

Notice of Violation

(3AAC 304.525)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

Date: 12-27-2017

License #/Type: Package Store 1309

Licensee: Anchor River Inn Inc.

Address: 34358 Old Sterling Hwy, Anchor PT, AK

DBA: Anchor River Inn

AMCO Case #: AB17-0794

This is a notice to you as licensee that an alleged violation has occurred. If the Alcoholic Beverage Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

On 12-13-2017 an inspection was conducted at your establishment. Belva Olsen was asked to provide proof of alcohol server education. Olsen stated she had left her card at home but did have one.

Your attention is directed to AS04.21.025: Server education, 3AAC304.465: Server education, AS04.21.030: Responsibility of licensees, agents, and employees, and AS04.16.150: Licensee responsible for violations.

As part of your response, please send a copy of Olsen's server education card.

You are directed to respond in writing to this Notice of Violation within 10 days of receipt to explain what action you have taken to prevent a re-occurrence of this violation. FAILURE TO RESPOND TO THIS NOTICE OF VIOLATION WITHIN 10 DAYS WILL RESULT IN YOUR APPEARANCE, EITHER IN PERSON OR TELEPHONICALLY, BEFORE THE ABC BOARD AT THEIR NEXT REGULARLY SCHEDULED BOARD MEETING.

***Please send your response to the address below and include your alcohol license number in your response.**

3 AAC 304.525 (B) provides that upon receipt of a Notice of Violation, a licensee may request to appear before the Director and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice and the Director must grant an appearance within ten days after receipt of a request. A Licensee shall respond, either orally or in writing, to the Notice.

Alcohol & Marijuana Control Office
ATTN: Enforcement
550 W. 7th Ave, Suite 1600
Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issuing Investigator: J. Hamilton

Received by:

SIGNATURE: *JR Sam*

SIGNATURE:

Delivered VIA: Mail

Date:

7013 2250 0000 9617 6412

January 3, 2018

Anchor River Inn / liquor license # 1309
PO Box 154
34358 Old Sterling Hwy
Anchor Point, AK 99556

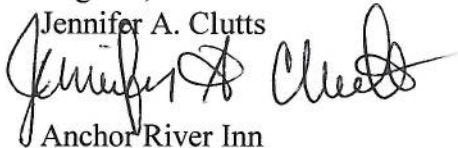
Alcohol & Marijuana Control Office
ATTN: Enforcement
550 W. 7th Ave, Suite 1600
Anchorage, AK 99501

To Whom it may concern,

On December 13, 2017 when Mr. Hamilton was conducting his investigation we provided a copy of Ms. Olsen's current TAPS card. We sent her home to retrieve her photo ID and TAPS card as we did not have a copy of her ID in her file. We have reminded all current employees who serve and sell alcohol that it is their responsibility to carry their TAPS card and ID while at work. We will be doing our own spot checks for compliance. We will also be stressing this when training new employees in the future.

Regards,

Jennifer A. Clutts



Anchor River Inn



TAPPS
Professionals
FOR THE STATE OF ALASKA

CERTIFICATE # 154902

Name Belva Olsen

[REDACTED]

Belva Olsen

Expires on 14 FEB 2020

800-485-6429 or
907-274-6136
www.alaska.gov

RECEIVED
JAN 08 2018
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

ABC Board
5848 E. Tudor Rd
Anchorage, AK 99507

December 16, 2018

To whom it may concern:

The Anchor River Inn, Inc. (ARI) is a privately held corporation providing lodging, dining, and retail services at Anchor Point, Alaska. The ARI was formed in 1983 out of an already existing partnership that had been providing the same services as far back as 1959.

