

# 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

#### **MEMORANDUM**

TO: Chair and Members of the Board DATE: December 23, 2020

FROM: Jacqlene Drulis, Occupational RE: Herbal Instincts #10156

**Licensing Examiner** 

This is a renewal application for a Standard Marijuana Cultivation Facility in the Fairbanks North Star Borough by Timeless Adventures, LLC DBA Herbal Instincts.

Local Government Protest: No

LG Protest Period Ends: N/A

Objection(s) Received/Date: No

Notice of Violation(s):

MJ-17a Temp Ownership Change Report: No

MJ-20a Residency Exemption Affidavit: Yes – for Jessica Huff

Staff comments for Board: Attached is the renewal packet from the October

meeting.



# 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

#### **MEMORANDUM**

TO: Chair and Members of the Board DATE: October 6, 2020

FROM: Glen Klinkhart, Interim Director RE: Herbal Instincts #10156

Marijuana Control Board

This is a renewal application for a Standard Marijuana Cultivation Facility in the Fairbanks North Star Borough, by Timeless Adventures, LLC DBA Herbal Instincts.

Local Government Protest: No

LG Protest Period Ends: 10/29/2020

Objection(s) Received/Date: No

Notice of Violation(s):

MJ-17a Temp Ownership Change Report: No

MJ-20a Residency Exemption Affidavit: Yes – for Jessica Huff

Staff questions for Board: None

## Alcohol & Marijuana Control Office

License Number: 10156

License Status: Active-Operating

License Type: Standard Marijuana Cultivation Facility

Doing Business As: HERBAL INSTINCTS

**Business License Number: 1044959** 

Designated Licensee: Cristopher Konopka

Email Address: herbalinstinctsak@gmail.com
Local Government: Fairbanks North Star Borough

Local Government 2: Community Council:

Latitude, Longitude: 64.877466, -147.080840

Physical Address: 405 Ream Lane

Fairbanks, AK 99712 UNITED STATES

#### Licensee #1

Type: Entity

Alaska Entity Number: 10030989

Alaska Entity Name: Timeless Adventures, LLC

Phone Number: 907-202-4500

Email Address: herbalinstinctsak@gmail.com

Mailing Address: 405 Ream Lane

Fairbanks, AK 99712 UNITED STATES

#### **Entity Official #1**

Type: Individual

Name: Cristopher Konopka

Phone Number: 907-202-4500

Email Address: Cristopher Konopka@yahoo.co

m

Mailing Address: 405 Ream Lane

Fairbanks, AK 99712 UNITED STATES

#### **Entity Official #2**

Type: Individual

Name: Jessica Huff

Phone Number: 907-202-2545

Email Address: Jessicahuff7@gmail.com

Mailing Address: 1250 E. Burnside Street

#309

Portland, OR 97214 UNITED STATES

#### **Entity Official #3**

Type: Entity

Alaska Entity Number: 10036773

Alaska Entity Name: Tanana Herb Company, LLC

Phone Number: 907-388-8023

Email Address: tananaherbcompany@gmail.com

Mailing Address: P.O. Box 81772

Fairbanks, AK 99708 UNITED STATES

#### **Entity Official #4**

Type: Individual

Name: Leslea Nunley



Phone Number: 907-388-8023

Email Address: tananaherbcompany@gmail.com

Mailing Address: 2008 Perkins Drive

Fairbanks, AK 99709 UNITED STATES

#### **Entity Official #5**

Type: Individual

Name: Joseph Hachey

Phone Number: 208-964-2019

Email Address: joe@tananaherbcompany.com

Mailing Address: 2008 Perkins Drive

Fairbanks, AK 99709 UNITED STATES

### Entity Official #6

. .

Note: No affiliates entered for this license.

Type: Individual

Name: Samuel Hachey

**Phone Number: 907-888-9696** 

Email Address: sam@tananaherbcompany.com

Mailing Address: 2008 Perkins Drive

Fairbanks, AK 99709 UNITED STATES



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>marijuana.licensing@alaska.gov</u>

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

Phone: 907.269.0350

#### Alaska Marijuana Control Board

## Form MJ-20a: Residency Exception Affidavit

#### What is this form?

This residency exception affidavit may be submitted with a marijuana establishment renewal application for each licensee whose residency status has changed so that the licensee is no longer considered a resident of the state as defined at 3 AAC 306.015(e)(2).

