

# 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: Bob Klein, Chair, and Members of the

Alcoholic Beverage Control Board

DATE: April 3, 2018

FROM: Erika McConnell, Director

RE: 5621 The Highliner

Restaurant

Requested Action:

Approve new Restaurant or Eating Place - Public Convenience license

Statutory and Regulatory Authority: AS 04.06.090(b): "The board shall review all applications for licenses made under this title and may order the director to issue, renew, revoke, transfer, or suspend licenses and permits authorized under this title."

AS 04.11.400(g): "The board may approve the issuance or transfer of ownership of a restaurant or eating place license in a municipality without regard to (a) [population limits] of this section if the board finds that issuance or transfer of the license is necessary for the public convenience."

- 3 AAC 304.335: "(a) The board may issue a restaurant or eating place license under AS 04.11.400(g) upon a showing that
  - (1) repealed 8/24/2001;
  - (2) there is community support, which must be shown by a petition signed by a majority of the residents 21 years of age or over who reside within one mile of the proposed premises; and
  - (3) the governing body of the municipality in which the licensed premises are to be located approves the application.
- (b) Renewal of a license issued under AS 04.11.400(g) will, in the board's discretion, be denied if the license ceases to be necessary to the public convenience."
- 3 AAC 304.115(a): "...Petition signatures must be obtained within the 90-day period immediately preceding the submission of the application. After an application has been filed, no additional signatures may be added to the petition, and no signatures may be withdrawn."

**Staff Rec.:** Approve with delegation

5621 The Highliner Restaurant ABC Board April 3, 2018 Page 2

**Background:** This application is for a new restaurant or eating place – public convenience license in Seward. 3 AAC 304.335 requires approval of the local governing body and community support as expressed by a petition signed by a majority of the residents 21 years of age or older who live within one mile of the proposed licensed premises.

The applicant walked through the petition area and used the Kenai Peninsula Borough website to identify the number of occupied residences within a mile of his proposed licensed premises. The DCCED website provided information on the average number of people per household and the number of people that are 21 years of age or older.

Using these methods, it was determined that the number of required signatures is 314. Staff verified the petition signatures and determined that at least 314 valid signatures were provided.

Attachment: License application



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Alaska Alcoholic Beverage Control Board

# Form AB-00: New License Application

#### What is this form?

[Form AB-00] (rev 10/10/2016)

This new license application form is required for all individuals or entities seeking to apply for a new liquor license. Applicants should review Title 04 of Alaska Statutes and Chapter 304 of the Alaska Administrative Code. All fields of this form must be completed, per AS 04.11.260 and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

Enter information for the bus	ection 1 - Esta iness seeking to be lice	ensed.		itact iiiio			
Licensee:	The Highliner Re	estaurant, LL	.C				
License Type:	Pub. Conveniend	b. Convenience Rest. Eating Place Statutory Reference: 04.11.400					04.11.400G
Doing Business As:	The Highliner Re	he Highliner Restaurant					
Premises Address:	303 Adams Stree	et					
City:	City: Seward State: Alaska ZIP: 9966-			99664			
Local Governing Body:	City Seward						
Community Council:							
Mailing Address:	33318 Bear Lake	e Road					
City:	Seward	State: Alaska ZIP: 9966			99664		
Designated Licensee:	Philip Zimmerma	an					
Contact Phone:	907-362-3291		Business	Phone:	907-22	4-6522	2
Contact Email:	gpenterprise88@	gmail.com					
Yes No Seasonal License? If "Yes", write your six-month operating period:							
OFFICE USE ONLY							
Complete Date:		License Years:		100	Licens	se#:	5621
Board Meeting Date:			Trans	saction #:	150	10700	:al
Issue Date:			BRE:			JAN	3.7 5018



[Form AB-00] (rev 10/10/2016)

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501

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ALCOHOL MARIJUANA CONTROL OFFICE STATE OF ALASKA

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

## Alaska Alcoholic Beverage Control Board

# Form AB-00: New License Application

	Section 2 – Premi	ises Info	rmation		
Premises to be licensed is:					
an existing facility	a new building	a proposed	d building		
The next two questions must	be completed by <u>beverage dispensar</u>	y (including t	ourism) and package store	<u>e</u> applican	ts only:
What is the distance of the outer boundaries of the	e shortest pedestrian route from the page in the page is the page in the page is should be shoul	oublic entran e unit of mea	ce of the building of your surement in your answer	proposed	premises to
N/A					
the public entrance of the N/A  Se  This section must be complete	e shortest pedestrian route from the nearest church building? Include the ection 3 – Sole Proprietor who is applead by any sole proprietor who is applead to the end of the end	unit of meas  or Owner  ying for a lice	urement in your answer.  Ship Information  ense. Entities should skip t	n	
The following information mu	se attach a separate sheet with the rest to be completed for each licensee and pplicant affiliate				
Name:					
Address:					
City:		State:		ZIP:	
This individual is an:	pplicant affiliate				
Name:					
Address:					
City:		State:		ZIP:	
					GEIVED



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## Alaska Alcoholic Beverage Control Board

# Form AB-00: New License Application

# Section 4 – Entity Ownership Information

This section must be completed by any <u>entity</u>, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 5.

If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a <u>corporation</u>, 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 <u>limited liability organization</u>, 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 <u>partnership</u>, including a <u>limited partnership</u>, the following information must be completed for each <u>partner</u> with an interest of 10% or more, and for each <u>general partner</u>.

Entity Official:	Philip Zimmerman					
Title(s):	Member	Phone:	907-362-3291	% Owr	ed:	50
Address:	33318 Bear Lake Road					
City:	Seward State: Alaska			ZIP:	996	64
Entity Official:	Vivian Zimmerman					
Title(s):	Member	Phone:	907-224-6522	% Owr	ned:	50
Address:	33318 Bear Lake Road					
City:	Seward	State:	Alaska	ZIP:	996	64
Entity Official:						
Title(s):		Phone:		% Owi	ned:	
Address:						
City:		State:		ZIP:		
Entity Official:						
Title(s):		Phone:		% Ow	ned:	
Address:						
City:		State:		ZIP:		
	······					





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Phone: 907.269.0350

## Alaska Alcoholic Beverage Control Board

# Form AB-00: New License Application

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10072580	AK Formed Date:	11/28/17	Home State:	Alaska	1
Registered Agent:	Philip Zimmerr	nan	Agent's Phone:	907-362-329	1	
Agent's Mailing Address:	33318 Bear La	ike Road	•	***************************************		
City:	Seward	State:	Alaska	ZIP:	99664	
Residency of Agent:					Yes	No
Is your corporation or LL	.C's registered agent	an individual resident of	the state of Alaska?		O	
	Sec	tion 5 – Other L	icenses			
Ownership and financial intere	est in other alcoholic	: beverage businesses:	,		Yes	No
Does any representative any other alcoholic beve				ancial interest in		0
If "Yes", disclose which indi		ancial interest, what the	type of business is,	and if licensed in A	laska, whi	ich
ilcense number(s) and ilcen	se type(s).					
	Sec	ction 6 – Author	rization			
Communication with AMCO st	aff:				Yes	No
Does any person other to AMCO staff?	han a licensee name	d in this application have	authority to discuss	this license with	0	
If "Yes", disclose the name The Law Offices of E				plication		
The Law Offices of t	_inoui a coney,	r.o. Assisting Wit	п ше псепѕе ар	plication.	VED	15,10
[n an and a solution of				IAN O /	2018	

[Form AB-00] (rev 10/10/2016)



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Phone: 907.269.0350

## Alaska Alcoholic Beverage Control Board

# Form AB-00: New License Application

#### 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 proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.	72
I certify that all proposed licensees have been listed with the Division of Corporations.	PZ
I certify 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.	F2
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.	72
l agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	2
As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC that this application, including all accompanying schedules and statements, is true, correct, and complete.	304, and
Signature of Incensee  Printed name of licensee  Signature of Notary Public in and for the State of Alaska  Printed name of licensee	
My commission expires: 6 15	19
Subscribed and sworn to before me this day of	, 20 <u>17</u> .
T BEOENVE	- D -

Anchorage, AK 99501 alcohol.licensing@alaska.gov

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# Alaska Alcoholic Beverage Control Board

# Form AB-02: Premises Diagram

#### What is this form?

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

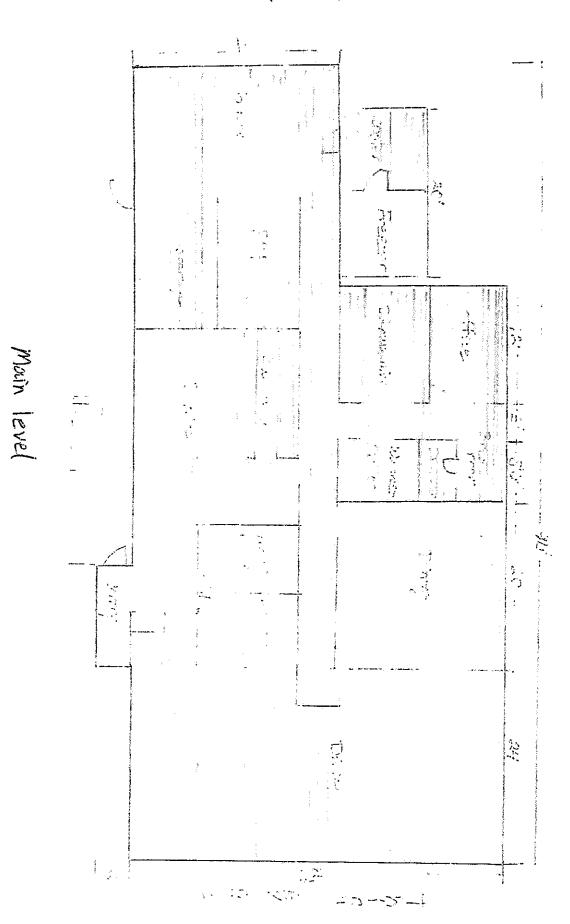
	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.	0	