The ARI currently offers 17 motel rooms as well as a full service restaurant. More information about the rooms and other offerings, including the current restaurant menu, can be found on our website: www.anchorriverinn.com

1. WE ENCOURAGE TOURISM BY OFFERING ROOMS AND DINING SERVICES TO THE TRAVELING PUBLIC. (SEE PARAGRAPH 2)
2. THE FACILITY WAS CONSTRUCTED AND REMODELED ACCORDING TO THE PLANS SUBMITTED TO YOUR DEPARTMENT, AT DIFFERENT TIMES OVER THE LAST 30 OR MORE YEARS, USING MOSTLY WOOD AND NAILS. (SEE PARAGRAPH 1)
3. OPERATED BY ANCHOR RIVER INN, INC. AN ALASKAN CORPORATION. (SEE PARAGRAPH 1)
4. 17 ROOMS ARE OFFERED. **NO KITCHENS OR ALCOHOL PROVIDED IN THE ROOMS.** YES MICROWAVES. (SEE PARAGRAPH 2)
5. FULL SERVICE DINING FACILITY. (SEE PARAGRAPH 2)
6. ADDITIONAL AMENITIES INCLUDE A RIVER. (SEE COMPANY NAME)

Sincerely,



Jesse R. Clutts
Secretary



Alaska Alcoholic Beverage Control Board

Beverage Dispensary – Tourism License

Form AB-17d: 2019/2020 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, 2018. 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. Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees that an application will be considered complete, or that a license will be renewed.

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.

Licensee:	Anchor River Inn Inc.	License #:	1309
License Type:	Beverage Dispensary - Tourism	Statute:	AS 04.11.400(d)
Doing Business As:	Anchor River Inn		
Premises Address:	34358 Old Sterling Highway, Anchor Point		
Local Governing Body:	Kenai Peninsula Borough		
Community Council:	None		

Mailing Address:	PO Box 154		
City:	Anchor Point	State:	AK
		ZIP:	99556

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.

Contact Licensee:	Jesse Clatts	Contact Phone:	907-399-3237
Contact Email:	jesse@anchorriverinn.com		

Optional: If you wish for AMCO staff to communicate with individual who is not a licensee named on this form (eg: legal counsel) about this application and other matters pertaining to the license, please provide that person's contact information in the fields below.

Name of Contact:	Kyle Akee	Contact Phone:	907-299-8242
Contact Email:	Kyleakee@yahoo.com		

AMCO



Section 2 - Entity or Community Ownership Information

This top 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). This number is neither your EIN/tax ID number, nor your business license number. You may view your entity's status or find your CBPL entity number by using the following site: https://www.commerce.alaska.gov/cbp/main/search/entities

General partnerships and local governments should skip to the second half of this page. Licensees who directly hold a license as an individual or individuals should skip to Section 3.

Alaska CBPL Entity #: 291120

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.

[Handwritten initials]

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.

Important Note: The information provided in the below fields (including spelling of names, specific titles, and percentages held) must match that which is listed with CBPL. If one individual holds multiple titles mentioned in the bullets above, all titles must be listed for that individual on this application and with CBPL. Failure to list all required titles constitutes an incomplete application.

Table with 5 columns: Name of Official, Title(s), Phone, % Owned, Mailing Address, City, State, ZIP. Row 1: Robert Clutts, President, 907-299-0855, 70, PO Box 154, Anchor Point, AK, 99556

Table with 5 columns: Name of Official, Title(s), Phone, % Owned, Mailing Address, City, State, ZIP. Row 1: Singonne Clutts, Vice President, 907-299-0855, 0, PO Box 154, Anchor Point, AK, 99556

Table with 5 columns: Name of Official, Title(s), Phone, % Owned, Mailing Address, City, State, ZIP. Row 1: Jesse Clutts, Secretary, 907-399-3237, 25, PO Box 154, Anchor Point, AK, 99556

DEC 24 2018



Form AB-17d: 2019/2020 Tourism Renewal License Application

Section 3 – Sole Proprietor Ownership Information

This section must be completed by any licensee who directly holds the license as an individual or multiple individuals and is applying for license renewal. If more space is needed, please attach a separate sheet that includes all of the required information. Entities should skip to Section 4. The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: applicant affiliate (spouse)

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

This individual is an: applicant affiliate (spouse)

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

Section 4 – 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 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 set forth in AS 04.21.025 and 3 AAC 304.465.

Section 5 – License Operation

Check a single box for each calendar year that best describes how this liquor license was operated:

2017 2018

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 240 total hours each calendar year. 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 240 total hours each year, 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, unless a complete copy of the form (including fees) has already been submitted for that year.



