



MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: February 22, 2022
FROM: Kristina Serezhenkov, OLE RE: #1766 Hatcher Pass Lodge

Requested action: Consideration of transfer of ownership application for Beverage Dispensary license.

Statutory and Regulatory Authority:

Renewal; transfer of ownership; evaluation of the public interest under AS 04.11.360(1) and 3 AAC 304.180.

AS 04.06.090(b): "The board shall review all applications for licenses made under this title and may order the director to issue, renew, revoke, transfer, or suspend licenses and permits authorized under this title."

AS 04.11.040(a): "A license issued under this title may not be transferred to another person except with the written consent of the board."

3 AAC 304.180. Denial, suspension, revocation, or refusal to renew or transfer, in the public interest:

- (a) The board may consider the following factors in determining whether it is in the public interest to deny, revoke, suspend, or refuse to renew or transfer a license:
 - (1) the applicant's, the applicant's affiliates', the transferee's, or the transferee's affiliates' histories of conviction of a felony in this state, the United States, or another state or territory during the 15 years immediately preceding the date of application;
 - (2) the applicant's, the applicant's affiliates', the transferee's, or the transferee's affiliates' histories of commission of
 - (A) a violation of AS 04 or regulations adopted by the board; or
 - (B) a violation of the alcoholic beverage control laws of another state, as a licensee of that state;
 - (3) whether the applicant, the applicant's affiliates, the transferee, or the transferee's affiliates are untrustworthy, unfit to conduct a licensed business, or a potential source of harm to the public;
 - (4) whether the applicant, the applicant's affiliates, the transferee, or the transferee's affiliates have permitted, on licensed premises belonging to that person, the occurrence of sexual contact between persons; for the purpose of this paragraph, "sexual contact" means the touching of genitals, anus, or female breast or the intrusion of any object into the genital or anal opening regardless of whether the act was consensual; and

(5) all other factors the board in its discretion determines relevant to the public interest.

(b) A local governing body may properly protest an application under AS 04.11.480 using the factors set out in (a) of this section.

Staff Rec.: Evaluate the public interest under AS 04.11.360(1) when considering the transfer application.

Background: This application is for a transfer of a Beverage Dispensary #1766 Hatcher Pass Lodge to Hatcher Pass Lodge 1 LLC. Mr. French, a member of this entity, submitted an AB-08a Authorization of Records release form and a letter of explanation. Mr. French's background investigation has been completed and there were no findings.

Attachments:

AB-08a: Authorization of Records Release

AB-01

AB-02

AB-03

Confidential Written Explanation-provided separately

Confidential Correspondence-provided separately



Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

What is this form?

This authorization of records release form is required for all liquor license applications. Each licensee and affiliate who is required to be listed on an application for a liquor license under AS 04.11.260 must provide written authorization for release of conviction and arrest records, as required by 3 AAC 304.105(a)(1).

The following individuals must complete this form:

- If the applicant is a sole proprietor, this form must be completed by the **applicant** and the applicant's **spouse**.
- If the applicant is a **corporation**, this form must be completed for each **stockholder who owns 10% or more** of the stock in the corporation, and for each **president, vice-president, secretary, and managing officer**.
- If the applicant is a **limited liability organization**, this form must be completed for each **member with an ownership interest of 10% or more**, and for each **manager**.
- If the applicant is a **partnership**, including a **limited partnership**, this form must be completed for each **partner with an interest of 10% or more**, and for each **general partner**.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

Section 1 – Establishment Information

Enter information for licensed establishment.

Licensee:	Hatcher Pass Lodge 1, LLC				
License Type:	Beverage Dispensary	License Number:	1766		
Doing Business As:	Hatcher Pass Lodge				
Premises Address:	Mile 17.5 Fishhook-Willow Road				
City:	Palmer	State:	AK	ZIP:	99645

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Richard French, Jr
Title:	Member
Date of Birth:	



Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

Section 3 – Certifications and Approvals

Read each line below, and then sign your initials in the box to the right of any applicable statements:

Initials

I certify that I have **never** been convicted of a violation of AS 04 or regulations adopted by the ABC Board.



I certify that I have **never** been convicted of a violation of the alcoholic beverage control laws of another state, as a licensee of that state.



I certify that I have **not** been convicted of a felony in this state, the United States, or another state or territory, including a suspended imposition of sentence, during the 15 years immediately preceding the date of this form.



Sign your initials to the following statement only if you are unable to certify one or more of the above statements:

Initials

I **have been convicted** of one or more of the above offenses, and I **have attached a written explanation** that includes the type of offense and why it would be in the public interest for the ABC Board to approve me as a licensee.



I understand that by signing this form, I am providing written authorization for release of my conviction and arrest records to the Alaska Alcoholic Beverage Control Board through the Alaska Alcohol & Marijuana Control Office under AS 04.11.295 and 3 AAC 304.105. I understand that my fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), and that I have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. *The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.*

I declare under penalty of perjury that this form, including all attachments and accompanying schedules and statements, is true, correct, and complete.

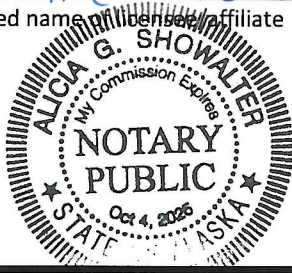

Signature of licensee/affiliate

Richard French
Printed name of licensee/affiliate


Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: Oct. 4, 2026



Subscribed and sworn to before me this 16th day of December, 2021.



