

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

https://www.co

AMCO

DEC 27 2021

Page 1 of 2

<u>alcohol.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u>

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

Phone: 907.269,0350

Alaska Alcoholic Beverage Control Board

Tourism Statement

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 Information		
Enter information for the business seeking to have its license renewed.	1	
Daine Daine Control of the Control o	License #:	5470
License Type: Perecusar Dispersion - Tox	IRBM	0110
is series to spensary roo	MICH	
Section 2 – Tourism Statement		
2.1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.		
As we are an established lodge that he under our ownership for sleyears we have contered to teurism. With the growing tourists each year to Countwell has be	is bee	en operating
under our ownership for the years we have	re celc	sees !
Coefered to four ism. With the growing	NUME	er of
tourists each year Fin Contracti has be	CAVE	age
to \$200.		
Continued on next p	xege -	
2.2. Explain how the facility was/will be constructed or improved as required by AS 04.11.400(d)(1)):	
Controll Lodge was a Fully Functional	10290	(SE MAIL
rooms openiontil an arson claimed th	e 20	rooms,
Contwelledge is continuing to add to	F SMG	to continue
being a fully tenchional place for-	teur	SM
and the locals		
	YES	NO
2.3 Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located?	M	
	7	<u> </u>
2.4 If "no" who operates the tourism facility?		
NA		
t		



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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:	7	
How many rooms are available? AFTER DEING U. CHEMICEL BY CURSON WE HAD IS rooms with the remaining Snooms b THE SIMMER.	te co	entitished Construct
How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for	food prepar	ation along
with refrigeration and cooking appliance devices, including a microwave)? All of the rooms provide a refrider of microwave and coffeepot, for full service they can enter the case.	ie mee	als
Do you stock or plan to stock alcoholic beverages in guest rooms?	YES	NO
If "no" is your facility located within an airport terminal?	YES	NO X
2.6 If your establishment includes a dining facility, please describe that facility. If it does not please wri	te "none".	
Our dining facility scals 15-20 people, provides and is publiacent to a full service lutchen. It in the bar, but if a customer wants to each in Can with a full service wents to each in	.Turch 13 no 14he 1	is denner it located our, they
2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or guests, other activities that attract tourists), please describe them. If they are not offered, please write	"none"	
Hiking, bery picture, photography snown cross withy skiling, ski journer and accommodate businesses that include hand Phight search, don't stell texts and flyf	achi	logifts,

Section 2 Tourism Stodement

2.1 continued!

Our business offers several items including Chi King, berry picking, photography, snowmachining, and skiing and skii juring) aross country skiing and skii juring) plus access to the many other tourist oriented businessess in the area.

A place For tourists to have
the ability to got a med, drink
or have a place to steep is a most.
As tourism is growing in the contuell
area, we as a foll service business
must continue to grow with the
influction of folks that come into
our area. That way we can continue
providing them with the amenities
that they are need, want and are
accustomed to.

AMCO

DEC 27 2021

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

ISSUED 3/14/2022 ABC BOARD LIQUOR LICENSE 2022 - 2023

TEMPORARY

5470

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

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$2,500.00

1106

D/B/A: Cantwell Lodge and Longhc

Mile 136 Denali Hwy.

Mail Address:

Longhorn Liquor, Inc

PO Box 87

Cantwell, AK 99729

CITY / BOROUGH: Outside City Limits
Denali 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 plate

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 3/14/2022 ABC BOARD LIQUOR LICENSE 2022 - 2023 5470

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COPY

DIRECTOR

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

D/B/A:

Cantwell Lodge and Longhorn Saloon Mile 136 Denali Hwy.

Mailing Address:

Longhorn Liquor, Inc.

PO Box 87

Cantwell, AK 99729



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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-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. **Establishment Contact Information** Licensee (Owner): License #: **License Type: Doing Business As: Premises Address: Local Governing Body: Community Council:** If your mailing address has changed, write the NEW address below: **Mailing Address:** City: State: ZIP: 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: Contact Phone: Contact Email:**), CON 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:** -8743 **Contact Email:** Name of Contact: **Contact Phone: Contact Email:**

Name of Contact:

Contact Email:

Contact Phone:



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 #:	51857D	

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:
 - 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

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

- Limited Liability Corporations, of any type must list ONLY the following:
 - 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

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: 00 Title(s): Phone: % Owned: **Mailing Address:** City: State: ZIP: Name of Official: Title(s): Phone: 590 % Owned: **Mailing Address:** City: State: ZIP: Name of Official: Vest? Title(s): Phone: % Owned: **Mailing Address:**

State:

AMCO

ZIP:

City:



Form AB-17: 2022/2023 License Renewal Application

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- Partnerships of any type, including Limited Partnerships must list ONLY the following:
 - 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.

