

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

Phone: 907.269.0350

### Alaska Alcoholic Beverage Control Board

## **Tourism Statement**

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.

| License Type:  | Al's Alaskan Inn License #: 10   |
|--|--|
|  | Beverage Dispensary- Tourism   |
|  | Section 2 – Tourism Statement  |
| 1. Explain how issuance o  | f a liquor license at your establishment has/will encourage tourism.   |
|  | cal lodging and entertainment to tourists that wish to save money for outdoor  |
| cuvilles and meet it   | ocals in the bar to share the Alaskan Experience and establish friendships.  |
| ere gerekter († 1941)<br>George († 1941)   |  |
| ,  |  |
|  |  |
|  |  |
| 3. Evalain have the facility   | error fruitt be assessmented as impressed as verritual by AC 04.11.400/d1/1/   |
|  | was/will be constructed or improved as required by AS 04.11.400(d)(1):   |
| he facility was cons<br>equirement for a be  | tructed when there was limited housing available to locals and tourists. The verage dispensary license at the time was to build 10 sleeping rooms for local  |
| he facility was cons<br>equirement for a be<br>nd tourists. The Leg  | tructed when there was limited housing available to locals and tourists. The   |
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550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 alcohol.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

Alcohol and Marijuana Control Office

### Alaska Alcoholic Beverage Control Board

# **Tourism Statement**

|   | and a Managaratan and a service of the service of | n Sandar managaran da biyaya Simoso da asan me |
|---|---|--|
| 2.5 Do you offer room rentals to the traveling public?  | YES   | NO   |
| If "yes" answer the following questions:  |   |  |
| How many rooms are available?   |   |  |
| 19  |   |  |
| How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for with refrigeration and cooking appliance devices, including a microwave)?   | or food prepara                                   | ation along                                    |
| 6 "Only 10 Moral Rooms are required based on the requirement at the time of original issuance. The Legislature "Grandfrithered" these rights and only requires the majority of 6 of the original 10 rooms to have the kild  | han fúcilities as dálined abouva                  |  |
|   | VEC   |  |
| Do you stock or plan to stock alcoholic beverages in guest rooms?   | YES   | X  |
| If "no" is your facility located within an airport terminal?  | YES   | NO<br>X  |
| 2.6 If your establishment includes a dining facility, please describe that facility. If it does not please  | write "none".                                     |  |
| None  |   |  |
|   |   |  |
|   |   | ı  |
|   |   |  |
| 2.7 If additional amenities are available to your guests through your establishment (eg: guided tours guests, other activities that attract tourists), please describe them. If they are not offered, please wr   |   | l equipment for                                |
| We provide brochures of Hiking, Hunting, Fishing, Camping, Boating, and Special Communit first-hand knowledge and directions to activities, and Tourism Related Guides and optimum to special requests. We offer Karaoke nightly, for some tourists that have a 50 State Singing Bu Karaoke Contests, Costume Contests, Male and Female Reviews, Dance Music, and a host mix and mingle with local and neighborhood guests. | imes of year t<br>icket List, as v                | o visit for their<br>well as                   |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

**ISSUED** 4/28/2022

ABC BOARD

LIQUOR LICENSE 2022 - 2023

10

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

Al's Alaskan Inn D/B/A:

7830 Old Seward Hwy

Mail Address:

Allen Henry Choy LLC 7830 Old Seward Hwy Anchorage, AK 99518

CITY / BOROUGH: Anchorage, Muni. of

Anchorage

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

04-900 (REV 7/21)

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

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

**ISSUED** 4/28/2022 ABC BOARD LIQUOR LICENSE

2022 - 2023

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

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

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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 7/21)

D/B/A:

Al's Alaskan Inn 7830 Old Seward Hwy

Mailing Address:

Allen Henry Choy LLC 7830 Old Seward Hwy Anchorage, AK 99518



Licensee (Owner):

**License Type:** 

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 alcohol.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

License #:

10

Alaska Alcoholic Beverage Control Board

Allen Henry Choy, LLC

Beverage Dispensary-Tourism

# 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

**Establishment Contact Information** 

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.

| Doing Business As:             | Al's Alaskan Inn   |                           |                              |              |   |  |  |
|--------------------------------|--|---------------------------|------------------------------|--------------|---|--|--|
| Premises Address:              | 7830 Old Seward Highwa   | 830 Old Seward Highway    |                              |              |   |  |  |
| Local Governing Body:          | Municipality of Anchorage  | lunicipality of Anchorage |                              |              |   |  |  |
| Community Council:             | Taku-Campbell Community Council  |                           |                              |              |   |  |  |
| If your mailing address ha     | s changed, write the NEW address   | below:                    |                              |              |   |  |  |
| Mailing Address:               |  |                           |                              |              |   |  |  |
| City:                          |  | State:                    |                              | ZIP:         |   |  |  |
| must be listed on CBPL with th | Section 1 – Licensee (ividual listed below must be listed in Sene same name and title.  ated point of contact regarding this licen | ction 2 or 3              | as an Official/Owner/Sha     |              | of your entity and  |  |  |
| Contact Licensee:              | Allen Henry Choy   |                           | Contact Phone:               | <del></del>  | 907-440-9176  |  |  |
| Contact Email:                 | alsakinn@gmail.com   |                           |                              |              |   |  |  |
| Ontional: If you wish for AMCO | staff to communicate with anyone other th  | an the Conta              | act Licensee about your lice | nse list the | m helow:  |  |  |
| Name of Contact:               | Start to communicate with anyone other a   | ar the conta              | Contact Phone:               | Iso, use the | The second  |  |  |
| Contact Email:                 | <u> </u>   |                           |                              |              | جود که دانشه برخید و انتیاب از می برخید و از جود و از جود و از جود و از خود |  |  |
| Name of Contact:               |  |                           | Contact Phone:               |              |   |  |  |
| Contact Email:                 |  |                           |                              |              |   |  |  |
| Name of Contact:               |  |                           | Contact Phone:               |              | <del></del>   |  |  |
| Contact Email:                 | , , , , , , , , , , , , , , , , , , ,  |                           | <u> </u>                     | .1           |   |  |  |
| Form AB-17] (rev09/21/2021)    |  |                           |                              |              | 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 #:

67022D

**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
- 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.

| Name of Official: | Allen Henry Choy    |        |              |      |         |
|-------------------|---------------------|--------|--------------|------|---------|
| Title(s):         | Member              | Phone: | 907-440-9176 | % Ow | ned: 51 |
| Mailing Address:  | 7830 Old Seward Hig | hway   |              |      |         |
| City:             | Anchorage           | State: | AK           | ZIP: | 99518   |

| Name of Official: | Sarah Annalyn Alexander |        |              |       |         |
|-------------------|-------------------------|--------|--------------|-------|---------|
| Title(s):         | Member                  | Phone: | 907-244-1707 | % Owi | ned: 49 |
| Mailing Address:  | 7830 Old Seward Hi      | ghway  |              |       |         |
| City:             | Anchorage               | State: | AK           | ZIP:  | 99518   |

| Name of Official: |        |          |
|-------------------|--------|----------|
| Title(s):         | Phone: | % Owned: |
| Mailing Address:  |        |          |
| City:             | State: | 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** Contact Phone: Name: **Mailing Address:** ZIP: State: City: Email: **Affiliate** This individual is an: Applicant **Contact Phone:** Name: **Mailing Address:** State: ZIP: City: 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) 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. 4. 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**

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?

| res | No |
|-----|----|
|     | V  |

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.



