March 28, 2018

To: Alaska Alcohol Licensing Board

From: Bill Bailey

President, Pacific Catalyst II, Inc

Re: Request for reinstatement for License #4521

To whom it may concern,

I respectfully request reinstatement for License # 4521. Due to a cascading multitude of errors and misunderstandings, compounded by the fact that I spend 4 months each winter operating one of my boats in Mexico's Sea of Cortez where I have very limited email and internet connectivity, I missed several deadlines for my 2018 license renewal.

I made my original renewal application in plenty of time to meet that deadline, but my application was rejected due to it being considered incomplete because I had only listed myself as a corporate officer. I did this because there are only two officers in my corporation, myself and my soon to be ex-wife, and I figured since I was the one signing the application, and the fact that there is an understanding between she and I that the business will go to me in our settlement, that I didn't need to include her on the application.

I was told that I needed to include all corporate officers on the application.

So I amended my application to include my wife and her primary corporate title, which is vice-president.

This is when things really began to go bad. Remember that there are big lags between my accesses to internet, so many of these correspondences are spread out due to my being off grid.

I was told that my application was still considered as incomplete because my application didn't match the paperwork, and I didn't understand the problem. It took a couple of emails for me to understand that my wife had listed herself as vice-president AND secretary, and I needed to include both titles on my application for it to be considered complete.

We are a two person corporation, so both of us wear several hats in the corporate structure, and it took me a while to understand that I didn't need to list all of our titles, just then ones that my wife had used on the original application. In the process of getting that information I somehow assumed that I had done what was needed to complete the application.

The next thing I know is that my application was *still* considered incomplete and that now it was past the deadline, so I owed a \$500 late fee.

\$500 for not including the word "secretary" on the application, which had been submitted well in advance of the deadline seemed like extortion to me, so I did miss one opportunity to call



into the office and give my credit card payment over the phone because I was extremely grumpy.

Next my book keeper sends an email to find out what happened to our alcohol permit and I find out that because I didn't get the \$500/word penalty paid on time that my license is now considered delinquent and I would need to request reinstatement from the board. Which of course I could only do AFTER paying the \$500!

So, I called this morning and paid the \$500 late fee, and am now submitting this note as my reason for being late and all.

In my defense, I am not an idiot, but am very busy. Distractedly busy, operating a small adventure charter boat in Mexico (I realize that this isn't likely to illicit much sympathy from folks that spend their winters in Anchorage) and worrying about making hotel and transportation reservations for my guests, captaining and maintaining my (95 year old) boat and keeping the (96 year old) engine running and spending our 72 hour turn-arounds cleaning the boat, changing linens, changing the oil, reprovisioning and at the same time working on maintaining all of my Alaska permits, permissions and reservations.

My plate is a bit overfull.

I apologize for my serial tardiness, and for the one time I got surly with Mr. Zeilinski, who I realize is just doing his job.

I will do better in the future.

(Somehow this reads to me like a note I should have my mother sign, but sadly that is impossible.)

Regards to all,

Bill Bailey

President and several other titles,

Pacific Catalyst II, Inc

M/V's Catalyst and Westward

www.pacificcatalyst.com





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

Phone: 907.269.0350

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LCOHOL MARIJUANA CONTROL OFFICE STATE OF ALASKA

Alaska Alcoholic Beverage Control Board

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.