Name of Official:	Janet Bra	13		
Title(s):	Trecourer	Phone:	907-388-2709	% Owned: 5590
Mailing Address:	POBX 93			1 19
City:	Contwell	State:	Alaska	ZIP: 99759
Name of Official:				
Title(s):		Phone:		% Owned:
Mailing Address:			·	
City:		State:		ZIP:
Name of Official:				
Title(s):		Phone:	40	% Owned:
Mailing Address:				
City:		State:		ZIP:



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) 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 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.

AMCO



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.

provided by AMICO is gro	ounds for rejection or denial of this application or revocation of any license issued.
1 (10)	POSTMASTER/NOTARY PUBLIC
Charles of	PERUSPS ASM 112.2 Wendy Johnson
Signature of licensee	Signature of Notary Public
Janet Brooks	Notary Public in and for the State of: A LASKA
Printed name of licensee	
	My commission expires: \mathcal{N}/\mathcal{A}
S	Subscribed and sworn to before me this 23 day of December 20 21 .

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:	\$ 3500	Application Fee:	\$ 300.00	Misc. Fee:	\$
		Total Fees Due:			\$ 2800

AMCO

DEC 27 2021

Details

ENTITY DETAILS

Name(s)

Type Name

Legal Name LONGHORN LIQUOR, INC.

Entity Type: Business Corporation

Entity #: 51857D

Status: Good Standing

AK Formed Date: 6/14/1993

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2023

Entity Mailing Address: P O BOX 87, CANTWELL, AK 99729

Entity Physical Address: 136 DENALI HIGHWAY, CANTWELL, AK 99729

Registered Agent

Agent Name: Armeda Bulard

Registered Mailing Address: PO BOX 87, CANTWELL, AK 99729

Registered Physical Address: 4 BLACK BEAR LANE, CANTWELL, AK 99729

Officials

			☐Show Former
AK Entity #	Name	Titles	Owned
	Armeda A Bulard	Director, Secretary, Shareholder	15.00
	Chris C Bulard	Director, Shareholder, Vice President	15.00
	Janet E Brooks	Director, Treasurer, Shareholder	55.00
	Michael P Brooks	Director, President, Shareholder	15.00

Filed Documents

Date Filed	Туре	Filing	Certificate
6/14/1993	Creation Filing		
11/23/1993	Biennial Report		
12/29/1994	Biennial Report	Click to View	
12/23/1996	Biennial Report	Click to View	
12/28/1998	Biennial Report	Click to View	
12/29/2000	Biennial Report	Click to View	
4/21/2003	Biennial Report	Click to View	

Date Filed 1/11/2005	Type Biennial Report	Filing Click to View	Certificate
10/20/2006	Biennial Report	Click to View	
2/07/2011	Biennial Report	Click to View	
2/07/2011	Biennial Report	Click to View	
2/07/2011	Change of Officials	Click to View	
12/29/2012	Biennial Report	Click to View	
9/16/2013	Change of Officials	Click to View	
10/06/2014	Change of Officials	Click to View	
4/29/2015	Biennial Report	Click to View	
12/06/2016	Biennial Report	Click to View	
2/08/2018	Change of Officials	Click to View	
4/25/2019	Biennial Report	Click to View	
5/15/2020	Change of Officials	Click to View	
11/30/2020	Biennial Report	Click to View	

Close Details

Print Friendly Version

License Detail

LICENSE DETAILS

License #: 175680

Print Business License

Business Name: CANTWELL LODGE

Status: Active

Issue Date: 01/13/1994

Expiration Date: 12/31/2022

Mailing Address: PO BOX 87

CANTWELL, AK 99729

Physical Address: 136 Denali Highway

CANTWELL, AK 99729

Owners

LONGHORN LIQUOR, INC.

Activities

Line of Business	NAICS	Professional License #
70 Appropriate delicer and Feed Comission	704440 HOTELO (EVOEDT OAGING HOTELO) AND MOTELO	

72 - Accommodation and Food Services 72111

721110 - HOTELS (EXCEPT CASINO HOTELS) AND MOTELS

Endorsements

End#	Issue	Renew	Expiration	Action End	Action Note	Address
1	10/28/2005		12/31/2006			M.P. 136 DENALI HIGHWAY, CANTWELL, AK 99729
2	11/1/2006		12/31/2008			M.P. 136 DENALI HWY, CANTWELL, AK 99729

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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