



MEMORANDUM

TO: Bob Klein, Chair, and Members of the Alcoholic Beverage Control Board DATE: November 12, 2019

FROM: Erika McConnell, Director RE: 5844 A Taste of Alaska Lodge

Requested Action: 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 04.11.225(c): “In this section, “outdoor recreation lodge” means a licensed business that provides overnight accommodations and meals, is primarily involved in offering opportunities for persons to engage in outdoor recreation activities, and has a minimum of two guest rooms.”

Staff Rec.: Approve the new license application

Background: This is a new license application for an Outdoor Recreation Lodge license in the Fairbanks North Star Borough. The applicant snow shoeing, northern lights tours, and dog mushing. They have 12 rooms available for rent and provide meals to their overnight guests.

Attachment: Outdoor Recreation Lodge Statement
AB-00
AB-02



Alaska Alcoholic Beverage Control Board

Outdoor Recreation Lodge Statement

A new, transfer, or renewal application for an outdoor recreation lodge license must be accompanied by a written statement that explains how the establishment meets the requirements listed under AS 04.11.225.

If you are applying for an Outdoor Recreation Lodge license that will be over the population limitations set forth in AS 04.11.400, Section 3 is required to show how your establishment meets the requirement under AS 04.11.400(j).

This document must be submitted to AMCO's main office before any Outdoor Recreation Lodge license application will be reviewed.

Section 1 – Establishment Information

Enter information for the business seeking a new Outdoor Recreation Lodge License.

Doing Business As:	A Taste of Alaska Lodge
Licensee	A Taste of Alaska Lodge, LLC

Section 2 – Outdoor Recreation Lodge Statement

2.1 Does your establishment provide overnight accommodations and meals?

YES

NO

If so, how many rooms does your establishment have for rent?

12

2.2 What outdoor recreational activities are offered or advertised through your establishment?

We offer snow shoeing, northern lights tours and dog mushing.

Section 3 – Encouragement of Tourist Trade (Answer as Applicable)

3.1 How will the issuance of this license encourage the construction or improvement of a business relating to the tourist trade?

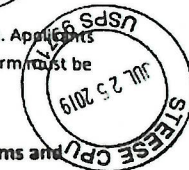
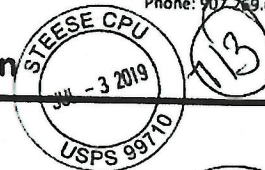




300 W. 7th Avenue, June 1999
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 alcohol.licensing@alaska.gov
 https://www.commerce.alaska.gov/web/amco
 Phone: 907-269-0350

Alaska Alcoholic Beverage Control Board

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 business seeking to be licensed.

Licensee:	A TASTE OF ALASKA LODGE, LLC.		
License Type:	OUTDOOR RECREATIONAL LODGE	Statutory Reference:	AS 04.11.225
Doing Business As:	A TASTE OF ALASKA LODGE		
Premises Address:	551 EBERHARDT RD		
City:	FAIRBANKS	State:	ALASKA ZIP: 99712
Local Governing Body:	FAIRBANKS NORTH STAR BOROUGH		
Community Council:			

Mailing Address:	551 EBERHARDT RD		
City:	FAIRBANKS	State:	ALASKA ZIP: 99712

Designated Licensee:	KORY W. EBERHARDT		
Contact Phone:	907.460.4035	Business Phone:	907.488.7855
Contact Email:	KORY@ATASTE OFALASKA LODGE.COM		

Seasonal License? Yes No If "Yes", write your six-month operating period: _____

OFFICE USE ONLY			
Complete Date:	License Years:	License #:	5844
Board Meeting Date:	Transaction #:	1094711	
Issue Date:	BRE:		



Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

Section 2 – Premises Information

Premises to be licensed is:

an existing facility

a new building

a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer.

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.