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

What is this form?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04 of Alaska Statutes** and **Chapter 304 of the Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 – Transferor Information

Enter information for the **current** licensee and licensed establishment.

Licensee:	Hatcher Pass Corporation	License #:	1766		
License Type:	Beverage Dispensary	Statutory Reference:	04.11.090		
Doing Business As:	Hatcher Pass Lodge				
Premises Address:	Mile 17.5 Fishhook-Willow Road				
City:	Palmer	State:	AK	ZIP:	99645
Local Governing Body:	Mat-Su Borough				

Transfer Type:

- ☒ Regular transfer
☐ Transfer with security interest
☐ Involuntary retransfer

OFFICE USE ONLY

Complete Date:	2/22/2022	Transaction #:	100320542
Board Meeting Date:	4/12/2022	License Years:	20-21 in renewal
Issue Date:		BRE:	KRS



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application**Section 2 – Transferee Information**Enter information for the **new** applicant and/or location seeking to be licensed.

Licensee:	Hatcher Pass Lodge 1, LLC				
Doing Business As:	Hatcher Pass Lodge				
Premises Address:	Mile 17.5 Fishhook-Willow Road				
City:	Palmer	State:	AK	ZIP:	99645
Community Council:	Fishhook				

Mailing Address:	1210 U Street, Apt 2				
City:	Anchorage	State:	AK	ZIP:	99501

Designated Licensee:	Benjamin Wasson			
Contact Phone:	907-903-7664	Business Phone:	907-903-7664	
Contact Email:	benwasson@gmail.com			

Seasonal License? Yes No
☐ ☒ If "Yes", write your six-month operating period: _____

Section 3 – Premises Information

Premises to be licensed is:

☒ an existing facility ☐ a new building ☐ a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer.

Palmer High School: 19.6 Miles

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.

First Baptist Church: 20.6 Miles



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application**Section 4 – Sole Proprietor Ownership Information**

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5.

If more space is needed, please attach a separate sheet with the required information.

The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	

Section 5 – Entity Ownership Information

This section must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.

If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a corporation, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president, vice-president, secretary, and managing officer*.
- If the applicant is a limited liability organization, the following information must be completed for each *member with an ownership interest of 10% or more*, and for each *manager*.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

Entity Official:	Benjamin Wasson				
Title(s):	Member	Phone:	907-903-7664	% Owned:	40
Address:	2708 Aspen Drive				
City:	Anchorage	State:	AK	ZIP:	99517



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:	Richard French, Jr				
Title(s):	Member	Phone:	907-841-8773	% Owned:	40
Address:	1210 U Street, Apt 2				
City:	Anchorage	State:	AK	ZIP:	99501

Entity Official:	Joseph Stockwell				
Title(s):	Member	Phone:	408-839-2219	% Owned:	20
Address:	19 Bennett Road				
City:	Redwood City	State:	CA	ZIP:	94062

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10172096	AK Formed Date:	8/25/21	Home State:	AK
Registered Agent:	Benjamin Wasson	Agent's Phone:	907-841-8773		
Agent's Mailing Address:	1210 U Street, Apt 2				
City:	Anchorage	State:	AK	ZIP:	99501

Residency of Agent:

Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?



DEC 20 2021



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses:

Yes No

Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?

☐☒

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

Section 7 – Authorization

Communication with AMCO staff:

Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

☒☐

If "Yes", disclose the name of the individual and the reason for this authorization:

The Law Offices of Ernouf & Coffey, P.C. is assisting with the transfer of the license.



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

Mark R. Musial
Signature of transferor

MARK R. MUSIAL, PERSONAL REPRESENTATIVE
Printed name of transferor KARL WORLITZER ESTATE

Subscribed and sworn to before me this 18th day of November, 2021.



[Signature]
Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 11/06/2024

Mark R. Musial
Signature of transferor

MARK R. MUSIAL
Printed name of transferor

President (Former V. Pres.) Subscribed and sworn to before me this 18th day of November, 2021.
HATCHER PASS CORP.



[Signature]
Signature of Notary Public

Notary Public in and for the State of Alaska.

My commission expires: 11/06/2024



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

BW

I certify that all proposed licensees have been listed with the Division of Corporations.

BW

I certify 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.

BW

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.

BW

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

BW

As an applicant for a liquor license, 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, is true, correct, and complete.

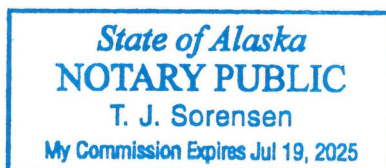
Signature of transferee

Benjamin Wasson

Printed name

Subscribed and sworn to before me this 18th day of November, 2021.

Signature of Notary Public



Notary Public in and for the State of Alaska.

