

Department of Commerce, Community, and Economic Development

ALCOHOL AND MARIJUANA CONTROL OFFICE 550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: July 9, 2019

FROM: Erika McConnell, Director RE: 5780 Jazz Bistro "Havana Nights"

Requested Action:

Requested New license application

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(a): "A local governing body may protest the issuance, renewal, relocation, or transfer to another person of a license by sending the board and the applicant a protest and the reasons for the protest within 60 days of receipt from the board of notice of filing of the application... The board shall consider a protest and testimony received at a hearing conducted under AS 04.11.510(b)(2) or (4) when it considers the application... If an application or continued operation is protested, the board shall deny the application or continued operation unless the board finds that the protest is arbitrary, capricious, and unreasonable."

AS 04.11.510(b)(2): "The board may review an application for the issuance, renewal, transfer of location, or transfer to another person of a license without affording the applicant notice or hearing, except...(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;"

Staff Rec.: Hold a public hearing; rescind previous approval, and deny the application with a 180 day

abeyance

Background: At the last meeting, the board approved this restaurant or eating place license with delegation. After the meeting, staff received a timely protest from the City of Fairbanks pending issuance of a certificate of occupancy.

The licensee should be notified that under 3 AAC 304.145(h), this abeyance period may not be extended or renewed.

Attachments: City of Fairbanks protest

New license application

Office of the City Clerk

800 Cushman Street

Fairbanks, AK 99701

(907)459-6702 Fax (907)459-6710

May 15, 2019

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

Mr. Zielinski:

At the regularly-scheduled meeting of May 13, 2019, the Fairbanks City Council voted to **PROTEST** the following new Restaurant/Eating Place liquor license and Restaurant Designation Permit (RDP) until a Certificate of Occupancy has been issued by the City Building Official:

License Type: Restaurant/Eating Place, License #5780

DBA: Jazz Bistro "Havana Nights"

Licensee/Applicant: Bluenote Create, Inc.

Physical Location: 529 4th Avenue, Fairbanks, Alaska

I will notify AMCO when the City protest has been lifted. Should you need further information, please do not hesitate to contact me.

Sincerely,

D. Danyiette Snider, CMC

Fairbanks City Clerk

cc: File

Anna Lenora Byam, Bluenote Create, Inc. Agent



Alaska Alcoholic Beverage Control Board

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

Form AB-00: New License Application

What is this form?

This new license application form is required for all individuals or entities seeking to apply for a new liquor license. Applicants should review **Title 04** of **Alaska Statutes** and **Chapter 304** of the **Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260 and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 - Establishment and Contact Information

| Enter information for the bu | siness seeking to be li | ensed. | | | | | |
|------------------------------|-------------------------|--------------------------------|---|-------------|---------------------------------------|-------|-------|
| Licensee: | Bluenote Cre | ate Inc | | | | | |
| License Type: | Restaurant E | ating Place |) | Statutory R | Statutory Reference: | | |
| Doing Business As: | Jazz Bistro "F | lavana Nig | hts" | J | | | |
| Premises Address: | 529 4th Ave | M-1/2-2-1- | | ****** | · | | |
| City: | Fairbanks | | State: | AK | 100 - 00 | ZIP: | 99701 |
| Local Governing Body: | City of Fairba | nks | | | | | |
| Community Council: | Fairbanks | | 110000000000000000000000000000000000000 | | · · · · · · · · · · · · · · · · · · · | | |
| | · | | | | | | |
| Mailing Address: | PO BOX 6058 | 34 | | | | | |
| City: | Fairbanks | Fairbanks State: AK ZIP: 99706 | | | | 99706 | |
| | | | | | | | |
| Designated Licensee: | Anna Lenora | Byam | | | | | |
| Contact Phone: | 9079879611 | 079879611 Business Phone: | | | | | |
| Contact Email: | jazzbistro.on4 | th@gmail. | com | | | | |
| Yes No Seasonal License? | | | | | | | |
| | | OFFICE U | SE ONLY | | | | |
| Complete Date: | | License Years: | | | License | e #: | 5780 |
| Board Meeting Date: | | | Transo | action #: | 10 | 379 | 69 |
| Issue Date: | t | | BRE: | | | 72 | * |

[Form AB-00] (rev 10/10/2016)