Section 3 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. 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

Name:					
Address:					
City:		State:		ZIP:	

This individual is an: applicant affiliate

Name:					
Address:					
City:		State:		ZIP:	



Alaska Alcoholic Beverage Control Board

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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: KORY EBERHARDT
Title(s): MANAGER, Member
Phone: 907.488.7855
% Owned: 100
Address: 551 EBERHARDT RD
City: FAIRBANKS State: ALASKA ZIP: 99712

Entity Official:
Title(s):
Phone:
% Owned:
Address:
City: State: ZIP:

Entity Official:
Title(s):
Phone:
% Owned:
Address:
City: State: ZIP:

Entity Official:
Title(s):
Phone:
% Owned:
Address:
City: State: ZIP:





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.

DOC Entity #:	10010108	AK Formed Date:	01/22/13	Home State:	ALASKA
Registered Agent:	KORY EBERHARDT		Agent's Phone:	907.488.7855	
Agent's Mailing Address:	551 EBERHARDT RD				
City:	FAIRBANKS	State:	ALASKA	ZIP:	99712

Residency of Agent: FAIRBANKS, ALASKA 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 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):

KORY EBERHARDT, OWNER, A TASTE OF ALASKA LODGE, LODGING BUSINESS, LICENSE #4214, RESTAURANT/EATING PLACE

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:

• DEBBIE EBERHARDT, OFFICE MANAGER • JO KUCHELE, LAWYER
• KRISTINA MILLER, LAWYER



330 WEST AVENUE, SUITE 2000
 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-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.

KE

I certify that all proposed licensees have been listed with the Division of Corporations.

KE

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.

KE

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.

KE

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

KE

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 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete.

[Handwritten Signature]

Signature of licensee

[Handwritten Signature]

Signature of Notary Public

Kory Eberhardt

Printed name of licensee

Notary Public in and for the State of

Alaska

My commission expires:

January 1, 2020

Subscribed and sworn to before me this

2

day of

July

, 20*19*.



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-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.

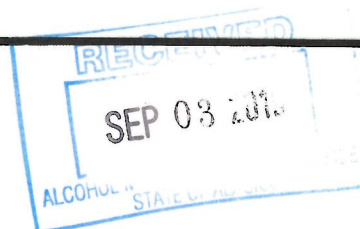
Yes No

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:	A TASTE OF ALASKA LODGE, LLC	License Number:	
License Type:	OUTDOOR RECREATION LODGE		
Doing Business As:	A TASTE OF ALASKA LODGE, LLC		
Premises Address:	551 EBERHARDT RD		
City:	FAIRBANKS	State:	ALASKA
		ZIP:	99712