# Section 1 - Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	The Highliner Restaurant, LLC	License	Number:	562	21
License Type:	Public Convenience Restaurant Eatir	ng Place			
Doing Business As:	The Highliner Restaurant				
Premises Address:	303 Adams Street				
City:	Seward	State:	AK	ZIP:	99664





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Alaska Alcoholic Beverage Control Board

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# Form AB-03: Restaurant Designation Permit Application

#### What is this form?

A restaurant designation permit application is required for a licensee desiring designation under 3 AAC 304.715 – 3 AAC 304.795 as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049. Designation will be granted only to a holder of a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license, and only if the requirements of 3 AAC 304.305, 3 AAC 304.725, and 3 AAC 304.745, as applicable, are met. A **detailed floor plan** of the proposed designated and undesignated areas of the licensed business and a **menu** or expected menu listing the meals to be offered to patrons must accompany this form. Applicants should review AS 04.16.049 – AS 04.16.052 and 3 AAC 304.715 – 3 AAC 304.795. All fields of this form must be completed. The required \$50 permit fee may be made by credit card, check, or money order.

# Section 1 - Establishment Information

Enter information for lice	nsed establishment.				
Licensee:	The Highliner Restaurant, LLC				
License Type:	Pub. Convenience Restaurant Eat. Place	License	Number:	562	21
Doing Business As:	The Highliner Restaurant			00.	
Premises Address:	303 Adams Street				
City:	Seward	State:	AK	ZIP:	99664
Contact Name:	Philip Zimmerman	Contact	t Phone:	907-3	862-3291

# Section 2 – Type of Designation Requested

This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

<b>V</b>	Dining after standard closing hours: AS 04.16.010(c)
<b>V</b>	Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)
<b>V</b>	Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)
<b>✓</b>	Employment for persons 16 or 17 years of age: AS 04.16.049(c)  NOTE: Under AS 04.16.049(d), this permit is not required to employ a person 18 - 20 years of age.

OFFICE USE ONLY			
Issue Date:	Transaction #:	BRE:	
			MAN 0 / 2010



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Phone: 907.269.0350

# Alaska Alcoholic Beverage Control Board

# Form AB-03: Restaurant Designation Permit Application

# Section 3 – Additional Information

Enter all hours that your establishment intends to be open. Include variances in weekend/weekday	hours, and indicate ar	n/pm:
Monday through Sunday 11am to 9pm		
Are any forms of entertainment offered or available within the licensed business or on the proposed portions of the premises?	Yes designated	No
If "Yes", describe the entertainment offered or available:		
Food and beverage service offered or anticipated is:  table service buffet service counter service other, describe the manner of food and beverage service offered or anticipated:	her	
Is an owner, manager, or assistant manager 21 years of age or older always present on the premises d business hours?	Yes Vering	No
Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the	third page of this form	m.
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, t page of this form that meet the requirements of this form.	the third  Ves  0 4 2018	No
[Form AB-03] (rev 10/10/2016)		-2.6-



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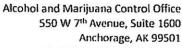
Phone: 907.269.0350

# Alaska Alcoholic Beverage Control Board

# Form AB-03: Restaurant Designation Permit Application

## Section 5 - Certifications and Approvals

Read each line below, and then sign your initia	ls in the box to the right of eac	h statement:	Initials
I have included with this form a detailed floor p business for purposes of this application. I unde	plan of the proposed designated erstand that this diagram is diffe	d and undesignated areas of the lice erent than my licensed premises dia	ensed P2
I have included with this form a menu, or an exp	pected menu, listing the meals	to be offered to patrons.	72
I certify that the license for which I am requesting golf course, or restaurant or eating place license	ng designation is either a bever e.	rage dispensary, club, recreational s	ite, 72
I declare under penalty of perjury that this form, correct and complete.  Signature of censee  Phil ip Zimmerman  Printed name of licensee  Subscribe	NOTARTY Public i	Signature of Notary Public  and for the State of Alaska  My commission expires:	15/19
Local Government Review (to be completed by	an appropriate local governmer	nt official): Approve	d Disapproved
Signature of local government official	Date		
Printed name of local government official	Title		
			EIVED
[Form AB-03] (rev 10/10/2016)		JAN (	1 / 2Rape 4 of 5
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## Alaska Alcoholic Beverage Control Board

# Form AB-03: Restaurant Designation Permit Application

AMCO Enforcement Review:			
Signature of AMCO Enforcement Supervisor	Printed name of AMCO Enforcement Supervisor	_ r	
Enforcement Recommendations:			
AMCO Director Review:		Approved	Disapproved
Signature of AMCO Director	Printed name of AMCO Director	-	Ц
Director	France name of Africo birector		
Date			
Date			
Limitations:			
		RECE	VED
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Form AB-03] (rev 10/10/2016)	A	LCOHOL MARLJUANA C STATE OF AL/	Page 5 of 5
		STATE OF ALT	SKA

# THE HIGHLINER

# Appetizers

#### Calamari

Seasoned batter served with lemon aoli 13.50

#### Popcorn Shrimp

A basket of tasty Bay Shrimp, lightly breaded and cooked to a crispy golden brown served with cocktail 13.50

#### Hot Crab and Artichoke Dip

Fresh snow crab, artichoke hearts and parmesan served with toasted baguettes 15

## Chicken Wings

choose mild, hot, barbecue or teriyaki 12.00

#### Steamer Clams

sautéed in garlic, butter, herbs and wine 18

#### Fresh Mushrooms or Zucchini

Lightly batter, deep fried served with blue cheese or ranch 10

# Sandwiches

served with choice of fries, macaroni salad, soup of the day or green salad

#### From the Sea

# The Highliner Fish Sandwich

Beer battered Halibut fillet deep fried to a golden brown served on brioche bun with melted cheddar and tartar

#### Deep fried Oyster Po Boy

served with roulade on sourdough 17

# Crab Salad Sandwich with Clam Chowder

Snow crab salad served on sourdough roll with melted cheddar and a cup of clam chowder 19

## Prime Rib Dip

prime rib, creamy horseradish sauce, auju 17

#### Ruben

Corned beef, swiss, sauerkraut, 1000 island grilled on marbled rye 12.50

# Salads

## Crispy Chicken Salad

Fresh mixed salad greens topped with two fried chicken strips, tomatoes, black olives and cheddar cheese with Chipotle Ranch dressing 13.50

#### Caesar Salad

Crisp romaine, Parmesan and homemade croutons tossed in our own Caesar dressing 13.00 Add Grilled chicken 3.00 Bay shrimp 4.50

#### Spinach Salad

Fresh spinach topped with bacon bits, hardboiled egg, purple onion, parmesan cheese served with warm honey mustard dressing. 14.00 add grilled chicken 3.00 bay shrimp 4.50

# Burgers

Choice of grilled chicken or hand pressed house ground beef burger served with a choice of french fries, macaroni salad, soup of the day or green salad

# All American Burger

Simply a delicious burger. Double your pleasure! Add a patty 2.75 12.00

## Bacon Cheese Burger

Apple smoked bacon and American cheese on brioche bun 13.50

## Mushroom Swiss Burger

Fresh mushrooms sautéed and piled high, swiss cheese on brioche bun 14

## Green Chile Cheese Burger

Hatch New Mexican green chile, american cheese on brioche bun 15.50
Add bacon 1.50

## The Honky Tonk

Crispy fried onions, pepper jack cheese, bacon and bbq-sauce 15.50

Consumer Advisory: Consumption of undercooked meat, poultry, eggs, or seafood may increase the risk of foodborne illnesses CONTROL OFFICE

marginana licensing@alaska.gov https://www.commerce.alaska.gov/web/amco





# Alaska Alcoholic Beverage Control Board

## Form AB-12: Petition

#### What is this form?

Any application for a restaurant / eating place – public convenience (REPC) license or any liquor license application for a premises located in an area with no local governing body must file a petition in accordance with AS 04.11.400(g), AS 04.11.460, 3 AAC 304.115, and/or 3 AAC 304.335. Instructions vary with the type of area in which your proposed premises are located.

Please read the instructions in Section 2 of this form carefully.

A liquor license application for a premises that is within 50 miles of the boundary of a local governing body must submit a petition signed by the majority of the permanent residents residing within one mile of the proposed premises per AS 04.11.460(a).

