13181

			10101	
License Information		Fees*		
Liquor License Number: 4230		Waiver Fee	\$ 1250.00	
11 m		-		
License Type: Bernage Dispersury Tonaism	AS	Penalty (If applicable)	\$ 1,000.00	
Local Governing Body: (City, Borough or Unorganized)		(II applicable)		
Awdorage Municipality		Total Submitted	\$2250.00	
Name of Licensee: Dimoral Curden Hotel, Lic		*The fee is non-refundable		
Doing Business As (Business Name) Come Rock Louis	÷ 2 .	Telephone Number:		
Mailing Address: Dimovod lighter Hotel, LLC	Street Address	or Location of Busin	less	
700 B. Dimend Blud.				
Anuchorage, Alusha 29515	City: ANG	honoge	A Constant of the local diversion of the loca	
Waiver Request Information				
This waiver application is the: $\square 1^{st}$ Request $\square 2^{nd}$ Requ	est 🛛 3 <sup>rd</sup> Request	Other		
Waiver Request for Calendar Year: Is this license for	sale?			
the license was not operated, any future plans for op additional sheets if necessary. "See Attached		e and projected ti	melines. Attach	
Signature of Licensee(s)	1			
Signature	Signature			
Name (Please Print) Tom Shephen l.	Name (Please Print)			
Date 2/1/14	Date			



550 West 7<sup>th</sup> Avenue Suite 1600 Anchorage, Alaska 99501

February 3, 2016

Dear ABC Board:

The Camel Rock Lounge was originally shut down for 2015 to accommodate work on a front of the lobby renovation that encompassed a lobby refresh and concept update to the Camel Rock Lounge. The project was delayed for various reasons including the resignation of our original designer and décor expert from the design firm we had hired to produce the design concept. Additionally, the hotel operated without a General Manager for several months also due to a resignation. I was hired as General Manager in mid-October and was not aware of the dynamics of the lobby renovation project and Camel Rock Lounge conceptual update. Subsequently in that process, Dimond Center Hotel, LLC did not file the Waiver of Application by the original due date in November 2015. The Dimond Center Hotel understands and is prepared to pay the late fee of \$ 1,000.00 plus the application fee of \$ 1,250.00.

The Dimond Center Hotel desires to reopen the Camel Rock Lounge in 2016 maintaining all of the requirements to effectively operate its Tourism License AS 04.11.400 (d) and expects to be open prior to the busy tourism season beginning in mid-May.

I have also included our intended menus for both our catering and restaurant operations. Thank you for your careful consideration to our Waiver of Application.

Respectfully,

Tom Shepherd General Manager Dimond Center Hotel, LLC

700 East Dimond Boulevard • Anchorage, Alaska 99515 Toll Free: 866-770-5002 | Main: 907-770-5000 | Fax: 907-770-5001 www.dimondcenterhotel.com

			1	
License Information		Fees*	13851	
Liquor License Number: 673		Waiver Fee	\$1,250.00	
License Type:		Penalty	\$ 1,000.00	
Beverage Dispensary		(If applicable)		
Local Governing Body: (City, Borough or Un	organized)	Total Submitted	\$2,250.00	
City and Borough of Juneau				
Name of Licensee: Peterson Pacific Holdings, Inc.		*The fee is non-refunda	*The fee is non-refundable	
Doing Business As (Business Name)		Telephone Numbe	r:	
Formerly Louies Douglas Inn		(907) 321-8090		
Mailing Address:	Stre	eet Address or Location of Busin	ness	
P.O. Box 240416 Douglas, AK 99824	No	Premises		
	Cit	y: Juneau Alaska		
Waiver Request Information				
	uest 2nd Request 2 3r	<sup>d</sup> Request  Other		
Waiver Request for Calendar Year: 2014	Is this license for sale? X Yes			
2014				
the license was not operated, any fut additional sheets if necessary. I have been trying to sell my license and reconcile wit Revenue Service seized the building where I operate I have suffered from extensive and ongoing medical is diabetic and other ongoing health related issues inclu- basis to this day and I am without a driver's license di cognitive and rationalization abilities. My ongoing me responsibilities, and record keeping in a timely and the Trying to resolve all the debts associated with the oper that has been working diligently with me to satisfy all concerns with regards to the license and the buyer are of the creditors or lien holders that I have that were as intentions whatsoever of ever re-entering the alcohol 100% of the proceeds of my license sale and transfer	th my creditors since 2014 and I we d my license in late 2013. ssues that have led to many hospiding toe amputation. My medical of ue to my many health issues. My his idical conditions have also greatly orough fashion. eration of my license has been a di the creditors and lien holders asso id I will be applying for a transfer of ssociated with the operation of my industry, in any capacity, in Alaska	as not able to operate my license in 20 talization including suffering a stroke. conditions have greatly affected my ph nealth issues at times have also had a affected my ability keep up with my bu ifficult, costly, and time consuming pro- potated with the operation of my license of my license to the buyer simultaneous license have any objections to its trans a in the future again.	014 as the Internal I have also suffered from ysical mobility on a daily very negative affect on my usiness dealings, cess. I have found a buyer a's current and future sly with my renewal. None sfer to the buyer. I have no	
Signature of Licensee(S)				
Signature	Signatur			
Name (Please Print)	Name (P	lease Print)		
Pat Peterson Date	Date			
Date	Date			

