

Department of Commerce, Community, and Economic Development

ALCOHOL AND MARIJUANA CONTROL OFFICE

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

MEMORANDUM

TO: Bob Klein, Chair, and Members of the

Alcoholic Beverage Control Board

mbers of the DATE: April 3, 2018

FROM: Erika McConnell, Director RE: 4768 and 4769 St. Elias

Brewing Company

Requested

License renewal; refund of late fee assessed under AS 04.11.270(b)(3)

Action:

Statutory Authority:

AS 04.06.090(b): "The board shall review all applications for licenses made under this title and may order the director to issue, renew, revoke, transfer, or suspend

licenses and permits authorized under this title."

There is no statutory authority for the board to refund a late fee. The board may conclude that the late fee was assessed in error, which would then require a refund.

Staff Rec.: Approve the renewal; deny the request for late fee refund

Background: AMCO first received the renewal applications this brewpub and restaurant or eating place licenses in Soldotna on December 19, 2017. An incomplete letter was emailed to the email address provided by the licensee on January 8, 2018, informing the licensee that corrections were needed to the application and that if the application was still incomplete after seven days, the \$500 late fee (per license) would be assessed.

AS 04.11.270(b)(2) states, "the licensee shall submit the completed renewal application and the biennial license fee to the director before January 1" and (b)(3) states, "a renewal application filed after December 31 is delinquent and must be accompanied by a \$500 penalty fee."

For those applications submitted before January 1 that are not reviewed for completeness until after January 1, a seven day grace period is provided to make any necessary corrections. If the application is not completed within that seven day grace period, the application is considered to be not completed by January 1 as required in AS 04.11.270(b) and the late fee is assessed.

Corrections to the renewal applications for these licenses were received on February 28, 2018.

4768 4769 St. Elias Brewing Company ABC Board April 3, 2018 Page 2

The licensee states in his appeal letter that he did not receive the January 8 email, and that he has not been required to state that the president is also the vice president, secretary, and managing officer, in the past.

AS 04.11.270(a) states, "An application for renewal of a license or renewal of a conditional contractor's permit must include (1) the information required for a new license or permit under AS 04.11.260 except that proof of notice under AS 04.11.310 is not required;"

AS 04.11.260(b) states, "A corporation applying for a license or permit shall provide the names and addresses of the president, vice-president, secretary, managing officer, and all stockholders who own 10 percent or more of the stock in the corporation, together with any other information required by the board."

Thus the renewal application requires the names and addresses of the president, vice-president, secretary, managing officer, etc. Mr. Henry provided this in his renewal application for the 2012/2013 licensing period. The instructions on the renewal application state that this information is required. The fact that AMCO staff failed to properly implement this portion of statute in two out of the last three renewal periods is not a valid reason to not properly implement the statute during this renewal period.

Attachment: Refund request

Applicable page of 2012/2013 renewal application

Applicable page of current renewal application (deemed incomplete)

Renewal application (complete)

Board of Directors: Date: 2/28/2018

St. Elias Brewing Company submitted liquor license renewal forms for license # 4768 and #4769 in December of 2017.

On page 3 of the renewal it asks to list corporate officers, president, vice president, secretary and managing officers, and any stockholder with 10% or more stock. There is only one corporate officer listed for St. Elias Brewing Company with the Division of Corporations and he holds all titles and 100% of the ownership of the business.

In past years we have filed page 3 to read "Zach Henry listed as President of the corporation with 100% ownership." We have not listed him on separate lines as holding other titles such as secretary, vice president or managing officer. He holds 100% of the ownership, therefore it seems a little redundant to have to write his name down under every title. This year when we filed the renewal, we received nothing back from AMCO stating there was an issue with our renewal form until Friday Feb 23rd. An entire month after we submitted the renewals, a letter came in the mail stating that our liquor license would expire in 5 days, Feb 28th at midnight. The letter stated that a complete application had not been received by AMCO staff. We called AMCO to figure out why we received the letter in the mail. We were told that we "should have received an email" regarding the issue on January 8th. We were also told that it was a "statutory regulation" to list Zach Henry not just as President and 100% ownership, but he also had to be listed separately as a secretary on the application. We searched through all of our emails from the date it was supposedly sent, and even through our spam folder, and the email was nowhere to be found. We do have an email address listed on the first page of the renewal application because it asks for an email address, but it was in no way implied that email is our preferred method of contact. Our business phone is also listed on that same page and our mailing address. Why did we not receive a letter or a phone call regarding this issue? E-mail communication often carries a lot of room for error, such as important emails being sent to a junk folder, human error; incorrect address being input etc. If the form asked for a preferred method of contact and we put in our email, then it would be our fault. Nothing replaces good old fashioned mail delivery. We should have received something in the mail regarding this issue well before Feb 23rd, 5 days before our license would completely expire.