A liquor license application for a premises that is 50 miles or more from the boundary of a local governing body must submit a petition signed by two-thirds of the permanent residents residing within a five mile radius of the United States post office nearest to the proposed licensed premises per AS 04.11.460(b)

This form must be submitted to AMCO's main office before any REPC license application or before any liquor license application in an area with no local government will be considered complete. You may include as many pages of signatures as necessary.

	Yes	No
I am applying for a restaurant / eating place – public convenience license, under AS 04.11.400(g).	<b>V</b>	Description
My proposed premises is outisde, but within 50 miles of the boundary of a local government.	V	
My proposed premises is 50 miles or more from the boundary of a local government.		$\checkmark$

## Section 1 - Establishment Information

Enter information for the	business seeking to be licensed, as it	dentified on the lice	nse applica	tion.				
Licensee:	The Highliner Restaurant, LLC							
License Type:	Public Convenience Restaur	Public Convenience Restaurant Eating Place						
Doing Business As:	The Highliner Restaurant							
Premises Address:	303 Adams Street							
City:	Seward		State:	AK	ZIP:	99664		
Latitude:	60,1026687	2/a/a 87 Longitude:			9.411			

[Form AB-12] (rev 07/17/2017)

JAN 0 4 2018

ALGORUL MATERIANA CONTROL OFFICE
STATE OF ALASKA



marijuana.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

# Alaska Alcoholic Beverage Control Board

# Form AB-12: Petition

## Section 2 - Petition Instructions

#### Please read these instructions carefully.

The following information must accompany all liquor license applications requiring petitions:

- 1. A map showing the population within:
  - a. the one mile radius with the proposed premises as center (required for REPC applications and for premises within 50 miles of the boundary of a local government)

OR

- b. the five mile radius with the United States post office as center (required for premises 50 miles or more from the boundary of a local government)\*
- 2. Graphic designation on a map showing the general area where petition signatures were obtained
- 3. A narrative and mathematical calculation of how population totals were determined
- 4. A narrative of how signatures were obtained (door to door solicitation; premises solicitation; etc.)

"Permanent resident" means a person 21 years of age or older who has established a permanent place of abode. A person may be a permanent resident of only one place, per 3 AAC 304.115(b).

Signatures must be obtained within the 90-day period immediately before submitting the petition to the board.

\*If there is no United States post office within a radius of five miles of the proposed licensed premises, the applicant must obtain the signatures of two-thirds of the permanent residents residing within a five mile radius of the proposed licensed premises. The map should show the applicable area.

JAN 0 4 2018

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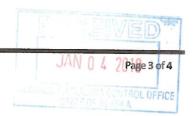
marijuana.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

# Alaska Alcoholic Beverage Control Board

Form AB-12: Petition

Section 3 – Petition	
*Have a completed copy of this page available for those considering this petition.	
This is a petition in support of a	
Public Convenience Restaurant Eating Place (type of license applied for)	license application.
By signing this petition, you are stating that you are in far alcohol establishment in your community.	vor of having a licensed
Each person who has signed this petition states that he or states that he or states in the area indicated below; that he or she is 21 years agrees to the issuance of a	
Public Convenience Restaurant Eating Place (type of license applied for)	to <u>sell</u> (manufacture, sell)
alcohol at 303 Adams Street, Seward, Alaska 99664 (location of proposed premises)	
in the State of Alaska, and that the physical address of his/l	her residence is:
within one (1) mile of proposed premises.	
$\Box$ within five (5) miles of the nearest post office to the p	proposed premises.





[Form AB-12] (rev 07/17/2017)

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501

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Phone: 907.269.0350

# Alaska Alcoholic Beverage Control Board

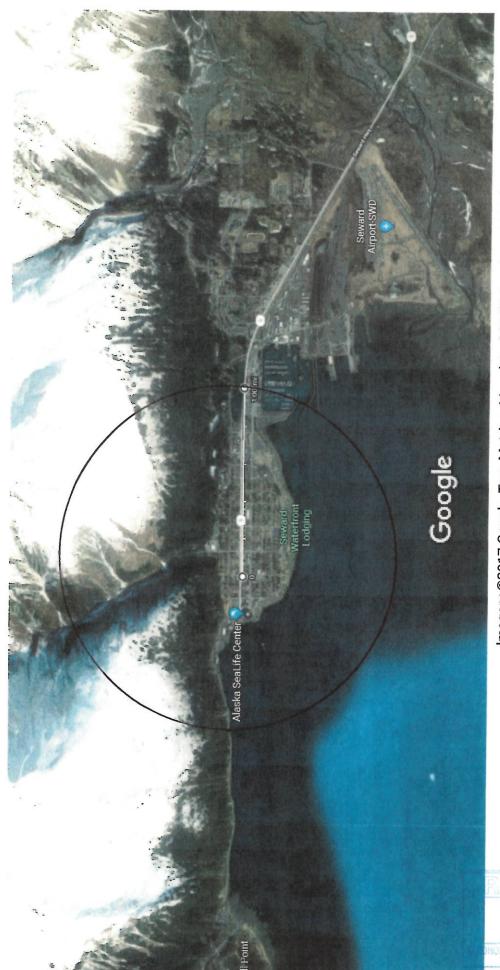
# Form AB-12: Petition

#### Section 4 - Certifications

This petition is not valid if this page i	s not complete, signed, and n	otarized.	
ı, The Highliner Restaurant, I	.l.C(proposed licensee)		, the applicant for a
Pub. Conv. Rest. Eating Place (type of I cense applied for)		OG statutory reference)	hereby certify that the
number of permanent residents 21 years of a second		(one/five)	
303 Adams Street, Seward, A (proposed premises or nearest US Post C	IASKA 99004 )ffice address)	totals   Itotal none	, and this petition
declare under penalty of perjury that this	(percentage)		
ignature o Dicensee	CALHO CALHO	C C C	ton Dublic
Phi:lip Zimmerrnan Printed name of licensee	E SOLOTO *=	Signature of No slic in and for the State of My commission this 28 day of 1	

12/14/2017

Google Maps



Imagery ©2017 Google, TerraMetrics, Map data ©2017 Google 2000 ft

Measure distance

Total distance: 1.00 mi (1.62 km)

Google Maps

en larged map



Imagery ©2017 Google, Map data ©2017 Google 500 ft

Measure distance

Total distance: 1.00 mi (1.62 km)

Google Maps



500 ft Imagery ©2017 Google, Map data ©2017 Google

Measure distance

Total distance: 1.00 mi (1.62 km)



We petitioned all households within one mile of the Highliner restaurant located at 303 Adams in Seward. After many days, nights, and weekends of circulating our petition door to door we are pleased to say we had an overwhelmingly positive response to our new endeavor. The findings are outlined below.

Total residences in our area	517
Total residences not signed home after four attempts	84
Total summer rentals (B&B or vacation rental)	42
Total vacant or abandoned	63
Total summer occupied only	21
Total people refused to sign	13
Total residences that signed	294
Total signatures obtained	348

#### **FINDINGS**

Out of 294 residences we acquired 348 signatures. This is an average of 1.19 signatures per household.

There are 84 households that meet the petition criteria. 84x1.19=100 possible missed signatures.

Out of 348 total signatures only 13 refused to sign. (13/348=.04%) refusals

Out of 100 missed signatures an average of 4 would be refusals.

#### SIGNATURE PERCENTAGE

(signatures obtained) divided by (total signatures possible) = percentage obtained

$$348 / (348 + 100 + 13) = 76\%$$

We have obtained 76% of signatures possible of people within one mile of the restaurant.



294 houses 348 signatures

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Rebecca Swartz	Checca Swand	5/1/82	4145 Lave#9	Seward	12/18/17	Yes ₽ No □
Joshua Long	tolmday	3/14/84	414 5 The #4	Sevard	19/18/17	Yes 🖟 No 🗆
Peanna Ochs	Domodelio	7/27/59	1122 4th Ave #3	Seward	12/18/17	Yes Ø No □
fre Own	Joe W OWENS	02/08/45	1119 Chily View Pl	Level	12/18/17	Yes ☑ No □
Diane Owens	De ani Driens	19/11/43	1119 Cliff View	Seward	12/18/17	Yes 🖾 No 🗆
Randy Alternate	Kangtitta	1/16/50	1129 Clifforew	Sevan	12/18/17	Yes ⊠ No □
Susan Swidershi	Such Enile	5118/59	704 Second Are	Sward	12/18/17	Yes 🗹 No 🗆
Dennis Swiderske	Kengulle	6/30/45	704 Secontin	Severel	12/18/17	Yes∕® No □
Pat Nolsa	JA JA	69 49	216 Marestlow	Sanas	18 Dec 17	Yes⊠ No□
Jehroh Hyrmatt	filler	420/53	1129 Cliffliew	Sevent	18 Dell	Yes ❷ No □
ARNE HATCH	Ceru Hatch	5-15-53	1133 CLIFFVIEW	4	1248-17	Yes 🗗 No 🗆
Melody Spangler-Hate	Melody Spargle Hatch	1/16/55	1133 Cliff View Pl	Seward	12/18/17	Yes No 🗆
Try Dinsmore	Tyle	11-01-90	600 31d Ave	Sward	12/18/17	
STEUT ALEHE	Det Creekt	6-23-52	518-54244	Swe	12/22/17	Yes ☒️ No □
Robyn Andette	Kelyn & Chelette	5-29-1996	516 STA Ave	Seward	12/20/17	Yes ☑ No □
Mal) Nielsen	NH N	3/6/87	531 5t Ave	Sewille	12/22/17	Yes 🕱 No 🗆
Megan Moser		4/28/89	E37 5th Ave	Seward.	12/22/17	Yes to No 🗆
Frik Hubery	4(.)	12.9.85	710 7.d Ave	Seword	12/22/17	Yes No 🗆
Andrew Course	Coffan	13-33-13	s 32land	Sur	12/22/17	Yes 🖾 No 🗆
Shari Davenport	Dar Kr	9-27-67	))	2ac	12/22117	Yes 🗹 No 🗆

Please provide your printed name, signature, birthdate, the physical location of your residence, date, and check the appropriate box.