My commission expires: November 19, 2025

STATE OF ALASKA

CERTIFICATION OF VITAL RECORD

STATE OF ALASKA

ALASKA DEPARTMENT OF HEALTH AND SOCIAL SERVICES - BUREAU OF VITAL STATISTICS
P.O. Box 110675, Juneau, AK 99811-0675

DATE FILED 10/29/2020

CERTIFICATE OF DEATH

STATE FILE NO. 2020003614

1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last) KARL ALBERT WURLITZER			2. SEX MALE		3. SOCIAL SECURITY NUMBER [REDACTED]	
4a. AGE-Last Birthday (Years) 83		4b. UNDER 1 YEAR Months _____ Days _____		4c. UNDER 1 DAY Hours _____ Minutes _____		5. DATE OF BIRTH (MM/DD/YY) [REDACTED]
7a. RESIDENCE-STATE ALASKA			7b. COUNTY MATANUSKA SUSITNA		7c. CITY OR TOWN WILLOW	
7d. STREET AND NUMBER MILE 17 WILLOW FISHHOOK			7e. APT. No. [REDACTED]		7f. ZIP CODE 99688	
8. EVER IN US ARMED FORCES? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown			9. MARITAL STATUS AT TIME OF DEATH NEVER MARRIED		10. SURVIVING SPOUSE'S NAME (If wife, give name prior to first marriage) [REDACTED]	
11. FATHER'S NAME (First, Middle, Last) ALBERT EDWARD WURLITZER			12. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle Last) DOROTHY MAY ETHEL AMOS			
13a. INFORMANT'S NAME RALPH BALDWIN		13b. RELATIONSHIP TO DECEDENT FRIEND		13c. MAILING ADDRESS (Street and Number, City, State, Zip Code) 3850E. WICKERSHAM WAY WASILLA, ALASKA 99654		
14. DECEDENT'S EDUCATION: 3. HIGH SCHOOL GRADUATE OR GED		16. DECEDENT'S RACE: <input checked="" type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaskan Native (Name of the enrolled or principal tribe) <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian (Specify) _____		17. DECEDENT'S USUAL OCCUPATION OWNER		
15. DECEDENT OF HISPANIC ORIGIN? <input checked="" type="checkbox"/> No, not Spanish/Hispanic/Latino(a) <input type="checkbox"/> Yes, Mexican, Mexican American, Chicano(a) <input type="checkbox"/> Yes, Puerto Rican <input type="checkbox"/> Yes, Cuban <input type="checkbox"/> Yes, other Spanish/Hispanic/Latino(a)		16. DECEDENT'S RACE: (Continued) <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro(a) <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander (Specify) _____ <input type="checkbox"/> Other (Specify) _____		18. KIND OF BUSINESS OR INDUSTRY HOSPITALITY/LODGING		
19. PLACE OF DEATH: INPATIENT			20. FACILITY NAME (If not institution, give street & number) MAT-SU REGIONAL MEDICAL CENTER			
21. CITY OR TOWN, STATE AND ZIP CODE PALMER, ALASKA 99645			22. COUNTY OF DEATH MATANUSKA SUSITNA			
23. METHOD OF DISPOSITION <input type="checkbox"/> Burial <input checked="" type="checkbox"/> Cremation <input type="checkbox"/> Donation <input type="checkbox"/> Entombment <input type="checkbox"/> Removal from State <input type="checkbox"/> Other (Specify) _____			24. PLACE OF DISPOSITION: JANSSEN'S ALASKA CREMATION CENTER			
25. LOCATION - CITY, TOWN AND STATE ANCHORAGE, AK			26. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY JANSSEN'S EVERGREEN MEMORIAL CHAPEL 737 E STREET ANCHORAGE, ALASKA 99501			
27. NAME OF FUNERAL SERVICE LICENSEE OR OTHER AGENT (SIGNATURE ON FILE) Steve Baldeshwiler			28. LICENSE NUMBER (Of Licensee) [REDACTED]			
29. DATE PRONOUNCED DEAD (MM/DD/YY) [REDACTED]			30. TIME PRONOUNCED DEAD 05:00			
31. SIGNATURE OF PERSON PRONOUNCING DEATH (Only when applicable) [REDACTED]			32. LICENSE NUMBER [REDACTED]		33. DATE SIGNED (MM/DD/YY) [REDACTED]	
34. ACTUAL OR PRESUMED DATE OF DEATH (MM/DD/YY) 10/24/2020			35. ACTUAL OR PRESUMED TIME OF DEATH 05:00		36. WAS MEDICAL EXAMINER OR CORONER CONTACTED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
37. PART I. CAUSE OF DEATH						Approximate Interval: Onset to death 10 HOURS 10 HOURS 10 HOURS
a. PNEUMONIA AND SEPSIS Due to (or as a consequence of): _____						
b. RENAL FAILURE Due to (or as a consequence of): _____						
c. SEVERE LACTIC ACIDOSIS Due to (or as a consequence of): _____						
d. _____						
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause						38. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
39. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No						
40. DID TOBACCO USE CONTRIBUTE TO DEATH? N		41. IF FEMALE (PREGNANCY STATUS) 8. NOT APPLICABLE		42. MANNER OF DEATH NATURAL CAUSES		
43. DATE OF INJURY (MM/DD/YY) [REDACTED]		44. TIME OF INJURY [REDACTED]		45. PLACE OF INJURY (e.g., Decedent's home; construction site; restaurant; wooded area) [REDACTED]		
47. LOCATION OF INJURY: (Street & Number, Apt. No., City or Town, State, Zipcode) [REDACTED]						46. INJURY AT WORK? <input type="checkbox"/> Yes <input type="checkbox"/> No
48. DESCRIBE HOW INJURY OCCURRED: [REDACTED]						49. IF TRANSPORTATION INJURY, SPECIFY: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Unknown <input type="checkbox"/> Other (Specify) _____
50a. CERTIFIER: CERTIFYING PHYSICIAN						
50b. NAME OF CERTIFIER (SIGNATURE ON FILE) MARIA FREEMAN						
51. ADDRESS, AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH 1261 S. SEWARD MERIDIAN PKWY #A WASILLA AK 99654						
52. LICENSE NUMBER 3237		53. DATE CERTIFIED (MM/DD/YY) 10/28/2020				

I CERTIFY THAT THIS IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE IN THE BUREAU OF VITAL STATISTICS, DEPARTMENT OF HEALTH AND SOCIAL SERVICES, JUNEAU, ALASKA.