Section 1 - Establishment and Contact Information

Doing Business As: Catalyst M/V * WESTWARD M/V Premises Address: Alaskan Waters Local Governing Body: None Community Council: None Mailing Address: P. O. Box 3/17 City: FPIDMY HAPBOR State: WA ZIP: 96256 Inter information for the individual who will be designated as the primary point of contact regarding this application. This individuals be a licensee who is required to be listed in and authorized to sign this application. Point of Contact: BILL BAILEY Contact Phone: 360-298-1661 Business Phone: 360-378-287123 Contact Email: Ves No If "Yes", write your six-month operating period: MY ~ SEPT-1530 Tomat AB-17] (rev 10/16/2017)	Licensee:	Pacific Catalyst II, Inc.			License		4521
Premises Address: Local Governing Body: None Community Council: None Mailing Address: P. O. Box 3/17 City: FPIDNY HAPBOR State: WA ZIP: 98256 Inter information for the individual who will be designated as the primary point of contact regarding this application. This individuals be a licensee who is required to be listed in and authorized to sign this application. Point of Contact: BILL BAILEY Contact Phone: 360-298-1661 Business Phone: 360-378-287123 Contact Email: Ves No If "Yes", write your six-month operating period: MY In SEPT-1530 Description of Contact (Prev 10/16/2017)	License Type:	Common Carrier - Seasonal			Statute	:	AS 04.11.180
Local Governing Body: None Community Council: None Mailing Address: ?. o. Box 3/17 City: FRIDAY HARBOR State: WA ZIP: 96252 Interinformation for the individual who will be designated as the primary point of contact regarding this application. This individuals be a licensee who is required to be listed in and authorized to sign this application. Point of Contact: BILL BAILEY Contact Phone: 360-278-1661 Business Phone: 360-378-287123 Contact Email: bille pacificestalyst.com Yes No If "Yes", write your six-month operating period: MYY N SEPT-1530	Doing Business As:	,					
Mailing Address: 7. 6. Box 3/17 City: FRIDAY HAPBOR State: WA ZIP: 96250 Interinformation for the individual who will be designated as the primary point of contact regarding this application. This individuals be a licensee who is required to be listed in and authorized to sign this application. Point of Contact: BILL BAILEY Contact Phone: 360-298-1661 Business Phone: 360-378-287123 Contact Email: bi//c pacificcatalyst.com If "Yes", write your six-month operating period: MY N SEPT-1530 Dorm AB-17] (rev 10/16/2017)	Premises Address:						
Mailing Address: P. 6. Box 3117 City: FPILMY HAPBOR State: WA ZIP: 96256 Interinformation for the individual who will be designated as the primary point of contact regarding this application. This individuals be a licensee who is required to be listed in and authorized to sign this application. Point of Contact: BILL BAILEY Contact Phone: 360-298-1661 Business Phone: 360-378-287123 Contact Email: bille pacificcatalyst.com Yes No If "Yes", write your six-month operating period: Yes No If "Yes", write your six-month operating period: Yes No Page 10-16/2017)	Local Governing Body:	None			3.		
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Inter information for the individual who will be designated as the primary point of contact regarding this application. This individual be a licensee who is required to be listed in and authorized to sign this application. Point of Contact: BILL BAILEY Contact Phone: 360-298-166 Business Phone: 360-378-37123 Contact Email: bille pacifice atalyst. com Yes No If "Yes", write your six-month operating period: MY \$500 - 1500	Mailing Address:	P.O. Box 3117					
inter information for the individual who will be designated as the primary point of contact regarding this application. This individual be a licensee who is required to be listed in and authorized to sign this application. Point of Contact: BILL BAILEY Contact Phone: 360-378-287123 Contact Email: bille pacificatalyst. com Yes No If "Yes", write your six-month operating period: MY N SEPT. 1530	City:	FRIDAY HARBOR	State:	WA		ZIP:	98250
Contact Phone: 360-298-1661 Business Phone: 360-378-287123 Contact Email: bill@ pacificcatalyst. com Yes No easonal License? If "Yes", write your six-month operating period: MY N SEPT. HS 30 orm AB-17] (rev 10/16/2017)	nust be a licensee who is requ	uired to be listed in and authorized to	orimary point of sign this application	of contact regardation.	rding this app	lication	n. This individual
Contact Email: bille pacific catalyst. com Yes No If "Yes", write your six-month operating period: MYN N SEPT. 1530 Orm AB-17] (rev 10/16/2017)	· omit or contact.	DICE DAILEY					
easonal License? If "Yes", write your six-month operating period: MYY N SEPT. 15.30			Business P	hone:	360-37	8.28	17123
Dano 1	Contact Phone:	360.298.1661		hone:	360-37	8.28	7123
cense #4521 DBA Catalyst M/V	Contact Phone: Contact Email: Yes	360.298.1661 bille pacificcatalyst.	COM				



