



MEMORANDUM

TO: Robert Klein, Chair, and
Members of the ABC Board

DATE: April 6, 2017

FROM: Erika McConnell
Director, ABC Board

RE: Knik Kountry Liquor
#4837

The Matanuska-Susitna Borough is protesting the renewal of this license in accordance with AS 04.11.480(a), for delinquent real property taxes owed. The 2015-2016 renewal was issued on October 30, 2014.

Date Notification sent to MSB:

December 15, 2016

Date Protest received:

February 5, 2017

Basis for Protest:

Delinquent real property taxes owed.

3 AAC 304.145(d) met?

According to the Mat-Su Borough, the licensee has been unresponsive to multiple communication attempts to allow for a reasonable defense of protest before the governing body.

Recommendation:

Delegation to await a lift protest letter from the Matanuska-Susitna Borough.



MATANUSKA-SUSITNA BOROUGH

Planning and Land Use Department

Development Services Division

350 E. Dahlia Avenue, Palmer, AK 99645

Phone (907) 861-7822 | Fax (907) 861-8158

E-mail: permitcenter@matsugov.us

February 5, 2017

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

SUBJECT: Knik Kountry Liquor, Inc.
Package Store; License #4837

A review of the files relating to the subject business and license application has been completed. Based on that review, the Planning Department hereby recommends the following action:

WAIVE THE RIGHT TO PROTEST

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

Delinquent Real Property Taxes owed: Property taxes past due as of January 15, 2017.

Bed Tax owed:

Other debts owed:

The required Conditional Use Permit has not been obtained.

There is a violation of the Conditional Use Permit:

There is an Assembly protest of renewal on file:

Upon curing all of the above referenced deficiencies the Matanuska-Susitna Borough will rescind any protest. It is the applicant's responsibility to notify the Development Services Division that any debts or taxes owed have been paid in full.

The applicant(s) has been sent a copy of this letter by certified mail or via email, only if a protest has been issued. Should you have any questions, please feel free to contact my office.

Sincerely,

Mark Whisenhunt, Planner II
Development Services Division
Matanuska-Susitna Borough

Cc: Duane Hart via email at knikliq@mtaonline.net



**Alaska Alcoholic Beverage Control Board
Renewal License Application
Form AB-17b: Package Store**

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

What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing package store license that will expire on December 31, 2016. All fields of this form must be complete and correct, or the application will be returned to you in the manner in which it was received, per AS 04.11.270 and 3 AAC 304.105. The Community Council field only needs to be verified/completed by licensees whose establishments are located within the Municipality of Anchorage or outside of city limits within the Matanuska-Susitna Borough.

This form must be completed correctly and submitted to the Alcohol & Marijuana Control Office (AMCO)'s main office, along with all other required documents and fees, before any renewal license application will be considered complete.

Section 1 – Establishment and Contact Information

Enter information for the business seeking to have its license renewed.

Licensee:	Knik Kountry Liquor, Inc.	License #:	4837
License Type:	Package Store	Statute:	AS 04.11.150
Doing Business As:	Knik Kountry Liquor		
Premises Address:	16512 E Anaconda Ave		
Local Governing Body:	Matanuska-Susitna Borough		
Community Council:	Talkeetna		

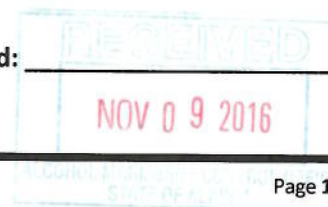
Mailing Address:	7362 W. Parks Hwy # 772			
City: Wasilla	Wasilla	State:	Alaska	ZIP: 99623

Enter information for the licensee who will be designated as the primary point of contact regarding this application and the license.

Designated Licensee:	Duane Hart		
Contact Phone:	907-355-0257	Business Phone:	907-373-2552
Contact Email:	KNIK LIQ @ MTA ONLINE.NET		

Seasonal License? Yes No

If "Yes", write your six-month operating period:





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Section 2 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 3.
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).