DATE ISSUED **November 9, 2020**

This copy not valid unless prepared on engraved border displaying the date, seal and signature of the Alaska State Registrar.

Clint J. Farr
State Registrar



IN THE SUPERIOR COURT FOR THE STATE OF ALASKA
THIRD JUDICIAL DISTRICT AT ANCHORAGE

In the Matter of the Estate)
)
 of)
)
 KARL ALBERT WURLITZER,)
)
 Deceased.)

Case No. 3AN-20- 2451 PR

LETTERS TESTAMENTARY

Pursuant to AS 13.16.010, the will of KARL ALBERT WURLITZER has been admitted to probate and MARK R. MUSIAL is appointed personal representative of the estate.

December 8, 2020
Date

[Signature]
Registrar

ACCEPTANCE

I, Mark R. Musial, accept the duties and promise to perform the duties as required by law of the office of personal representative of the estate of Karl Albert Wurlitzer. I acknowledge my duty as personal representative to:

(a) take possession and control of decedent's property as required by AS 13.16.380, determine the liabilities of the estate, and complete an inventory as required by AS 13.16.365;

(b) provide notice to heirs and devisees as required by AS 13.16.360, except as provided by AS 13.16.690;

MANLEY
& BRAUTIGAM
ATTORNEYS AT LAW
A PROFESSIONAL CORPORATION
1127 W. 7TH AVENUE
ANCHORAGE, AK 99501
PHONE: (907) 334-8800
FAX: (907) 334-8888

Letters Testamentary
IMO Estate of Karl Albert Wurlitzer

AMCO
DEC 21 2021

NOV 12 2020

(c) provide notice to creditors as required by law, publish notice when required, and review and either accept or reject claims as required by AS 13.16.450-.515;

(d) advise the court in writing of my address and telephone number as required by Probate Rule 8;

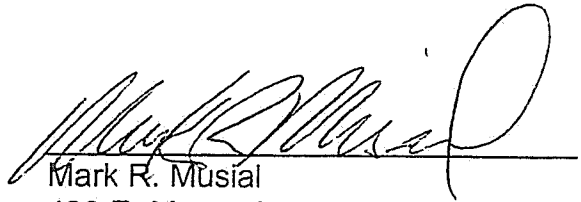
(e) file returns for state estate taxes, if required by AS 43.31.121 and AS 43.31.250;

(f) pay homestead, exempt property and family allowances as required by AS 13.12.401-.404, costs of administration and other claims as required by AS 13.16.470, and distribute the assets of the estate; and

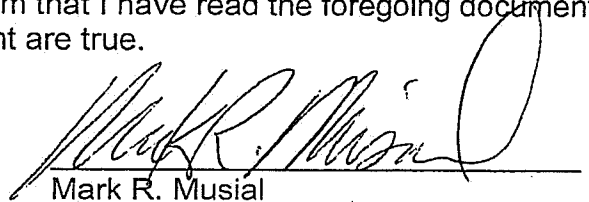
(g) close the estate as soon as appropriate as required by AS 13.16.620-670.

I will file any required bond.

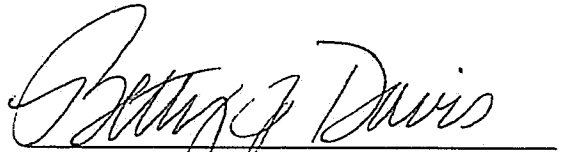
11 Nov. 2020
Date


Mark R. Musial
400 E. Manor Avenue
Anchorage, Alaska 99501
Telephone: (907)250-2250

I, Mark R. Musial, say on oath or affirm that I have read the foregoing document and believe all statements made in the document are true.


Mark R. Musial

Subscribed and sworn to or affirmed before me on the 11th day of November, 2020.


Notary Public in and for Alaska
My commission expires: 9/11/23

I hereby certify that this is a true and correct copy of the original on file in my office.

ATTEST: [Signature] Clerk of the Trial Courts
M:\MB\14309101 Letters Testamentary.wpd
By: [Signature] Deputy
Date: 12/8/2020
Letters Testamentary
IMO Estate of Karl A. Wurlitzer

I certify that on 12/8/2020
a copy of this document was faxed to
each of the following addresses of record:

P. Brautigam Page 2
Judicial Assistant

DEC 9 1 2020



Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram**What is this form?**

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

Yes No

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.