License Information		Fees*	13852	
Liquor License Number: 673		Waiver Fe	e \$2,500.00	
License Type:		Penalty	\$ 1,000.00	
Beverage Dispensary		(If applicab		
Local Governing Body: (City, Borough or Uno	rganized)	Total Subm	itted \$3,500.00	
City and Borough of Juneau				
Name of Licensee: Peterson Pacific Holdings, Inc.		*The fee is not	*The fee is non-refundable	
Doing Business As (Business Name)		Telephone	Number:	
Formerly Louies Douglas Inn		(907) 321-	-8090	
Mailing Address: P.O. Box 240416 Douglas, AK 99824	12	treet Address or Location of No Premises	of Business	
	(	City: Juneau Alaska		
	l			
Waiver Request Information	and an	and m		
	est X 2 <sup>nd</sup> Request	3 <sup>re</sup> Request $\Box$ Other		
The second s	Is this license for sale?			
2015	X Yes	No		
the license was not operated, any future additional sheets if necessary.	my creditors since 2014 and my license in late 2013. sues that have led to many ho ing toe amputation. My medic a to my many health issues. M ical conditions have also great rough fashion. ation of my license has been a le creditors and lien holders at I will be applying for a transfe lociated with the operation of it dustry, in any capacity, in Ala	I was not able to operate my lices spitalization including suffering a al conditions have greatly affecte ly health issues at times have als tly affected my ability keep up wi a difficult, costly, and time consur ssociated with the operation of m er of my license to the buyer simu my license have any objections to ska in the future again.	nse in 2014 or 2015 as the Internal stroke. I have also suffered from ad my physical mobility on a daily so had a very negative affect on my th my business dealings, ming process. I have found a buyer by license's current and future ultaneously with my renewal. None to its transfer to the buyer. I have no	
Signature of Licensee(s) Signature	Signat	ture		
protect of the				
Name (Please Print)	Name	(Please Print)		
Pat Peterson Date	Data			
Date	Date			

02/24/16 Waiver App 9/9/15

AS 04.11.330(a)(3)

1332

License Information			Fees*	
Liquor License Number: 5344			Waiver Fee	\$ 300.00
License Type: Restaurant/E Local Governing Body: (City, Borough or Un	Eating Place		Penalty (If applicable)	\$ 1,000.00
City of Fairbanks			Total Submitted	\$1,300.00
Name of Licensee: Refirement Community	of Fairbanks	5	*The fee is non-refundab	le
Relirement Community Doing Business As (Business Name) Raven Landing Ce	Nter		Telephone Number 907-329	
Mailing Address:		Street Address	or Location of Busin	
949 Mc Gown Stre		Souther States Contraction Contraction	Gowles S	1511 01
Fairbanks, AK 99:	701		panks, AK	
Waiver Request Information				
This waiver application is the:	quest 2 <sup>nd</sup> Request	□ 3 <sup>rd</sup> Request □	Other	
Waiver Request for Calendar Year:	Is this license for sale?	D No		
Explanation of the circumstances for the license was not operated, any fut additional sheets if necessary. See attac	ure plans for opera			
Signature of Licensee(s)				
Signature		gnature		
Name (Please Print) Karen H. Parr	Na	ime (Please Print)		
Date 2/23/2016	Da	ite	8	

Raven Landing Senior Community 949 McGown Street Fairbanks, AK 99701 Susan Motter, General Manager 907-328-5458 Fax: 907-328-5468



February 22, 2016 Retirement Community of Fairbanks, Inc. a non-profit 501©(3) Corporation License Number: 5344

Waiver of Operation Explanation

Raven Landing Senior Community, is a 95 apartment complex that serves 140 residents. Raven Landing Center is the core of the campus, a 13,500 sq ft community center built to provide meals, activities, and culture for all of Fairbanks. To that end, we serve meals six days a week to our residents, guests, and provide catering for events.