Due to the miscommunication, we were then forced to pay a \$1000 late fee for filing our forms the same way we have for years, and not even knowing that it was filed "incorrectly" until almost a month after the application deadline. I have attached page 3 of the liquor license renewal form that we submitted without issue, from both 2014/2015 and 2016/2017. Both of these license renewal forms were filed listing Zach Henry as President with 100% ownership only. He is not

listed as owning any other corporate officer position and we had no troubles filing those renewals.

We feel that we were diligent in making sure our applications were in before the deadline and have also been consistent in keeping our license in compliance with AMCO since we started our business in 2008. It seems there are some inconsistencies in how applications are processed through AMCO and this is one instance where we feel that AMCO is working against a licensee that is really just trying to do the right thing. We feel that AMCO should have a little bit of leniency when working with a license holder who has shown a good track record of being in compliance, especially when past license renewals have been accepted in the very same manner this license renewal was filed.

Thank you for taking the time to review my appeal.

Sincerely,

Zach Henry

St. Elias Brewing Company

Alcoholic Beverage Control Board 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

Renewal Liquor License 2016/2017

Phone: (907) 269-0350
Email: alcohol.licensing@alaska.gov
http://commerce.alaska.gov/web/abc/Home.aspx

License is: Full Year If seasonal, list dates of operation: SECTION A - LICENSE INFORMATION License Number: Statute Reference: License Type: 4768 Sec. 04.11.400(g) Restaurant/Eating Place-Public Convenience Local Governing Body: Community Council (if applicable): Soldotna Kenai Peninsula Borough Name of Licensee: Doing Business As (DBA): St. Elias Brewing Co St. Elias Brewing Company Mailing Address: Street Address or Location of Premises: 434 Sharkathmi Ave Phone: (907) 260-7837 (907) 260-7841 Jessietaze notmail. com SECTION B - OWNERSHIP INFORMATION - CORPORATION (if owner is a sole proprietor, skip to SECTION C)

Name of Entity (Corporation/LLC/LLP/LI	P):			
St. Elias Brewing Company				
Is the Entity in "Good Standing" with the If no, attach written explanation. Your e			☐ No Title 10 of the Alaska Statutes to be a valid liquor licensee.	
Entity Members (Must include Preside	nt, Secretary, Treasurer,	, Vice-Pre	esident, Manager and Shareholder/Member with 10% or more of st	tock)
Name	Title	96	Mailing Address	Telephone Number
Zach Henru	President	100	33160 Community College Dr.	1907/953-232
			Soldotra, AK 9910169	

2014/2015 Liquor License Rer

License Number		
TF C 4769	License Type Recommendation	Establishment Name
If Seasonal Lic. Seaso	Brewpub onal Date From:	St. Elias Brewing Company
	-ar Date From:	Seasonal Date To:

St. Elias Brewing Company PO P	Premises Address 434 Sharkathmi Ave
PO Box 1141 Soldotna, AK 99669 Community Council/s	City: Soldotna Borough: Kenai Peninsula Borough
(Anchorage & Mat-Su only)	

Please mark the correct box to answer:

Was your business open at least 30 days for 8 hours each day in 2012? ONO Was your business open at least 30 days for 8 hours each day in 2013? ONO AYes Has the licensed premises changed from the last diagram submitted? No □ Yes Has any person named in this application been convicted of a felony or Title 4 violation?