By signing this petition, you are stating that you are in favor of having a licensed alcohol establishment in your community.

		- The state of the				
Printed Name (Please print legibly		Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
LOW STAIN	My Trees Sep	5-18-61	705 4th	SEWAID	12-17	Yes No 🗆
In Welds	Jun Debto	7-3-19	7054th #1	Source	12-17	Yes ⊠ No □
Mark Frekenbrose	X Markey h	6/3/73	100 and	]/	11	Yes Ø No □
of De Moss	N. V	9/8/73	101 Cavina	Several	17-17	Yes ⊠ No □
Herther Rother	/// / / / / / / / / / / / / / / / / / /	2138/74	1419 Vista	Seward	12-18	Yes ☑ No □
Harold Tanst	My K Yayal	11-07-53	1414 Vista	Savand	12-18	Yes X No □
Horaw Kothenbe	riger C	1-30-80	1419 Vista AVE	Severe	12-18	Yes No □
Jeen A Hira		6.12-81	401 ) JOHNSON	Source	12-19	Yes □ No □
Jim Willie	Jan wellie	01-11-55	107 RIVIAN St.	SENARO	12-18-17	Yes 2 No 🗆
Cristatrit	2 Mote Tur	01-24-71	500 4th Ave	Seward	12-18-17	Yes 12 No 🗆
Maranda McN	long Myanch & many	11/21/91	5005th Aug A	Sewand	12/18/17	
HANS HODEIZMAN		10/27/86	SOU STLAUEA	SEMARD	12/18/17	Yes 🖸 No 🗆
TillwanAT	Les January Contraction of the C	1/24/164	50 5 <sup>5</sup>	L,Č	uu	Yes 🗗 No 🗆
Irene Kansa	141 Jane Ramon	11/03/51	536 5TH	Sewayof	12/18/17	Yes No 🗆
Scott Kans		4/28/57	536 5+1		12/18/12	Yes 🐯 No 🗆
Jean A. Tisdo		13/1/26/50	704 5年	Seward	12/18/17	Yes 🗷 No 🗆
Michennissen	Phihat Chin	1/28/196	6700 5th Au	Secont	12/18/17	Yes 🛱 No 🗆
Henry Whotent	( ) ( )	4/20/7	527 52 AVe	Serverel	12/18/1	Yes 🗘 No 🗆
Raymond How	15 Potture	12/10/18/88	SOZ OTHALVE	Seword	12/18/17	Yes A No D
Will Calhoon	1 Mrs Com	12-7-56	(01) 4th fue		12-14-17	Yes No 🗆
** 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		, ,				רו פאר רולפאז

Please provide your printed name, signature, birthdate, the physical location of your residence, date, and check the appropriate box.

By signing this petition, you are stating that you are in favor of having a licensed alcohol establishment in your community.

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Elizabeth led	8	2/12/65	3385HAR	Seward	12/18/17	Yes Æ No □
KarenThonstroma	Karen Sunstrain	8/23/59	3365 AUR	Seward	10/10/17	Yes Si No 🗆
Rendall Smith	Man je	7/22/1991	232 5th Are	Seward	12/18/17	Yes ⊉ No □
En Eldae		0/12/1/1986	331 5th Ale	grand	2018117	Yest⊠ No 🗆
Kam Hansen	13195	3/21/1990	331 5th Avenue	Seward	12/18/17	Yes.⊠ No 🗆
Chis Clerrens	G. Cu	7/25/1983	334 fight Ave	Sevad	12/18/17	Yes-∰ No □
Samontha Clemens	feliale	3/22/83		Seward	12/18/17	Yes.☐ No □
Math Mankousle	<del></del>	4/27/86	423 5th Ave	Sevend	12/18/17	Yeş∕∰ No 🗆
Murack	Kanster-casiela	11/22/85	ŢĬ.	Severa	12/18/17	Yes∕\ No □
Jennifer Cotton	The Cath	1000185	4-81 \$39-5th	Soward	12/18/17	Yeş∕ 🖎 No 🗆
Clifford Reid	Wiffin	04-25-63	439 GM Ave	(1	12-18-17	YesÆ No □
KOT AA JANAN	4 KRUCHI	9-13-38	5285 auc	Seupl	12/19/	7yes Ø No □
Mod Elour	Who flore	96/73/9	502 Morre, 87	Selver	15	Yes 🖬 No 🗆
Juliewilder	Jula	1/5/76	503 ASt,	Seward	ì	Yes⊠ No □
Andray Willey	- Duy V f by Ad	10/30/7	2503AS+	Seward	12/18/17	Yes 🖟 No 🗆
Kob Kurtz	hot I'm	03/25/198	607 FAM Ave		12/15/207	Yes No 🗆
him Sawyer	lichigan		179 5th Are	seword	12-18-17	Yes ☑ No □
Randall Wester	Rulestr	3-12-63	414 51h Ave #12	Seward	12.18-17	Yes No □
Stalyul Ster	Agricult	8/7/72	4145MANE FIC	Seuberd	- IC/	Yes 🔀 No 🗆
HS Twa	ASSO	7-14-19	414 5th Ave \$13	Soward		Yes ☒ No □

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Sigrun SPII	P. S. Stoty	5 25/0			12/17/1	Yes Æ No □
Patrick Lewis	Patile Z=	3/17/18	524 4th AVE APT 3	Seward	12/17/18	Yes ⊠ No 🗆
Robie Arguetz	forthe	2-19-88	524 4h we #2	Sevara	12/7/8	Yes No 🗆
Brankan Work	John	7/12/81	SY 4th Ave #1	Seward	12/17/18	Yes Mo 🗆
Moel Wilson	grow wen	11/9/86	524 4th Ave#1	Semon 9	12/17/18	Yes 🖼 No 🗆
Khandle Bohert	Unde PS	9/29/80	514 4th Ave	Sewand	12/17/17	Yes 😘 No 🗆
Km us he	fraga	8/11/76	512 4- Avc.	somed	12/17/17	Yes⊠ No □
Haley Hath	Yould A Mas	11/10/87	SOA Agr aven	Swell	12/17/17	Yes ⊠ No □
Dorthap Dinglet	on Dartheysingleter	11 14/29/44	310 Jefferson	Seward	רולרולח	Yes∕® No □
Soft Reiessen	Densey	10/3/1990	334 4th Ave	Seward	12/17/17	Yes No 🗆
Sanna G-Levan	Sanna S. Se Van	4-21-30	429 4th ave	Sewed	.12-17-17	Yes <b>幻</b> No ロ
Mark Adams	flum (hu	10-31-91	425 4th Ave	Seword	12-17-17	Yes ☑ No □
Whitney Adams	Lehdreyfdons	07-12-96	425 4th Ave	Second	12-17-17	Yes ௴ No □
KONALD REIGHUM	Should Johnson	10-16-52	417 ath Ave	Saul	12-17-17	Yes Ø No □
Kimberly Reverson	Kimberly Recusor	7-25-56	417 4th Due	Seward	12-17-17	Yes A No 🗆
Jessica Fogle	gessia Kogle	5-23-90	508,5 Madison St	Seward	12-17-17	Yes ☑ No □
Geoffrey Dauson	47	3-21-83	425 4th Ave	Sevard.	12-17-17	Yes 🖾 No 🗆
Brad Snowden	his family	5/6/51	430 4 Ave	Stuard	141717	Yes ੴ No □
Ja Costo Mar		#12a/90		Seward	12/17/17	Yes Ø No □
Co. P. P. C. C. C.	Morros	12-19-40	524 474 AV	Segusa.	14-17-	Yes Ⅸ, No □

