

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

Recreational Site Statement Form

- A new, transfer, or renewal application for a <u>Recreational Site License</u> must be accompanied by a written statement that explains how the establishment meets the requirements listed under AS 04.11.210 and be deemed complete by AMCO staff, or your application will be returned.
- 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 what hours your establishment will be serving beer and wine in relation to your event hours.
	Beer & Wire will be served during ragular Business hours
	M-THURSDAY 3-midnight & Friday - Sunday NEON - Midnight
2.	Are baseball games, car races, hockey games, sled dog racing events, or curling matches regularly held during a season at your establishment? Yes: No: No:
	If No, what recreational events are regularly held during a season at your establishment that qualify you for this license under AS 04.11.210?
	Bowling
3.	Was this license exercised at least once during each of the two preceding calendar years in accordance with AS 04.11.330(d)? Yes: No:
	If the answer is no, you are required to complete an AB-29 (Waiver of Operation Application) for your renewal application to be deemed complete with this office.
	The AB-29 form can be found here if needed: https://www.commerce.alaska.gov/web/Portals/9/pub/ABC/AlcoholLicenseApplicationForms/WaiverApp.pdf
4.	List the seasons of the events on your premises. (example: Baseball May 1-Sept 15, Dog Sled Races Oct 1- March 15)
	Bowling year round

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

ISSUED 4/22/2021

ABC BOARD

LIQUOR LICENSE 2021 - 2022

5095

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

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

TYPE OF LICENSE: Recreational Site-

04.11.210(d)

LICENSE FEE: \$800.00

1261

D/B/A: PINZ

608 W Willoughby Avenue

Mail Address: PINZ, LLC PO Box 35366

Juneau, AK 99803

Juneau CITY / 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

LIQUOR LICENSE

2021 - 2022

5095

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

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

TYPE OF LICENSE: Recreational Site

04.11.210(d)

ISSUED

4/22/2021 **ABC BOARD**

LICENSE FEE: \$800.00

CITY / BOROUGH: Juneau Juneau

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

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

D/B/A:

PINZ

608 W Willoughby Avenue

Mailing Address:

PINZ, LLC

PO Box 35366

Juneau, AK 99803



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Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	PINZ	PINZ License Number: 5095						
License Type:	RECR	RECREATIONAL SITE - GRANDFATHERED						
Examiner:	Kr	istina S.			Transaction #:	100025649		
Document		Received	Completed	Notes				
AB-17: Renewal Applica	ation	12/18/2020	4/22/2021					
App and License Fees		12/18/2020	4/22/2021					
Supplemental Docume	nt	Received	Completed	Notes				
Tourism/Rec Site State	ment	12/18/2020	4/22/2021	REC				
AB-25: Supplier Cert (W	/S) .							
AB-29: Waiver of Opera	ation							
AB-30: Minimum Opera	ation					-		
AB-33: Restaurant Affic	lavit							
COI / COC / 5 Star								
FP Cards & Fees / AB-08	Ва							
Late Fee								
Names on FP Cards:								
Yes No N/A								
CBPL Entity Printout inc	luded?							
Business License Copy i	Business License Copy included?							
Background(s) Completed & Date:								
Special Consideration: Board Meeting Date:								
LGB Sent Date: LGB Deadline Date:								
LGB 1 Name: City and	Borou	igh of Juneau	LGB 2 Nam	ne: N	/A	_		
Waive	Protest	Lapsed	Waiv	ve Prot	test Lapsed			



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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
- 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.