Please answer the following questions:

What is a good contact phone number for us to use? 907-260-7837

Please give us a fax number if available or write N/A 907 - 260 - 7841

Give us an email address to use in contacting you Jessie taze not mail. Com

Please write your Employer Identification Number (EIN) here 26-1470328

List all corporation/LLC members, managers and shareholders below:

Title	Share %	Phone
President	100%	(907)953-2320
	President	President 100%

If not a corporation - List all individuals, spouses, or partners that own business below:

Name & Mailing Address	Title	Phone —
1 2400 Viking Drive - A	nchorage, AK 99501	

ABC Board - 2400 V. Phone: 907-263-5900 Fax: 907-263-5930

Alcoholic Beverage Control Board 5848 E Tudor Rd	Renewal	Liquor License	PAGE 2 OF
Anchorage, AK 99507	www.dr	os.state.ak.us/abc	(907) 269-035 Fax: (907) 272-941
ENT	ITY OWNERSHI	P (Corporation/LLC/LP)	
Corporations, LLCs, LLPs and I			
Name of Entity (Corporation/LLC/LLP/LP) (or N			Fax Number:
St. ELIAS BRE	111111 /0	1907) 3/6-	-T837 (907)260-78U
Corporate Mailing Address:	W1NG CO	. (101) 260	100 11 (101)260-169
P.O. BOX 1141 SO	LDOTNA AK	99669	
Corporate Mailing Address: P.O. BOX 1141 SO Name, Mailing Address and Telephone Number of CACH HENRY	of Registered Agent:	Date of Incorporation	OR State of Incorporation:
33160 Community coll	000 de 501do	tna, AX Date of Incorporation Certification with DC 12/07	ALASKA
Is the Entity in compliance with the reporting requ			If no, attach written explanation. You
entity <i>must</i> be in compliance with Title 10 of the			Ti no, utaton vinton explanation.
Entity Members (Must include President, Sec			er with at least 10%)
Name Title	% Но	me Address & Telephone #	Work Phone # Date of Birth
ZACH HENLOY Presi	lentino 2711	2 /	(907)210-7837 2/22/
Correte	1410 3316	of Commonity	1901/2 191/4/21
- Persu	Colleg	le drive	11
() () ()	es) Sold	otno, AK	
(All till	996	69	
NOTE: On a separate sheet provide addit	tional w ership, areh	older/member/director/officer in	formation.
INDIVID	HALL DAY TEDSHI	ID (I-di-id-al - Dayton	-1:->
INDIVID		IP (Individual or Partner	
Individual Licensees/Affiliates Name:	The AB Board de les "A Applicant □	ffiliate" as the spouse or significant other	
Address:	Affiliate	Address:	Applicant □ Affiliate □
TI DI	Date of Birth:		Date of Birth:
Home Phone: Work Phone:	Date of Birth:	Home Phone: Work Phone:	Date of Birth:
	4-1:		
Name: Address:	Applicant □ Affiliate □	Name: Address:	Applicant □ Affiliate □
Home Phone: Work Phone:	Date of Birth:	Home Phone: Work Phone:	Date of Birth:
WOLK I HOLD,		WOLK I HOUSE.	
estaurant/Eating YES NO 🗆	Gross receipts from the	sale of food at the licensed premise	es constituted at least 50 percent of
	business during the 2010	/20/1 calendar license years as req	uired under AS 04.11.100(e).
Declaration			
 I declare under penalty of perjury that I have ex and belief it is true, correct and complete, and this 			
I hereby certify that there have been no change	s in officers or stockholders th	at have not been reported to the Alcoholic	Beverage Control Board. The undersigned
 certifies on behalf of the organized entity, it is und I further certify that I have read and am familia 			
than the licensee(s) has any direct or indirect final	ncial interest in the licensed bu	siness.	The state of the s
 I agree to provide all information required by t 	he Alcoholic Beverage Contro	l Board in support of this application.	
GI CI			
Signature of Licensen(s)			
Signature of Licenseë(s)	*****		. 0
Signature of Licensee(s)	7	ZACH HENRY	1: PRESIDENT

Notary Signature

Notary Public in and for the State of Alaska

JAN 26 '12 AM 11:46

Subscribed and sworn to before me this 35 day of January, 20 2.

My commission expires: 7-16-2012



Alaska CBPL Entity #:

[Form AB-17a] (rev 10/16/2017) License #4768 DBA St. Elias Brewing Co

Alaska Alcoholic Beverage Control Board

112634

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

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

alcohol.licensing@alaska.gov

Phone: 907.269.0350

Restaurant or Eating Place License

Form AB-17a: 2018/2019 Renewal License Application

Section 4 - 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, Business & Professional Licensing (CBPL). You may view your entity's status or find your CBPL entity number by vising the following site: https://www.commerce.alaska.gov/cbp/main/search/entities Partnerships may skip to the second half of this page. Sole proprietorships should skip to Section 5.

