

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

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.

Se	ection 1 – Establishmen	t and Co	ntact Infor	mation		
Enter information for the bus	iness seeking to have its license renev	ved. If any po	pulated informati	on is incorrect,	please contact AMCO.	
Licensee:	JSJ Group, LLC			License #:	5455	
License Type:	Beverage Dispensary - Tourism			Statute:	AS 04.11.400(d)	
Doing Business As:	Sushi on the Fly					
Premises Address:	5000 W Int'l. Airport Road C2786					
Local Governing Body:	Municipality of Anchorage					
Community Council:	Sand Lake					
Mailing Address:	9430 Musketball PL.					
City:	Anchorage	State:	AK	ZIP	: 99507	
Enter information for the indi must be a licensee who is req	vidual who will be designated as the p uired to be listed in and authorized to s	rimary point sign this appli	of contact regard	ing this applica	tion. This individual	
Point of Contact:	Jung Kim	V-000				
Contact Phone:	907-230-7096	Business Phone:			1 1000	
Contact Email:	1245592 ak@hanmail.net					
Yes Seasonal License?	No If "Yes", write your s	x-month op	erating period:		RECEIVED	
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		Section 2 -	Authoriza	ation			
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?						X	
If "Yes", disclose the nam	ne of the indivi	dual and the reason fo	r this authori	zation:			
This section must be comple If more space is needed, ple The following information me	ted by any <u>sole</u> ase attach a se	e proprietorship who is parate sheet with the i	applying for required infor	mation.		p to Sectio	n 4.
Name:							
Mailing Address:							
City:			State:		ZIP:		
Email:	1			,			
Contact Phone:							
This individual is an: a	pplicant	affiliate					
Name:			·····				
Mailing Address:							
City:			State:		ZIP:		
Email:							
Contact Phone:			Was to see a s				





Alaska CBPL Entity #:

Alaska Alcoholic Beverage Control Board

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Initials

ALCOHOL MARIJUANA CONTROL OFFICE

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

Form AB-17d: 2018/2019 Renewal License Application

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 vising 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.

are also currently and accur	good standing with CBPL and that all rately listed with CBPL.	current entity	officials and stakeholders	(listed belo	ow)		
 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:	Jeffry Graham	~					
Title(s):	owner	Phone:	907-240-7431	% Owne	ed: 50		
Mailing Address:	8127 Seclusion	DR					
City:	Anchorage	State:	AK	ZIP:	99504		
F 055 . 1 N	0		.,,				
Entity Official Name:	Jung Kim		•				
Title(s):	Owner	Phone:	907-230-7906	% Owne	ed: (7)		
Mailing Address:	9430 Musketballa						
City:	Anchorage	State:	AK	ZIP:	99,507		
Frails Official N	0-						
Entity Official Name:		Г					
Title(s):		Phone:		% Owne	d:		
Mailing Address:							
City:		State:		ZIP:			
			-	bear			
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License #3433 DDA SUSIII ON THE	riy			DEC 1	2 2017		



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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.		X
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.		
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 co	nviction	S.
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 parhave completed an alcohol server education course approved by the ABC Board and keep current, valid copies of thei course completion cards on the licensed premises during all working hours, as required under AS 04.21.025 and 3 AAC 304.465.	tron ir	20





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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. 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, managers, general partners, or stakeholders) from what is currently 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. 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. 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. **Notary Public** MARK LACSAMAN otary Public in and for the State of Printed name of licensee State of Alaska My commission expires: My Commission Expires Dec. 12, 2020 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:

GRAND TOTAL (if different than TOTAL):

<u>Liquor License Renewal Application</u> "Mandatory Points To Be Included"

1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.

Having a liquor license at our establishment has encouraged tourism throughout our time of being in operation. Not only do we serve sushi and Asian cuisines, we compliment our foods with the option of ordering alcohol along with it. As people are waiting at the airport, many adults enjoy grabbing a quick beverage before their upcoming flight.

2. Explain how the facility was/will be constructed or improved in accordance with this application.

Our facility has been built to accommodate the regulations that come along with owning a liquor license. The bar is placed distinctly in one section of the restaurant where the liquor is located so that patrons can easily identify the area as the bar. Our dining tables are at a lower height than the bar area and takes up a majority of the front of house so that it is easily identifiable by patrons. The dining and bar areas are strategically placed so that patrons do not confuse the bar area as the dining area.

3. Who operates the facility for which a liquor license is being applied?

Jung Kim, who is an owner of the facility oversees all general operations of the restaurant.

4. Do you offer room rentals to the traveling public?

No, we do not offer room rentals to the traveling public.

5. Does your establishment include a dining facility?

Yes, our establishment includes a dining facility.

6. Are additional amenities available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists)?

Our facility does not offer additional amenities to our guests.

