

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u> Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Tourism Statement Form

- A new, transfer, or renewal application for a Tourism Site License must be accompanied by this form which explains how the establishment satisfies the requirements listed under AS 04.11.400 (d), 3 AAC 304.325.
 - You must provide complete responses to all questions or your application will be returned and will not
 - be scheduled for the next ABC board meeting until the application is deemed complete by AMCO staff.
- All questions must be answered on this form. Do not attach other documents, or they will be returned.
- Do not provide documents and/or statements not requested.

Mandatory Points to be Included

1. Explain how issuance of a liquor license at your establishment has/will keep encouraging tourism:

hong Rifle ledge has been serving tourists since 1975. The lodge is located in front of the Matanuska Glacier on the Glenn Hwy. We have over 20 Alaskan animal mounts on display as well as an awe inspiring view of the Matanuska Glacier. Our lodge is one of the few your round businesses in our area catering to tourists. We have all Alaskan microbrews available t serve local grown produce. We provide food & lodging for traveless wishing to ice climb, glacier trek, white water raft, hike, zip line, gold pan or take a flight seeing tour of our community. We hope to have a return to tourism Very Soon.

2. Explain how the facility was or will be improved in accordance with this application: (this includes planned renovations, repairs, updates to the facility/grounds)

There were no new improvements this year. There may be plans to update porches around the restaurant to better accomidate outdoor seating if COUID carries into 2021.



3. Who operates the Liquor License?

1	
	hong Rifle Lodge has been run by owner Kate Riddles + her husband Russell for over 14 years.
	her husband Russell for over 14 years.
۱ 4.	Do you offer room rentals to the traveling public? Yes No (if no, skip to question 5)
	No (if no, skip to question 5)
	a. If so, how many of these rooms are available?
	10
	b. Do any of the rental rooms have kitchen facilities (such as: a separate sink for food preparation and refrigeration/cooking appliance devices, including a microwave)? Yes X No
	i. If yes, how many of the rental rooms have kitchen facilities that meet this definition?
	Two rooms + two cabins have refriguators, microwaves + coffee pots. The remaining rooms have microwaves + coffee pots.
	coffee pots. The remaining rooms have microwaves
	+ Cottee pors.
	c. Do you stock alcoholic beverages in guest rooms? Yes No X
5.	Is your facility located within an airport terminal? Yes No X
6.	Does your establishment include a dining facility? Yes X No
7.	Are additional amenities available to your guests through your establishment? Yes No X
	a. If Yes, list your available amenities that directly pertain to this license type:



- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2020 per AS 04.11.270, 3 AAC 304.160, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.
- Any complete application for renewal or any fees for renewal that have not been postmarked by 02/28/2021 will be expired per AS 04.11.540,3 AAC 304.160(e).
- All fields of this application must be deemed complete by AMCO staff and must be accompanied by the required fees and all documents
 required, or the application will be returned without being processed, per AS 04.11.270, 3 AAC 304.105
- Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees in any way that an application will be deemed complete, renewed, or that it will be scheduled for the next ABC Board meeting.

Establishment Contact Information						
Licensee (Owner):	Glacier View Ventures LLC License #: 2063					
License Type:	Beverage Dispensary- Tourism					
Doing Business As:	Long Rifle Wage					
Premises Address:	mile 102 Glenn Hwy					
Local Governing Body:	Matanuska - Susitna Burough					
Community Council:	Glacier View					

If your mailing address has changed, write the NEW address below:

Mailing Address:	31406 W Glen	nn Hwy			ж.
City:	Sutton	State:	AK	ZIP:	99674

Section 1 – Licensee Contact Information

Contact Licensee: The individual listed below must be listed in Section 2 or 3 as an Official/Owner/Shareholder of your entity and must be listed on CBPL with the same name and title.

This person will be the designated point of contact regarding this license, unless the Optional contact is completed.

Contact Licensee:	KATE RIDDLES	Contact Phone:	(907)745-5151
Contact Email:	Ir l@matnet.com		

Optional: If you wish for AMCO staff to communicate with anyone other than the Contact Licensee about your license, list them below:

Name of Contact:	Contact Phone:
Contact Email:	

Name of Contact:	Contact Phone:	
Contact Email:		

Name of Contact:	Contact Phone:	
Contact Email:		

[Form AB-17] (rev09/23/2020)



Section 2 – Entity or Community Ownership Information

Sole Proprietors should skip this Section.