You must ensure that you a	re able to certify the following statem	ent before si	gning your initials in the b	ox to the right	t: Initials		
certify that this entity is in good standing with CBPL and that all current entity officials and stakeholders (listed below) are also currently and accurately listed with CBPL.							
 limited partnership, that is a If the applicant is a corp the stock in the corporat If the applicant is a <u>limit</u> ownership interest of 10 If the applicant is a <u>partnership</u> 	npleted by any community or entity, in pplying for renewal. If more space is a praction, the following information mustion, and for each president, vice-presided liability organization, the following 10% or more, and for each manager. The including a limited partnership or more, and for each general partner	needed, pleased by the complet dent, secreta information in the following, the following.	se attach additional comp ed for each stockholder wo ry, and managing officer. must be completed for eac	ho owns 10% the nember with	f this page. or more of th an		
Entity Official Name:	Zach Henru						
Title(s):	President	Phone:	(907)260-7837	% Owned:	100		
Mailing Address:	33160 Community	college	Dr				
City:	Soldotna	State:	AK	ZIP:	79669		
Entity Official Name:							
Title(s):		Phone:		% Owned:			
Mailing Address:				390 SH			
City:		State:		ZIP:			
				·····			
Entity Official Name:							
Title(s):		Phone:		% Owned:			
Mailing Address:							
City:		State:		ZIP:			
				RECEI	WED		



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

Phone: 907.269.0350

Restaurant or Eating Place License

Form AB-17a: 2018/2019 Renewal License Application

What is this form?

[Form AB-17a] (rev 10/16/2017) License #4768 DBA St. Elias Brewing Co

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing restaurant or eating place liquor license that will expire on December 31, 2017. 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 should 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. If any populated information is incorrect, please contact AMCO. St. Elias Brewing Company License #: 4768 License Type: Restaurant/Eating Place - Public Convenience Statute: AS 04.11.400(g) Doing Business As: St. Elias Brewing Co Premises Address: 434 Sharkathmi Ave Local Governing Body: City of Soldotna (Kenai Peninsula Borough) **Community Council:** None Mailing Address: Sharkathmi Ave. City: State: ZIP: Enter information for the individual who will be designated as the primary point of contact regarding this application. This individual must be a licensee who is required to be listed in and authorized to sign this application. Point of Contact: Contact Phone: **Business Phone:** Contact Email: Seasonal License? If "Yes", write your six-month operating period:



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Restaurant or Eating Place License

Form AB-17a: 2018/2019 Renewal License Application

Section 2 – Authorization						
Communication with AMCO	staff:	000074444			Yes	No
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?						
<u></u>	ne of the individual and the reason for NESAY - GENETAU Y	r this authori:	zation:			
This section must be comple If more space is needed, ple The following information m	ection 3 – Sole Proprietors to steed by any sole proprietorship who is ase attach a separate sheet with the roust be completed for each licensee and applicant affiliate	applying for equired infor	license renewal. Entities s mation.		p to Sectio	n 4.
Name:						
Mailing Address:				***************************************		
City:		State:		ZIP:		
Email:						
Contact Phone:						
This individual is an:	pplicant affiliate					
Name:					MANUAL CONTRACTOR OF THE PARTY	
Mailing Address:					·	
City:		State:		ZIP:		
Email:						
Contact Phone:						



112634

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

Initials

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FEB 2 8 2018

ALCOHOL MARIJUANA CONTROL OFFICE

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

Restaurant or Eating Place License

Form AB-17a: 2018/2019 Renewal License Application

Section 4 - 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, Business & Professional Licensing (CBPL). You may view your entity's status or find your CBPL entity number by vising the following site: https://www.commerce.alaska.gov/cbp/main/search/entities Partnerships may skip to the second half of this page. Sole proprietorships should skip to Section 5. Alaska CBPL Entity #:

You must ensure that you are able to certify the following statement before signing your initials in the box to the right:

mula. II	L and that all current entity officials a	and stakeholders (listed below)
mula. II		12
oration, the following infition, and for each preside ed liability organization, of or more, and for each	formation must be completed for each each each, vice-president, secretary, and must be commanager.	ompleted for each mombon with
-1 10 11		tion must be completed for each <i>partne</i>
President, S	ecretary Phone: (907)2	60-7837 % Owned: 100
2	Nunuty College Dr.	,
		- ZIP: 9966
	Phone	
	Thole.	% Owned:
	State:	ZIP:
	Phone	
	Filone;	% Owned:
	State:	ZIP:
	ed liability organization, 1% or more, and for each nership, including a limite or more, and for each gentlement, and for	Phone: Phone: Phone: Phone: President president, vice-president, secretary, and moded liability organization, the following information must be considered partnership, the following information must be considered partnership, the following information more, and for each general partner. President Secretary Phone: (907)2 33160 Community College Dr. State: Phone:



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Restaurant or Eating Place License

Form AB-17a: 2018/2019 Renewal License Application

Section 5 – License Operation		
Check a single box for each calendar year that best describes how this liquor license was operated:	2016	2017
The license was regularly operated continuously throughout each year, for 8 or more hours each day.	\times	$ \nabla $
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, a complete copy of Form AB-30: Proof of Minimum Operation Checklist, and all necessary documentation must be provided with this 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, a complete copy of Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated for at least the minimum requirement.		
Section 6 – Violations and Convictions Applicant violations and convictions in calendar years 2016 and 2017:	Yes	No
Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2016 or 2017?		K
Has any person or entity 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 2016 or 2017?		
If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or cor	nviction	s.
Section 7 – Alcohol Server Education		
Read the line below, and then sign your initials in the box to the right of the statement:		Initials
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a pat have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, as required under AS 04.21.025 and 3 AAC 304.465.	ron [2H





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Restaurant or Eating Place License

Form AB-17a: 2018/2019 Renewal License Application

	Sec	ction 8 – G	ross Re	eceipts	3			
Enter the dollar amounts of the food and gross (food + alcohol) receipts on the licensed premises, and calculate the percentage of gross receipts that are from food sales on the licensed premises for each calendar year. (Food Receipts ÷ Gross Receipts x 100 = %)								
2016 Food Receipts:	\$1,432,309.00	2016 Gross I			9,865,00	% From Fo		
2017 Food Receipts:	\$1,211,500.00	2017 Gross F	Receipts:		5,179.00	% From Fo		%
	Se	ction 9 – C	Certific	ations				
Read each line below, and t	hen sign your initials i	n the box to the	right of ea	ch stateme	ent:		In	itials
I certify that all current licen	sees (as defined in AS	04.11.260) and	affiliates ha	ive been li	sted on this a	pplication.	[24
I certify that in accordance win the licensed business.	vith AS 04.11.450, no o	ne other than th	e licensee(s) has a dir	ect or indirec	t financial inte	erest	2H
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, managers, general partners, or stakeholders) from what is currently on file with the Alcoholic Beverage Control Board.								
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.								
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. Signature of Notary Public Notary Public in and for the State of Printed name of licensee								
My commission expires:								
OFFICIAL MOLLY (and sworn to be	fore me thi	s da	y of Oct	emb	20	<u> </u>
License Fee: My Comra Explo	65.069/2020 Appl	ication Fee:	\$ 200.00		TOTAL:	\$ 8	300.00	
Late Fee of \$500.00 - if	received or postma	rked after 01/	02/2018:					
Miscellaneous Fees:		TOTAL TOTAL		(nex)			£) a	
GRAND TOTAL (if differ	ent than TOTAL):				- Marie	RIE	800-	



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Form AB-17: 2018/2019 Renewal License Application

What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing liquor license that will expire on December 31, 2017. 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 should 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.

Se	ection 1 – Establishmer	nt and Contact Info	rmation		
Enter information for the bus	siness seeking to have its license rene	wed. If any populated informa	tion is incorrect,	olease contact AMCC	
Licensee:	St. Elias Brewing Company		License #:	4769	
License Type:	Brewpub		Statute:	AS 04.11.135	
Doing Business As:	St. Elias Brewing Company				
Premises Address:	434 Sharkathmi Avenue				
Local Governing Body:	City of Soldotna (Kenai Peninsu	la Borough)			
Community Council:	None	W		7/2 948FF	
		-	100		
Mailing Address:	434 Sharkathur	ni Ave.	160	30	
City:	Soldotna	State: AK	ZIP:	99669	
Enter information for the indi	ividual who will be designated as the uired to be listed in and authorized to	primary point of contact regar sign this application.	ding this applicat	ion. This individual	
Point of Contact:	zach Henry				
Contact Phone:	(907) 260-7837	Business Phone:	Same		
Contact Email:	zachjennycho	tmail.com			
Yes Seasonal License?	No If "Yes", write your s	six-month operating period	r REC	CEIVED	
[Form AB-17] (rev 10/16/2017) License #4769 DBA St. Elias Brew	ring Company		DE(1 9 2 Page 1 of 5	