Licensee (Owner):	Pinz LLC			License #:	5095	
License Type: Recreation Site - Grand fathered						
Doing Business As:	Pinz					
Premises Address:	608 W. Willowg	Lby Aur	9		40.00	
Local Governing Body:	608 W. Willoug Juneau City & 1	Borough				
Community Council:		7				
your mailing address ha	s changed, write the NEW addres	s below:				
Mailing Address:						
City:		State:		ZIP:		
ust be listed on CBPL with th	Section 1 – Licensee vidual listed below must be listed in Se same name and title. Ited point of contact regarding this lice	ection 2 or 3 a	s an Official/Owner			
ust be listed on CBPL with th	vidual listed below must be listed in S e same name and title. ted point of contact regarding this lice	ection 2 or 3 a	s an Official/Owner	s completed		
ust be listed on CBPL with the nis person will be the designa	vidual listed below must be listed in Sesame name and title. Ited point of contact regarding this lice. Robert Petersen	ection 2 or 3 a	s an Official/Owner	s completed		
contact Email:	vidual listed below must be listed in sessme name and title. ted point of contact regarding this lice Robert Petersen pinziuneau E Yaha	ection 2 or 3 a	s an Official/Owner Optional contact Contact Phone:	s completed	-723-7602	
contact Email:	vidual listed below must be listed in Sesame name and title. Ited point of contact regarding this lice. Robert Petersen	ection 2 or 3 a	s an Official/Owner Optional contact Contact Phone:	s completed	-723-7602	
ust be listed on CBPL with the designal contact Licensee: Contact Email: Otional: If you wish for AMCO sees	vidual listed below must be listed in sessme name and title. ted point of contact regarding this lice Robert Petersen pinziuneau E Yaha	ection 2 or 3 a	s an Official/Owner Optional contact Contact Phone: t Licensee about you	s completed	-723-7602	
Contact Email: Name of Contact: Contact Email:	vidual listed below must be listed in sessme name and title. ted point of contact regarding this lice Robert Petersen pinziuneau E Yaha	ection 2 or 3 a	s an Official/Owner e Optional contact Contact Phone: t Licensee about you Contact Phone:	s completed	-723-7602	
Contact Email: Ptional: If you wish for AMCO s Name of Contact: Contact Email:	vidual listed below must be listed in sessme name and title. ted point of contact regarding this lice Robert Petersen pinziuneau E Yaha	ection 2 or 3 a	s an Official/Owner Optional contact Contact Phone: t Licensee about you	s completed	-723-7602	
Contact Email: Name of Contact: Contact Email:	vidual listed below must be listed in sessme name and title. ted point of contact regarding this lice Robert Petersen pinziuneau E Yaha	ection 2 or 3 a	s an Official/Owner e Optional contact Contact Phone: t Licensee about you Contact Phone:	s completed	-723-7602	
Contact Email: Name of Contact: Name of Contact: Name of Contact:	vidual listed below must be listed in sessme name and title. ted point of contact regarding this lice Robert Petersen pinziuneau E Yaha	ection 2 or 3 a	s an Official/Owner e Optional contact Contact Phone: t Licensee about you Contact Phone:	s completed	-723-7602	



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 #:	10106051

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
 - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of any type must list ONLY the following:
 - All Members with an ownership interest of 10% or more
 - All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
 - 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.

Name of Official:	Robert Petusen					
Title(s):	Member	Phone:	907-723-7602	% Ow	ned:	50
Mailing Address:	P.U. Box 35366					
City:	Juneau	State:	Aĸ	ZIP:	998	30.3
	-					
Name of Official:	Lisa Petersen					
Title(s):	Member	Phone:	260-341-2790	% Owi	ned:	50
Mailing Address:	P.O. Box 35366			***************************************		
City:	Tunean	State:	Ak	ZIP:	99	803
Name of Official:						
Title(s):		Phone:		% Owr	ned:	
Mailing Address:			1			
City:		State:		710.		

ZIP:



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. 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** Name: **Contact Phone:** Mailing Address: City: State: ZIP: Email: This individual is an: Applicant Affiliate Name: **Contact Phone:** Mailing Address: City: State: ZIP: Email: Section 4 - License Operation Check ONE BOX for EACH CALENDAR YEAR that best describes how this liquor license was operated: 1. The license was regularly operated continuously throughout each year. (Year-round) 2. The license was only operated during a specific season each year. (Seasonal) If your operation dates have changed, list them below: to 3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year. A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form. 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. A complete 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. 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 Yes No 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.



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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.

