



Alcohol and Marijuana Control Office  
 550 W 7th Avenue, Suite 1600  
 Anchorage, AK 99501  
[alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov)  
<https://www.commerce.alaska.gov/web/amco>  
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

**Form AB-17: 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 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:	Craig Lodge #1206	License #:	746
License Type:	Club	Statute:	AS 04.11.110
Doing Business As:	Loyal Order of Moose #1206		
Premises Address:	601 Water Street		
Local Governing Body:	City of Craig		
Community Council:	None		

Mailing Address:	PO Box 113		
City:	Craig	State:	AK
		ZIP:	99921

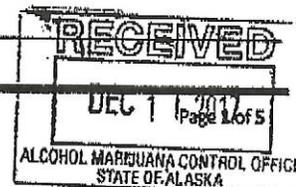
Enter information for the individual who will be designated as the primary point of contact regarding this application. This individual must be a licensee who is required to be listed in and authorized to sign this application.

Point of Contact:	Larry Williams		
Contact Phone:	907 826 2188	Business Phone:	907 826 3214
Contact Email:	Lodge 1206 @ Loyal Order of Moose Units - AK		

Seasonal License?  Yes  No

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

[Form AB-17] (rev 10/16/2017)  
 License #746 DBA Loyal Order of Moose #1206





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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:

**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 using 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 #:	254510
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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: 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.

*[Handwritten initials]*

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:	LARRY WILLIAMS		
Title(s):	Vice President	Phone:	907-886-2188
Mailing Address:	PO Box 113		
City:	Craig	State:	AK
		ZIP:	99921

Entity Official Name:	Robert Sabro		
Title(s):	SECRETARY MANAGING OFFICER	Phone:	907-404-0051
Mailing Address:	PO Box 285		
City:	Craig	State:	AK
		ZIP:	99921

Entity Official Name:	William Braznet		
Title(s):	President	Phone:	907 209 5512
Mailing Address:	PO Box 467		
City:	CRAIG	State:	AK
		ZIP:	99921

RECEIVED  
 JAN 11 2019  
 RECEIVED  
 DEC 14 2017  
 ALCOHOL MARIJUANA CONTROL OFFICE  
 STATE OF ALASKA

**Moose Lodge #1206  
Craig, Alaska**



Lodge1206@mooseunits.org

Alcohol Beverage Control Board

Notice of change in officers.

Craig Moose Lodge # 1206 Lic.# 746

Larry Williams moved to Vice President.

Our list of current officers in leadership positions is as follows.

William Bazinet President

Larry Williams Vice President

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Robert D. Sabin Secretary/Managing Officer

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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.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
The license was regularly operated during a specific season each year, for 8 or more hours each day.	<input type="checkbox"/>	<input type="checkbox"/>
The license was only operated to meet the minimum requirement of 30 days each year, 8 hours each day. <i>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.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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. <i>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.</i>	<input type="checkbox"/>	<input type="checkbox"/>

**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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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**

This section must be completed only by the holder of a beverage dispensary, club, or pub license or conditional contractor's permit. The holders of all other license types should skip to Section 8.

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.





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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:

I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

Initials

*[Handwritten initials]*

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.

*[Handwritten initials]*

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.

*[Handwritten initials]*

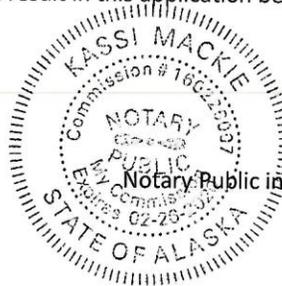
I certify on behalf of myself or of the organized entity that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

*[Handwritten initials]*

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.

*Larry J Williams*  
 Signature of licensee

Larry J Williams  
 Printed name of licensee



*[Handwritten Signature]*  
 Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 2/20/20

Subscribed and sworn to before me this 16th day of December, 2017.

License Fee:	\$ 1200.00	Application Fee:	\$ 200.00	TOTAL:	\$ 1400.00
Late Fee of \$500.00 – if received or postmarked after 01/02/2018:					
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					



To; Alcohol & Marijuana Control Office

RE; Notice of Violation case # AB17-0362

In response to this notice I am reporting that the sign is removed. I have read the State statute AS04.11.110 and understand completely. We see how misleading that sign is. The intent was for breakfast only before the social quarters or bar was open. It's an old sign and should have been taken down long ago. Please understand that at no time were non- members served alcohol without being signed in as a quest of an active member. It is our strict policy that no non-member can purchase any alcoholic beverage. Also our employee hand book states that no employee while they are working can sign in a quest or buy an alcoholic beverage for them. We will take whatever measures are needed to insure this rule is followed. In closing I hope this is a satisfactory answer and correct action taken.

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Respectfully;

Robert D. Sabin

Administrator/Manager

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Craig Moose Lodge #1206

State of Alaska Alcohol license # 746



Attention; Carrie Craig

Occupational Licensing Examiner.

I received a letter from Erika McConnell earlier stating that a change in officers form had not been developed as yet and that submitting the changes on an organization letterhead in duplicate would suffice. William Bazinet's finger prints will be sent priority mail as soon as possible. I have added secretary to my name. We don't use these titles so I forget to use them properly. Please let me know if there is anything else I can do to complete this application.

Respectfully

---

Robert D. Sabin

Secretary/ Manager

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