Raven Landing originally filed for a liquor license not with the sole idea of daily operation of our restaurant, but as an added value for catering in the Community Center. We do offer beer and wine during our daily meal service, but few residents partake. Any visitors who are joining our residents for meals may order beer and wine. Meals are generally open only for 3 hours per day.

There is no question that we had an inherent obligation to understand the regulations for the operation of our liquor license. We have no excuse other than ignorance of the law. Even after reading the finding of the ABC board to enforce the 8 hour rule, we mistakenly thought that we could calculate those days as days we were open more than 8 hours for catering events.

When we realized that we had to operate as a restaurant/eating place, and had to meet the minimum requirements of open at least 30 days 8 hours a day, we immediately moved to resolve the issue of non-compliance.

Each Monday, we have operated our food establishment from 11:30 a.m. to 7:30 p.m. and serve in the range of 60 people. As we continue to grow our business and complete construction on our campus, we will increase the hours of operation to other days with similar hours. One of the added features this year will be a bar install. The infrastructure has been in place since we opened our Community Center in 2014 but we have not built the bar itself. As we are within a month of final construction of our campus, we will return to this project.

In the year we received our license (2014), we were only open for four months. We understand that we could have met the regulation had we been aware. In 2015, we operated 32 days longer than 8 hours but due to catering, not restaurant operation. We feel that we have resolved our non-compliance.

Sincerely,

Susan Motter General Manager



7 HS 26 1E MIL 64



Owned and Operated by Retirement Community of Fairbanks Building to keep seniors in our community 949 McGown Street, Fairbanks, AK 99701

retirement@ravenlanding.org www.ravenlanding.org

13833

License Information		Fees*	
Lieuer Lieense Number		Waiver Fee	\$ 600.00
Eiguor License Number: 53 4 4			600.00
License Type: Restaurant/Edia Plas		Penalty	\$ 1,000.00
License Type: Restaurant/Eding Place Local Governing Body: (City, Borough or Unorganized)		(If applicable)	
City of Fairbanks		Total Submitted	\$ 160000
Name of Licensee:	ich Va	*The fee is non-refundab	le
Retirement Community of Fo Doing Business As (Business Name)	urpants	Telephone Number	•
Raven Landing Center Mailing Address:		907-328-	
	Street Address	or Location of Busin	ess
949 Mc Gown Street	1200	Cowles	Street
Fairbanks, AK 99701	City: Fai	rbanks	51.201
Waiver Request Information			
This waiver application is the: $\Box$ 1 <sup>st</sup> Request $\bowtie$ 2 <sup>nd</sup> Reque	est 🛛 3 <sup>rd</sup> Request [	] Other	_
Waiver Request for Calendar Year: Is this license for s	NOTO THE IS PRIME ALLOW		
$2015$ $\Box$ Yes	D No		
Explanation of the circumstances for non-operation			
the license was not operated, any future plans for operated	erating the license	and projected til	melines. Attach
additional sheets if necessary.			
See attached			
See attached			
10			
Signature of Licensee(s)			
Signature (///)	Signature		
KILLA KLANA			
Journ and and	No. (DI D. 1. 2)		
Name (Please Print) Karen H Parr Date	Name (Please Print)		
Date Jack Jack Jack Jack Jack Jack Jack Jack	Date		
Date 2/23/2016			

1999 (S. 1999) (M. 1987)

Raven Landing Senior Community 949 McGown Street Fairbanks, AK 99701 Susan Motter, General Manager 907-328-5458 Fax: 907-328-5468



February 22, 2016 Retirement Community of Fairbanks, Inc. a non-profit 501©(3) Corporation License Number: 5344