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Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-17: 2018/2019 Renewal License Application

		Section 2 - A	uthorizati	on		
Communication with AM	ICO staff:				Yes	No
Does any person <u>other th</u> staff?	aan a licensee name	ed in this application have	authority to d	iscuss this license with AM(co	X
If "Yes", disclose the I	name of the individ	iual and the reason for t	his authorizatio	on:		
more space is needed, I	pleted by any <u>sole</u> please attach a sep	Sole Proprietor proprietorship who is apparate sheet with the req d for each licensee and e	plying for licer	se renewal. Entities shoul	d skip to Section	on 4.
] applicant	атплате	**			
Name:						
Mailing Addrage	•					
Mailing Address:				Manager of the second of the s		
City:			State:	ZIP	:	
			State:	ZIP	:	
City:			State:	ZIP	:	
City: Email: Contact Phone:	applicant	affiliate	State:	ZIP	:	
City: Email: Contact Phone: his individual is an:	applicant		State:	ZIP	:	
City: Email: Contact Phone: his individual is an: Name: Mailing Address:	applicant	affiliate	State:	ZIP		
City: Email: Contact Phone:	applicant	affiliate				

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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 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 Sertion 5

Partnerships may skip to	the second half of this page. Sole pr	oprietorships s	should skip to Section 5.				
Alaska CBPL Entity #:	109360						
You must ensure that you	are able to certify the following sta	tement before	signing your initials in the	box to the rip	ght: Initial		
	in good standing with CBPL and that						
 If the applicant is a correct the stock in the corpor If the applicant is a <u>lim</u> ownership interest of: If the applicant is a <u>par</u> 	ompleted by any <u>community</u> or <u>entity</u> or <u>entity or entity or en</u>	e is needed, ple must be compli resident, secret ring information ship, the follow	ease attach additional cometed for each stockholder tary, and managing office on must be completed for each must be completed for each must be completed.	opleted copies who owns 109 r. ach <i>member</i> w	of this page. Sor more of with an		
Entity Official Name:							
Title(s):	PRESIDENT	Phone:	360.298.1661	% Owned	56%		
Mailing Address:	P.O. BOX 3117				1+0/3		
City;	FRIDAY LARBOR	State:	WA	ZIP: C	18250		
Entity Official Name:	SHANNON CLAIRE IS	AILEY		· · · · · · · · · · · · · · · · · · ·			
Title(s):	SECRATERY &	Phone:	360:378.7123	% Owned:	50%		
Mailing Address:	P.6. Box 3117				1-73		
City:	FRIDAY HARBOR	State:	WA	ZIP: 9	82 <i>50</i>		
Entity Official Name:							
Title(s):		Phone:		% Owned:	T		
Mailing Address:			L1		<u> </u>		

State:

[Form AB-17] (rev 10/16/2017) License #4521 DBA Catalyst M/V

City:

Page 3 of 5



ZIP:



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Form AB-17: 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.		
The license was regularly operated during a specific season each year, for 8 or more hours each day.	X	X
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?		X
If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or co	nviction	ıs.
Section 7 – Alcohol Server Education		
This section must be completed only by the holder of a <u>beverage dispensary, club,</u> or <u>pub</u> license or <u>conditional cont</u> The holders of all other license types should skip to Section 8.	ractor's	permit.
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	BS
Form AB-171 (rev 10/16/2017)	5	