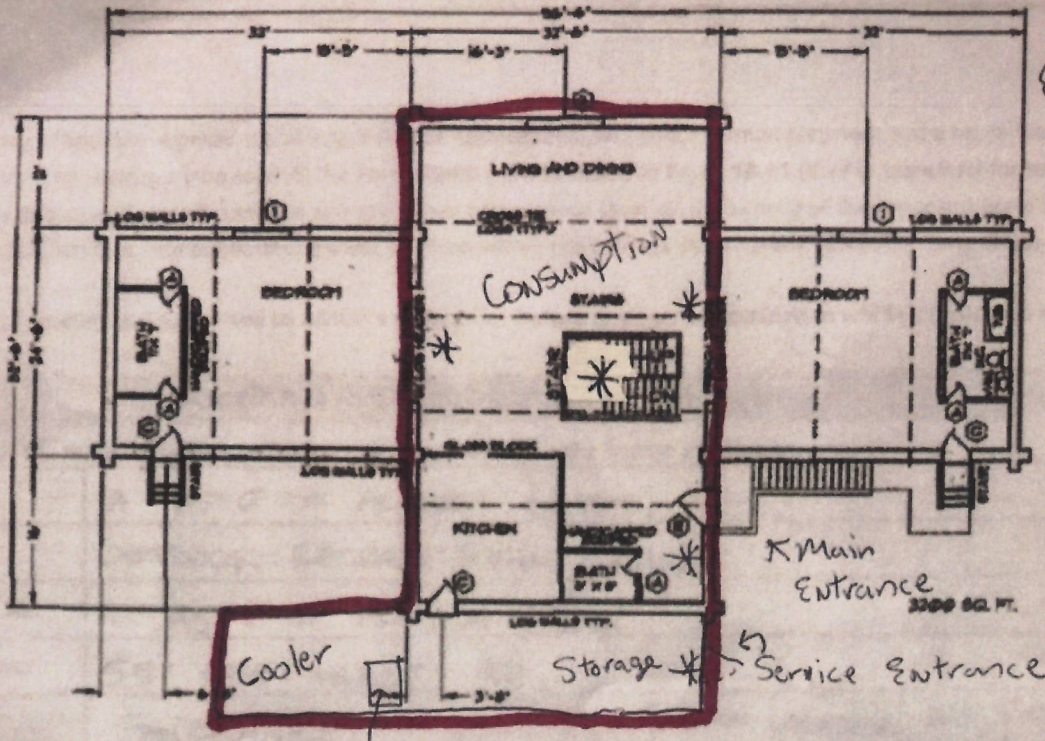
Premises 5844

South ↑

East ←

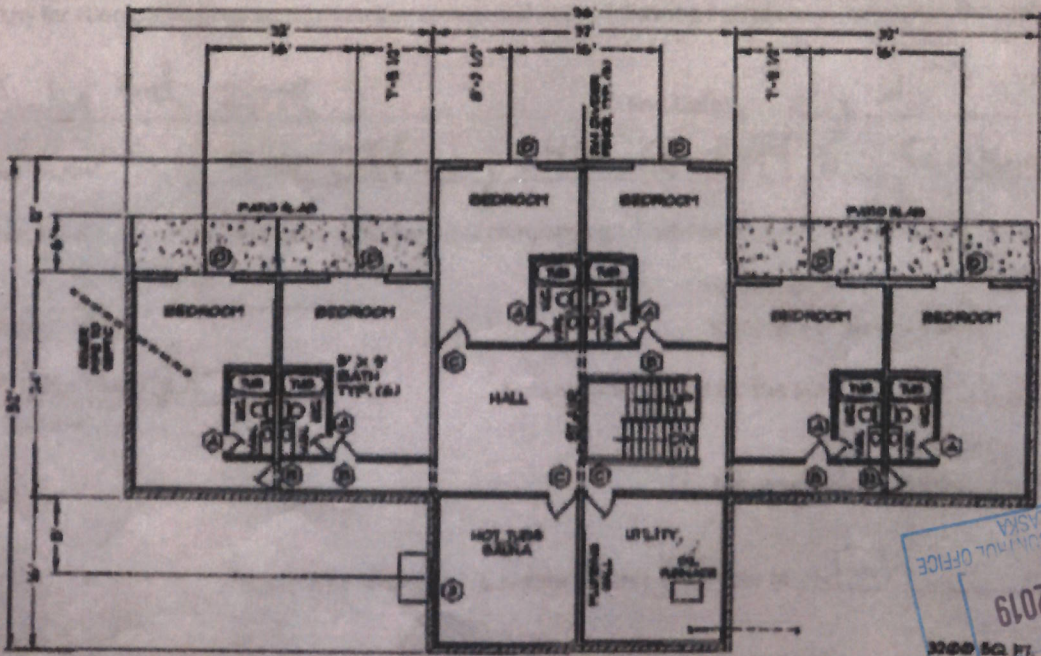
Exits *

West →



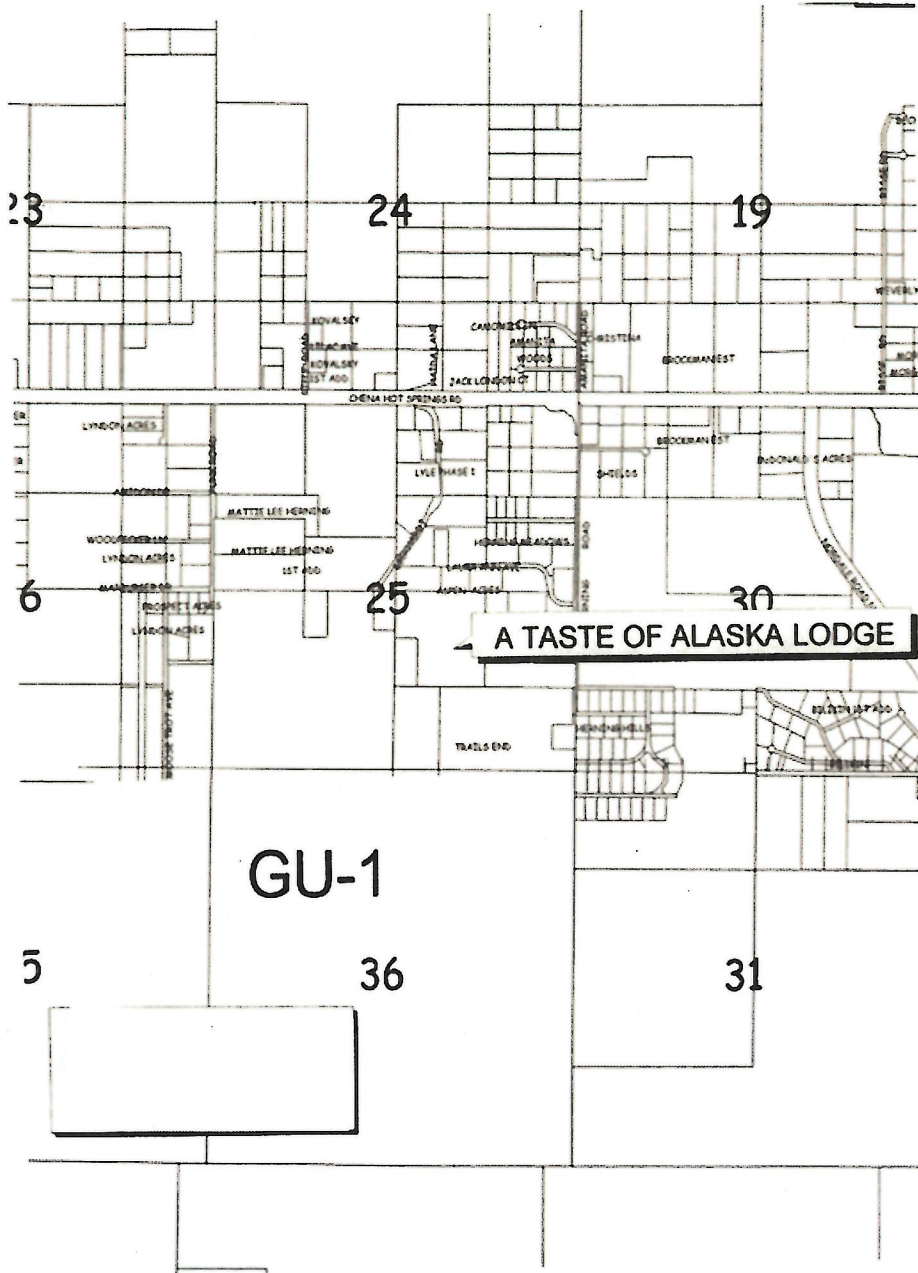
SECOND FLOOR PLAN

↓ North



FIRST FLOOR PLAN

ALCOHOL STATE OF ALASKA
 MARIJUANA CONTROL OFFICE
 RECEIVED
 SEP 03 2019
 11 05 00 AM



RECEIVED
 ALCOHOL REGULATORY
 STATE OF ALASKA
 SEP 03 2019
 OFFICE