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Important Note: All ent	ries below must r	natch our records, o	or your application	will be returned per AS (04.11.270, 3 AAC	304.105. You
				or partner whose information partner whose information is a second contract of the partner when the partner		
This individual is an:	Applicant	Affiliate	e. Additional own	lers not instead on this pa	ge will be rejec	teu.
	Applicant	Annace		Contact Phone:		
Name:			/	Contact Phone:		
Mailing Address:						
City:			State:		ZIP:	
Email:						
This individual is an:	Applicant	Affiliate				
Name:				Contact Phone:		
Mailing Address:					***	
City:			State:		ZIP:	***************************************
Email:		· · · · · · · · · · · · · · · · · · ·				
The license was only o If your operation date	arly operated conti perated during a sp as have changed, lis	R that best describes nuously throughout ea ecific season each yea t them below:	ach year. (Year round r. (Seasonal)	ense was operated:	201	9 2020
A complete AB-30: Proof	f of Minimum Operation	on Checklist, and all docu	nt of 240 total hours of mentation must be pro-	each calendar year. vided with this form.		
hours each year, durir	ng one or both caler	not operated for at lean ndaryears. <u>A complete F</u> h this application for each	orm AB-29: Waiver of C	uirement of 240 total Operation Application which the license was not oper	oted.	
If you have not me	t the minimum n	umber of hours of a	peration in 2020,	you are not required to	pay the fees, h	owever a
comp	olete AB-29 is req	uired with Section 2	marked "OTHER"	and COVID is listed as t	he reason.	
	Sec	tion 5 – Viola	ations and C	convictions		
	of Title 04, 3AAC 3	04 or a local ordinar	nce adopted under Notices of Violation	AS 04.21.010 in 2019 or n and/or Convictions pe	2020? •r AS 04.11.270((a)(2)
<u>If you are u</u>	nsure it you have	received any Notice	es of Violation, con	tact the office before su	ıbmitting this fo	orm.



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 grounds for rejection or denial of this application or revocation of any license issued.

Robert Potential Signature of licensee	Signature of Notary Public
Robert Petersen	Notary Public in and for the State of: AUASKA
JESSA RAMIREZ Notary Public State of Alaska My Commission Expires Mar 27, 2024	My commission expires: <u>March 27, 20</u> 29 Subscribed and sworn to before me this <u>15</u> day of <u>December</u> , 20 <u>70</u> .

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:	\$ 800	Application Fee:	\$ 300.00	Misc. Fee:	\$
		Total Fees Due:			\$ 1100

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 #2087474

LICENSE DETAILS

License #: 2087474

Print Business License

Business Name: PINZ LLC

Status: Active

Issue Date: 05/17/2019

Expiration Date: 12/31/2022

Mailing Address: P. O. Box 35366

Juneau, AK 99803

Physical Address: 608 w. Willoughby ave

Juneau, AK 99801

Owners

PINZ LLC

Activities

Line of Business	NAICS	Professional License #
71 - Arts, Entertainment and Recreation	713950 - BOWLING CENTERS	

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.

No Lapses on record for the last 4 years.

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	PINZ LLC

Entity Type: Limited Liability Company

Entity #: 10106051

Status: Good Standing

AK Formed Date: 5/15/2019

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2023

Entity Mailing Address: P. O. BOX 35366, JUNEAU, AK 99803

Entity Physical Address: 608 W WILLOUGHBY AVE., JUNEAU, AK 99801

Registered Agent

Agent Name: Robert Petersen

Registered Mailing Address: P. O. BOX 35366, JUNEAU, AK 99803

Registered Physical Address: 9866 MENDENHALL LOOP ROAD, JUNEAU, AK 99801

Officials

			□Show Former
AK Entity #	Name	Titles	Owned
	Lisa Petersen	Member	50.00
	Robert Petersen	Member	50.00

Filed Documents

Date Filed	Туре	Filing	Certificate
5/15/2019	Creation Filing	Click to View	Click to View
5/17/2019	Initial Report	Click to View	
12/05/2020	Biennial Report	Click to View	