

# Department of Commerce, Community, and Economic Development

ALCOHOL AND MARIJUANA CONTROL OFFICE

550 West 7th Ave, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

#### **MEMORANDUM**

TO: Robert Klein, Chair, and

Members of the Board

FROM: Erika McConnell

Director, ABC Board

DATE: July 11, 2017

RE: Great Alaska Adventure

Lodge #5086 Outdoor

Recreational Lodge -

Seasonal

Renewal applications were due on January 1, 2017, in accordance with AS 04.11.270(b)(2). AS 04.11.540 states that if a complete application for renewal has not been filed by February 28 [2017], the license expires on midnight of February 28.

The AMCO office received a complete renewal application for this seasonal outdoor recreational lodge license on April 10, 2017. The licensee is seeking reinstatement and renewal.

Recommendation: Evaluate the request for reinstatement and renewal pursuant to 3

AAC 304.160(e) and (f).

Dept. of Commerce
Alcohol Control Office
Anchorage, Alaska
Dear Sarah and Mark Bailey
Per the instructions of your letter to Great Alaska Fish Camp, DBA Great Alaska Adventures, following is our letter requesting reinstatement of liquor license #5086.
Our mail sent to the Sterling, Alaska address was not properly forwarded and thus we lapsed our license renewal. Per your instructions, the letter requesting reinstatement is as follows.
"Great Alaska Fish camp requests reinstatement of license #5086. The necessary funds to reinstate were sent Certified Mail, to your address last week.
Please advise if this is sufficient to fulfill our obligation.
Thank you
Laurence John
President
Great Alaska Fish Camp



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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: Renewal License Application

#### What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing liquor license that will expire on December 31, 2016. All fields of this form must be complete and correct, or the application will be returned to you in the manner in which it was received, per AS 04.11.270 and 3 AAC 304.105. The Community Council field only needs to be verified/completed by licensees whose establishments are located within the Municipality of Anchorage or outside of city limits within the Matanuska-Susitna Borough.

This form must be completed correctly and submitted to the Alcoho! & Marijuana Control Office (AMCO)'s main office, along with all other required documents and fees, before any renewal license application will be considered complete.

#### Section 1 - Establishment and Contact Information Enter information for the business seeking to have its license renewed. Licensee: Great Alaska Fish Camp, Inc. License #: 5086 License Type: Outdoor Recreation Lodge - Seasonal Statute: AS 04.11.225 **Doing Business As:** Great Alaska Adventure Lodge Premises Address: 33881 Sterling Highway Local Governing Body: Kenai Peninsula Borough **Community Council:** None Mailing Address: 33881 STERLING HWY City: State: ZIP: 99672 HLASKA STERLING, AK99672 Enter information for the licensee who will be designated as the primary point of contact regarding this application and the license. Designated Licensee: LAURENCE Contact Phone: **Business Phone:** 907262 4515 907 262 4515 **Contact Email:** Seasonal License? If "Yes", write your six-month operating period:



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Se	ection 2 – Sole Proprie	tor Ownership	Information		
If more space is needed, plea	ed by any <u>sole proprietor</u> who is a se attach a separate sheet with the st be completed for each licensee a	e required information	ì.	n 3.	
This individual is an: ap	oplicant affiliate				
Name:		¥			- C
Address:					
City:		State:	ZIP:		
Email:					
Contact Phone:					
Name: Address: City: Email:		State:	ZIP:		
Contact Phone:					
	Section 3 – Entity C	Ownership Info	ormation		
그림 사람이 되는 살림이 하고 교육하고 기업하게 되었다면 하고 있다면 하지 않아 하는데 하다 하는데 없었다.	pleted by any licensee that is a cor sion of Corporations (DOC). Partne		4 BB ( - 1 ) [ - 1] 전 1 ( ) : [ - 1		
Alaska DOC Entity #:	46806D				
Alaska Division of Corporatio	ns:			Yes	No
Is your entity in good st	tanding with the Alaska Division of	Corporations?	•	×	

APR 0 3 2017



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This subsection must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

- 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

	LH.	LAURENCE JOH	Entity Official:
none: 907262 4575 % Owned: 5/	Phone:	PRESIDENT	Title(s):
Ywy	& HWY	33881 STERLING	Address:
ate: AK ZIP: 99672	State:	STERLING	City:
		KENT JOHN	Entity Official:
none: 9072624575 % Owned: 15 3/3	Phone:	VICE PRESIDENT	Title(s):
1	Address:		
1	State:	33881 STERLING +	City:
		" " 2	
		KATHY HALEY	Entity Official:
none: 907 374 1772 % Owned: 33 1/3	Phone:	DIRECTOR	Title(s):
		PO BOX 1194	Address:
ate: AK ZIP: 99672	State:	STERLING	City:
			Entity Official:
none: % Owned:	Phone:		Title(s):
			Address:
ate: ZIP:	State:		City:
	***	- Los Anna Maria	Entity Official:
none: % Owned:	Phone:		Title(s):
			Address:
ate: ZIP:	State:		City:
ate: ZIP:	State:	6)	



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Section 4 – Authorization		
ommunication 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?		X
If "Yes", disclose the name of the individual and the reason for this authorization:		
Section 5 – License Operation		
heck the box that best describes your liquor license operations in calendar years 2015 and 2016:		
The license was regularly operated continuously throughout each year, for 8 or more hours each day.		
The license was regularly operated during a specific season each year, for 8 or more hours each day.  LICENSE WAS OFERATED MAY THRO SEPT FOR Z HOURS PER DRY  The license was only operated to meet the minimum requirement of 30 days each year, 8 hours each day.  If this box is checked, an AMCO employee will contact you after reviewing your application.		
The license was not operated at all or was not operated for at least the minimum requirement of 30 days each year, 8 hours each day, during one or both of the calendar years.  If this box is checked, an AMCO employee will contact you after reviewing your application.		
Section 6 - Convictions		
Applicant convictions in calendar years 2015 and 2016:	Yes	No
Has any person named in this application been convicted of a violation of Title 04, of 3 AAC 304, or a local ordinance adopted under AS 04.21.010 in the calendar years 2015 or 2016?		X
If "Yes", list all convictions:		<del>-</del> -7
DEGEN W.		

[Form AB-17] (rev 10/25/2016)

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# Section 7 - Certifications Read each line below, and then sign your initials in the box to the right of each statement: Initials I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and if the licensee is an organized entity, that all current entity officials and stakeholders are listed with the Alaska Division of Corporations. 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. I certify 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 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 or the ownership (including officers or stakeholders) from what is currently on file with the Alcoholic Beverage Control Board. I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Alcoholic Beverage Control Board. 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, is true, correct, and complete. I agree to provide all information required by the Alcoholic Beverage Control Board 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 to me as incomplete. ublion and for the State of Washin 9ton. My commission expires: <u>08|15|20</u> Subscribed and sworn to before me this 29 day of \_\_\_\_\_\_Maren License Fee: \$ 625.00 Filing Fee: \$ 200.00 TOTAL: \$ 825.00 Late Fee of \$500.00 - if received or postmarked after 01/03/2017: 500.00 Miscellaneous Fees:

GRAND TOTAL (if different than TOTAL):

1375.00