood and beverage service offered or a	nticipated is:			
table service bu	uffet service	counter service	other	
f "other", describe the manner of food	l and beverage servi	ce offered or anticipated:		
				HID)



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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.		MRC				
I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons. This menu includes entrées 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 n (AB-03 applications that accompany a new o not be required to submit an additional copy		ermitted.	MEC			
complete application, and I know the full content to and evidence or other documents submitted are to misrepresentation of any item or response in this a application, is sufficient grounds for denying or rev misdemeanor under Alaska Statute 11.56.210 to fa	and subscribing to this application and that I have refereof. I declare that all of the information contained and correct. I understand that any falsification of application, or any attachment, or documents to supplication alicense/permit. I further understand that it is alsify an application and commit the crime of unswood	ed herein, r sport this s a Class A	Mec			
falsification.		RECE				
Monica Romero-Curiel Printed name of licensee	Signature of licensee	MAY 0 Dept. of Co	ommerce			
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					

MENU

Breakfast: Huevos rancheros, Chilaquiles, breakfast

burritos.

Tacos: Al Pastor, Birria, Carnitas and Asada.

Soups and Stews: Pozole, Caldo, and chili.

Milanesa: Beef and Chicken

Tortas de Papas (potato cakes smothered in red or green

sauce).

Enchiladas (red, green, mole, and Suizas).

Chicken and Beef Fajitas.

Burritos: Carnitas, Steak and Tinga.

Chips and a variety of salsas.

Fresh Drinks: Horchata, Pina Colada (non-alcoholic), beer

and wine).

Deserts will include: Polvorones (Mexican wedding cookies), Buñuelos, flan, tres leches cakes.

We are thinking about including a small section of non-Mexican fare. It would include jambalaya, beef and vegetables in cowboy butter, pasta, and artisan bread.





Moni Romero-Curiel <

Approval To Operate - Casa de Monana

1 message

Mon, May 5, 2025 at 10:41 AM

Good Morning,

Thank you for meeting with me this morning for a virtual walk through of your new operation. Your application has been approved. You will be receiving a copy of your permit in the mail, please consider this email your approval to operate until you receive your permit.

I am attaching a number of handouts that we spoke about during the walk-through. Please do not hesitate to ask if you have any questions.

Thank you and have a great summer!



Heidi Isernhagen

Environmental Health Officer 3

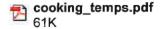
ADEC Food Safety and Sanitation

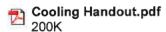
43335 Kalifornsky Beach Rd, Ste. 11, Soldotna AK 99669

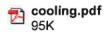
Phone: (907) 262-3416 | Cell: (907) 741-1007

Email: heidi.isernhagen@alaska.gov

9 attachments











MAY 0 8 2025

Dept. of Commerce AMCO 11/3/25, 2:12 PM Print Permit



Alaska Food Code 2025 Establishment Permit

Division of Environmental Health Food Safety & Sanitation Program

Permit Number:

17510

Issued to:

WALL ENTERPRISES LLC

For:

LA CASA DE MONANA

For Operation Of:

FF-6 Deli/Takeout/Drive-in Food Service

Located at:

4246 Homer Spit RD UNIT 4 Homer, AK 99603

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, 2025

Program Manager:

If you have questions or concerns regarding safe food handling practices call or text
907-764-9825 or visit our website to file a complaint
(dec.alaska.gov/eh/fss/report-illness-issue/)







Alconol and Iviarijuatia Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

alcohol.licensing@alaska.gov

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

Phone: 907.269.0350

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 alcohol license applications, per AS 04.11.260, 3 AAC 305.630 and 3 AAC 305.660. 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.

This form must be completed and submitted to AMCO's Anchorage office before any license application will be considered complete. You may attach blueprints or other detailed drawings that meet the requirements of this form.

The diagram MUST include:

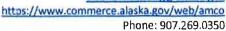
- You must use a solid, contiguous red line to outline the outer perimeter of your premises with no breaks or separations.
 - o The red outline is required to follow a physical barrier (wall, fence and even across doorways).
 - o There should be no red lines within the perimeter
- Each area should be clearly labeled in any color other than red where alcohol is:
 - Stored
 - Served/Sold
 - Manufactured
 - Consumed
- All diagrams must include:
 - Dimensions (AMCO does not accept diagrams drawn to scale)
 - Cross streets
 - o Points of reference, such as a compass rose indicating True North
 - All entrances, exits, walls, bars, and fixtures
- If your premises include multiple floors, please include a separate diagram of each floor.
 - o You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- If your premises includes multiple floors, please include a separate diagram of each floor. You must identify
 the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- 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.
- Any license applications that include outdoor space are required to submit a security plan that includes
 information about the barriers, practices, and personnel that are to be used to ensure that alcohol is not
 introduced or removed from the permitted premises and to prevent the access of alcohol by a minor during
 the permitted event. A security plan may be requested for other proposed locations on a case-by-case basis.

