

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

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 <u>provide complete responses to all questions</u> 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:

Malamute Saloon (know as the Ester Gold Camp on the Historic Register)

The Ester Gold Camp encourages tourism by providing a change for visitors to learn and experience the gold mining history of Ester, Alaska. Through old mining equipment and historic structures, the Gold Camp provides a window through time for guests to see how the miners lived and worked. Ester Gold Camp is on the National Register of Historic Places. We have 15 room rentals in our hotel along with 8 rooms in our bunkhouse. A majority of the rooms (12 to be exact) have kitchenettes in them.

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)

No improvements planned Rol 2021 at this time of renewal



3.	Who operates the Liquor License?
	Jingle LLC.
	DBA Malemote Saloon
	Scott Swingle 100% Owner, managing member
ļ. '	Do you offer room rentals to the traveling public? Yes No (if no, skip to question 5)
	a. If so, how many of these rooms are available?
	23
	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 No
	i. If yes, how many of the rental rooms have kitchen facilities that meet this definition?
	12
	c. Do you stock alcoholic beverages in guest rooms? Yes No
j.	Is your facility located within an airport terminal? Yes No
õ.	Does your establishment include a dining facility? Yes No
' .	Are additional amenities available to your guests through your establishment? Yes No
	a. If Yes, list your available amenities that directly pertain to this license type:

AMCO

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

691

XXXX

ISSUED 3/10/2021 ABC BOARD

LIQUOR LICENSE 2021 - 2022

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2022 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

4/15 - 10/15

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$1,250.00

1103

Malemute Saloon

3660 Main Street

Mail Address:

D/B/A:

Jingle LLC

5160 Cherokee Avenue Fairbanks, AK 99709

CITY / BOROUGH:

Outside City Limits

Fairbanks North Star Borough

This license cannot be transferred without permission of the Alcoholic Beverage Control Board

[] Special restriction - see reverse side

ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

DIRECTOR

04-900 (REV 9/09)

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

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ABC BOARD

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ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

COPY

DIRECTOR

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 9/09)

D/B/A:

Malemute Saloon 3660 Main Street

Mailing Address:

Jingle LLC

5160 Cherokee Avenue Fairbanks, AK 99709



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Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	Male	mute Saloor	າ	M / M / M	License Number:	691	24 2000
License Type:	Beve	erage Dispen	sary - Tourisr	n Seasonal			
Examiner:	ristina	S.		Transaction #:	100014	1255	
Document		Received	Completed	Notes			
AB-17: Renewal Applic	ation	12/17	3-10-21			-	
App and License Fees		12/17	3-10-21				
Supplemental Docume	ent	Received	Completed	Notes			
Tourism/Rec Site State	ment	12/17	3-10-21				
AB-25: Supplier Cert (V	VS)						
AB-29: Waiver of Oper	ation					,	
AB-30: Minimum Oper	ation	-					
AB-33: Restaurant Affic	davit						
COI / COC / 5 Star							
FP Cards & Fees / AB-0	8a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1	
Late Fee							
Names on FP Cards:					The state of the s		
						Yes	No
Selling alcohol in respo	nse to v	vritten order (pa	ckage stores)?		3		7
Mailing address and co	ntact in	formation differe	ent than in databa	se (if yes, update	e database)?		Z
In "Good Standing" wit	In "Good Standing" with CBPL (skip this and next question for sole proprietor)?						
Officers and stockholde	ers mate	ch CBPL and data	base (if "No", dete	ermine if transfe	r necessary)?		
LGB 1 Response:	3 ×	North Sto	LGB 2 Resp	oonse:	NA		
Waive	Protest	-	Waiv	re Prote	est Lapsed		



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Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-17: 2021/2022 License Renewal Application

- 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

	Establishment Con	tact ii	nformation						
Licensee (Owner):	Jingle LLC			License #:	691				
License Type:	Beverage Dispensary - To	urism	Seasonal		J				
Doing Business As:	oing Business As: Malemute Saloon								
Premises Address:	Address: 3660 Main St. Ester, Alaska 99725								
Local Governing Body:	Fairbanks North Star Boro	ugh							
Community Council:									
vour mailing address ha	s changed, write the NEW address b	elow:							
Mailing Address:									
City:		State:		ZIP					
<u>ust be listed on CBPL with th</u>	Section 1 – Licensee Control of the same name and title. ated point of contact regarding this license.	tion 2 or 3	as an Official/Owne						
<u>ust be listed on CBPL with th</u>	ividual listed below must be listed in Sect te same name and title.	tion 2 or 3	as an Official/Owne	is completed					
ust be listed on CBPL with the list person will be the designation	ividual listed below must be listed in Sector ne same name and title. nated point of contact regarding this licens	tion 2 or 3 e, unless t	as an Official/Owner the Optional contact	is completed	d.				
ust be listed on CBPL with the designation of the d	ividual listed below must be listed in Section	tion 2 or 3 e, unless t	as an Official/Owner the Optional contact Contact Phone:	is completed	-388-0473				
ust be listed on CBPL with the designation of the d	ividual listed below must be listed in Sectors in Sec	tion 2 or 3 e, unless t	as an Official/Owner the Optional contact Contact Phone:	907	-388-0473				
ust be listed on CBPL with the list person will be the designation of the designation of the list person will be the designation of the list person with the list person of the list per	ividual listed below must be listed in Section	tion 2 or 3 e, unless t	as an Official/Owner the Optional contact Contact Phone: act Licensee about you	907	-388-0473				
ust be listed on CBPL with the designation of the d	ividual listed below must be listed in Section	tion 2 or 3 e, unless t	as an Official/Owner the Optional contact Contact Phone: act Licensee about you	907	-388-0473				
ust be listed on CBPL with the designation of Contact Licensee: Contact Email: ctional: If you wish for AMCO Name of Contact: Contact Email:	ividual listed below must be listed in Section	tion 2 or 3 e, unless t	as an Official/Owner the Optional contact Contact Phone: act Licensee about you Contact Phone:	907	-388-0473				
ust be listed on CBPL with the designation of Contact Licensee: Contact Email: ctional: If you wish for AMCO Name of Contact: Contact Email:	ividual listed below must be listed in Section	tion 2 or 3 e, unless t	as an Official/Owner the Optional contact Contact Phone: act Licensee about you Contact Phone:	907	-388-0473				