	Section 1 - Establishmen	t Informat	ion		
Enter information for t	he licensed establishment, as identified on the license	application.			
Licensee:	Timeless Adventures, LLC	License	Number:	10/5	6
License Type:	Standard Marijuana Cult	ivation Fac	cility		
Doing Business As					
Premises Address:					
City:	Fairbanks	State:	AK	ZIP:	99712
	Section 2 – Individual I	nformation	l .		
Enter information for t	he individual licensee who is completing this form.				
Name:	Jeasica HUFF				
Title:	OWNER				
	Section 3 – Changes to	Residency	<b>.</b>		
Read each line below,	and then sign your initials in the box to the right of <u>al</u>	I statements:			Initials
certify that <b>my prima</b>	ry residence is in Alaska.				H
certify that I have goo at 3 AAC 306.015(e)(2).	od cause, as stated below, for not meeting the require	ments to be a re	sident of th	<b>e state</b> as (	defined
I initially left to return in Sp impact it had a order to allow m operate two bus	the state of Alaska in November 2019 ring 2020, however, due to COVID on Small businesses I took a position by Alaska businesses to continue. During masses & properties in Alaska.	for Person 19 and the at a hospit 1 this time	extent extent alduring There	ons with of the the po	n the intent economic indemic in

I certify that the cause of not meeting the requirements to be a resident of the state as defined at 3 AAC 306.015.(e)(2)

I anticipate being able to meet the requirements to be a resident of the state as defined at 3 AAC 306.015(e)(2) at the following time:

[Form MJ-20a] (rev 2/20/19)

is temporary.

2021



### Form MJ-20a: Residency Exception Affidavit

#### **Section 4 - Certifications**

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

Initials

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



As a marijuana establishment licensee, I declare under penalty of unsworn falsification that this form is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this form and understand that failure to do so by any deadline given to me by AMCO staff may result in action upon the license by the Board.

gnature of licensee

Notary Public in and for the State of Alaska Ovegon

Jessica Huff

My commission expires:  $4/2\sqrt{23}$ 

Subscribed and sworn to before me this 215tday of September, 2020.

OFFICIAL STAMP

AARON CAUDILL

NOTARY PUBLIC-OREGON

COMMISSION NO. 986622

MY COMMISSION EXPIRES APRIL 21, 2023



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

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

Phone: 907.269.0350

## Form MJ-20: Renewal Application Certifications

#### What is this form?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

### Section 1 - Establishment Information

Licensee:	Timeless Adventures, LLC License Number: 4a-10		License Number:		10156	
License Type:	Standard Cultivation			<u> </u>	20 20 10 10 10 10 10 10 10 10 10 10 10 10 10	
Doing Business As:	Herbal Instincts					
Premises Address:	405 Ream Ln			V = 104 ( = 1 ) = 10 ( = 1 )		
City:	Fairbanks	State:	Alaska	ZIP:	99712	

#### Section 2 - Individual Information

Enter information for the individual licensee who is completing this form.

Name: Cristopher Konopka

Title: Owner

Section 3 – Violations & Charges	j I
Read each line below, and then sign your initials in the box to the right of any applicable statements:	Initials
certify that I have <b>not</b> been convicted of any criminal charge in the previous two calendar years.	æ
I certify that I have <b>not</b> committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	æ
I certify that a notice of violation has <b>not</b> been issued to this license between July 1, 2019 and June 30, 2020.	(Q)
Sign your initials to the following statement only if you are unable to certify one or more of the above statements:	Initials
I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).	



## Form MJ-20: Renewal Application Certifications

### **Section 4 - Certifications**

Read each line below, and then sign your initials in the box to the right of each statement:	Initials
I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued.	æ
certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.	æ
I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.	$\omega$
certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.	C.
certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.	00
l certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.	Q
I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.	R
As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have reafamiliar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and uthat failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.  Signature of licensee  **Offical Sear*** Notary Public in and for the State of Ala Notary Public in and for the S	, correct, nderstand



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

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

Phone: 907.269.0350

## Form MJ-20: Renewal Application Certifications

#### What is this form?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

#### **Section 1 – Establishment Information**

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Timeless Adventures, LLC	License	Number:	4a-10	156
License Type:	Standard Cultivation				
Doing Business As:	Herbal Instincts				
Premises Address:	405 Ream Ln				
City:	Fairbanks	State:	Alaska	ZIP:	99712

#### Section 2 - Individual Information

Enter information for the individual licensee who is completing this form.

Name: Jessica Huff

Title: Owner

Section 3 – Violations & Charges	
Read each line below, and then sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have <b>not</b> been convicted of any criminal charge in the previous two calendar years.	K
I certify that I have <b>not</b> committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	H
I certify that a notice of violation has <b>not</b> been issued to this license between July 1, 2019 and June 30, 2020.	H
Sign your initials to the following statement only if you are unable to certify one or more of the above statements:	Initials
I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).	