Section 1 - Establishment Information

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

Licensee:	Wall Enterprises LLC	License Number:	604	6040	
License Type:	Restaurant or Eating Place	ces			
Doing Business As:	La Casa de Monana				
Premises Address:	4246 HARRETERM #	‡ Y			
City:	Homer Homer	State: AK	ZIP:	99603	





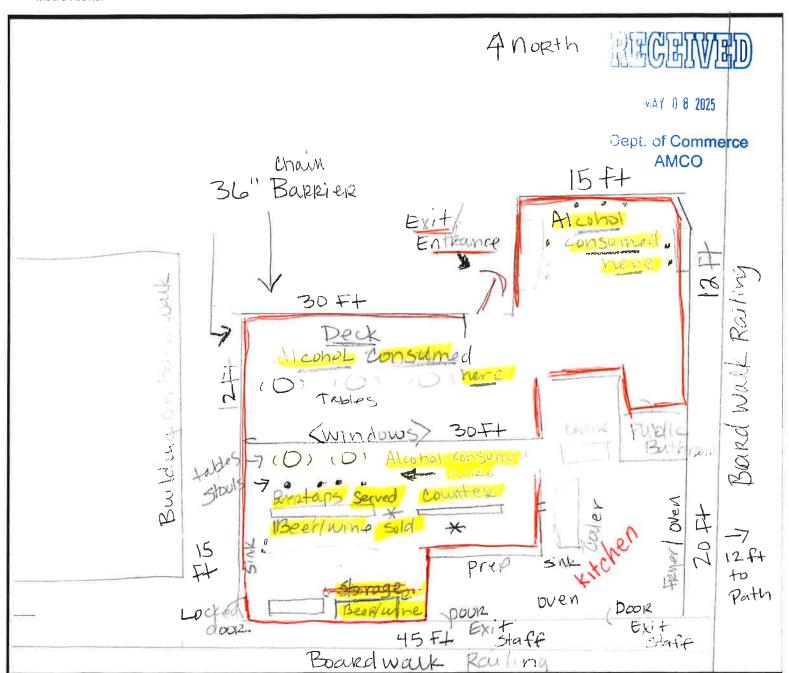


Alaska Alcoholic Beverage Control Board

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. See above for detailed instructions.



Outside Service Plan - La Casa de Monana

We have a small area just outside the restaurant where people can enjoy beer and wine. Our plan to ensure that minors do not gain access to alcohol is as follows.

- 1) The area will be cordoned off with a rope or chain.
- 2) We will include all requisite signage telling people they cannot take open containers outside the area and that minors may not consume alcohol within the area.
- 3) The wall leading to this area is comprised of a series of large windows, giving full view of that area to anyone working the cash register or the bar. Staff will frequently take food out to the area and clean tables when guests leave. At all times, staff will be on the lookout for inappropriate conduct in the outside service area. First and foremost, they will be checking to ensure that no minors consume alcohol.

Daniel S. Wall

Monica Romero-Curiel

Amy Woodruff

From: Ryan Browning

Sent: Tuesday, November 18, 2025 10:32 AM

To: Amy Woodruff

Cc: Lisa Linegar; Mark Robl

Subject: RE: 6040 LGB Notice of Transfer of Ownership

Follow Up Flag: Follow up Flag Status: Completed

Hi Amy,

No objections on this one.

Ryan

From: Department Police <police@ci.homer.ak.us> Sent: Monday, November 17, 2025 5:58 PM

To: Mark Robl

Subject: FW: 6040 LGB Notice of Transfer of Ownership

FYI.

Wina

From: Amy Woodruff

Sent: Monday, November 17, 2025 2:51 PM
To: Department Police colice@ci.homer.ak.us>

Subject: FW: 6040 LGB Notice of Transfer of Ownership

Hello, one more license for HPD review—hoping to have a response by tomorrow afternoon if possible.

Sorry for the short notice!

Amy

Amy Woodruff City Clerk

City of Homer, Alaska

907.235.8121 x2226

From: Serezhenkov, Kristina R (CED)

Subject: 6040 LGB Notice of Transfer of Ownership

CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or clicking links, especially from unknown senders.

Good morning,

Attached is correspondence regarding a complete liquor license application within your jurisdiction. This is a transfer of ownership for license 5115 dba AK Burger Zone Tikhatnu.

We have scheduled this application for board consideration at the 12/2/2025 meeting.

If you have any questions or concerns, please direct them to amco.localgovernmentonly@alaska.gov.

Thank you,



Kristina Serezhenkov Local Government Specialist Alcohol and Marijuana Control Office <u>kristina.serezhenkov@alaska.gov</u> <u>amco.localgovernmentonly@alaska.gov</u> Tel: 907-269-0359



Planning

491 East Pioneer Avenue Homer, Alaska 99603

Planning@ci.homer.ak.us (p) 907-235-3106 (f) 907-235-3118

MEMORANDUM

TO: MAYOR LORD AND HOMER CITY COUNCIL THROUGH: MELISSA JACOBSEN, CITY MANAGER FROM: RYAN FOSTER, ASSOCIATE PLANNER

DATE: NOVEMBER 24, 2025

SUBJECT: KACHEMAK CANNABIS, LLC RETAIL MARIJUANA STORE

LICENSE COMBINED RENEWAL

I have received and reviewed the license combined renewal application for Kachemak Cannabis, Retail Marijuana Store, License number 33236, located at 3585 East End Road, Suite 3, Homer, AK.

I have no objection to the application for renewal on zoning related issues.



Office of the Borough Clerk

144 North Binkley Street, Soldotna, AK 99669 | (P) 907-714-2160 | (F) 907-714-2388 | www.kpb.us

Monday, November 17, 2025

Sent via email: clerk@ci.homer.ak.us

Amy Woodruff, City Clerk City of Homer

RE: Non-Objection of Application

Licensee/Applicant : Wall Enterprises LLC
Business Name : La Casa de Monana

License Type : Restaurant/Eating Places

License Location : 4246 Homer Spit Road #4, City of Homer

License No. : 6040

Application Type : Transfer of Name

Transfer of Owner

Dear Ms. Woodruff,

This serves to advise that the Kenai Peninsula Borough has reviewed the above referenced application and has no objection.

Should you have any questions, or need additional information, please do not hesitate to let us know.

Sincerely,

Michele Turner, CMC

Borough Clerk

cc: monav4@gmail.com;

mailto:amco.localgovernmentonly@alaska.gov