



MEMORANDUM

TO: Bob Klein, Chair, and Members of the
Alcoholic Beverage Control Board

DATE: August 14, 2018

FROM: Erika McConnell, Director

RE: 3323 Home Run Concessions

Requested Action: License renewal

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."

Staff Rec.: Approve the renewal with clarification of hours of service

Background: This recreational site license appears to meet the statutory requirements of the license type:

Sec. 04.11.210. Recreational site license.

(a) The holder of a recreational site license may sell beer and wine at a recreational site during and one hour before and after a recreational event that is not a school event, for consumption on designated areas at the site.

(b) The biennial fee for a recreational site license is \$800.

(c) In this section, "recreational site" includes a location where baseball games, car races, hockey games, dog sled racing events, or curling matches are regularly held during a season.

Although the facility appears to meet the requirements for the license type, it is not clear from the licensee's statement whether the hours of service are tied to the hours of the event. The board should direct the licensee to clarify their hours of service in relation to events on the premises.

Attachment: Renewal application



Alaska Alcoholic Beverage Control Board

Recreational Site License

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

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 recreational site 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.

Table with 4 columns: Field Name, Value, License #, Statute. Rows include Licensee (Home Run Concessions LLC), License Type (Recreational Site - Seasonal), Doing Business As (Home Run Concessions), Premises Address (901 Mystery Ave), Local Governing Body (City of Wasilla), and Community Council (None).

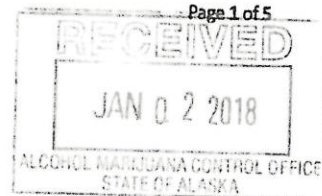
Table with 4 columns: Field Name, Value, State, ZIP. Rows include Mailing Address (2050 N. Meadow Lakes Dr.), City (Wasilla), State (AK), and ZIP (99623).

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.

Table with 4 columns: Field Name, Value, Business Phone, Contact Email. Rows include Point of Contact (Robert Pevan), Contact Phone (907-232-3039), Business Phone (907-232-3039), and Contact Email (kpevan2007@mtaonline.net).

Seasonal License? [X] Yes [] No

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





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Section 2 - Authorization

Communication with AMCO staff:

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? Yes No [] [X]

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

Section 3 - Sole Proprietor Ownership Information

This section must be completed by any sole proprietorship who is applying for license renewal. Entities should skip to Section 4. 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

Form with fields: Name, Mailing Address, City, State, ZIP, Email, Contact Phone

This individual is an: [] applicant [] affiliate

Form with fields: Name, Mailing Address, City, State, ZIP, Email, Contact Phone





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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 visiting 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 #: 123114

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

I 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. [Initials: KP]

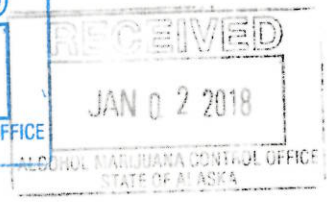
This subsection must be completed by any community or entity, including a corporation, limited liability company, partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

- 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 Name: Robert Pevan
Title(s): Member
Mailing Address: 2050 N. Meadow Lakes Dr.
City: Wasilla
State: AK
ZIP: 99623
Phone: 907-232-3204
% Owned: 50

Entity Official Name: David Stanberry
Title(s): Member
Mailing Address: ? 2401 Lewis Dr.
City: Wasilla
State: AK
ZIP: 99623
Phone: 907-355-7602
% Owned: 50

Entity Official Name:
Title(s):
Mailing Address:
City:
State:
ZIP:





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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:

Table with 2 columns (2016, 2017) and 4 rows of license operation descriptions. Includes checkboxes for 'The license was regularly operated continuously throughout each year.', 'The license was regularly operated during a specific season each year.', 'The license was only operated to meet the minimum requirement of one time during the calendar year.', and 'The license was not operated at all during the calendar year.'.

Section 6 - Violations and Convictions

Applicant violations and convictions in calendar years 2016 and 2017:

Table with 2 columns (Yes, No) and 2 rows of violation questions. Includes checkboxes for 'Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2016 or 2017?' and '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 convictions.

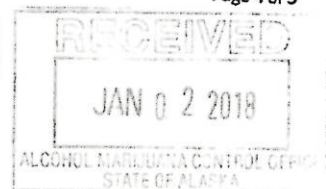
Section 7 - Alcohol Server Education

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

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a patron 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.

Initials

RP





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Section 8 - Certifications

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

- 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.
I am submitting as part of this application a written statement that meets the attached Recreational Site Statement Guidelines, for review by the Alcoholic Beverage Control Board.

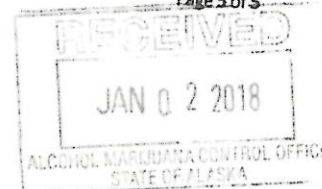
As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the 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: Robert Pevan
Printed name of licensee: Robert Pevan

Notary Public section with signature of Jennifer Sharon, Notary Public - Arizona, My Comm. Expires Oct 10, 2020

Subscribed and sworn to before me this 29 day of Dec, 2017.

Table with columns for License Fee (\$400.00), Application Fee (\$200.00), TOTAL (\$600.00), and GRAND TOTAL (600.00).



TO: AMCO

DECEMBER 29, 2017

Hours of operation for Home Run Concessions LLC are Mon-Thurs 6pm-11pm. Occasional ^{Friday and} Weekend times Due to tournaments include 8am-8pm? Depending on game times.

Rec site License is used to serve beer & wine for adult slow pitch softball.

Season opens mid may and can run to mid (or thru the end) of September.

Thank you!
Kari Pevan
Home Run Concessions LLC
2050 N. Meadow Lakes Dr.
Wasilla, AK. 99623
907-232-3039
Kpevan2007@mtaonline.net

