

[Tourism Statement] (rev 9/22/2021)

Alaska Alcoholic Beverage Control Board

Tourism Statement

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

Page 1 of 2

A new, transfer, or renewal application for a Beverage Dispensary – Tourism or Restaurant/Eating Place – Tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

This document must be completed and submitted to AMCO's main office before any tourism license application will be reviewed.

	Section 1 – Establishment Informati	on	
Enter information for the bu	siness seeking to have its license renewed.		
Doing Business As:	Chart Room	License #:	600
License Type:	Beverage Dispensary-Tourism	1	
	Section 2 – Tourism Statement		
2.1. Explain how issuance of	a liquor license at your establishment has/will encourage touris	m	
A full serv	ice hotel is important to tourists	to be able	to
provide lodg	ing, tood + beverages. We have the	hat choose	Koeliak
to see Alask	ice hotel is important to tourists ing, food + beverages. We have my groups, American to foreigners & as beauty, and the ligur license is to enjoy their experience	sone piece	borthem
2.2 Evolain how the facility	was/will be constructed or improved as required by AS O4 11 400	0/4//1/	
The Chart for the 82 rd serve guests, is important	Room Restaurant & Lounge is an own Best Western Kodiak Inn hold Hourists meals and beverages in a co	asset, on tel. The abi, on venient.	-site, lityto location
/	licant for this liquor license also operate the	YES	NO
2.4 If "no" who operates the	tourism facility?		
	,		



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Tourism Statement

2.5 Do you offer room rentals to the traveling public?	YES	NO
If "yes" answer the following questions:	,	
How many rooms are available?		
82 rooms		
How many of the available rooms (if any) have kitchen facilities (defined as: a separate swith refrigeration and cooking appliance devices, including a microwave)?	,	ation along
One room is a kitcherette, the remaining rooms microwave and small fridge.	shavea	/
Do you stock or plan to stock alcoholic beverages in guest rooms?	YES	NO
f "no" is your facility located within an airport terminal?	YES	NO
2.6 If your establishment includes a dining facility, please describe that facility. If it does not ple	ease write "none".	
The Chart Room Restaurant + Lounge serves dinnern the location for daily continental (hot) breakfast.	ightly + i	šalso
2.7 If additional amenities are available to your guests through your establishment (eg: guided guests, other activities that attract tourists), please describe them. If they are not offered, pleas	se write "none".	
We have meeting rooms for guests to utilize. a hot tub, fitness center + business center as add	The hotell El ameniti	nas Čes,

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED 01/19/2022 ABC BOARD **LIQUOR LICENSE 2022 - 2023**

600

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2023 (AS 04.11.270(b))

TEMPORARY
THIS LICENSE EXPIRES MIDNIGHT
FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$2,500.00

1106

D/B/A: Chart Room

236 W Rezanof Drive

Mail Address:

Island Hotels, LLC 236 W Rezanof Drive Kodiak, AK 99615 CITY / BOROUGH: 1

Kodiak

Kodiak Island 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

Je Klitt

04-900 (REV 7/21)

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

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED 01/19/2022 ABC BOARD LIQUOR LICENSE

2022 - 2023

600

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2023 (AS 04.11.270(b))

TEMPORARY

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Disper

LICENSE FEE: \$2,500.00

CITY / BOROUGH: Kodiak

Kodiak Island 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

COPY

DIRECTOR

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 7/21)

D/B/A:

Chart Room

236 W Rezanof Drive

Mailing Address:

Island Hotels, LLC

236 W Rezanof Drive

Kodiak, AK 99615



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Alaska Alcoholic Beverage Control Board

2022-2023 Master Checklist: Renewal License Application

Doing Business As:	Char	t Room		**	License Number:	600
License Type:	Beve	rage Dispen	sary - Tourisr	m .		
Examiner:	Ce	11 0	Hon		Transaction #:	100312122
Document		Received	Completed	Notes		
AB-17: Renewal Applica	ation	12/6	19120			
App and License Fees		12/6	1/5/20			
Supplemental Docume	nt	Received	Completed	Notes		
Tourism/Rec Site Stater	ment	12/6				
AB-25: Supplier Cert (W	/S)					
AB-29: Waiver of Opera	ition					
AB-30: Minimum Opera	tion					
AB-33: Restaurant Affid	avit					
COI / COC / 5 Star / FAA	Cert					
FP Cards & Fees / AB-08	3a					
Late Fee	1.154					
Names on FP Cards:						
			Yes No	N/A		
CBPL Entity Printout incl	luded?					
Business License Copy ir	ncluded	?				
Background(s) Complete	ed & Da	te:				
Special Consideration:	Le	our ism		Board Meetin	g Date: 4/12	122
LGB Sent Date:	19/	22	LGB Deadl	ine Date:	120/22	
LGB 1 Name: Kodio	L_		LGB 2 Nam	ne: Kodial	Island Bore	pugh
Waive P	rotest	Lapsed	Waiv	ve Prote	est Lapsed	7



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Alaska Alcoholic Beverage Control Board

Form AB-17: 2022/2023 General Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2021 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 02/28/2022 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.