AMCO



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Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

| Section 2 – Premises Information | | | | | | |
|--|--|------------------|--|-------------------|--|--|
| | section 2 – Pre | emises in | ormation | | | |
| Premises to be licensed is: | | | | | | |
| ✓ an existing facility | a new building | a propos | ed building | | | |
| The next two questions mus | st be completed by <u>beverage disper</u> | nsary (including | tourism) and package sto | <u>re</u> applica | ants only: | |
| What is the distance of t | he shortest pedestrian route from t | the public entra | nce of the building of you | r propose | d premises to | |
| the outer boundaries of | the nearest school grounds? Include | e the unit of me | easurement in your answe | er. | | |
| | | | | | | |
| What is the distance of t | he shortest pedestrian route from t e nearest church building? Include t | he public entra | nce of the building of you surement in your answer. | r propose | d premises to | |
| | | | | | | |
| Harris and the second s | | | 1.777870000 | | | |
| | cotion 2 Cala Busunia | 1 0 | | | | |
| 3 | ection 3 – Sole Proprie | etor Uwne | rsnip intormatio | n | | |
| f more space is needed, ple | eted by any <u>sole proprietor</u> who is a ase attach a separate sheet with the ust be completed for each licensee a | e required info | mation. | to Section | 1 4. | |
| The following information in | ust be completed for each licensee a | and each amiliat | e (spouse). | | | |
| This individual is an: | applicant affiliate | | | | | |
| Name: | | | *************************************** | | | |
| Address: | | | | 0.000 | | |
| City: | | State: | | ZIP: | | |
| This individual is an: | applicant affiliate | | | | | |
| | | *** | | | Marie Commence and the commence of the commenc | |
| Name: | | 3200.2400 | | | | |
| Address: | | | | | | |
| City: | | State: | | ZIP: | | |
| | Land to the same of the same o | | | | L | |



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Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

Section 4 - Entity Ownership Information

This section must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 5. If more space is needed, please attach a separate sheet with the required information.

- 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: | Anna Lenora Byam | | | | ***** | |
|------------------|---|--------|----------|------------|---------|-----|
| Title(s): | President, VP, Sec, owner Phone: 9079879611 | | % Owned: | | 100 | |
| Address: | Po Box 60584 | | | | | |
| City: | Fairbanks | State: | AK | ZIP: | 997 | 706 |
| | | | | | | |
| Entity Official: | | | | | | |
| Title(s): | | Phone: | | % Owr | ned: | |
| Address: | | | | | | |
| City: | | State: | | ZIP: | | |
| | | | | | • | |
| Entity Official: | | | | | | |
| Title(s): | | Phone: | | % Owr | red: | |
| Address: | | | | | | |
| City: | | State: | | ZIP: | | |
| | | | | LANCES NAV | | |
| Entity Official: | | | | | 200,000 | |
| Title(s): | | Phone: | | % Own | ed: | |
| Address: | | | | | | |
| City: | | State: | | ZIP: | | |

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Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