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Alaska Alcoholic Beverage Control Board

Form AB-17: 2018/2019 Renewal License Application

		Section 2	– Authoriz	ation			
Communication with AMO	O staff:					Yes	No
Does any person other that staff?	<u>n</u> a licensee na	med in this application	n have authority	to discuss this license with	AMCO		
If "Yes", disclose the na		ividual and the reason					
This section must be comp If more space is needed, p The following information This individual is an:	leted by any <u>s</u> lease attach a	ole proprietorship who separate sheet with th	o is applying for ne required info	rmation.		ip to Sectio	on 4.
Name:					100 TO 100		
Mailing Address:		190					-
City:			State:		ZIP:		-
Email:		. 3		· · · · · · · · · · · · · · · · · · ·			
Contact Phone:							
This individual is an:	applicant	affiliate					
Name:							
Mailing Address:		-					
City:			State:		ZIP:		
City: Email:			State:		ZIP:		





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

Initials

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-17: 2018/2019 Renewal License Application

Section 4 - 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, Business & Professional Licensing (CBPL). You may view your entity's status or find your CBPL entity number by vising the following site: https://www.commerce.alaska.gov/cbp/main/search/entities Partnerships may skip to the second half of this page. Sole proprietorships should skip to Section 5. Alaska CBPL Entity #:

You must ensure that you are able to certify the following statement before signing your initials in the box to the right:

I certify that this entity is in good standing with CBPL and that all current entity officials and stakeholders (listed below)

the stock in the corporal fithe applicant is a limit ownership interest of the control of the corporal fitters.	perpleted by any community or entity applying for renewal. If more space poration, the following information mation, and for each president, vice-presided liability organization, the following the following or more, and for each manager. Including a limited partners for more, and for each general partners. Zach Henry	ust be comple esident, secret ing information	eted for each stockholder ary, and managing office must be completed for	who own	pies of t s 10% or	his page <i>more</i> of
TITLES	President Secreto		(907)260-7837	% Ow	ned:	100
Mailing Address:	33160 Communit	y collec	ie Dr.		- Lucia	100
City:	Soldotna	State:	AK	ZIP:	994	ol o Ca
Entity Official Name:					1-1-14	70-1
Title(s):	2 1 1 6 1					
Mailing Address:	Prosident Secretary	Phone:		% Owr	ed:	
City:		- T				
		State:		ZIP:		
Entity Official Name:		· · · · · · · · · · · · · · · · · · ·				
litle(s):		Phone:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Mailing Address:		. Hone.		% Own	ed:	
City:		6: .				
		State:	I	ZIP:		

ALCOHOL MARIJUANA CONTROL OFFICE STATE OF ALASKA



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

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Section 5 – License Operation		
Check a single box for each calendar year that best describes how this liquor license was operated:	2016	2017
The license was regularly operated continuously throughout each year, for 8 or more hours each day.	X	X
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, a complete copy of Form AB-30: Proof of Minimum Operation Checklist, and all necessary documentation must be provided with this 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, a complete copy of Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated for at least the minimum requirement.		
Section 6 – Violations and Convictions		
Applicant violations and convictions in calendar years 2016 and 2017:	Yes	No_
Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2016 or 2017?		X
Has any person or entity 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 2016 or 2017?		\times
If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or cor	viction	S.
Section 7 – Alcohol Server Education This section must be completed only by the holder of a beverage dispensary, club, or pub license or conditional contr		
The holders of all other license types should skip to Section 8.	actor's	<u>permit</u> .
Read the line below, and then sign your initials in the box to the right of the statement:		Initials
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a path have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, as required under AS 04.21.025 and 3 AAC 304.465.	ron	24

DEC 1 9 2017

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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. 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. 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, managers, general partners, or stakeholders) from what is currently on file with the Alcoholic Beverage Control Board. 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. 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.

Printed name of licensee

STATE OF ALASKA

NOTARY PUBLIC

Jerrica Woods

Signatur

My Commission Expires:

My commission expires: 9-7-2

Subscribed and sworn to before me this 144 day of December 2017

Notary Public in and for the State of

License Fee:	\$ 500.00	Application Fee:	\$ 200.00	TOTAL:	\$ 700.00
Late Fee of \$50	0.00 – if received	or postmarked after 01,	/02/2018:		
Miscellaneous	Fees:			300	
GRAND TOTAL (if different than TOTAL):					700-