[Form AB-17] (rev 10/16/2017) License #4521 DBA Catalyst M/V

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

Form AB-17: 2018/2019 Renewal License Application

Section 8 - Certifications

Read each line belo	w, and then sign your	initials in the box to th	ne right of each staten	nent:	Initial
I certify that all curr	ent licensees (as defin	ed in AS 04.11.260) an	d affiliates have been	listed on this application	on.
I certify that in acco in the licensed busin	rdance with AS 04.11.4 ness.	50, no one other than	the licensee(s) has a d	irect or indirect financi	al interest
and I have not chang	not altered the function ged the business name what is currently on file	or the ownership (incl	uding officers, manage	ea of the licensed premers, general partners, o	ises,
I certify on behalf of any other form prov	myself or of the organ ided by AMCO is groun	ized entity that I under ds for rejection or den	rstand that providing a ial of this application o	false statement on thi or revocation of any lice	s form or ense issued.
3 AAC 304, and that provide all informati	liquor license renewal, this application, includ on required by the Alco e given to me by AMCO	ing all accompanying so pholic Beverage Contro	chedules and statement Board in support of t	nts, is true, correct, and his application and und	I complete. I agree to
Signature of licensee				\ 1	
BILL BAICE Printed name of licer	4		Jotary Public in and fo	nature of Notary Public r the State of Wish	euztr
₿ NOT.	MARIE STEWART ARY PUBLIC		Му	commission expires: _	2/7 / 2020
COMM	OF WASHINGTON ISSION EXPIRES UARY 7, 2020	scribed and sworn to b	efore me this <u>30</u> da	ay of <u>Novembe</u>	2017
License Fee:	\$ 500.00	Application Fee:	\$ 200.00	TOTAL:	\$ 700.00
Late Fee of \$500	.00 – if received or p	ostmarked after 01,	/02/2018:		
Miscellaneous Fe	es:				
GRAND TOTAL (i	f different than TOT	AL):			

[Form AB-17] (rev 10/16/2017) License #4521 DBA Catalyst M/V

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ALCOHOL MARIJUANA CONTROL OFFICE STATE OF ALASKA

From: bill@pacificcatalyst.com To: Oates, Sarah D (CED)

Cc: Alcohol Licensing, CED ABC (CED sponsored)

Re: Lic. 4521 DBA Catalyst M/V - Renewal and Reinstatement Clarification Subject:

Date: Tuesday, May 29, 2018 10:35:22 AM

Attachments: image001.png

Thank you, I understand. I will be sending a new license application for Westward.

Regards, Bill Bailey

From: Oates, Sarah D (CED)

Sent: Tuesday, May 29, 2018 9:29 AM

To: bill@pacificcatalyst.com

Cc: Alcohol Licensing, CED ABC (CED sponsored)

Subject: RE: Lic. 4521 DBA Catalyst M/V - Renewal and Reinstatement Clarification

Good morning,

To clarify: if you wish for Westward M/V to have a license to sell or serve alcohol, a new license application and fees must be submitted for that vessel. The last license for that vessel expired in 2004, so the option to reinstate and renew that license is not available.

The only application that will be considered during the June 12th meeting will be the renewal of the Catalyst M/V.

I apologize for any potential confusion.

Sarah Daulton Oates

Program Coordinator Alcohol & Marijuana Control Office

Phone: 907.269.0350 alcohol.licensing@alaska.gov marijuana.licensing@alaska.gov



Please consider the environment before printing this e-mail.

From: Alcohol Licensing, CED ABC (CED sponsored)

Sent: Friday, May 25, 2018 1:27 PM

To: bill@pacificcatalyst.com

Cc: Alcohol Licensing, CED ABC (CED sponsored) <alcohol.licensing@alaska.gov>; Oates, Sarah D

(CED) <sarah.oates@alaska.gov>

Subject: Lic. 4521 DBA Catalyst M/V - Renewal and Reinstatement Clarification

Good afternoon,

I am writing to you regarding your renewal application and request for reinstatement for Common Carrier – Seasonal Liquor License 4521, doing business as Catalyst M/V. During a review of your

application and request for reinstatement, it was noted that Westward M/V was written in on Page 1 of your Renewal Application in the "Doing Business As" section, as well as in the signature section of your request for reinstatement. The purpose of this email is to clarify that an application for renewal is specific to the license number listed on the application, so this application and request for reinstatement are only applicable for Catalyst M/V.

If you wish to apply for reinstatement and renewal for Westward M/V, a separate application and request for reinstatement would be required. I have attached the renewal application and request for reinstatement for License 4521 DBA Catalyst M/V for your reference, but no action is required from you for this license at this time.

Please let us know if you have any questions.

Sincerely,



TJ Zielinski

Occupational Licensing Examiner Alcohol & Marijuana Control Office 550 West 7th Avenue, Suite 1600 Anchorage, Alaska 99501