This individual is an: applicant affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:					
Contact Phone:					

This individual is an: applicant affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:					
Contact Phone:					

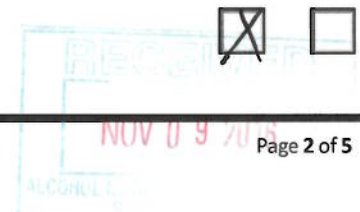
Section 3 – Entity Ownership Information

This subsection must be completed by any licensee that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC). Partnerships may skip to Page 3. Sole proprietors should skip to Section 4.

Alaska DOC Entity #:	50975 D
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Alaska Division of Corporations: Yes No

Is your entity in good standing with the Alaska Division of Corporations?





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LIC# 4837

This subsection must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

- If the applicant is a corporation, the following information must be completed 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 limited liability organization, the following information must be completed for each member with an ownership interest of 10% or more, and for each manager.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each partner with an interest of 10% or more, and for each general partner.

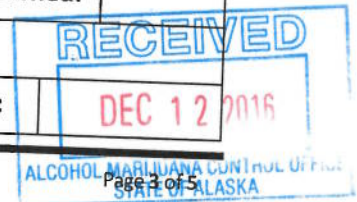
Entity Official:				
Title(s):	Duane Hart	Phone:	907-373-2552	% Owned: 95 %
Address: 7362 W. Parks Hwy #772				
City:	Wasilla	State:	AK	ZIP: 99623

Entity Official:				
Title(s):	Duane Hart	Phone:	907-373-2552	% Owned: 5 %
Address: 7362 W. Parks Hwy #772				
City:	Wasilla	State:	AK	ZIP: 99623

Entity Official:				
Title(s):		Phone:		% Owned:
Address:				
City:		State:		ZIP:

Entity Official:				
Title(s):		Phone:		% Owned:
Address:				
City:		State:		ZIP:

Entity Official:				
Title(s):		Phone:		% Owned:
Address:				
City:		State:		ZIP:





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Section 4 – 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? Yes No

If "Yes", disclose the name of the individual and the reason for this authorization:

Susan Hart Glansbeek V.P.

Section 5 – License Operation

Written Orders: Yes No

Did you sell alcoholic beverages in response to a written order in calendar years 2015 or 2016? Yes No

Check the box that best describes your liquor license operations in calendar years 2015 and 2016:

The license was regularly operated continuously throughout each year, for 8 or more hours each day.

The license was regularly operated during a specific season each year, for 8 or more hours each day.

The license was only operated to meet the minimum requirement of 30 days each year, 8 hours each day.
If this box is checked, an AMCO employee will contact you after reviewing your application.

The license was not operated at all or was not operated for at least the minimum requirement of 30 days each year, 8 hours each day, during one or both of the calendar years.
If this box is checked, an AMCO employee will contact you after reviewing your application.

Section 6 – Convictions

Applicant convictions in calendar years 2015 and 2016: Yes No

Has any person named in this application been convicted of a violation of Title 04, of 3 AAC 304, or a local ordinance adopted under AS 04.21.010 in the calendar years 2015 or 2016? Yes No

If "Yes", list all convictions:

NOV 09 2016



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Section 7 – Certifications

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

Initials

I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and if the licensee is an organized entity, that all current entity officials and stakeholders are listed with the Alaska Division of Corporations.

JA

I certify on behalf of myself or of the organized entity 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.

JA

I certify that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business.

JA

I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name or the ownership (including officers or stakeholders) from what is currently on file with the Alcoholic Beverage Control Board.

JA

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 Alcoholic Beverage Control Board.

JA

As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned to me as incomplete.

Duane Hart
Signature of licensee

Ruth R. Israel
Signature of Notary Public

Duane Hart
Printed name of licensee

Notary Public in and for the State of Alaska



My commission expires: 02-14-2017

Subscribed and sworn to before me this 4th day of November, 2016.

License Fee:	\$ 1500.00	Filing Fee:	\$ 200.00	TOTAL:	\$ 1700.00
Late Fee of \$500.00 – if received or postmarked after 01/03/2017:					
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					