Form AB-17d: 2019/2020 Tourism Renewal License Application

Section 6 – Violations and Convictions

Applicant violations and convictions in calendar years 2017 and 2018:

Yes No

Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2017 or 2018?

Yes No

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 2017 or 2018?

Yes No

If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or convictions.

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 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 approved and on file with the Alcoholic Beverage Control (ABC) 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 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 or AMCO staff 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.

Jesse R. Cluffs
Signature of licensee

Jesse R. Cluffs
Printed name of licensee

Marilyn Damvel
Signature of Notary Public
Marilyn Damvel
Notary Public - State of Florida
Commission # PF 20355
My Comm. Expires Jun 23, 2019
My commission expires: _____
Notary Public in and for the State of Florida

Subscribed and sworn to before me this 16th day of December, 2018.

Seasonal License? Yes No

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

License Fee:	\$ 2500.00	Application Fee:	\$ 300.00	TOTAL:	\$ 2800.00
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					

From: jesse@anchorriverrinn.com
To: [Alcohol Licensing, CED ABC \(CED sponsored\)](#)
Subject: RE: Incomplete Renewal Applications - License #1309 and #2313 DBA Anchor River Inn
Date: Sunday, January 20, 2019 2:19:58 PM
Attachments: [image001.png](#)

TJ Zielinski,

Please attach this email to license applications 1309 and 2313 for Anchor River Inn, Inc. as the required listing of violations for section 6. Thank you.

On December 13th 2017 during an inspection an employee of the Anchor River Inn was asked to provide proof of Alcohol Server Training. Management provided a copy of the employee's TAP card but the employee had to go home and return with a photo identification. A Notice of Violation with AMCO case #AB17-0794 was subsequently received and responded to.

Sincerely,
Jesse R. Clutts

From: Alcohol Licensing, CED ABC (CED sponsored) [mailto:alcohol.licensing@alaska.gov]
Sent: Thursday, January 17, 2019 5:27 PM
To: jesse@anchorriverrinn.com; Alcohol Licensing, CED ABC (CED sponsored)
Cc: Brittnay Akee
Subject: RE: Incomplete Renewal Applications - License #1309 and #2313 DBA Anchor River Inn

Good afternoon Jesse,

I have received your revised documents and see that most corrections have been made, but there will be some additional information required. If you answer "yes" to any of the questions in Section 6 – Violations and Convictions, a separate page that lists all Notices of Violation that were received during 2017 or 2018 is required for each application.

Thank you,



TJ Zielinski

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

From: jesse@anchorriverrinn.com <jesse@anchorriverrinn.com>
Sent: Wednesday, January 16, 2019 3:56 PM
To: Alcohol Licensing, CED ABC (CED sponsored) <alcohol.licensing@alaska.gov>

Cc: Brittnay Akee <brittnayshouse@yahoo.com>

Subject: RE: Incomplete Renewal Applications - License #1309 and #2313 DBA Anchor River Inn

Alcohol Licensing,

Thank you for taking the time to notify us of the errors in our renewal applications. I believe I have made the required corrections on the attached applications. Please let me know if there is anything else that is required.

Sincerely,
Jesse Clutts

From: Alcohol Licensing, CED ABC (CED sponsored) [<mailto:alcohol.licensing@alaska.gov>]
Sent: Wednesday, January 16, 2019 1:07 PM
To: jesse@anchorriverrinn.com
Cc: Alcohol Licensing, CED ABC (CED sponsored)
Subject: Incomplete Renewal Applications - License #1309 and #2313 DBA Anchor River Inn

Good morning,

I have received and reviewed your liquor license renewal applications. At this time, your applications are considered incomplete. Please review the attached documents for instructions on how to complete your applications.

Completed documents (with the exception of fingerprint cards or payments) may be scanned and emailed, and questions or concerns may be sent to alcohol.licensing@alaska.gov. **Please submit all documents to complete your applications within seven (7) days from the date of this notice. If your applications are still incomplete after seven (7) days, they will be assessed an additional \$500.00 late fee each, per AS 04.11.270.** Any application that is still incomplete at midnight on February 28, 2019 will be expired, per AS 04.11.540.

Thank you for your immediate diligence toward completing your applications.

Sincerely,



TJ Zielinski

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