| Registered Agent: Anna Lenora Byam Agent's Phone: 9079879611 Agent's Mailing Address: PO BOX 60584 City: Fairbanks State: Alaska ZIP: 99706 Residency of Agent: Yes No Is your corporation or LLC's registered agent an individual resident of the state of Alaska? Section 5 - Other Licenses Ownership and financial interest in other alcoholic beverage businesses: Yes No Does any representative or owner named in this application have any direct or indirect financial interest in any other alcoholic beverage business in or is licensed in Alaska? If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s): Restaurant Eating Place License, License # 5585, Bluenote Create Inc dba Jazz Bistro On 4th, owner Anna Lenora Byam Section 6 - Authorization Communication with AMCO staff: Yes No Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? If "Yes", disclose the name of the individual and the reason for this authorization: | | I | T | T | | | |
|---|--------------------------------|-------------------------|--------------------------|------------------------|-------------------|---|----|
| Agent's Mailing Address: PO BOX 60584 City: Fairbanks State: Alaska ZIP: 99706 Residency of Agent: Yes No Is your corporation or LLC's registered agent an individual resident of the state of Alaska? Section 5 - Other Licenses Ownership and financial interest in other alcoholic beverage businesses: Yes No Does any representative or owner named in this application have any direct or indirect financial interest in any other alcoholic beverage business in or is licensed in Alaska? If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s): Restaurant Eating Place License, License # 5585, Bluenote Create Inc dba Jazz Bistro On 4th, owner Anna Lenora Byam Section 6 - Authorization Communication with AMCO staff: Yes No Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | DOC Entity #: | 10035398 | AK Formed Date: | 2/01/16 | Home State: | Alask | а |
| City: Fairbanks State: Alaska ZIP: 99706 Residency of Agent: Yes No Is your corporation or LLC's registered agent an individual resident of the state of Alaska? | Registered Agent: | Anna Lenora | Byam | Agent's Phone: | 907987961 | 1 | |
| Residency of Agent: Yes No Is your corporation or LLC's registered agent an individual resident of the state of Alaska? Section 5 - Other Licenses Downership and financial interest in other alcoholic beverage businesses: Yes No Does any representative or owner named in this application have any direct or indirect financial interest in any other alcoholic beverage business in or is licensed in Alaska? If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s): Restaurant Eating Place License, License # 5585, Bluenote Create Inc dba Jazz Bistro On 4th, owner Anna Lenora Byam Section 6 - Authorization Communication with AMCO staff: Yes No Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | Agent's Mailing Address: | PO BOX 605 | 84 | | | | |
| Is your corporation or LLC's registered agent an individual resident of the state of Alaska? Section 5 - Other Licenses Section 5 - Other Licenses | City: | Fairbanks | State: | Alaska | ZIP: | 99706 | 3 |
| Section 5 – Other Licenses Ownership and financial interest in other alcoholic beverage businesses: Yes No Does any representative or owner named in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska? If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s): Restaurant Eating Place License, License # 5585, Bluenote Create Inc dba Jazz Bistro On 4th, owner Anna Lenora Byam Section 6 – Authorization Communication with AMCO staff: Yes No Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | Residency of Agent: | | | | | Yes | No |
| Does any representative or owner named in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska? If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s): Restaurant Eating Place License, License # 5585, Bluenote Create Inc dba Jazz Bistro On 4th, owner Anna Lenora Byam Section 6 – Authorization Communication with AMCO staff: Yes No Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | ls your corporation or LL | C's registered agent a | n individual resident of | the state of Alaska? | | 1 | |
| Does any representative or owner named in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska? If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s): Restaurant Eating Place License, License # 5585, Bluenote Create Inc dba Jazz Bistro On 4th, owner Anna Lenora Byam Section 6 – Authorization Communication with AMCO staff: Yes No Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | | Sect | ion 5 – Other L | icenses | | 779879611 IP: 99706 Yes No Yes No I interest in I licensed in Alaska, which The Anna Lenora Byam Yes No | |
| any other alcoholic beverage business that does business in or is licensed in Alaska? If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s): Restaurant Eating Place License, License # 5585, Bluenote Create Inc dba Jazz Bistro On 4th, owner Anna Lenora Byam Section 6 – Authorization Communication with AMCO staff: Yes No Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | Ownership and financial intere | st in other alcoholic l | peverage businesses: | | | Yes | No |
| Communication with AMCO staff: Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | | | | | ncial interest in | 1 | |
| Section 6 – Authorization Communication with AMCO staff: Yes No Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | license number(s) and licen | se type(s): | | | | | ch |
| Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | Restaurant Eating Place Lic | ense, License # 5585 | , Bluenote Create Inc d | ba Jazz Bistro On 4th | , owner Anna Leno | ra Byam | |
| Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? | | Sec | tion 6 – Author | ization | | | |
| AMCO staff? | Communication with AMCO sta | off: | | | | Yes | No |
| If "Yes", disclose the name of the individual and the reason for this authorization: | | an a licensee named | in this application have | authority to discuss t | his license with | | 1 |
| | If "Yes", disclose the name of | of the individual and t | the reason for this auth | orization: | | | |
| | | | PANA. | 1 V V (1) The Lands | | | |

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Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

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 proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application. | |
| I certify that all proposed licensees have been listed with the Division of Corporations. | \$ |
| I certify 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. | AB |
| I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465. | 9 |
| I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application. | 96 |
| As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC that this application, including all accompanying schedules and statements, is true, correct, and complete. | 304, and |
| Signature of licensee Signature of Notary Public | |
| Anna Lenora Byam Printed name of licensee Notary Public in and for the State of Alas Lea | <u>/</u> . |
| My commission expires: OF LOU | 12027 |
| STATE OF ALASKA NOTARY PUBLIC B. Withrow My Commission Ends July 4, 2022 | _ 20 <u> Q</u> . |



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Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

What is this form?