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Judy Cabarre	Orly Calora	130/42	59-32 AW	SWD	12/17/17	Yes X No □
Nathanial Charbonners	I from fifty	03/03/80	506 - and Ave	5WD	12/17/17	Yes 🖎 No 🗆
Ere icla Sergio	Fice da lione	5/16/93	303 Melison SHY	SWD	12/17/17	Yes. No □
Charlotte Mayo	Charlotte Mago	8/21/69	303 mac 1 #1	5wd	12/17/17	Yes Ø No □
Raula Mortillaro	Paule Worthlow	4/3/60	300 Washing for	SWD	12/17/17	Yes No 🗆
CJ Levine	Offern	27 Dec 157	200 Washinston SA	SWD	17 Dec 2017	Yes-₹ No 🗆
Terrance Radinary	As By	06/29/95	235 30 HO	SwD.	12/17/17	Yes Ø No □
LINDA MICHOIN	Berder I Magin	10/29/54	327 There are	Swd	12/17/2017	Yes No □
Katie Cornwell	Kirle	7/31/30	601 3rd Dre	Swd	12/17/17	Yes X No □
Ben Matheson	Bu Mun-	12/10/75	601 3rd Ave	Swd	12/17/17	Yes X No.□
CIKEMOORD	an	11/23/33	902 GAY AMEA	Sury	19/18/12	Yes □ No □
Courtney moore	Gran	4/20/91	903 4th Ave	Swd	12/18/17	Yes ☑ No □
Stephenie Higgins	February Hispan	5-11-76	1124 4th	Shup	12-13-17	Yes I No 🗆
Chad Higgins	Chines /tog	Co-20-71	1124 4 tu	500	12-18-17	
LisameClure	Bysa McClura	8/25/58	1112 44 Ave #8	Siwerd	12/17/17	Yes ☑ No □
wendy Stallings	Wendy Jatko	2/27/104	7054th Avet 2	Scurid	12/17/17	Yes No □
M. Mord Rice	Vir Ly	6/26/84	708 3rdAve.	Schro		Yes-E No 🗆
tyler U Pelo	AGNITION TO	8-31-78	602 4th Ave	SWD	12-17-17	Yes 🗗 No 🗆
Exachilman	an Cla On	2/20/5/	6/0 4thAve	500	12-1717	Yes No 🗆
Thanin Sheas	& Sharon Should	19-3-44	614 4ph	Savara	13-17-17	Yes D No □
Sharon Shea	17	]				

Please provide your printed name, signature, birthdate, the physical location of your residence, date, and check the appropriate box.

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Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Angelena Ledet	Augelean Ledet		413 OHA ATRE	Seward	12/11/6	Yes ☑ No □
Unique Reese		08/ou/qu	TOU SOLUTIONS	Sewared	12/14	Yes ₪ No 🗆
lauren Breager	Lowen & Brenger	12/14/17	10134th Ave #A	Seward	12/16	Yes 🔯 No 🗆
Br. Harex Schuffe	Lan Selver	OU/icum	10BB 4Ph AVR	Souard	12/16	Yes I No 🗆
Blef Compbell	W Coll	09117/92	1013 Buth Ave	Schard	12/16	Yes ☑ No □
Mary Martin	MARTY MARTINSED	2-5-43	1013 D Yave	SEWARD	12-16	Yes.⊉ No □
TINNAVISAGE	Sinia Visage	11/12/50	1009 NTh AVC.	Strand	12/16/17	Yes ☑ No □
Suscende Agrone	Susamel Ugnore	08/19/63	1009 413 Ave	Seward	12/16/17	Yes Ø No □
Kathy Gilley	Kally Tally	06/37/53	1009 4M AVE	Sewerd	12/14/17	Yes 🗖 No 🗆
Ribbie Whitelead	Helphie underten	3/3/7/	10114 th AVD1007A	Several	12/16/17	Yes & No □
DAME SCARS	B-5-6	2950071	10141210114 A	Sound	16 Dec 17	Yes ⊠ No 🗆
77767	VAR	102957	100 94TH B	11	17-17	Yes ⊠ No □
Carol Michelle Schalter		04/29/68	1000 CHHALL	severd,	12/17/17	Yes ⊠ No □
Britany Hilbur	Butter	06/11/1990	1006B 35 Aug	Seward	12/1/11/7	Yes ⊠ No □
Kylertickenson	Asher	1/28/1994	1013 C 4th Ave.	Sevard	12/17/17	Yes 🖾 No 🗆
Acron Lavis (	Me	13/86	1010 A 3rd Ave	Scward	12/17/17	Yes 🖾 No 🗆
IM O'DELL	Jim O'Dell	6/2/54	1011 3 PD AUF.	SIEWARD	12/17/17	Yes ⊠ No 🗆
THI washer	4/	12/14/45	10 10 Uth Ave	6cward	12/19/17	Yes 🖾 No 🗆
Katrina (buritur	Patylow	1/14/81	7113,d Ava	Seward	12/17/17	Yes ☑ No 🗆
Levi Kangel		8/4/86	7683 Ave		12/17/17	Yes ⊠ No 🗆

			Physical address of your			
Printed Name (Please print legibly)	Signature	Birthdate	residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Cothy K White	Cetty R. White	12-20-5	809 Third Au	Sewad	12-16-17	Yes 🗗 No 🗆
Helenk Harmon	Kelenk. Harmon	9-21-34	809 Think AIX	Seward	12-16-17	
BLAKE WOOT TON	Afrika Worthon	10-7-73	1005 3NS AUE	SEWARD	12-16-17	Yes 🗗 No 🗆
RAMIREZ RAUL	for Benit	11 DEC 1982	1007 3rd AVE	SENARD	17-16-17	Yes. ☑ No □
Sonny Talens	By Jale	07-27-41	DOOT SILL AKE	Sonard	12-16-17	Yes ☐ No ☐
CAY DISDAY	14 Sy /	03.14.87	POR 3/6 THIRD AVE	Sau mo	12-16-17	Yes Æ No □
KRISTI ELGSNIN &	May 14	4-15-85	316 THIRD AVE	SENMO	12-16-17	Yes 🖾 No 🗆
Ma Teatera	to terra	1.19.73	317 Third Are	Severel	12-16/7	Yes ☑ No 🗆
Totiana Lalonier.	Maria	8 10 89	513 36d Aven.	Schard	12.16/17	Yes X No □
Sharan O Man.	Traca Pollay	121-54	1006-A3RdAUR	Seured	12-16-17	Yes 🖸 No 🗆
COLT Pillon	Cott sucm	3/8/95	1006 A 3RDADE	Scwarn)	02/16-10	Yes 🖾 No 🗆
Carmen Schultz	Science Scholtz	6/23/14	10000 C BRDIAVE	Teveral	12/16/17	Yes No 🗆
POYARD GUILLEMETTE	Shood Audemoth	1/11/54	1008 A 3RD AUE	SELVARIT	12/16/17	Yes 🗗 No 🗆
Drittany Will's		. 7	160% 3rd Ave	Sound	12/16/1	Yes ₩ No 🗆
Stolpen tisher	(SHEET)	415/1484	1010 A 3rd ave	Seward	10/17/11	Yes S No 🗆
Opri Orgates	In Tour	2/20/25	1010 C 5 days	Savard	12/16/17	Yes 🖼 No 🗆
Kava King	1/2	4/16/60	1612 3rdAV	SEWAR	12/15/17	Yes 🗗 No 🗆
Bujon Journey	BRYZN JOUNG	16/2/62	10/2 HITA	Seward	12/16/17	Yes 🖯 No 🗆
Cheli Simpsio	Cheri Sinpon	12-16-36	1015 HPTB Bayside	Seward		Yes No 🗆
TOWN BOOK	Grandi ledet 1	M8-14-88	1015 Apt. D. Bayside	Seward	12/16/17	Yes 🖾 No 🗆

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you_ understand this petition?
Leif Bardarson	he falo-	10/25/1986	220 3rd Ave	Seavard	12/16	Yes ⊠ No □
Lec Felton	Lee Felor	9/68	220 and Ave B	sewahd	1216	Yes 🎏 No 🗆
Any Stevenson		830-80	225-31 Ave#1	Sound	12/16	Yes No □
Der Kemple	all	10/13/72	1236/ myda su	Solyn	12/1/	Yes No 🗆
Varidy Fly	David J. Gotz	05/19/50	32711 Nash Rd.	Seward	12/16	Yes ☑ No □
Roper Son	Sunt	1529-55	1-4×25,604	HOMER	12116	Yes No 🖸
Thesa slots.	Kuen Alato	5/1/62	235 3rd Are	Sewand	12/16	Yes ☒, No □
WALKETHEDER		04/3/44	2531 d the	y	12/16	Yes ☑ No □
JONL ANDREWS		12-10-45	305 3rd Aug	Seward	18-16	Yes Ø No □
ValerieRose	Calque Rose	UBUSH		Sovard	12/16/17	Yes 🔼 No 🗆
JOE TONH	to Jag	47 1975	413 3rd AVE	SEWARD	12/16/17	Yes 🖾 No 🗆
Japanes Hunt	Jana Attent	03/05/86		Icward	12/16/17	Yes 🖟 No 🗆
Mark T	Mruk )	10118/60	Pa 2501 Severd, HK	Several	12/16/7	Yes Æ No □
thica Jung	3	619178	303 Madisin	Seward	17/16/17	Yes 🛣 No 🗆
ED PLEUKA	Edward I letter to	19 NOV 1944		Skyary,	12/16/17	Yes 型 No □
Christina Saples	Chitan Sage	11/88	610 3rdave	Seement	416/17	Yest No □
Teven ausay	Destroyly )	2-26-51	605 3N AUE	Secran	10 76-17	Yes Ø—No □
Rebecca Lawson		6-70-55	11	((	11	Yeşk®√ No 🗆
Thomas Mor	,	12/16/17	615 J-0 Au	Sturb	0606/976	Yes⊅≦ No 🗆
Sheila Bertiesich	The le Bertinger	12/16/17	414 314 AVE	Sewand	12/14/17	Yes Ø No □