☐☒**Section 1 – Establishment Information**

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Hatcher Pass Lodge 1, LLC	License Number:	1766		
License Type:	Beverage Dispensary				
Doing Business As:	Hatcher Pass Lodge				
Premises Address:	Mile 17.5 Fishhook-Willow Road				
City:	Palmer	State:	AK	ZIP:	99645

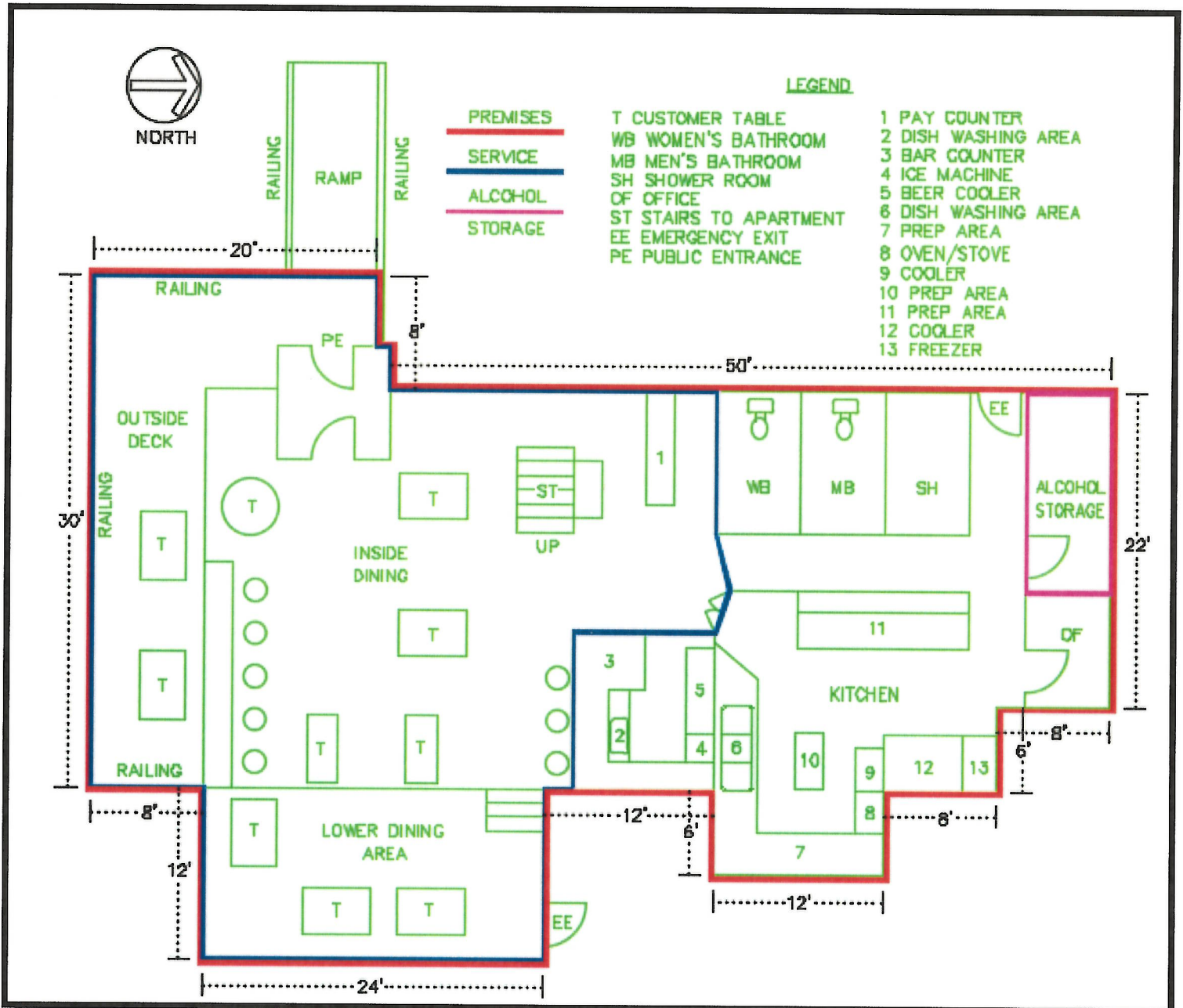


Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

Section 2 – Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, and fixtures, and outline in red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Include dimensions, cross-streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of this form.





Alaska Alcoholic Beverage Control Board

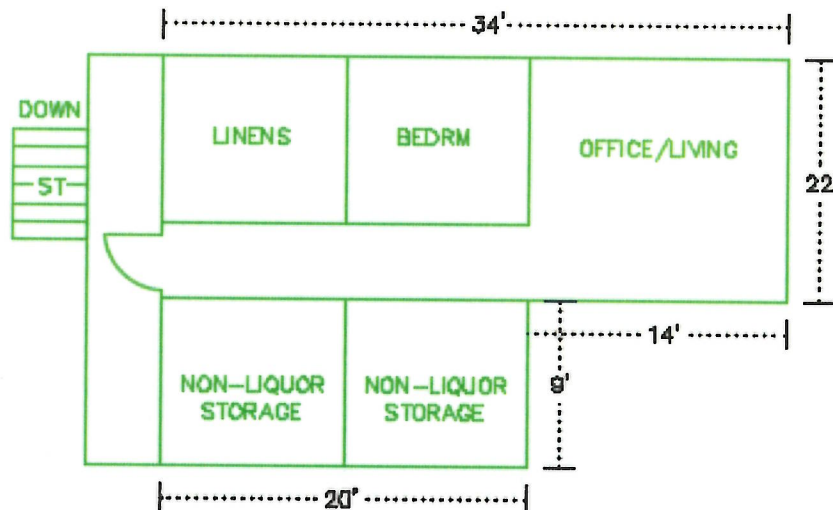
Form AB-02: Premises Diagram

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UPSTAIRS PRIVATE APARTMENT
NOT IN LIQUOR SERVICE AREA





Matanuska-Susitna Borough



- Legend**
- Road Mileposts
 - Roads**
 - Highway
 - Major Road
 - Medium Road
 - Minor Road
 - Ramp
 - Primitive Road
 - Private Road
 - Alaska Railroad
 - Mat-Su Borough Boundary
 - Incorporated Cities
 - Address Numbers
 - Parcels
 - Government Lot Lines
 - ROW and Easements
 - ROW Road
 - ROW RR
 - ROW Easement
 - Section line easement
 - Lakes and Rivers
 - Streams
 - 100 year Flood Zone
 - Section Lines

1: 1,200



WGS_1984_Web_Mercator_Auxiliary_Sphere
© Latitude Geographics Group Ltd.