Waiver of Operation Explanation

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Sincerely,

Susan Motter General Manager



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Owned and Operated by Retirement Community of Fairbanks Building to keep seniors in our community 949 McGown Street, Fairbanks, AK 99701

retirement@ravenlanding.org www.ravenlanding.org

13835

License Information			Fees*	
Liquor License Number: 3268			Waiver Fee	\$ 750.00
License Type: Package Store			D I	6 1 000 00
			Penalty (If applicable)	\$ 1,000.00
Local Governing Body: (City, Borough or Ur Sitka, City & Borough	norganized		(in applicable)	
Sirka, City & Borough			Total Submitted	\$ 1,750.00
Name of Licensee: House of Liquors, Inc			*The fee is non-refundab	le
Doing Business As (Business Name)Salty Sa	l's Liquor Cabinet		Telephone Number	: 747-5322
Mailing Address: Street		Street Address o	Street Address or Location of Business	
705 Halibut Point Rd., Ste D Sitka, AK 99835		326 Lincoln St		
пка, АК 77055		City:Sitka, Al	K 99835	
Waiver Request Information				
	uest 街 2 <sup>nd</sup> Request	□ 3 <sup>rd</sup> Request □	Other	
Waiver Request for Calendar Year: 2015	Is this license for sale	No No		
The lease space was lost and we have	e just located anoth	er space that wi	ll be available fo	r 2016
Signature of Licensee(s)				
Signature Stephen J Reed.	N	gnature	Reeder	2
Date z/z3/2016		ate $Z[23]$	2016	
Vaiver App 9/9/15			U	

License Information		Fees*	
Liquor License Number: 2365		Waiver Fee	\$ 625.00
License Type: Beverage Dispensary Tourism - Sea. Local Governing Body: (City, Boroligh or Ungrganized)	sonal	Penalty (If applicable)	S 1,000.00
Unorganized		Total Submitted	\$ 1,625.00
Name of Licensee: Westmark Hotels, Inc.		*The fee is non-refundabl	6 13846
Doing Business As (Business Name) Westmark. Tok		Telephone Number (26) 336-6	105
Mailing Address: Attn Michelle Pipkin 800 5th Ave, Suite 2000 Seattle, WA 98101		r Location of Busine UK & Alaska J	
Waiver Request Information			
This waiver application is the: $\Box I^{st}$ Request $\Box 2^{nd}$ Request	□ 3 <sup>rd</sup> Request □	Other	
Waiver Request for Calendar Year: 2014 Is this license for sale?	□ No		
Explanation of the circumstances for non-operation of the the license was not operated, any future plans for operate additional sheets if necessary. The Westmark Inn Tok has been for sale over the past two years. I the opportunity to complete differen as well as move and remove buildings. Our goal is to sell the clestina tim and have it opened	closed and Wring that trenovat a number property	and projected tim d put on the time we have in projects of cabins a as a tourist	nelines. Attach he Market ave taken m site and t
Season in May 2016.			

Signature of Ligensee(s)	
Signature	Signature
Name (Please Print) David McGlothlin	Name (Please Print)
Date 2 25/16	Date

Waiver App 8/14/2015

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License Information		Fees*	
Liquor License Number: 2365		Waiver Fee	\$ 625.00-
License Type: Beverage. Dispensary Tourism. Sea Local Governing Body: (City, Borough or Unorganized)	senal	Penalty	\$ 1,000.00
Local Governing Body (City, Borough or Unorganized)		(If applicable)	
Unorganized	<u>ä</u>	Total Submitted	54625.00
Name of Licensee: Westmark Hotels, Inc.		*The fee is non-refundabl	· 13847
Doing Business As (Business Name) Westmark Tck		Telephone Number:	105
Mailing Address: Attn. Alichelle Pipking	Street Address	or Location of Busine	
800 5th Ave, Suite 2600	Intersection	C TOK & Alasi	Ka Hishward
Sea Hle, WA 98104.	City: -	Tok	- J. J.
	×	161-	
Waiver Request Information This waiver application is the: If 1 <sup>st</sup> Request A 2 <sup>nd</sup> Request	T 3rd Request	D Other	
Waiver Request for Calendar Year: 2015 Is this license for sale?			
Explanation of the circumstances for non-operation of l the license was not operated, any future plans for opera additional sheets if necessary.	ting the license	e and projected tin	nelines. Attach
The Westmark Inn Tok has been closed and put on the			
market for sale over the past two years. During that time we have			
taken the opportunity to complete a	lifterent	renovation	Projects
on site as well as move and	remove a	a number o	f calours
and buildings. Our goal is to sell	The prope	) us a rour	
destination and have it opened.	for the su	mmer touris	m Season
In May 2016.		2	
		تحری	

Signature Nummer Mach	Signature
Name (Please Print) David McGlothlin	Name (Please Print)
Date 2/25/14	Date

Waiver App 8/14/2015