Page \_\_\_\_\_ of \_\_\_\_\_\_

			Physical address of your		1	Do you
Printed Name			residence (PO Boxes will		Date	understand
(Please print legibly)	Signature	Birthdate	not be accepted)	City	Signed	this petition?
Rhonda My Hon	Phonda Milton	426/1961	2146 Ave D-4	Several	12/17/2019	Yes 🔼 No 🗆
Jame Shaw	Jeanne Shaw	9-14-4		Source	にレフィフ	Yes 5 No 🗆
Duana Marrison	Wiring Month	2-47-57		Sewa/a	12-17-17	Yesd⊋ No 🗆
Bank Jandon	RESERVICE WAVE	6-21=	the sid lothes	SWD	A 124/1	Yes & No 🗆
that the state of	Hote Malinez	achgo	10-15-55/214n	- Secon	l 4/17/10	Yes ⊠ No □
Cathy Maph	Cathy Murph	12-96-41	PERIOD.	Suvara	152/17/19	Yes 🗷 No 🗆
Harri D	() · · · · · ()	<u> </u>	214 GHI Avelluitisi	1942_		Yes 🗆 No 🗆
BonieBrown	Bome Broon					Yes 🗆 No 🗆
A Gryf Ask	Broom	5/2/1/3	214 Sex due	Devois	12/17/17	Yes No 🗆
Drange Mustan	\$1.17	10/10/178	314 li au	Sever	10/1/1/10	Yes ☒; No □
Andra Mandard	India Andard	1/13/1982	513 Monre Sd	Souard	12/23/17	Yes⊿ No 🗆
Morgan Wagland	VIII I I I	8/28/46	S13Menverst	Sonard	12/23/17	Yes ⊠. No □
Karen Varder Veg	* Candelest	9-17-73	509 monroe	Seward	12/23/17	Yes Ø No □
Sabring Noove	1/1056	12.07.78	531 6th and	Seward	12/23/17	Yes ☑ No □
Richard Hobbetts	Tackard Frakhvill	12-23-17	5216th RUE	SEWARD	12-23/17	Yes 🖾 No 🗆
Anastasia Lane	ane Jane		5176th Ave	Seword	12-23-17	Yes 🗹 No 🗆
Peter TOLOVY	We the	17	326 6th AVZ	7 /	7/	Yes 🗹 No 🗆
7	Dis Resept	•	5,2 6,1 7	11	//	Yes ☑ No 🗆
Kee & Lane	theed 2		SIZ First Ave	Schard	122317	Yes 🗵 No 🗆
Kenny Audette	5-6 Relle	1990	215 6th Ave	Seward	12/23/	Yes 🖫 No 🗆

Printed Name			Physical address of your			Do you
(Please print legibly)	Signature	Birthdate	residence (PO Boxes will not be accepted)	City	Date Signed	understand this petition?
GARY SEESE	In 11 Stano	13/21/3			ļ,	
CHERYL SEESE	Charel Sees	9/2/150	319 Balloune Blvo	II	1 . 1	Yes X No □
Alice Mc Caule	alen M. Cans	7/18/57			12/16/2017	Yes No 🗆
undth Christiansen		1.	337 Bellan BN		1 / 9	Yes 🗹 No 🗆
Mich Anchyor	or Man	25-5%	311 BAllaine Glos	l Control	12/11/7	Yes No 🗆
Linda Chichester		(413/57		Jan Waln	12417/2017	Yes E No 🗆
Cliff Kno		<del>                                     </del>	403 Ballaine	seward	12/17/17	Yes 🖾 No 🗆
MarkKansteiner	Wash Vant	7/12/65		seward	12/17/17	Yes 🖾 No 🗆
Colleen Kelly	G CO 16.00	8/10/51	235 Ballaine	Seward	12,17,17	Yes ⊠ No □
Mayy Ann Bens		6/20/1955	235 Ballaine Blvd	Soward	12~17-17	Yes ☑ No □
	$(\mathcal{N}, \mathcal{N}, \mathcal{N})$ .	6/25/58	515 SIN X-0		12-17-17	Yes 🖾 No 🗆
Dan Malacial	A K (Thanstor	<u>13  34</u> 55 4 15/75		Servard	13-1717	Yes 🗗 No 🗆
Michelle Quin	TWichelly Am	1.77	536 AUX	Sound	12-17/	Yes ⊠- No 🗆
1		2/19/71	528 6th Ave	Sward	12-17/17	Yes 🔼 No 🗆
Mick Quiguri	Nuclo Jan	7/15/74	528 G CA LUE	SEWARD,	12/17/17	Yes ⊠ No □
thri Schellen		7/218/87	Coll Monrow St	severel	12/23/17	Yes 🔁 No 🗆
BARB ERICSON	Gairae LEurin		608 ADAMS ST.	SEALD	12-23-17	Yes 🕅 No 🗆
Rick FRIESON		1	608ADAMS . ST	SCHRO	72-23-77	Yes 🚉 No 🗆
Thomas Buchenes	The or Such	6-7-60	GOY Abons ST,	5E imaro	12-23-17	Yes Æ No □
MarguertaM Manus	Super Sus Sher	11-15-58	604 Adams St	Sward	12-23-17	Yes ⊠ No 🗆
Michael Brittain	124 botton	10-11-46	231 Ballaine	Seward	12-23-17	Yes ☑ No □

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Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
indra Welson	andras notron	3-37-82	235 Brawnell	Solice	2-16-17	Yes ≅ No □
Alexandrea Starenslyinga	Westfuly	1-9-82	38 Brownell	Seward	2-16-17	Yes 🗗 No 🗆
Parpie danger	150 min	3/13/54	2260BEARCO	Sword	12-16-17	Yes 🗗 No 🗆
Esther Stolt L	ester state	6/21/51	226 BOWN 11-D-4	Severel	12/16/7	Yes ⊠ No 🗆
Gara Havens	Laura Xtovens	9/11/89	(06 washington St	Sewond	12/16/17	Yes, ☑ No □
Alexander Havens	Colefand Haven	03/23/1989	106 Washington st.	Seward	17/16/2017	Yes ☑ No 🗆
Helian Hlexx	Michere	8/2/78	Zolo Washity St.	Shrind	12/16/17	Yes 🗗 No 🗆
Dustin Miles	Justen Miles	4/9/87	211 Benson DR	Seward	12/16/17	Yes [2] No □
TANIAS CARUSEN	TSCL	9-K1-76	216 250 AVE	STUARD		Yes ☑ No □
JAMES SALGOV.	9.00	8/25/69	71/2. ALE	Stilled	12-1617	Yes ⁄⊠ No 🗆
DANGE , W. CHAUS		2/20/02	276 Scord Als	SWARD	12-16-17	Yes ☑ No □
Jr M. CHAUS	Jos Mise	12-1/57	276 SECONDAUF	SEWADS	2-16-17	Yes 1 No 🗆
JEN LEAHY	N	4/1/80	364 SECOND	SENARD	12/16/17	Yes ☑ No □
BRETT LEMAY	BUH CKILL	1/26/77	320 SECONT AVE	SEWARD	12/17/17	Yes ⊠ No 🗆
David Smith	dal South	11/1/92	336 2nd Ave	Seward	12/16/17	Yes 🖾 No 🗆
Sydny Bolin	Sylm. L. Bai	4/5/95	334 2nd AVX	Suward	12/14/17	Yes 🗷 No 🗆
Iris Johnson	Lux Janga	ONN II	374 100 PM	Seward	12/16/17	Yes⊠ No □
Oran Dick Galling	Damento of Halling		135 Fayoth Aug	Scrayed	12//6/17	Yesi No 🗆
Darian Draper	ala Chu	\$1/36/1283	_ · _ · · i 1		12/16/17	Yes 🗵 No 🗆
Marie Goz	Merce De	10/20/5	. ~ \	Seeway	12/16/19	Yes 🗗 No 🗆
7	dt.	.=	-			- 1