[Form MJ-20] (rev 4/23/2020) Page 1 of 2



## Form MJ-20: Renewal Application Certifications

#### **Section 4 - Certifications**

Read each line below, and then sign your initials in the box to the right of each sta	tement:	Initials
I certify that no person other than a licensee listed on my marijuana establishment direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the busines establishment license has been issued.		H
I certify that I meet the residency requirement under AS 43.23 or I have submitted (MJ-20a) along with this application.	a residency exception affidavit	H
I certify that this establishment complies with any applicable health, fire, safety, or other law in the state.	tax statute, ordinance, regulation, or	H
I certify that the license is operated in accordance with the operating plan currently Marijuana Control Board.	y approved by the	74
I certify that I am operating in compliance with the Alaska Department of Labor and requirements pertaining to employees.	Workforce Development's laws and	H
I certify that I have not violated any restrictions pertaining to this particular license operated in violation of a condition or restriction imposed by the Marijuana Control		H
I certify that I understand that providing a false statement on this form, the online a by or to AMCO is grounds for rejection or denial of this application or revocation of		4
As an applicant for a marijuana establishment license renewal, I declare under pena familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompand complete. I agree to provide all information required by the Marijuana Control that failure to do so by any deadline given to me by AMCO staff may result in additional states of licensee.	panying schedules and statements, is true, Board in support of this application and ur	correct, nderstand
Printed name of licensee	My commission expires: 07114	12023
Subscribed and sworn to before me this day of	_, 20 <u>20</u> .	
,	OFFICIAL STAMP  KAREN N AMIN  NOTARY PUBLIC - OREGON  COMMISSION NO. 989302  MY COMMISSION EXPIRES JULY 14, 202	3



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

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

Phone: 907.269.0350

## Form MJ-20: Renewal Application Certifications

#### What is this form?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

nter information for the	licensed establishment, as identified on the license	application.	·		·
Licensee:	Timeless Adventures, LLC	l l	Number:	4a-10	)156
License Type:	Standard Cultivation				
Doing Business As:	Herbal Instincts				
Premises Address:	405 Ream Ln				
City:	Fairbanks	State:	Alaska	ZIP:	99712
	Section 2 – Individual	Information	<b>)</b>		
<u> </u>	individual licensee who is completing this form.			4.111	
Name:	Joseph Hachey	<del></del>			· · · · · · · · · · · · · · · · · · ·
Title:	Owner				
Read each line below, an	Section 3 – Violations d then sign your initials in the box to the right of	any applicable sta	tements:		Initi
certify that I have not be	een convicted of any criminal charge in the previou	is two calendar ye	ars.		M.
,	een convicted of any criminal charge in the previou			calendar	years.
certify that I have not co		3 AAC 306 in the p	revious two		years.
certify that I have not co	ommitted any civil violation of AS 04, AS 17.38, or 3	3 AAC 306 in the p  n Jul <b>y 1,</b> 2019 and	revious two June 30, 20	D20.	
certify that I have not co certify that a notice of vi Sign your initials to the fo	ommitted any civil violation of AS 04, AS 17.38, or 3 iolation has <b>not</b> been issued to this license betwee	3 AAC 306 in the p in July 1, 2019 and fy one or more of	revious two June 30, 20	020. <u>statemen</u>	ts: Ini

## Form MJ-20: Renewal Application Certifications

### Section 4 - Certifications

Read each line below, and then sign your initials in the box to the right of each stat	tement:	Initials
I certify that no person other than a licensee listed on my marijuana establishment li direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business establishment license has been issued.		H
l certify that I meet the residency requirement under AS 43.23 or I have submitted a (MJ-20a) along with this application.	a residency exception affidavit	7
I certify that this establishment complies with any applicable health, fire, safety, or other law in the state.	tax statute, ordinance, regulation, or	77
l certify that the license is operated in accordance with the operating plan currently Marijuana Control Board.	approved by the	J.
I certify that I am operating in compliance with the Alaska Department of Labor and requirements pertaining to employees.	Workforce Development's laws and	H
I certify that I have not violated any restrictions pertaining to this particular license to operated in violation of a condition or restriction imposed by the Marijuana Control		
l certify that I understand that providing a false statement on this form, the online at by or to AMCO is grounds for rejection or denial of this application or revocation of a		
As an applicant for a marijuana establishment license renewal, I declare under penal familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompand complete. I agree to provide all information required by the Marijuana Control E that failure to do so by any deadline given to me by AMCO staff may result in additional additional accompany. The provided has been deadline and the provided has been deadline given to me by AMCO staff may result in additional accompany. The provided has been deadline given to me by AMCO staff may result in additional accompany. The provided has been deadline given to me by AMCO staff may result in additional accompany.	My commission expires: May 1	ue, correct, understan
Subscribed and sworn to before me this 23 day of 5 unc	_ 20 <u>20</u> .	Manuelland American



Enter information for the licensed establishment, as identified on the license application.

