



MEMORANDUM

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

DATE: April 6, 2017

FROM: Erika McConnell
Director, ABC Board

RE: Best Western Lake Lucille
Inn and Lakeview Lounge
#3375

Renewal applications were due on January 1, 2017, in accordance with AS 04.11.270(b)(2). AS 04.11.540 states that if a complete application for renewal has not been filed by February 28 [2017], the license expires on midnight of February 28.

The AMCO office received a renewal application for this beverage dispensary tourism license on March 17, 2017. The licensee is seeking reinstatement and renewal.

Recommendation: Evaluate the request for reinstatement and renewal.

Aurora Lodging Management, Inc

d/b/a Best Western Lake Lucille Inn

Accounting office: 5525 Hero Dr. Austin, Tx 78735

Alaska Department of Commerce, Community and Economic
Development

Via Email: alcohol.licensing@alaska.gov

Attn: Mark Bailey – Occupational Licensing Examiner

I, Sham Idnani, President of Aurora Lodging Management, Inc. do
certify as follows:

1, In Nov. 2016, I took a serious fall and cracked one of my vertebrae.

This was over and above the two surgeries I have had on my low back
since 2011. I went thru an X-ray on Nov. 9th.

2. Obviously, I was in lot of pain. At first I was told to wear a back brace
for two weeks hoping to hold the vertebrae in place and heal naturally

3. When that did not help, I was told to try for two more weeks, which
did not help either.

4. After Dr's appointment on Nov 23rd, the fracture was determined to
be more severe than originally thought.

5. I was scheduled for an MRI on Nov.. 29th, follow by a surgery on
December 2nd.

6. On Dec 13th, I had the post-surgical follow-up and was schedule for
Physical therapy.

7. January and February went by with being in post surgical pain and physical therapy appoinments. I was in no position sit and focus on any work

8. Your letter of mid February was (correctly) sent to the Hotel but I was in Austin Tx. It took some time for it to be forwarded to Tx.

Considering my health situation I responded as soon as I could. I am very sorry for the delay.

I am still in pain, living with pain killers and spending most of my time in bed or an easy chair. I am very fortunate to have a very good GM taking care of the property.

PLEASE DO CONSIDER this letter to be my request for reinstatement and advise if you need any medical records. I am sending this without any medical records attached as it will take week or two to get the medical records from doctors, hospital and the physical therapist.

Sincerely,

Sham Idnani- President

Before me this _____ day of October, 2016



Alaska Alcoholic Beverage Control Board Renewal License Application Form AB-17d: Beverage Dispensary – Tourism

What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing beverage dispensary – tourism 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:	Aurora Lodging Management Inc (BWLLI)	License #:	3375
License Type:	Beverage Dispensary-Tourism AS 04.11.400(d)	Statute:	AS 04.11.400(d)
Doing Business As:	Best Western Lake Lucille Inn and Lakeview Lounge		
Premises Address:	1300 W Lake Lucille Dr		
Local Governing Body:	City of Wasilla (Matanuska-Susitna Borough)		
Community Council:	None		

Mailing Address:	1300 W. Lake Lucille Dr.				
City:	Wasilla	State:	AK	ZIP:	99654

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

Designated Licensee:	Sham Idnani		
Contact Phone:	907-982-2649 (cell)	Business Phone:	907-373-1776
Contact Email:	Shamdb.l@yahoo.com		

Seasonal License? Yes No If "Yes", write your six-month operating period: _____





Alaska Alcoholic Beverage Control Board
Renewal License Application
Form AB-17d: Beverage Dispensary – Tourism

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:				

N/A

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 #:	50608D
----------------------	--------

Alaska Division of Corporations: Yes No

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

Biennial Report attached



Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional
Licensing

State of Alaska > Commerce > Corporations, Business, & Professional Licensing > Biennial Report

EXIT APPLICATION

Biennial Report

To file a Biennial Report, enter your Alaska Entity Number and choose to either file online now or print a paper form. Repeat this process if you need to file more than one biennial report.

Entity #

If you do not know your Alaska Entity Number, search for your entity by name (dissolved or revoked entities will not be displayed).

Entity Name Starts With Contains

This entity may not file their next Biennial Report until 10/2/2017.

Type	Entity #	Name of Entity	Status		
Business Corporation	50608D	AURORA LODGING MANAGEMENT, INC.	Good Standing	<input type="button" value="File Online"/>	<input type="button" value="Print Form"/>

Juneau Mailing Address

P. O. Box 110806
Juneau, AK 99811-0806

Physical Address

333 Willoughby Avenue
9th Floor
Juneau, AK 99801-1770

Phone Numbers

Main Phone: (907) 465-2550
FAX: (907) 465-2974

Anchorage Mailing/Physical Address

550 West Seventh Avenue
Suite 1500
Anchorage, AK 99501-3567

Phone Numbers

Main Phone: (907) 269-8160
FAX: (907) 269-8156

State of Alaska © 2017





Alaska Alcoholic Beverage Control Board
Renewal License Application
Form AB-17d: Beverage Dispensary – Tourism

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:	Sham Idnani			
Title(s):	Pres.	Phone:	907-982-2649	% Owned: 1%
Address: *	1300 W. Lake Lucille Dr			
City: *	Wasilla	State:	AK	ZIP: 99654

Entity Official:	Saroj S. Idnani			
Title(s):	VP & Sec.	Phone:	907-982-2648	% Owned: 9%
Address: *	1300 W Lake Lucille Dr.			
City: *	Wasilla	State:	AK	ZIP: 99654