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John R. Cay Merket =	4/21/52	( ( )	-	Signed	this petition?
		10) Loved/Con	George	12/16/17	Yes X No □
Karen McDermott Karen Miss	1-26-40	229 Lowell Carrow RD	-4 6	12/14/17	Yes 🔯 No 🗆
Drent A Johnson Brent A John	504 9/17/49	200 Lowe CAnyon	Savard	12/16/19	Yes No □
ZACH JOHNSON Sach John	3110/80	420 FIRST ANE	SewARi)	12116/17	Yes ☑ No □
Jana Johnson Korla	05/18/81	420 First Are	Sewand	12/16/17	Yes No 🗆
Redolate Snith	4/21/78	428 1st Ave	Sewand	17/16/17	Yes 🖾 No 🗆
Tladson Smith Thankor Smi		428 1st Ave	Seward	12-16-17	Yes No 🗆
Sneob Heinstoile My 477	9/29/93	505 1st Au	Sevan	12/17/17	Yes ⊠ No □
Maureen Calchan Maureen Call	Le 5/28/45	613 First Ave	Seward	12/11/17	Yes No 🗆
Robert Gardner Robert Angla	101 5/3/56	204 B St.	Seward	12/22/17	Yes 🔼 No 🗆
Julie Shaul facti Alul	- 3/19/66	1607 2 of fre	Just	12/22/19	Yes ⊠ No 🗆
Chantal Waitsh Charles	R 10/28/61	1011 2 nd Ave	Sevise	12/27/7	Yes 🕅 No 🗆
Sean Corriger	3-28-72	203 Van Bren	Carrol	112/22/17	Yes No 🗆
-oh-Buttamus Wy	01-31/5	YOUR BAME.	Swand	12/23/17	Yes 🗖 No 🗆
Nadine a long Industry	02/10/91	276 Bownell St P3	Seward	12/20/17	Yes W No 🗆
Al Plan Will	03/15/7	315 Znd Avo	Sevarl	12/24/17	Yes No 🗆
Nicole Stores Wallsoff	- 03/30/81	315 2n2 Avo	Sewal	12/26/17	Yes 🗘 No 🗆
RECRUSE VEM	8/29/42	Zio Lowell Cann	SEVERA	7/24/17	Yes ☑ No □
Some Crush Syplan	4/28/62	210 Lowell Dig	SENACH	12/1/1	Yes 🖟 No 🗆
Delo Kurtz Walt	15/28/74	501 SundAve	Sound Ar	1///	Yes ⊠ No □

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0203	
30000	
Same	
Committee of	

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
William O. Garge	William O. Wary	03,28.80		Seward	12.17.07	Yes No 🗆
GREGORY T Reinlag	Droy House	060350	4 / 6	Severel	12/12/19	Yes □ No □
Kent Boyer	Bont Boyer	09/12/38		Sevard	12/17/07	Yes 🖆 No 🗆
Robert Orlando	Robert Orlande	12/23/51	200 Lawll Conyor	Seward		Yes 🗆 No 🗆
J'INLEY Davison	Shirley Wavison	well	200/1042/ (Grunnild	Seward	1 , , ,	
HARSMUT GROWAN	11. Bon	09/10/40	11 #30 (.	ħ	2/17/17	Yes X No □
herech. Mil box.	10 16 house Millon	3.14.701	105 15thue #1	SEWARD	12,17.17	Yes Ø No □
Darsh Lean	Unalet In	9.5.74	605 15 Ave#1	SENAID	12.17.17	Yes. D≪No □
YODNIZ, ENERT	Ruding Englet	172847, 191, 1929	6071SINWE	SEWRIT	12.	Yes No 🗆
Craig Williams	W/Sevi	11/11/45	5/5/10 Hue 5	Sewsel	12/17	Yes ⊠ No □
CCIFF HRING	LE 078	111049	525 SECUNI	Soward	12/14	Yes Ø No □
Tatcherts in cold	Valoria Houge	31/1/1149	525 DN Ave.	Leward	13/14	Yeş∕ဩ No 🗆
Shavi amengort	May orderent	9-15-67	525 - ZudAuc	Sevi and	12/17	Yes No 🗆
CLARA GLOTFELTY	(Vara Colleto	9-10-44	1006-2 mg ave	Devolo)	12-23-17	Yes No D
Virginia Retrev	Ama Retor	1-14-66	1006 2nd Ave	Souland	12-23-1	Yes No 🗆
Titler Mallon	Anne	4/12/92	1008 Ind Au	Sevand	12/201	Yes 🖾 No 🗆
George Greendyk	My MM	5/23/94	1414 2nd Arc	Severo	12/23	Yes 🗹 No 🗆
6 leen abert	ELECIVHLERIVE	2(24/37	9013 ed an	Seword	12/23	Yes 🗗 No 🗆
Danetto Chardon	legnote ( Wardlow	12-20-61		Seward	12-24	Yes/ No 🗆
Billy be Wardlow	Pally for Wordlow	10-27-1492	234 Breand B4	Servard	12-26	Yes Ø No □

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Theresa Waldron	Sheresahurou			Seward	12/16/17	Yes 🔯 No 🗆
Charle Jackson	Chale Just	9/24/59	1 82	Source.	12/16/17	Yes No 🗆
Amanda SNOWLON	1 Canada SAS	11/2/86	C3	Seward	12/11/17	Yes 🗵 No 🗆
CHANG WHILDE		7/2/53	230 Blownse de		12/11/19	Yes 🖾 No 🗆
Agres domny	threeten	2/22/5/	130C-1	Sew and	12/16/17	Yes.⊠ No □
Rayla Schandel	Cufa Schall	9/15/83	218 Brownell D-4	Seward	12/16/17	Yes No 🗆
Alberto Siller	Mentstal	3/20/58	215 Second AVE	Sward	12/16/17	Yes No 🗆
Doug Schoessler	4 Jole	4/29/61	231 Second for	1 \	1,1	Yes 🗹 No 🗆
Rothleen Lerschu	- /	5/15/47	235 2ND AU	Secretard	12/16/17	Yes 🛛 No 🗆
Bert Johnson	Credit Caphuson	12/15/17	235 End Ave	Scurrel	12/16/17	Yes D. No 🗆
Steve Lemme	Styre Lenne	112-15-17	144	Sevard	12-16-17	Yes No 🗆
Jim Voegken	for-	6/8/69	336 12 ALL	Seward	12-16-17	Yes 🔀 No 🗆
Luther Kreener		7	330 154 AJE	Sevor	12-16-17	Yes No 🗆
Sharlene movshal		11-13-81	521 Ist Aven	Sewood	12-16-17	Yes 🖾 No 🗆
0 1 1 1 1 1 1 1	Sharlere Marshall	67-2255	9/01 3 no A UZ	se word	12-16-17	Yes 🖾 No 🗆
Adam Deedside	Adr Weekl	09-05-83	217 674 AVE	SEWARD	12/16/17	Yes 🔼 No 🗆
TYPEC TOSCY	Ble Bry VI	4-29-92	217 GIHAVE	SEWARD	13/16/17	Yes ② No 🗆
	,	7-13-14	217 Level Caska Rd	Spiraley	12/16/17	Yes No 🗆
CHAPLE LISCUSCIMONO		57,5/65	21) Girallethywho	SKRARIS	12/1/17	Yes No 🗆
101/1/1/1	- HEALT	30/91	(1)	sewand	3/17/17	Yes 🗹 No 🗆

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
WILLIAM CAZEMIER	William Cyania	3/5/1947	528 1 <sup>5T</sup> AUE	SEWARD	12/26	Yes No 🗆
KELLEY MILEY LANIE	(4) #-m/4/	9/2/81	512 IST AVE.	SEWARD	12/26	Yes ☑ No □
METHARD OSLATHE	16 Ruchard o Stath	-4/8/88	STO 2KA AVE	SEWARD	12-26-17	Yes,≅≤ No 🗆
Valerie Cole	Valoriz Colo.	10-30-57	506 2nd	Seward	12-26-17	
		·······		·		Yes □ No □
						Yes 🗆 No 🗆
						Yes □ No □
						Yes □ No □
						Yes 🗆 No 🗆
						Yes □ No □
					<del></del>	Yes □ No □
						Yes 🗆 No 🗆
						Yes □ No □
						Yes 🗆 No 🗆
						Yes □ No □
						Yes □ No □
						Yes □ No □
						Yes 🗆 No 🗆
						Yes □ No □
						Yes 🖸 No 🗀

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Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
TANNER EVANS	Tyr	06/01/94	303 SECOND AVE	SEWARD, AK	12/26/17	Yes 🔯 No 🗆
Matt Evans		4/22/69	7		1	Yes 🖫 No 🗆
Allie Frans	all was	6/30/96	V	V	<b>V</b>	Yes Do O
Dustin McHene	Distribletine	7/19/91	323 Second Ave.	SUNAROL	K 12/26	
Bristina Jensen	hot fund	12/19/89	323 2nd Ave	Several AK		
CRAIG AMBIOSIAVI	CyCle	126/17/56	419 Zad NUP.	Scarged No	12/22/17	Yes 🖾 No 🗆
Jam Lawson	In Jun	12/26/80	517 IST AVE	Seword, Ah	13/20/17	Yes No 🗆
-111 Hemstock	1316 ASI	6/13/66	102 Madison	Downd AK	' '/	
Malia Sutehin	1/Chi	10/29/88	102 modison	Seward IK	12/2/17	Yes No 🗆
Steve Ashtors	Act		526 15+ AV-e	SELME	17-28-17	Yes 🖫 No 🗆
Eril Morra	Common	12/26/2017	Con 2nd Axe	Senot	4-25-1982	Yes 🗹 No 🗆
Christian Tofran	THANA	17/26/2017	\$204 Zndfue	Severa	段-20-17	Yes A No 🗆
			-			Yes 🗆 No 🗆
						Yes 🗆 No 🗆
						Yes 🗆 No 🗆
						Yes No
						Yes No 🗆
						Yes 🗆 No 🗆
						Yes No 🗆
						Yes 🗆 No 🗆