Standard Cultivation

Herbal Instincts

405 Ream Ln

Fairbanks

Timeless Adventures, LLC

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>marijuana.licensing@alaska.gov</u> https://www.commerce.alaska.gov/web/amco

4a-10156

ZIP:

99712

Phone: 907.269.0350

## Form MJ-20: Renewal Application Certifications

#### What is this form?

Licensee:

City:

License Type:

**Doing Business As:** 

Premises Address:

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

### Section 1 - Establishment Information

License Number:

Alaska

State:

	Section 2 – Individual Information	
Enter information	for the individual licensee who is completing this form.	
Name:	Leslea Nunley	
Title:	Owner	<u> </u>
	Section 3 – Violations & Charges	
Read each line bel	ow, and then sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have	not been convicted of any criminal charge in the previous two calendar years.	las
I certify that I have	not committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	
l certify that a notic	ce of violation has not been issued to this license between July 1, 2019 and June 30, 2020.	lu
Sign your initials to	the following statement only if you are unable to certify one or more of the above statements:	Initials
I have attached a w	vritten explanation for why I cannot certify one or more of the above statements, which includes n or offense, as required under 3 AAC 306.035(b).	



# Form MJ-20: Renewal Application Certifications

### **Section 4 – Certifications**

Read each line below, and then sign your initials in the box to the right of ea	ach statement:	Initials
I certify that no person other than a licensee listed on my marijuana establish direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the b establishment license has been issued.	ment license renewal application ha	s a
I certify that I meet the residency requirement under AS 43.23 or I have subr (MJ-20a) along with this application.	mitted a residency exception affidat	rit A
I certify that this establishment complies with any applicable health, fire, saf other law in the state.	fety, or tax statute, ordinance, regul	ation, or
I certify that the license is operated in accordance with the operating plan control Board.	urrently approved by the	Le 1
I certify that I am operating in compliance with the Alaska Department of Lab requirements pertaining to employees.	oor and Workforce Development's la	iws and
I certify that I have not violated any restrictions pertaining to this particular l'operated in violation of a condition or restriction imposed by the Marijuana	icense type, and that this license ha Control Board.	s not been
I certify that I understand that providing a false statement on this form, the object to AMCO is grounds for rejection or denial of this application or revocation.	online application, or any other forn ition of any license issued.	n provided
As an applicant for a marijuana establishment license renewal, I declare und familiar with AS 17.38 and 3 AAC 306, and that this application, including all and complete. I agree to provide all information required by the Marijuana C that failure to do so by any deadline given to me by AMCO staff may result i	accompanying schedules and states Control Board in support of this app	fication and understan
Signature of licensee	Notary Public in and for th	ne State of Alaska
Printed name of licensee	My commission expires: _	May 1,2023
Subscribed and sworn to before me this 23 day of June		TARY
		ALAST MINING



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 marijuana.licensing@alaska.gov

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

Phone: 907.269.0350

### Form MJ-20: Renewal Application Certifications

#### What is this form?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

#### Section 1 - Establishment Information

Enter information for the licensed establishment, as identified on the license application. Licensee: License Number: Timeless Adventures, LLC 4a-10156 License Type: Standard Cultivation **Doing Business As:** Herbal Instincts **Premises Address:** 405 Ream Ln City: Fairbanks State: Alaska ZIP: 99712

#### Section 2 - Individual Information

Samuel Hachey	
Owner	

Name:	Samuel Hachey	-
Title:	Owner	
w		
	Section 3 – Violations & Charges	
Read each line be	low, and then sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have	e not been convicted of any criminal charge in the previous two calendar years.	2
I certify that I have not committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.		3
I certify that a not	ice of violation has not been issued to this license between July 1, 2019 and June 30, 2020.	9
Sign your initials to the following statement only if you are unable to certify one or more of the above statements:		Initials

I have attached a written explanation for why I cannot certify one or more of the above statements, which includes

[Form MJ-20] (rev 4/23/2020)

the type of violation or offense, as required under 3 AAC 306.035(b).

## **Section 4 - Certifications**

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

Initials

I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued.



I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.



I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.



I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.



I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.



I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.



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



As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have read and am familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, correct, and complete, agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.

Signature of licensee

Notary Public in and for the State of Alaska

Printed name of licensee

My commission expires: May

Subscribed and sworn to before me this 23 day of 50re

