

# 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

DATE: June 12, 2018

FROM: Erika McConnell, Director RE: 1031 Westmark Sitka Hotel

Requested

License renewal

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."

AS 04.11.480(c): "A local governing body may recommend that a license be issued, renewed, relocated, or transferred with conditions. The board shall consider recommended conditions and testimony received at a hearing conducted under AS 04.11.510(b)(2) ... If the local governing body recommends conditions, the board shall impose the recommended conditions unless the board finds that the recommended conditions are arbitrary, capricious, or unreasonable. If a condition recommended by a local governing body is imposed on a licensee, the local governing body shall assume responsibility for monitoring compliance with the condition, except as otherwise provided by the board."

AS 04.11.510(b)(2): "the board may, on its own initiative or in response to an objection or protest, hold a hearing to ascertain the reaction of the public or a local governing body to an application if a hearing is not required under this subsection; the board shall send notice of a hearing conducted under this paragraph 20 days in advance of the hearing to each community council established within the municipality and to each nonprofit community organization entitled to notification under AS 04.11.310(b);"

**Staff Rec.:** Renew with requested condition

**Background:** On March 14, 2018, the City and Borough of Sitka requested that a condition be placed on this beverage dispensary – tourism license, in accordance with AS 04.11.480(c). The requested condition is:

1031 Westmark Sitka Hotel ABC Board June 12, 2018 Page 2

The applicant must satisfy the note/payment plan entered into with the City and Borough of Sitka.

In a subsequent email, the Municipal Clerk stated that the first payment of the payment plan was due in May, and the plan must be fulfilled by April 15, 2019. As noted in AS 04.11.480(c), the local governing body assumes responsibility for monitoring compliance with the condition, unless otherwise provided by the board.

The board is required to hold a hearing under AS 04.11.510(b)(2) to consider the conditions. The board shall impose the requested conditions unless the board finds them to be arbitrary, capricious, or unreasonable.

This beverage dispensary – tourism license was first issued in November of 2008. The facility provides 105 rental rooms and maintains a restaurant and lounge.

A temporary license was issued on January 19.

Attachment: City and Borough of Sitka requested conditions

Renewal application

From: Sara Peterson < sara.peterson@cityofsitka.org>

Sent: Wednesday, March 14, 2018 2:53 PM

To: AMCO Local Government Only (CED sponsored) <a href="mailto:amco.localgovernmentonly@alaska.gov">amco.localgovernmentonly@alaska.gov</a>

Cc: lisalaudon@gmail.com; Brian Hanson <br/>
brian.hanson@cityofsitka.org>

Subject: APPROVED with a CONDITION: Lic. 1031 DBA Westmark Sitka Hotel - Complete Renewal Application

Importance: High

Dear AMCO,

At the March 13, 2018 Assembly meeting, the City and Borough of Sitka Assembly approved, with a condition, the liquor license renewal application for license #1031 (JL Sitka, Inc. dba Westmark Sitka Hotel). The applicant must satisfy the note/payment plan entered into with the City and Borough of Sitka.

Please contact me if you require additional information or explanation.

Thank you,

Sara

Sara Peterson Municipal Clerk City and Borough of Sitka

From: Sara Peterson < sara.peterson@cityofsitka.org>

Sent: Thursday, March 15, 2018 10:41 AM

 $\textbf{To:} \ AMCO \ Local \ Government \ Only \ (CED \ sponsored) \\ < \underline{amco.localgovernmentonly@alaska.gov} >; \ Smith, \ Jedediah \ R \ (CED) \\ < \underline{jedediah.smith@alaska.gov} >; \ Smith, \ Jedediah \ R \ (CED) \\ < \underline{jedediah.smith@alaska.gov} >; \ Smith, \ Jedediah \ R \ (CED) \\ < \underline{jedediah.smith@alaska.gov} >; \ Smith, \ Jedediah \ R \ (CED) \\ < \underline{jedediah.smith@alaska.gov} >; \ Smith, \ Jedediah.smith@alaska.gov >; \ Smith, \ Jedediah.smith.gov >; \ Smith, \ Jedediah.smith.gov >; \ Smith, \ Jedediah.smith.gov >; \ Smith.gov >;$ 

Subject: RE: APPROVED with a CONDITION: Lic. 1031 DBA Westmark Sitka Hotel - Complete Renewal Application

Hi Jed,

The licensee has a year to fulfill the plan. The first payment is due in May and the plan must be fulfilled by April 15, 2019.

Sara



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

alcohol.licensing@alaska.gov

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

## Beverage Dispensary – Tourism License

## Form AB-17d: 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 beverage dispensary – tourism 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.

on piece.						
Se	ection 1 – Establishmen	t and C	ontact Info	rmation		
Enter information for the bus	siness seeking to have its license rene	wed. If any p	opulated informa	ation is incorrect	, please contact AMCO	
Licensee:						
License Type:	Beverage Dispensary - Tourism			Statute: AS 04.11.40		
Doing Business As:	Westmark Sitka Hotel					
Premises Address:	330 Seward Street					
Local Governing Body:	City & Borough of Sitka		-	W. B. V.		
Community Council:	None					
Mailing Address:	330 Seward		treet			
City: Sitka	Sitka	State:	AL	ZII	99835	
Enter information for the indimust be a licensee who is req	vidual who will be designated as the pure to be listed in and authorized to	orimary poin	it of contact rega	rding this applica	ation. This individual	
Point of Contact:		idon	meation.			
Contact Phone:	907-230-4095	H095 Business Phone: Same.				
Contact Email:	lisalaudon @ gr	nail.	com			
Yes Seasonal License?	No If "Yes", write your s		pperating perio			
[Form AB-17d] (rev 10/16/2017)			BECEL	MININ	Page 1 of 5	
License #1031 DBA Westmark Sitka Hotel				2018	rage 1 of 5	