Entity Official:	Neelam Idnani Julian			
Title(s):	Shareholder	Phone:	512-899-1127	% Owned: 45%
Address:	5002 JEFFERY PL., Austin, TX 78746			
City:	Austin	State:	TX	ZIP: 78746

Entity Official:	RAJESH Idnani			
Title(s):	Shareholder	Phone:	512-394-3400	% Owned: 45%
Address:	2906 Greenlee Dr.			
City:	Austin	State:	TX	ZIP: 78703

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

* WINTER Address
 5525 Hero Dr. Austin, TX 78735

MAR 17 2017



Alaska Alcoholic Beverage Control Board
Renewal License Application
Form AB-17d: Beverage Dispensary – Tourism

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?

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

[Empty text box]

Section 5 – License Operation

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 ^{continuously} each year, 8 hours each day.

If this box is checked, an AMCO employee will contact you after reviewing your application. The license was also operated for weddings, Banquets and special occasions as requested.

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?

If "Yes", list all convictions:

[Empty text box]





Alaska Alcoholic Beverage Control Board
Renewal License Application
Form AB-17d: Beverage Dispensary – Tourism

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.

SDI

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.

SDI

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.

SDI

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.

SDI

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.

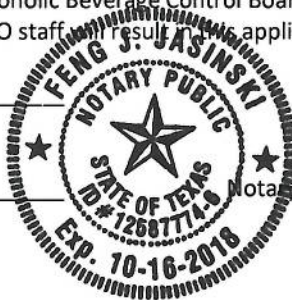
SDI

I have submitted a written statement as part of this application that meets the attached Tourism Statement Guidelines.

SDI

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, resulting in my application being returned to me as incomplete.

Sham Idnani
 Signature of licensee



[Signature]
 Signature of Notary Public

Sham Idnani
 Printed name of licensee

Notary Public in and for the State of TX



My commission expires: 10/16/18

Subscribed and sworn to before me this 15th day of March, 2017.

License Fee:	\$ 2500.00	Filing Fee:	\$ 200.00	TOTAL:	\$ 2700.00
Late Fee of \$500.00 – if received or postmarked after 01/03/2017:					500.00
Miscellaneous Fees:					—
GRAND TOTAL (if different than TOTAL):					3200.00



Alaska Alcoholic Beverage Control Board

Tourism Statement Guidelines

What is this document?

A new, transfer, or renewal application for a beverage dispensary – tourism or restaurant / eating place – tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325. This document provides guidelines regarding what must be covered in the separate written statement that you'll submit along with your license application.

A written statement must be submitted to AMCO's main office before any tourism license application will be considered complete.

Mandatory Points to be Included

Responses to each of the following points must be included in your written statement. Please provide a separate page and **do not** submit this document as your statement.

1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.
2. Explain how the facility was/will be constructed or improved in accordance with this application.
3. Who operates the facility for which a liquor license is being applied?
4. Do you offer room rentals to the traveling public?
 - a. If so, how many of these rooms are available? Do any of the rental rooms have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)? If yes, how many of the rental rooms have kitchen facilities that meet this definition? Do you stock alcoholic beverages in guest rooms?
 - b. If not, is your facility located within an airport terminal?
5. Does your establishment include a dining facility?
6. Are additional amenities available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists)?

Please see attached →

Also please see attached
"DESIGN EXCELLENCE PROPERTY IMPROVEMENT PLAN"
we have finished all the work targeted for 2016. We are
Licensee: Working on 2017 WORK now and will follow with
2018 Improvements.

Please provide a "tourism statement" with your renewal application. The questions below will assist in forming the statement. The ABC Board is requiring all tourism liquor licenses to fulfill the regulation below by providing the Board with a statement demonstrating how your establishment encourages tourism. Please attach the statement to the renewal application and submit the package to the ABC Board office. Thank you for your cooperation.

RENEWAL for Tourism Licenses AS 04.11.400(d)

13 AAC 104.325

(c) The licensee must show, upon application for renewal, that issuance of the license encouraged tourism, that the facility was constructed or improved in accordance with the application, and that the facility continues to be operated by the licensee. If the licensee does not make the showings required by this subsection, renewal will be denied.

Questions:

1. Explain how your establishment "encourages tourism"?
We are The premier Hotel in Wasilla & Part of World's Largest hotel chain
2. Do you offer room rentals? If so how many rooms are available?
YES, We have 54 ROOMS (FIFTY-FOUR ROOMS) and a large banquet facility.
3. Do you offer food service? Please attach a menu.
We offer Deluxe Complimentary Breakfast Buffet and Catering Service as needed.
4. Please explain any additional amenities available to your guests through your establishment. Example: Guided tours or trips, rental equipment for guests, other activities that attract tourists. Float plane tours are available May thru Sept. We help with Fishing and Hunting Service as needed.
5. Describe any construction or improvements made to the existing premises within the last two years?
All hotel rooms were completely renovated about 4 yrs ago.
All Banquet rooms and Restaurant Carpet was upgrade upgraded just last month.
New and addition equipment was added to our Fitness facility
We maintain the entire property in excellent shape and we have been winners of Director's award of Best Western several times.



We have contracts with Denali Lodges and Alaska Denali Tours to further facilitate our guests.



Shamldhrami - Pres
2/27/13
Shamldhrami - Pres
3/15/17