#### 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.

| provided by AMCO is a   | grounds for rejection or denial of this application or revocation of any license issued. |
|---|--|
| Ce een Chor   | B. J.  |
| Signature of licensee   | Signature of Notary Public   |
| Allen Henry Choy  | Notary Public in and for the State of: Alaska  |
| Printed name of licensee                                      | My commission expires: 10 17 3022  |
| "Official Seal" Notary Public Brittany Finger State Of Alaska | Subscribed and sworn to before me this 7th day of Feb 20 27.                             |

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: | \$<br>500,00  |
|--|------------|------------------|-----------|------------|---------------|
| A Control of the Cont |            | Total Fees Due:  |           |            | \$<br>3300.00 |

# **ENTITY DETAILS**

# Name(s)

| Туре       | Name                  |  |
|------------|-----------------------|--|
| Legal Name | ALLEN HENRY CHOY, LLC |  |

**Entity Type:** Limited Liability Company

Entity #: 67022D

Status: Good Standing

AK Formed Date: 6/9/1999

**Duration/Expiration:** Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2023

Entity Mailing Address: 7830 OLD SEWARD HIGHWAY, ANCHORAGE, AK 99518

Entity Physical Address: 7830 OLD SEWARD HWY, ANCHORAGE, AK 99518

# **Registered Agent**

Agent Name: ALLEN CHOY

Registered Mailing Address: 7830 OLD SEWARD HWY, ANCHORAGE, AK 99518

Registered Physical Address: 7830 OLD SEWARD HWY, ANCHORAGE, AK 99518

## **Officials**

|             |                  |        | □Snow Former |
|-------------|------------------|--------|--------------|
| AK Entity # | Name             | Titles | Owned        |
|             | ALLEN HENRY CHOY | Member | 51.00        |
|             | SARAH ALEXANDER  | Member | 49.00        |

## **Filed Documents**

| Date Filed | Туре                | Filing        | Certificate |
|------------|---------------------|---------------|-------------|
| 6/09/1999  | Creation Filing     |               |             |
| 6/30/1999  | Biennial Report     |               |             |
| 1/16/2001  | Biennial Report     |               |             |
| 5/09/2003  | Biennial Report     | Click to View |             |
| 12/01/2006 | Change of Officials | Click to View |             |
| 12/03/2006 | Biennial Report     | Click to View |             |
| 1/01/2008  | Biennial Report     | Click to View |             |
| 4/13/2010  | Biennial Report     | Click to View |             |
| 1/07/2011  | Change of Officials | Click to View |             |

| Date Filed | Туре                | Filing        | Certificate   |  |
|------------|---------------------|---------------|---------------|--|
| 9/12/2011  | Biennial Report     | Click to View |               |  |
| 8/26/2013  | Biennial Report     | Click to View |               |  |
| 4/13/2015  | Biennial Report     | Click to View |               |  |
| 5/06/2016  | Change of Officials | Click to View |               |  |
| 3/11/2017  | Biennial Report     | Click to View |               |  |
| 4/02/2019  | Biennial Report     | Click to View |               |  |
| 2/24/2021  | Biennial Report     | Click to View |               |  |
| 3/05/2021  | Amendment           | Click to View | Click to View |  |

Close Details

**Print Friendly Version** 

# LICENSE DETAILS

License #: 406861

**Print Business License** 

**Business Name: AL'S ALASKAN INN** 

Status: Active

Issue Date: 07/23/1999

Expiration Date: 12/31/2023

Mailing Address: 7830 OLD SEWARD HIGHWAY

ANCHORAGE, AK 99518

Physical Address: 7830 Old Seward Highway

Anchorage, AK 99518

#### **Owners**

ALLEN HENRY CHOY LLC

## **Activities**

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

## **Endorsements**

| End# | Issue      | Renew      | Expiration | <b>Action End</b> | <b>Action Note</b> | Address                                      |
|------|------------|------------|------------|-------------------|--------------------|--|
| 1    | 2/24/2010  |            | 12/31/2011 |                   |                    | 7830 OLD SEWARD HIGHWAY, ANCHORAGE, AK 99518 |
| 2    | 12/13/2017 | 10/26/2021 | 12/31/2023 |                   |                    | 7830 OLD SEWARD HWY, ANCHORAGE, AK 99518     |

# 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

**Print Friendly Version**