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THIS MAP IS NOT TO BE USED FOR NAVIGATION

Notes

This map was automatically generated using Geocortex Essentials.

AMCO Received 2/17/2022

Hatcher Pass Lodge 1, LLC
Outside Security Plan

Hatcher Pass Lodge 1, LLC d.b.a. Hatcher Pass Lodge is located at Mile 17.5 Fishhook-Willow Road, Palmer, Alaska 99645.

The outside deck area is used during good weather and staff dependent. There is a 36-inch tall railing around the deck. During use the area will be monitored so no one will be able to enter and or exit the area via the ramp with alcoholic beverages.

There will be a manager on site at all times, and when the outdoor serving area is open (weather and staffing dependent), there will be staff walking between the indoor area, and outdoor area to monitor alcohol consumption.



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application**What is this form?**

A restaurant designation permit application is required for a licensee desiring designation under 3 AAC 304.715 – 3 AAC 304.795 as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049. Designation will be granted only to a holder of a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license, and only if the requirements of 3 AAC 304.305, 3 AAC 304.725, and 3 AAC 304.745, as applicable, are met. A menu or expected menu listing the meals, including entrees prepared onsite and offered to patrons, and copy of the DEC Food Service Permit (or corresponding DHHS documentation for licenses located in the Municipality of Anchorage) must accompany this form. Applicants should review AS 04.16.049 – AS 04.16.052 and 3 AAC 304.715 – 3 AAC 304.795. All fields of this form must be completed. The required \$50 permit fee may be made by credit card, check, or money order.

Section 1 – Establishment Information

Enter information for licensed establishment.

Licensee:	Hatcher Pass Lodge 1, LLC				
License Type:	Beverage Dispensary	License Number:	1766		
Doing Business As:	Hatcher Pass Lodge				
Premises Address:	Mile 17.5 Fishhook-Willow Road				
City:	Palmer	State:	AK	ZIP:	99645
Contact Name:	Benjamin Wasson	Contact Phone:	907-903-7664		

Section 2 – Type of Designation Requested

This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

- ☒ Dining after standard closing hours: AS 04.16.010(c)
 - ☒ Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)
 - ☒ Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)
 - ☒ Employment for persons 16 or 17 years of age: AS 04.16.049(c)
- NOTE: Under AS 04.16.049(d), this permit is not required to employ a person 18 - 20 years of age.

OFFICE USE ONLY			
Transaction #:	Initials:	100320542	



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 3 – Minor Access

Review AS 04.16.049(a)(2); AS 04.16.049(a)(3); AS 04.16.049(c)

List where within the premises minors are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Minors will only be allowed in the dining area. OR Minors will only be employed and present in the Kitchen.)

Minor patrons are allowed in the restaurant area, hotel rooms, deck area, and bathrooms. They are not permitted behind the bar, or in the kitchen areas.

Minor Employees are allowed in the restaurant area, kitchen area, deck area, and bathrooms. They are not permitted behind the bar.

Describe the policies, practices and procedures that will be in place to ensure that minors do not gain access to alcohol while dining or employed at your premises.

Storage: All alcohol will be locked in secure storage. This will only be accessible by the restaurant owners, general manager and bar tender. Each of these individuals will be at least 21 years old and will hold on their persons a current TAP or eTIP card verifying that they have been trained to control the distribution and service of alcoholic beverages in Alaska.

Access/Service: There will be alcohol sales and delivery outside on the deck area only. Dining guests must walk in and out the same door, which controls the transfer of alcohol. An owner or manager is always on site and monitors the consumption of alcohol.

Is an owner, manager, or assistant manager who is 21 years of age or older always present on the premises during business hours?

Yes No



Section 4 – DEC Food Service Permit

Per 3 AAC 304.910 for an establishment to qualify as a Bona Fide Restaurant, a Food Service Permit or (for licenses within the Municipality of Anchorage) corresponding Department of Health and Human Services documentation is required.

Please follow this link to the DEC Food Safety Website: <http://dec.alaska.gov/eh/fss/food/>

Please follow this link to the Municipality Food Safety Website:

<http://www.muni.org/Departments/health/Admin/environment/FSS/Pages/fssfood.aspx>

IF you are unable to certify the below statement, please discuss the matter with the AMCO office:

Initials

I have attached a copy of the current food service permit for this premises OR the plan review approval.



**Please note, if a plan review approval is submitted, a final permit will be required before finalization of any permit or license application.*



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 5 – Hours of Operation

Review AS 04.16.010(c).

Enter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/pm:

Monday to Sunday: 7am to 10pm

Section 6 – Entertainment & Service

Review AS 04.11.100(g)(2)

Are any forms of entertainment offered or available within the licensed business or within the proposed licensed premises?

Yes

No



If "Yes", describe the entertainment offered or available and the hours in which the entertainment may occur:

Small bands play. There is not a set schedule but usually they play on Saturday afternoons.