	Establisilli	ient Contact in	Tormation		
Licensee (Owner):	Island Hote	1s, LLC		License #:	600
License Type:	Beverage D		Tourism		
Doing Business As:	Chart Room	γ			
Premises Address:	236 W. Rez				
Local Governing Body	: City of Kadia	uk (Kodia KI	sland Boroug	jh)	
Community Council:	None				
f your mailing address h	nas changed, write the NEV	N address below:			
Mailing Address:	236 W. Reza				
City:	Kodiak		AK	ZIP:	99615
	Section 1 – Lice				
ontact Licensee: The in	idividual listed below must be	listed in Section 2 or 3	as an Official/Owne	er/Shareholder	of your entity a
ust be listed on CBPL with					
is person will be the desig	nated point of contact regardi	ing this license, unless t	ne Optional contact	is completed.	
Contact Licensee:	SusanJohn	Son	Contact Phone	907-	539-621
Contact Email:	info@kodi			•	
ptional: If you wish for AMC	O staff to communicate with any		ct Licensee about vo	ur license. list the	em below:
Name of Contact:	Lucy John		Contact Phone:		-539-62
Contact Email:	kibooks@o		n		30, 42
Name of Contact:			Contact Phone:		
Contact Email:			Contact Phone:		
Solidat Lilian.					
Name of Contact:			Contact Phone:		
Contact Email:					
				AMCO	
form AB-17] (rev09/21/2021)			1,000		Page 1 of 4



Alaska Alcoholic Beverage Control Board

Form AB-17: 2022/2023 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 #: 10025175

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:
 - o 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
 - o 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.

Title(s):	Member	Phone:	907-539-6217	% Owned:	51
Mailing Address:	236 W. Rezand	Dr.			
City:	Kodiak	State:	AK	ZIP: 99	615
Name of Official:	Daniel Gilb	ert			
Title(s):	Member	Phone:	907-539-5905	% Owned:	49
Mailing Address:	236 W. Rezan	of Dr.			
City:	Kodiak	State:	AK	ZIP: 99	615
Name of Official:					

Phone:

State:

AMCO

Mailing Address:

Title(s):

City:

Name of Official:

% Owned:

ZIP:



Alaska Alcoholic Beverage Control Board

Form AB-17: 2022/2023 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: 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 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 and/or 2021, 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 2020 or 2021?

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.

[Form AB-17] (rev09/21/2021)

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Alaska Alcoholic Beverage Control Board

Form AB-17: 2022/2023 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.

Susanophne	HRISTES	Schristercu
Signature of licensee	S. commission	Signature of Notary Public
Susan Johnson	NOTAR Notar Pul	blic in and for the State of: Alaska
Printed name of licensee	*\PUBLIC/*	
	13, 200	My commission expires: 03/3-2022
	Subscribed and sworn to before me	this_1st_day of December, 2021.

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
Common Carrier applications must include a current safety inspection certificate

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:	\$ 2500.00	Application Fee:	\$ 300.00	Misc. Fee:	\$ 2800.00
		Total Fees Due:			\$ 2800,00

AMCO C - 6 2021 Details

ENTITY DETAILS

Name(s)

Туре	Name	
Legal Name	Island Hotels, LLC	

Entity Type: Limited Liability Company

Entity #: 10025175

Status: Good Standing

AK Formed Date: 12/2/2014

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2022 File Biennial Report

Entity Mailing Address: 236 W REZANOF DR, KODIAK, AK 99615

Entity Physical Address: 236 W REZANOF DR, KODIAK, AK 99615

Registered Agent

Agent Name: Daniel Keith Gilbert

Registered Mailing Address: 236 W REZANOF DR, KODIAK, AK 99615

Registered Physical Address: 236 W REZANOF DR, KODIAK, AK 99615

Officials

			☐Show Former
AK Entity #	Name	Titles	Owned
	DANIEL KEITH GILBERT	Member	49.00
	SUSAN MARIE JOHNSON	Member	51.00

Filed Documents

Date Filed	Туре	Filing	Certificate
12/02/2014	Creation Filing	Click to View	Click to View
4/01/2015	Change of Officials	Click to View	
4/09/2015	Initial Report	Click to View	
12/03/2015	Biennial Report	Click to View	
3/02/2018	Biennial Report	Click to View	
2/05/2020	Biennial Report	Click to View	

Close Details

Print Friendly Version

License Detail

LICENSE DETAILS

License #: 1014482

Print Business License

Business Name: BEST WESTERN KODIAK INN

Status: Active

Issue Date: 12/11/2014

Expiration Date: 12/31/2022

Mailing Address: 236 W REZANOF DR

KODIAK, AK 99615-6044

Physical Address: 236 W Rezanof Dr

Kodiak, AK 99615

Owners

ISLAND HOTELS, LLC

Activities

Line of Business	NAICS	Professional License #
72 - Accommodation and Food Services	722110 - FULL-SERVICE RESTAURANTS	
72 - Accommodation and Food Services	721110 - HOTELS (EXCEPT CASINO HOTELS) AND MOTELS	

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.

Close License Detail

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