

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

alcohol.licensing@alaska.gov

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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-30: Proof of Minimum Operation Checklist

Why is this form needed?

This form is required for any license that was exercised only to satisfy the minimum operating requirement of 240 hours in each calendar year under AS 04.11.330(a)(3) or 3 AAC 304.107(c)(1). A licensee has the burden of proof to show that the licensed premises was operated in a similar fashion to other licensed premises of the same type by maintaining and providing specific types of documentation, required by 3 AAC 304.170(j).

Please note that a licensee who has operated a licensed premises only to satisfy the minimum operating requirement for more than one calendar year must submit a complete copy of this form, including documentation, for each year.

		Sect	ion 1 – E	stablis	shmen	it Inf	ormati	on			
Ent	er information for the lic	ensed establish	ment.								
ı	Licensee:						License	Number:			
ı	icense Type:										
I	DBA:										
ı	Premises Address:										
(City:						State:	Alaska	ZIP:		
	Sectio	n 2 – Cale	ndar Yea	ar & Pı	roof of	f Ope	ration	(All Lic	enses)	
Ext rec	ra documentation may luirements set forth in 3 umust be able to certify	pe provided <u>in a</u> AAC 304.170(j)	unless all ma	ndatory o	locument	tation r	equired be	elow has be	en submit		n e Initials
1.	I am attaching photos s size and visibility to sho			-			-	-			
2.	I am attaching a list of the variety of malt beverages, wines, and distilled spirits (as appropriate) that were offered for sale at the licensed premises during all hours of operation.										
3.	I am attaching a record of this establishment.	of all purchases	s of alcoholic b	peverages	made by	this lice	ense for re	esale on the	licensed p	remises	
4.	I am attaching cash reg	ister/point of sa	ale system rece	eipts shov	ving all al	coholic	beverage	transactions	s on the pr	remises	

[Form AB-30] (rev 3/1/2022) Page 1 of 2



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

alcohol.licensing@alaska.gov

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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-30: Proof of Minimum Operation Checklist

Section 3 - Additional Proof Required of Specific License Types

ine	tollowing must be sub	omitted for <i>package stores</i> . Read and sign your initials next to each statement.	Initials						
5a.	I am attaching photos showing how the stock of alcoholic beverages was displayed on the licensed premises of my package store during all hours of operation.								
The	following must be sub	omitted for beverage dispensaries. Read and sign your initials next to each statement.	<u>Initials</u>						
5b.	 I am attaching documentation showing that seating was provided on the licensed premises of my beverage Dispensary for at least one-half of the maximum number allowed by the occupancy permit. 								
appl othe resp den	lication, and I know the er documents submitte onse in this application ying or revoking a licen	the person herein named and subscribing to this application and that I have read the complete efull content thereof. I declare that all of the information contained herein, and evidence or ed are true and correct. I understand that any falsification or misrepresentation of any item or not							
Prin	ted name of licensee	Signature of licensee							
-		OFFICE USE ONLY							
1	nvestigator:	Date:							
1	Req. 1 met? (Y/N):	Req. 2 met? (Y/N):							
-	Req. 3 met? (Y/N):	Req. 4 met? (Y/N):							
1	Req. 5a/b met? (Y/N):	Burden of Proof Met?							
C	omments:	,							

[Form AB-30] (rev 3/1/2022) Page 2 of 2