



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

MEMORANDUM

- TO: Chair and Members of the Board
- FROM: Jacqlene Drulis, Occupational Licensing Examiner
- RE: Dejavu Cannabis Company #19658

DATE: December 23, 2020

This is a renewal application for a Retail Marijuana Store in the Kodiak Island Borough by Andrew G Sablon DBA Dejavu Cannabis Company.

Local Government Protest:	Yes – 10/8/2020
LG Protest Period Ends:	N/A
Objection(s) Received/Date:	No
Notice of Violation(s):	No
MJ-17a Temp Ownership Change Report:	No
Staff comments for Board:	None



Kodiak Island Borough OFFICE of the CLERK

710 Mill Bay Road Kodiak, Alaska 99615 Phone (907) 486-9310 Fax (907) 486-9391 E-mail: clerks@kodiakak.us

October 8, 2020

Alcohol & Marijuana Control Office 550 West 7th Avenue, Suite 1600 Anchorage, AK 99501

RE: License Number: 1088016 - Andrew G Sablon, dba: DejaVu Cannabis Company

A review of the files relating to the subject license above has been completed. Based on the review, the Kodiak Island Borough hereby recommends the following action:



NON-OBJECTION/WAVING THE RIGHT TO PROTEST

PROTEST the issuance of the license for the following reason(s):

- 1. Delinquent Real Property Taxes Owed Delinquent balance for 2019 property trates
- 2. Other Taxes Owed

3. There is an Assembly Protest of renewal on file

4. Other reasons noted below:

Upon curing the above referenced deficiencies, the Kodiak Island Borough Assembly will rescind the any protest recommended above. The applicant has been sent a copy of this letter by certified mail. Should you have any questions, please contact the Clerk's Office.

It is the applicant's responsibility to notify the Clerk's Office that any taxes owed have been paid in full. It is also the applicant's responsibility to provide the Clerk's Office with documentation that all conditions addressing the deficiencies have all been met.

Sincerely Alise L Rice, Borough Clerk Kodiak Island Borough

AMCO

OCT 1 3 2020

Alcohol & Marijuana Control Office

License Number: 19658 License Status: Active-Operating License Type: Retail Marijuana Store Doing Business As: DEJAVU CANNABIS COMPANY Business License Number: 1088016 Designated Licensee: ANDREW G SABLON Email Address: drewsablon@hotmail.com Local Government 2: Community Council: Latitude, Longitude: 57.696964, -152.582282 Physical Address: 11676 west rezanof drive Kodiak, AK 99615 UNITED STATES

Licensee #1

Type: Individual Name: ANDREW G SABLON



Phone Number: 252-202-7469
Email Address: drewsablon@hotmail.com
Mailing Address: 1528 Ismailov St Kodiak, AK 99615 UNITED STATES Note: No entity officials entered for this license.

Note: No affiliates entered for this license.



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

Alaska Marijuana Control Board 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 <u>by each licensee</u> (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:	Andrew	Sablen	License	Number:	196.	58
License Type:	Retail					
Doing Business As:	Dejavu	Cannabis	Compan	9		
Premises Address:	11676 West	Rezanolf		5		
City:	Kodiak		State:	Alaska	ZIP:	99615

Section 2 - Individual Information

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

Name:	Andrev Sablon
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 not been convicted of any criminal charge in the previous two calendar years.	A
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.	1ft
I certify that a notice of violation has not been issued to this license between July 1, 2019 and June 30, 2020.	ef-
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



Section 4 - Certifications

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

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. I 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

Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 11-21-23

Subscribed and sworn to before me this Hay of June







Initials











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License #

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