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #. https://www.commerce.alaska.gov/cbp/main/search/entities

Alaska CBPL Entity #:	99600	
	11800	

READ BEFORE PROCEEDING: Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.

- Corporations of any type including non-profit must list ONLY the following:
 - All shareholders who own 10% or more stock in the corporation 0
 - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of any type must list ONLY the following: 0
 - All Members with an ownership interest of 10% or more
- All Managers (of the LLC, not the DBA) regardless of percentage owned 0
 - Partnerships of any type, including Limited Partnerships must list ONLY the following: 0
 - Each Partner with an interest of 10% or more
 - All General Partners regardless of percentage owned 0

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.

Name of Official:	KATE RIDDLES				
Title(s):	member	Phone:	(907)745-5151	% Owr	ned: 50
Mailing Address:					
City:	Sutton	State:	AK	ZIP:	99674

Name of Official:	William Stev	enson		
Title(s):	member	Phone:	(907)745-2534	% Owned: 50
Mailing Address:	30820 W Gle	nn Hwy		
City:	Sutton	State:	AK	ZIP: 99674

Name of Official:		
Title(s):	Phone:	% Owned:
Mailing Address:		
City:	State:	ZIP:

E. The second second



Section 3 – Sole Proprietor Ownership Information

Corporations, LLC's and Partnerships of ALL kinds should skip this section.

READ BEFORE PROCEEDING: Any new or changes to the ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI approved cardstock, AB-08a's, payment of \$48.25 for each **new** owner or officer and a date stamped copy of the CBPL change per AS 04.11.045, or a Notice of Violation will be issued to your establishment and your application will be returned.

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, phone number, and mailing address for each owner or partner whose information we require.

If more space is needed, attach additional copies of this page. Additional owners not listed on this page will be rejected. This individual is an: Applicant Affiliate

in a fordation and the arriver	Applicant	Annate				
Name:				Contact Phone:		
Mailing Address:						
City:			State:		ZIP:	
Email:						
This individual is an:	Applicant	Affiliate				
Name:				Contact Phone:		
Mailing Address:			Addition (Material and Statements and Statements and Statements			
City:			State:		ZIP:	
Email:						

Section 4 – License Operation

Che 1.	eck ONE BOX for EACH CALENDAR YEAR that best describes how this liquor license was operated: The license was regularly operated continuously throughout each year. (Year-round)	2019	2020 X
2.	The license was only operated during a specific season each year. (Seasonal) I <u>f your operation dates have changed, list them below:</u> to		
3.	The license was only operated to meet the minimum requirement of 240 total hours each calendar year. <u>A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.</u>		
4.	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 calendaryears. <u>A complete Form AB-29: Waiver of Operation Application</u> and corresponding fees must be submitted with this application for each calendar year during which the license was not operated.		

If you have not met the minimum number of hours of operation in 2020, you are not required to pay the fees, however a complete AB-29 is required with Section 2 marked "OTHER" and COVID is listed as the reason.

Section 5 – Violations and Convictions

Have **ANY** Notices of Violation been issued for this license **OR** has **ANY** person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2019 or 2020?

If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)

If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.

No

Yes



Section 6 – Certifications

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, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by 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 and potentially expired if I do not comply with statutory or regulatory requirements.
- 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 this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity
 officials and stakeholders are current and accurately listed, and I have provided AMCO with all required changes of
 Shareholders (10% or more), Managers, Corporate Officers/Board of Directors, Partners, Controlling Interest or Ownership of
 the business license, and have provided all required documents for any new or changes in officers.
- I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons 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, <u>if applicable for this license type</u> as set forth in AS 04.21.025 and 3 AAC 304.465.
- 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 from what is currently approved and 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 devial of this application or revogation of any license issued.

Signature of licensee

KATE L RIDDLE Printed name of licensee

Signature of Notary Public and for the State of: My commission expires: Subscribed and sworn to before me this 🔟 day of 💇

Restaurant/Eating Place applications must include a completed AB-33: Restaurant Receipts Affidavit Recreational Site applications must include a completed Recreational Site Statement Tourism applications must include a completed Tourism Statement Wholesale applications must include a completed AB-25: Supplier Certification

All renewal and supplemental forms are available online

Any application that is not complete or does not include ALL required completed forms and fees will not be processed and will be returned per AS 04.11.270, 3 AAC 304.105.