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		T				
Printed Name			Physical address of your residence (PO Boxes will		Date	Do you understand
(Please print legibly)	Signature	Birthdate	not be accepted)	City	Signed	this petition?
Jusen Nelson	Jug 1	06/13/89	600 ADans	Sewwo	12-23-17	Yes. 🖾 No 🗆
-anes Hibernick	January Mil	8/6/66	413 6th Aue	Serve	121417	Yes No 🗆
MARYHI BERNICK	May Surficielle	10/22/100	413 6th tue	Sourcesof	12/26/17	Yes No 🗆
Mactin Hribains	oner yungh	1/20/59	413 6Th AVE	seward	12/20/17	Yes 🛕 No 🗆
Bethany Campbell	Daybell	1/03/198	570 6K AVR	Seward	12/26/17	Yes ⊠ No □
Dogh Svalaic	Sman Denleyk	4/21/85	/	Seward	14/26/17	Yes 🖾 No 🗆
Xyler tinh	Tyler Finch	4/20/07/04	82 538 6th Ave	Seward	12/24/17	Yes No 🗆
Sara Caster	atal Jana	1-19-76	- J 3 10.0 17V	Seward	nelsulm	Yes No 🗆
Sosh Thomas	San S	11-24-60		SevilAR	12/26/17	Yes 🖾 No 🗆
Sarah Thomas	weeke Th	6/10/83	2256th ave	Soward, Af	12/26/1	Yes No 🗆
Katil Humbert	20 1/01/0	9/12/92	304 oth Ave	Seward	12/20/17	Yes No 🗆
Elegnor H Mala	Eleanor H Mala	41634	312-6th ave	5eward	12/2617	Yes No 🗆
DesClabon	Dayld Claborn	3/15/67	1006D 3ª Ave	Soutral	0/26/17	Yes No 🗆
Hernonscarchio	July 1	2/21/82	P000×1614506th		2126/17	Yes 🙀 No 🗆
Richard Temo	This had	1/15/78	329 3 m Ave.	Seisand	12/26/17	Yes 🖾 No 🗆
< , 0	Kichard D. Tero	2/2/43	409 5Th Ave		2/26/17	Yes¹☑ No □
Darah Benjamin	land Deges	11/28/74	POBOX 185376th	SCWARd	12/26/17	Yes Ki No 🗆
						Yes 🗆 No 🗆
						Yes 🗆 No 🗆
						Yes No 🗆

## Relition for Bear wine license

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		T	Physical address of your	T	T -	Maria 4
Printed Name			residence (PO Boxes will		Date	Do you understand
(Please print legibly)	Signature	Birthdate	not be accepted)	City	Signed	this petition?
Andy Baron	al 10	2/13/87	34 Sixth	Seword	12/23/17	Yes No 🗆
Callie Bacon	Clem	10/28/86	321 Sixth	Seward	12/23/14	Yes 🖫 No 🗆
BILL HEARN	RIVA	12/27/46	327 674	SEWHAD	12/23/17	Yes No 🗆
TessTulley	or only	11584	32 thave 5th	Sewart,	12/23/11	Yes ☑ No □
PHICIFOR KeidON	Surfer Cold	11-9-63	508 6+4	Seward	12-23-17	Yes No 🗆
SHAUF STALLARD	Shep Jaluly	1-24-16	508,5 MATTSON.	SEWAUS	12-23-17	Yes 😉 No 🗆
Dylon Spellar ()	Mrs Ma	06-22-90	508.5 milion	Sowak	12-23-17	Yes 🖾 No 🗆
MINONIN THINK	MICHARL LACLAS		57 5026TH	SKUMD	12-23-17	Yes 🖾 No 🗆
Sprya D Franck	Somon	.// //	502 649 AUY	Seward.	12/23/17	Yes No 🗆
TOTALLA KONG		3/19/194	601 loth Ave	Schard	12/23/17	Yes 🕮 No 🗆
37) 7 (1)	( ) grant ( )	5/1167	604 6th #4	Sauce	12/23/17	Yes 🗖 No 🗆
XSIGN / JAA /2	The state of the s	4/1/15	613 CAMAIR	DELOICE C	12/23/1	Tes 🖾 No 🗆
Emily Johnson	attalle Jas	11/09/92	5do 6th Ave	Soward	12/23/17	Yes 12 No 🗆
Sand Delay	SAUCEA Seurs	6/20/55	511 loth	Seward	13/23/17	Yes & No 🗆
Samontha Osbor	Alshon	112171	403 6th	Seward	142317	Yes No 🗆
Ala Suban		12/28/76	4036/2 DRIEN	Seneral	12/23/17	Yes 🖫 No 🗆
Anna Joland	MAUREE Shede	7//3//95	2/4 (x/) 3	Je Waped	12/2817	Yes 🖾 No 🗆
Anna Weed	,		10 30× 2425-04	seward AK		Yes No 🗆
Sharon Finn	Sharon Jini	3123 157	2146th # A4	Seward AX	12/23/17	Yes 🗆 No 🗆
						Yes 🗆 No 🗆

Printed Name (Please print legibly)	Signature	Birthdate	Physical address of your residence (PO Boxes will not be accepted)	City	Date Signed	Do you understand this petition?
Wanico Cowles	Warring Cowler	2-28-53	603 4 TRAJE	Bened ,	12/2/17	Yes 🖄 No 🗆
Robert BURL	Balt huse	8-22-47	4145 to forth 1	Siewan	15/22/24	Yes Ø No □
Chloë Rosiman	Chor	6/29/92	南京教育95	seward	17/23/17	Yes No 🗆
Monique Dursel	undel	1115/92	SUL Adams st.	seward	12/23/17	Yes No 🗆
Spencer Burgin	5/b	1019192	Soo Adoms St.	Sevenil	17/23/17	Yes.⊠ No □
Dieter Fuchs	Wiete Frehr	3/24/52	935 3rd	Sensio	12/23/17	Yes Ø No □
PENNY Dencar	Tenny Duncan	3/23/48	101 MILL ST	SEWARD	12/23/17	Yes ဩ No □
Amber Pe'a	956	1/21/85	1306 Vistgare	Serad	12/23/12	Yes No 🗆
Lori Parish	Son Parish	1-11-71	POPOX 7766	Seward	12-23-17	Yes No 🗆
LANNY DUNGAN	Jan Desela	9/27/46	10/ MILLST,	SEINAN	12/23/17	
13 Kaun Boundouson	Blank	12/4/57	1308 Chamberlain	Sewad	12/23/17	Yes No 🗆
Year Bardarson	Geon Darden	2/15/58	1308 Chaybelan	Seware	12/23/17	Yes No 🗆
M. Ke Insida	M	10/3/68	327 Ballaine	Seword		Res B→ No □
USA Insalaco	Sina Asalaco	3/02/69	327 Rallaine Bleef	Sewond	12/23/17	Yes 🛛 No 🗆
Tobart Dlinger	44-7	1/8/1981	425 4th apt A	Souvel	12/23/17	/
Brigh WEIMER	3 The	6/25/1988	-323 2 vcl	9 0	12/23/17	Yes W No 🗆
Jimmy Pinner	1	8/30/1988	Podole-long 8	Sevary	17/12/17	Yes 🖺 No 🗆
Tyson Vones	11/5	7/24/84	MOBELLI HAVE	Saverd	12/2/10	Yes No 🗆
			1112 NOW			Yes No D
						Yes No No

not home	1st Ave	Sumur rent snobivel
508 514 506 534 502 502 503 703 703 703 703 703 703 703 703 703 7	616 612 608 608 108 madison 1019	704 515 500 \$B 911 1021
219 300 335 757 537		refuse 4/2 526 614 518 102 madison 206 JAN 0 4 2018

(

_ not home_	Second And Vacant	Summer rendal
Beer min D1 A31 B0 A31 A31 A31 A31 A31 A31 A31 A31 A31 A31	210 B Bear mtn D-3 Bear mtn A-2 6-2 134 316 306	308 318 432 418 58 219

3rd Avenue		1
Not home	Vacant	Summer rectal
24	235 #8 Boyside 1015 A 1008 D 1002 D 1002 Blog 135 #4 135 #4	307 5B 309 #1 #3 #3 313 AB 430 B 432 Beach Condo #15B 302 A 417 519
346	#9 #9 03 modison #3 20 13 each Cords #5 #6	refuse to sign Bayside 1009B 1012D

(

(		4th Are	
	not home	Vaccint	Summerventalorsno
	508 430	700 430 #3 425 Apt A midtown Apts #3	606 506 SB 502 SB 8000 606
			JAN N 4 2018

not home	15th Aug Vaccourt	Sno birds Summer rewtal
506 508 507 501 519 334 429 439 #3 moltoun Apts#11 #10 #10 #10 212 218	503 A mid form Apts #8 #5 #7 #3 #2 416 706 615 212 329 333 310	701 705 A SB

not home	Vacant	Snobive Summere	ntal
228 300 300 300 300 300 300 300 300 300 30	502 #2 510 214 APH B3 A1	236 327 336	
333 331	32/	611 613 217 223	SB SB
520 530 530		317 513 313 318	න්හි රාහි
	7.0	refused	
		JAN 0 4	2018  MARIA OFFICE

7th Ave Ballaine

not	home	ſ.		Snobird Summer reutal			
323			500 35 500 500	193375	#1234	\$B \$B \$B \$B	
			52	JAN OHOL MAR	VO 4 2018  JUANA CONTROL OF E OF ALASKA	FFICE	