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# Beverage Dispensary – Tourism License

# Form AB-17d: 2018/2019 Renewal License Application

	Section 2 – Authorization		
Communication with AMCO	staff:	Yes	No
Does any person <u>othe</u> AMCO staff?	r than a licensee named in this application have authority to discuss this license with		
(1) A	ryant, Joseph List, Sysan Doyle ways, authorized office management		
This section must be comple If more space is needed, plea The following information mu	tection 3 – Sole Proprietor Ownership Information  ted by any sole proprietorship who is applying for license renewal. Entities should skip as attach a separate sheet with the required information.  ast be completed for each licensee and each affiliate (spouse).  pplicant affiliate	p to Section	n 4.
Name:			
Mailing Address:			
City:	State: ZIP:		
Email:			
Contact Phone:			
	oplicant affiliate		
Name:			
Mailing Address:	Α		
City:	State: ZIP:		
Email:			
Contact Phone:	,		

ALCOHUL MANDUANA CONTRACTOR STATE OF ALASKA



Alaska CBPL Entity #:

Alaska Alcoholic Beverage Control Board

114445

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### **Beverage Dispensary – Tourism License**

### Form AB-17d: 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: <a href="https://www.commerce.alaska.gov/cbp/main/search/entities">https://www.commerce.alaska.gov/cbp/main/search/entities</a>
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 stateme	ent before si	gning your initials in the b	ox to the	right:	Initials
I certify that this entity is in a are also currently and accura	good standing with CBPL and that all coately listed with CBPL.	urrent entity	officials and stakeholders	(listed be	low)	
limited partnership, that is a  If the applicant is a corp the stock in the corporat If the applicant is a limit ownership interest of 10  If the applicant is a partn with an interest of 10%  Entity Official Name:	inpleted by any community or entity, in applying for renewal. If more space is representation, the following information mustion, and for each president, vice-presided liability organization, the following 0% or more, and for each manager.  Increase including a limited partnership or more, and for each general partner.  John E Emmu	needed, plea it be complet dent, secreta information 2, the followi	se attach additional comp ted for each stockholder wary, and managing officer. must be completed for each	leted cop ho owns in th member mpleted f	ies of the control of	this page. r more of
Title(s):	Director Sec. V.P.	Phone:	907-209-7135	% Owr	ned:	50
Mailing Address:	330 Seward &					
City:	Sitter	State:	AK	ZIP:	9	9835
Entity Official Name:	Lisa J. Lande	M				
Title(s):	Dirator, Pres, Thosur	Phone:	917-230-4095	% Owr	ned:	50
Mailing Address:	330 Seward Street	- ,			,	
City:	Dieces Sithe	State:	Ale	ZIP:	99	835.
Entity Official Name:						
Title(s):		Phone:		% Owr	ned:	
Mailing Address:				- Investigation in		
City:		State:		ZIP:		
			DEGETWE			
Form AB-17d] (rev 10/16/2017)			1AN 1 0 2010			Page 3 of 5



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# Beverage Dispensary – Tourism License

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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.		
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?	П	
	2	V
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?		V
	nviction	ns.
ordinance adopted under AS 04.21.010 in the calendar years 2016 or 2017?	nviction	ns.
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 con	nviction	ns.



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## **Beverage Dispensary – Tourism License**

## Form AB-17d: 2018/2019 Renewal License Application

#### **Section 8 - 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.						
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.					al interest	
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.					ses,	
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.						
I am submitting as part of this application a written statement that meets the attached Tourism Statement Guidelines, for review by the Alcoholic Beverage Control Board.						
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 licensee  Notary Public in and for the State of Alaska  Printed name of licensee  My commission expires: 3.9.20  Subscribed and sworn to before me this 4 day of 4 december 2017.						
License Fee:	\$ 2500.00	Application Fee:	\$ 200.00	TOTAL:	\$ 2700.00	
Late Fee of \$500.00 – if received or postmarked after 01/02/2018:				500.00		
Miscellaneous Fees:						

**GRAND TOTAL (if different than TOTAL):** 

Tourism Statement for Renewal

12-3-17

Westmark Sitka Hotel (JL SITKA)

To whom it may concern:

JL SITKA DBA Westmark Sitka hotel is located at 330 Seward Street Sitka, Alaska 99835 .

Westmark Sitka hotel is a 105 room hotel that very much is in compliance with the guidelines for the tourism licensing. We have a restaurant and lounge open for business year round. We see up to 165 cruise ships per summer season and are able to employ and add an extra 30 jobs each season annually. We are Alaska owned and operated. John Emmi and myself, Lisa Laudon are hands on owners and we personally hire and at times train our crew. We work very closely with staff to provide an environment which is safe and fun and generate excitement about southeast Alaska. Yes, we do offer rooms to the traveling public. In fact we hold most State of Alaska conferences and do their banquets for meetings and work closely with the SEARCH Hospital staff to accommodate their traveling physicians and those traveling for healthcare from the outerlying villages. None of our rooms have kitchen facilities and we do not stock alcoholic beverages in our rooms. We are not in an airport or its terminal.

We do have a large dining facility where we are the spotlight for locals and all our travelers to enjoy. We do not have a concierge service at our hotel but we will certainly point you in the right direction of walking trails and the Totem Park, canoeing, museums, Russian Orthodox churches and all that Sitka has to offer. We can connect you with those that specialize in their field. We have responsibly held this tourism license for years and our goal is to continue to do so. We hold the TAP class at our hotel conference rooms and accommodate all of our local servers and bartenders here at the WESTMARK Sitka Hotel. Thank you for your time.

Lisa J Laudon