FOR OFFICE USE ONLY

License Fee:	\$ Application Fee:	\$ 300.00	Misc. Fee:	\$
	Total Fees Due:		т. Т	\$



Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	License Number:	
License Type:		
Examiner:	Transaction #:	

Document	Received	Completed	Notes
AB-17: Renewal Application			
App and License Fees			

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement			
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation			
AB-30: Minimum Operation			
AB-33: Restaurant Affidavit			
COI / COC / 5 Star			
FP Cards & Fees / AB-08a			
Late Fee			

Names on FP Cards:		
	Yes	No
Selling alcohol in response to written order (package stores)?		
Mailing address and contact information different than in database (if yes, update database)?		
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?		
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?		
LGB 1 Response: MSB LGB 2 Response: Glacier View		
Waive Protest Lapsed Waive Protest Lapsed		
[Master Checklist: Renewal] (rev 09/20/2018)	Pag	e 1 of 1



Department of Commerce, Community, and Economic Development CORPORATIONS, BUSINESS & PROFESSIONAL LICENSING

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Corporations / Entity Details

ENTITY DETAILS

Name(s)

Туре	Name
Legal Name	Glacier View Ventures, LLC
Entity Ty	ype: Limited Liability Company
Entit	y #: 99600
Sta	tus: Good Standing
AK Formed D	ate: 3/7/2006
Duration/Expirat	ion: Perpetual
Home St	ate: ALASKA
Next Biennial Report D	Due: 1/2/2022
Entity Mailing Addre	ess: 31406 W GLENN HWY, SUTTON, AK 99674
Entity Physical Addre	ess: 31406 W GLENN HWY, SUTTON, AK 99674
Registered Agent	
Agent Na	me: William Stevenson

Registered Mailing Address: 30820 W GLENN HWY, SUTTON, AK 99674

Registered Physical Address: 30820 W GLENN HWY, SUTTON, AK 99674

Officials

□Show Former

AK Entity #	Name	Titles	Owned
	Kate Riddles	Member	50.00
	William Stevenson	Member	50.00

Filed Documents

Date Filed	Туре	Filing	Certificate
3/07/2006	Creation Filing	Click to View	
11/02/2010	Biennial Report	Click to View	
11/03/2010	Biennial Report	Click to View	
12/02/2011	Biennial Report	Click to View	
11/30/2013	Biennial Report	Click to View	
12/01/2015	Biennial Report	Click to View	
1/25/2016	Agent Change	Click to View	
12/01/2017	Biennial Report	Click to View	
11/25/2019	Biennial Report	Click to View	

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Alaska Business License # 733617

Alaska Department of Commerce, Community, and Economic Development

Division of Corporations, Business, and Professional Licensing PO Box 110806, Juneau, AK 99811-0806

This is to certify that

GLACIER VIEW VENTURES, LLC

31406 W GLENN HWY, SUTTON, AK 99674

owned by

GLACIER VIEW VENTURES, LLC

is licensed by the department to conduct business for the period

October 5, 2020 to December 31, 2022 for the following line(s) of business:

72 - Accommodation and Food Services



This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State or of the United States.

This license must be posted in a conspicuous place at the business location. It is not transferable or assignable.

Julie Anderson Commissioner





Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West Seventh Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

November 6, 2020

Glacier View Ventures LLC DBA: Long Rifle Lodge Via Email: Irl@matnet.com

Re: Beverage Dispensary - Tourism License #2063 DBA: Long Rifle Lodge

Dear Applicant:

I have received your application for renewal of your liquor license. Our staff has reviewed your application after receiving your application and required fees. Your renewal documents appear to be in order, and I have determined that your application is complete for purposes of AS 04.11.510, and AS 04.11.520.

Your application is now considered complete and will be sent electronically to your local governing body, your community council if your proposed premises is in Anchorage or certain locations in the Matanuska-Susitna Borough, and to any non-profit agencies who have requested notification of applications. The local governing body will have 60 days to protest the renewal of your license or waive protest.

A temporary license has been issued for this establishment.

Your application will be scheduled for the January 2021 board meeting for Alcoholic Beverage Control Board consideration. The address and call-in number for the meeting will be posted on our home page. The board will not grant or deny your application at the meeting unless your local government waives its right to protest per AS 04.11.480(a).

Please feel free to contact us through the <u>alcohol.licensing@alaska.gov</u> email address if you have any questions.

Sincerely,

Olivia Frank Occupational Licensing Examiner