Alaska Alcoholic Beverage Control Board

Form AB-17: 2021/2022 License Renewal Application

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 #: 10104627

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

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.

page. Additional information not on this page will be rejected.							
Name of Official:	Scott T. Swingle					•	
Title(s):	Manager/Member	Phone:	907-388-0473	% Owi	ned:	100	
Mailing Address:	5160 Cherokee Ave						
City:	Fairbanks	State:	Ak	ZIP:	997	09	
P							
Name of Official:							
Title(s):		Phone:		% Owr	ned:		
Mailing Address:							
City:		State:		ZIP:			
Name of Official:							
Title(s):		Phone:		% Owr	ned:		
Mailing Address:							
City:		State:		ZIP:			



Alaska Alcoholic Beverage Control Board

Form AB-17: 2021/2022 License Renewal Application

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.

			ACCORDING TO	e. Additional own	ers not listed on this pa	ge will be	rejected.	
This individual is an:	Applica	int	Affiliate					
Name:					Contact Phone:			
Mailing Address:								
City:				State:		ZIP:		
Email:							J	
This individual is an:	Applica	nt	Affiliate					
Name:		714			Contact Phone:			
Mailing Address:								
City:				State:		ZIP:		
Email:						. 1		
The license was only If your operation day The license was only A complete AB-30: Pro The license was not concern the license was not conc	operated des have cha	luring a sp anged, lis o meet the im Operational or was	nuously throughout each perific season each year at them below: to e minimum requirement on Checklist, and all document on the period of the	ch year. (Year-round . (Seasonal) t of 240 total hours enentation must be provented to the minimum requests the minimum requests.	each calendar year. Fided with this form.	sted.	2019	2020
<u>If you have not m</u> com	et the min plete AB-2	29 is req	umber of hours of or uired with Section 2 tion 5 - Viola	marked "OTHER"	you are not required to p and COVID is listed as the	ay the fee	s, howev	er a
onvicted of a violation	of Little 04	, 3AAC 3	04 or a local ordinand	ce adopted under	entity in this application b AS 04.21.010 in 2019 or 2 In and/or Convictions per	2020?	Yes	No
lf you are ા	insure if ye	ou have	received any Notices	of Violation, con	tact the office before sul	bmitting th	nis form.	



Alaska Alcoholic Beverage Control Board

Form AB-17: 2021/2022 License Renewal Application

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, if applicable for this license type 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 a	grounds for rejection or denial of this application or revocation of any license issued.
Signature of licensee	Signature of Notary Public
Printed name of licensee	Notary Public in and for the State of:
Three dame of needsee	My commission expires: 24 April, 2023
	Subscribed and sworn to before me this 15 day of December, 20 26.

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

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

License Fee:	\$1250 =	Application Fee:	\$ 300.00	Misc. Fee:	\$
		Total Fees Due:			\$ 155000

AR	100
. Wh	100

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

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Business License / License #2089870

LICENSE DETAILS

License #: 2089870

License unavailable for printing

Business Name: Malamute Saloon

Status: Expired

Issue Date: 07/11/2019

Expiration Date: 12/31/2020

Mailing Address: 5160 Cherokee Ave

Fairbanks, AK 99709

Physical Address: 5160 Cherokee Ave

Fairbanks, AK 99709

Owners

Jingle LLC

Activities

Line of Business	NAICS	Professional License #
72 - Accommodation and Food Services	721110 - HOTELS (EXCEPT CASINO HOTELS) AND MOTELS	
72 - Accommodation and Food Services	722211 - LIMITED-SERVICE RESTAURANTS	

Endorsements

No Endorsements Found

License Lapse(s)

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.

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)

Type Legal Name

Name

Jingle LLC

Entity Type: Limited Liability Company

Entity #: 10104627

Status: Good Standing

AK Formed Date: 4/23/2019

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2023

Entity Mailing Address: 5160 CHEROKEE AVE, FAIRBANKS, AK 99709

Entity Physical Address: 5160 CHEROKEE AVE, FAIRBANKS, AK 99709

Registered Agent

Agent Name: Scott Swingle

Registered Mailing Address: 5160 CHEROKEE AVE, FAIRBANKS, AK 99709

Registered Physical Address: 5160 CHEROKEE AVE, FAIRBANKS, AK 99709

Officials

			□Show Former
AK Entity #	Name	Titles	Owned
	Scott Swingle	Manager, Member	100.00

Filed Documents

Date Filed	Туре	Filing	Certificate	
4/23/2019	Creation Filing	Click to View	Click to View	
4/23/2019	Initial Report	Click to View		
2/03/2021	Biennial Report	Click to View		

 $\textbf{COPYRIGHT} @ \textbf{STATE OF ALASKA} \cdot \underline{\textbf{DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT}} \cdot \underline{\textbf{DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT}} \\$