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

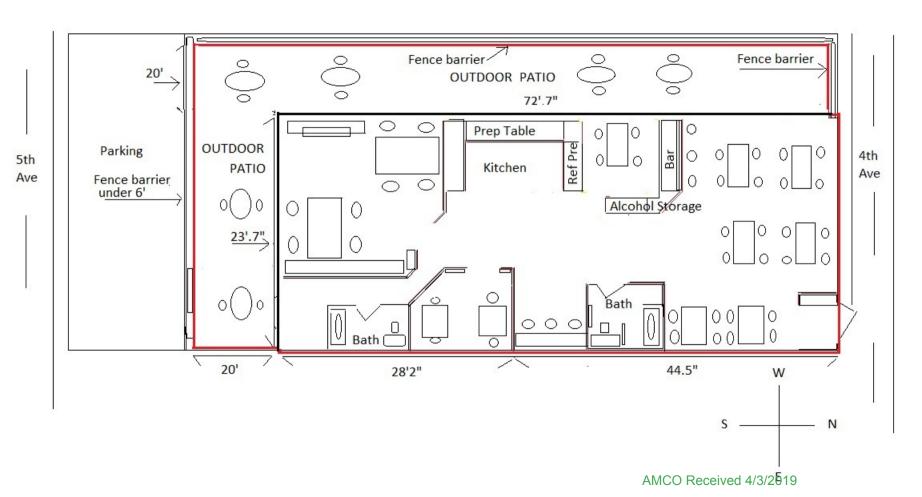
This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

| | Yes | No |
|--|----------|----|
| I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form. | √ | |

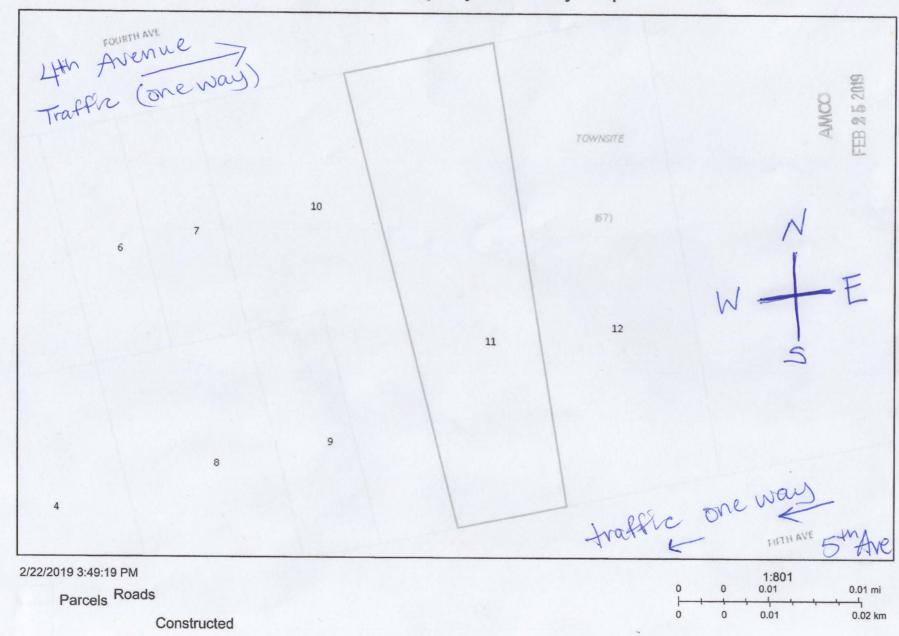
Section 1 - Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

| Licensee: | Bluenote Create Inc License Number: | | | | | | |
|--------------------|-------------------------------------|----------|--------|----------|--|--|--|
| License Type: | Restaurant Eating Place | - Marian | | J | | | |
| Doing Business As: | Jazz Bistro "Havana Nights" | | | | | | |
| Premises Address: | 529 4th Avenue | | | 1,50,500 | A STATE OF THE STA | | |
| City: | Fairbanks | State: | Alaska | ZIP: | 99701 | | |



Fairbanks Property Summary Map



Restaurant Designation Permit Application:

More Details outside patio dining; Security Measures:

Customers can dine outside during the summer season.

The area will be fenced, and the proper alcohol signage provided by AMCO of the Alaska Statutes on Alcohol will be posted.

No one can leave the area with any alcohol.

All staff will monitor and make sure patrons are aware of those regulations.

Everyone will be ID, and no one under 21 Years of age will be served alcohol.

The fence is less than 6 feet. Outdoor seating wraps around the building; it is "L" shaped. There is only one outdoor patio seating area.

There will be 6 to 7 outdoor patio tables.