Food and beverage service offered or anticipated is:



table service



buffet service



counter service



other

If "other", describe the manner of food and beverage service offered or anticipated:



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application**Section 7 – Certifications and Approvals**

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

There are tables or counters at my establishment for consuming food in a dining area on the premises.

I have included with this form a menu, or an expected menu, listing the meals to be offered to patrons.
This menu includes entrees that are regularly sold and prepared by the licensee at the licensed premises.

I certify that the license for which I am requesting designation is either a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license.

I have included with this application a copy of the most recent AB-02 or AB-14 for the premises to be permitted.
(AB-03 applications that accompany a new or transfer license application will
not be required to submit an additional copy of their premises diagram.)

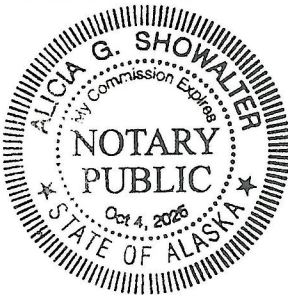
I declare under penalty of perjury that this form, including all attachments and accompanying schedules and statements, is true, correct, and complete.

Signature of licensee
Signature of Notary Public

Benjamin Wasson

Notary Public in and for the State of Alaska

Printed name of licensee

My commission expires: Oct. 4, 2026Subscribed and sworn to before me this 16th day of December, 20 21.**Local Government Review** (to be completed by an appropriate local government official):

Approved

Denied



Signature of local government official

Date

Printed name of local government official

Title



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

AMCO Enforcement Review:

Enforcement Recommendation:

Approve

Deny

☐☐

Signature of AMCO Enforcement Supervisor

Printed name of AMCO Enforcement Supervisor

Date

Enforcement Recommendations:

AMCO Director Review:

Approved

Denied

☐☐

Signature of AMCO Director

Printed name of AMCO Director

Date

Limitations:



BEVERAGES

Soft Drinks: Coke, Diet Coke, Root Beer, 7~Up\$3.00

Coffee: Café del Mundo, River Blend (Free Refills) \$3.00

Hot Tea: Herbal or Lipton\$2.00

Juice: Orange, Apple, Tomato, Cranberry\$3.50

Silk Milk: Vanilla or Chocolate\$3.50

Hot Chocolate: With homemade whipped cream\$4.25

Hot Spiced Cider: With cinnamon stick and nutmeg...\$3.50

*For more drinks, including beer & wine see our Drink Menu



DESSERTS



Fresh Baked Pies: Apple or Razzleberry (Blackberries & Raspberries).

Slice\$7.00

Ala mode\$10.00

N.Y. Style Cheesecake:

With Raspberry Sauce & Whipping Cream if preferred\$8.50

AMCO

DEC 20 2021

Hatcher Pass Baked Goods: Baked from scratch here at the lodge.
Ask server for goodies of the day! Prices Vary

SANDWICHES

Served with your choice of potato chips or homemade potato salad.

**Add cheese (Tillamook, Havarti or Swiss) to any sandwich for .50 extra*

- Tempeh Sandwich:** A delicious soybean alternative to meat. Grilled in toasted sesame oil, with lettuce, tomato, red onion, poupon mustard, mayo, & sweet pickle relish, served on 12 grain Oroweat bread \$16.75
- Veggie Sandwich:** With avocado, red onion, lettuce, tomato, mayo & Havarti cheese, served on 12 grain Oroweat bread \$15.75
- Burger:** 1/3 Pounder, with lettuce, tomato, red onion & mayo \$16.75
- Turkey Sandwich:** Fresh roasted here at the Lodge, with cranberries, lettuce & mayo on 12 grain Oroweat bread \$17.75
- Grilled Swiss Turkey:** Fresh roasted turkey served on Oroweat bread, with Swiss cheese, mayo and fresh tomatoes \$18.75
- Black Forest Ham & Cheese:** Grilled or cold, with Tillamook cheddar, lettuce, tomato, mayo, mustard, red onion on Oroweat bread \$18.75
- Smoked Halibut or Salmon on a Bagel:** Alaskan smoked halibut with cream cheese, red onion & Capers \$19.75
- Tuna Salad Sandwich:** Grilled or cold with red onions, lettuce, & tomatoes on wheat bread \$17.00
- Salmon Melt:** Alaska Salmon patty topped with melted havarti cheese, served open faced tomato, avocado, spinach, red onion on wheat bread..... \$18.75
- Salmon Burger:** A delicious Alaskan salmon patty served with lettuce, tomato, red onion & our homemade tartar sauce on a bun \$17.75
- Fried Egg:** Two eggs with lettuce & mayo on Oroweat bread \$10.00
- Grilled Cheese:** Tillamook or Havarti cheese on Oroweat bread \$10.00
- PBJ:** Adam's (100% Natural) peanut butter & jam on Oroweat bread \$6.50
- Bagel & Cream Cheese** \$6.00



Hatcher Pass Lodge generates its own electric power by a small diesel generator. Telephone service is provided via a line of sight radio link to the town of Palmer. The Lodge is situated on 10 acres of private land that was filed on in 1963 and patented in 1977. We're 60 miles north of Anchorage and four hours from the Alaska Range and Denali National Park.

