



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

**Beverage Dispensary – Tourism License
 Form AB-17d: 2018/2019 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 beverage dispensary – tourism liquor license that will expire on December 31, 2017. 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 should 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 Alcohol & 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. If any populated information is incorrect, please contact AMCO.

Licensee:	Dimond Center Hotel, LLC	License #:	4230
License Type:	Beverage Dispensary - Tourism	Statute:	AS 04.11.400(d)
Doing Business As:	Camel Rock Lounge		
Premises Address:	700 E. Dimond Blvd		
Local Governing Body:	Municipality of Anchorage		
Community Council:	Taku/Campbell		

Mailing Address:	700 E. Dimond Blvd.				
City:	Anchorage	State:	Alaska	ZIP:	99515

Enter information for the individual who will be designated as the primary point of contact regarding this application. This individual must be a licensee who is required to be listed in and authorized to sign this application.

Point of Contact:	Tom Shephard		
Contact Phone:	(907) 743-4718	Business Phone:	(907) 770-5000
Contact Email:	t.shephard@dimondcenterhotel.com		

Seasonal License? Yes No

If "Yes", write your six-month operating period: _____

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 1026439
 \$12,200





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Section 2 – 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:

Tony Cange is the CEO of the corporation that owns Diamond Center Hotel, LLC

Section 3 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietorship who is applying for license renewal. Entities should skip to Section 4. 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:					
Mailing Address:					
City:		State:		ZIP:	
Email:					
Contact Phone:					

This individual is an: applicant affiliate

Name:					
Mailing Address:					
City:		State:		ZIP:	
Email:					
Contact Phone:					





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Section 4 – Entity Ownership Information

This subsection must be completed by any licensee that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). You may view your entity's status or find your CBPL entity number by visiting the following site: https://www.commerce.alaska.gov/cbp/main/search/entities Partnerships may skip to the second half of this page. Sole proprietorships should skip to Section 5.

Alaska CBPL Entity #: 730250

You must ensure that you are able to certify the following statement before signing your initials in the box to the right: Initials

I certify that this entity is in good standing with CBPL and that all current entity officials and stakeholders (listed below) are also currently and accurately listed with CBPL



This subsection must be completed by any community or entity, including a corporation, limited liability company, 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 with an interest of 10% or more, and for each general partner.

Entity Official Name: Selkvia Native Assn., Inc.
Title(s): Member, Manager
Phone: (907) 868-2006
% Owned: 100%
Mailing Address: 101 W. Benson Blvd., Ste. 302
City: Anchorage
State: Alaska
ZIP: 99503

Entity Official Name: Tom Shephard
Title(s): Affiliate
Phone: (907) 743-4718
% Owned: 0%
Mailing Address: 700 E. Diamond Blvd.
City: Anchorage
State: Alaska
ZIP: 99515

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

[Form AB-17d] (rev 10/16/2017)
License #4230 DBA Camel Rock Lounge





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Section 5 – License Operation

Check a single box for each calendar year that best describes how this liquor license was operated: 2016 2017

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. [] []

The license was only operated to meet the minimum requirement of 30 days each year, 8 hours each day. If this box is checked, a complete copy of Form AB-30: Proof of Minimum Operation Checklist, and all necessary documentation must be provided with this 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, a complete copy of 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 for at least the minimum requirement. [X] [X]

Section 6 – Violations and Convictions

Applicant violations and convictions in calendar years 2016 and 2017: Yes No

Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2016 or 2017? [] [X]

Has any person or entity 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 2016 or 2017? [] [X]

If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or convictions.

Section 7 – Alcohol Server Education

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

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a patron 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, as required under AS 04.21.025 and 3 AAC 304.465. [Signature]





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Section 8 – 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.	<input type="checkbox"/> OS
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.	<input type="checkbox"/> OS
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, managers, general partners, or stakeholders) from what is currently on file with the Alcoholic Beverage Control Board.	<input type="checkbox"/> OS
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.	<input type="checkbox"/> OS
I am submitting as part of this application a written statement that meets the attached Tourism Statement Guidelines, for review by the Alcoholic Beverage Control Board.	<input type="checkbox"/> OS

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.

Tom Shepherd
 Signature of licensee

Alicia Conti
 Signature of Notary Public

Tom Shepherd
 Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 7/22/2020

Subscribed and sworn to before me this 11 day of December, 2017.

License Fee:	\$ 2500.00	Application Fee:	\$ 200.00	TOTAL:	\$ 2700.00
Late Fee of \$500.00 – if received or postmarked after 01/02/2018:					
Miscellaneous Fees:					2500.00
GRAND TOTAL (if different than TOTAL):					5200.00

ALICIA CONTI
 Notary Public, State of Alaska
 Commission # 160722004
 My Commission Expires
 July 22, 2020





December 11, 2017

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To whom it may concern:

The Dimond Center Hotel has been serving the State of Alaska, City of Anchorage and the tourism industry for 15 years. Our hotel is made up of 109 (612 square feet) rooms on 3 floors and none of our rooms have kitchen facilities although each room comes equipped with a microwave and micro refrigerator. We are located in the bustling south Anchorage and are not part of the Ted Stevens International Airport. We do not stock alcoholic beverages in our guest rooms. We also offer meeting space for people looking to accommodate conventions, parties, catering or business meetings and our bar with dining facilities adds another dimension to our guests overall experience and gives our patrons value for price paid in that they have first class facilities to meet their travel or business needs.

We are members of the Chamber of Commerce and Visit Anchorage and are active in our community. We are Alaskan Native owned and house much of that market. Dimond Center Hotel owns and operates the bar and dining facilities. We have in room guest directories, rack card displays (housing dozens of tour operators, rental companies and other tourism activities) as well as electronic media in our lobby to help guests learn about area attractions and how to book them as well as trained hotel staff to help facilitate an excellent guest experience.

In 2018, we are looking at the feasibility of adding a roof top deck and our bar and dining facilities will play a huge role in the success of that endeavor. In 2017 we acquired additional licensed premises areas so that our bar with dining would offer more enjoyment.

Thank you for your careful attention to our request to renew our liquor license.

Respectfully,

Tom Shepherd
General Manager