AMCO

DEC 20 2021

SWISS/MEXICAN

Swiss Cheese Fondue: Gruyere & Emmentaler cheeses, nutmeg, garlic, black pepper, Kirshwasser & wine, with French bread & sliced apple.....\$35.00

Cheese & Crackers Plate: A variety of cheese, & crackers. Served with Poupon mustard. 9" Tray \$16.50

Top Nacho: Taco Loco corn chips, Tillamook cheddar cheese, low~fat beans, lettuce, sour cream & salsa.

9" Tray \$18.00

13" Tray \$29.50

Nachos: Taco Loco corn chips, Tillamook cheddar cheese & salsa.

9" Tray \$10.00

13" Tray \$15.00

Chips & Salsa: A Basket of Taco Loco corn chips with mild salsa \$10.00

Quesadilla:

Flour tortilla filled with Tillamook cheddar, fresh spinach, tomato, avocado, salsa & sour cream.....\$18.50

Just Cheese \$11.00

Add Smoked Salmon or Halibut\$25.00

Black Bean Quesadilla:

Black beans, avocado, Monterey jack cheese, salsa \$18.00

SOUP & SALAD

Homemade Soup of the Day: A favorite, served with crackers.

Cup \$7.00

Bowl \$10.00

** Served with French bread and butter, add an extra \$1.00*

House Salad: Romaine, tomato, mushroom, cucumber & croutons\$9.00

Salmon or Turkey Avocado Salad: Sautéed salmon or oven roasted turkey with romaine, tomatoes, avocado, mushrooms, cucumbers &

croutons\$24.50

Hatcher Salad: Spinach, tomato, avocado, red onion, strawberries,

crumbled feta cheese and walnuts \$15.50

Skier's Special: Bowl of soup, fresh house salad,

French bread & butter \$17.50



HOMEMADE DRESSINGS:

Ranch, Blue Cheese & House (vinegar, oil, soy, minced onion, AMCO ginger & sugar)

DEC 20 2011

PIZZAS

Allow 25 Minutes for pizza

Cheese	6" ... \$12.00	12" ... \$17.00
Pepperoni	6" ... \$14.00	12" ... \$21.00
Vegetarian: Red onion, green pepper,	6" ... \$16.00	12" ... \$25.00
mozzarella, fresh mushrooms, spinach, topped with fresh tomatoes.		
Greek: Garlic butter sauce, feta, spinach,	6" ... \$17.50	12" ... \$27.00
mozzarella, topped with fresh tomatoes.		
Smoked Halibut: Smoked halibut,	6" ... \$20.00	12" ... \$30.00
red onions, cream cheese & capers. (Not served with cheese or sauce)		

AFTER FIVE IDEAS

Spinach & Tomato Fettuccine: A unique recipe with minced garlic, fresh spinach & tomatoes topped with fresh Parmesan\$25.95

Add smoked salmon or halibut \$32.50

Spaghetti: With our vegetarian marinara sauce\$22.50

Or Our Meat Sauce\$24.50



In 1906 Robert L. Hatcher staked and filed the first hard rock gold claim opening one of the richest chapters in Alaska mining history lasting until 1953 when Independence Mine was finally closed, In the late 1970's the Independence Mine State Historical Park was established, Where today guides lead walking tours among its old romantic buildings in the summer months.

AMCO

DEC 20 2020

MEMO TO AMCO BOARD
LAW OFFICES OF ERNOUF & COFFEY, PC
PO Box 212314
ANCHORAGE, ALASKA 99521-2314
(907) 274-3385

TO: ABC BOARD STAFF
FROM: AMANDA SHAWCROSS/SHERMAN ERNOUF
RE: TRANSFER BDL #1766
DATE: 12/16/21

The purpose of this memo is to submit to you a completed application for transfer for beverage dispensary liquor license #1766.

Please find attached check #5459 in the amount of \$694.75 for the application filing fees.

The following documents are enclosed:

1. Pages 1-7 of the Transfer Application.
2. Creditors Affidavit
3. Statement of Financial Interest.
4. Posting Affidavit.
5. Affidavit Publication.
6. Diagram
7. Certificate, Articles of Organization, Operating Agreement
8. Lease
9. Deck Security Plan.
10. RDP, and Menu. (A food permit is being applied for and will be submitted at a later date)
11. 3 X AB08s and fingerprint cards.

If you have any questions in regards to this Memo or need any additional information, please call our offices directly at (907) 274-3385 or email ashawcross@eclawfirm.org. Thank you for your time and attention to this matter.

AMCO

DEC 20 2021



**Alaska Food Code
2021 Establishment Permit**

Division of Environmental Health
Food Safety & Sanitation Program

Permit Number: 11682
Issued to: **HATCHER PASS CORP DBA HATCHER PASS LODGE**
For: **Hatcher Pass Lodge Food Service**
For Operation of: **FF-1 Food Service**
Located at: **Mile 17.5 Fishhook Willow RD Palmer, AK 99645**

This permit, issued under the provisions of 18 AAC 31, is valid until the noted expiration date or unless suspended or revoked by the department.

This permit is not transferable for change of ownership, facility location, or type of operation. It must be posted in plain view in the establishment and is the property of the State of Alaska.

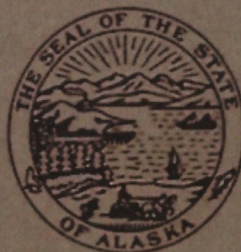
Expiration Date:
December 31, 2021

Program Manager:

**If you have questions or concerns regarding
safe food handling practices call toll free:**

1-87-SAFE-FOOD

(in Anchorage call 334-2560)



AMCO

DEC 20 2021