

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?

License #4379 DBA The Station Bar & Grill

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.

	ection 1 – Establishmen					
Licensee:	siness seeking to have its license renewed. If any populated information is incorrect, please contact AMCO Elizabeth F Smith License #: 4379					
License Type:						
Doing Business As:	Beverage Dispensary - Tourism Statute: AS 04.11.400(d) The Station Bar & Grill					
Premises Address:	444 4th Street					
Local Governing Body:	Municipality of Skagway Borough					
Community Council:	None					
			×			
Mailing Address:	P.O. Box 280					
City:	SKOQWOY, AK	State: AK		ZIP:	99840	
Enter information for the ind must be a licensee who is req	ividual who will be designated as the puired to be listed in and authorized to	orimary point of contact regar sign this application.	ding this ap	plication	. This individual	
Contact Phone:	Dem Smith	Business Phone:	1.	00-		
Contact Phone: 907)613 - 0100 Business Phone: 907) 983 - 2200 Contact Email: Skagpie@yahoo.com						
Seasonal License? Yes No If "Yes", write your six-month operating period:						
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	Section 2 – Authorization	
Communication with AMC	CO staff:	Yes No
Does any person <u>oth</u> AMCO staff?	ner than a licensee named in this application have authority to discuss this license with	
If "Yes", disclose the na	ame of the individual and the reason for this authorization:	
This section must be comp	Section 3 – Sole Proprietor Ownership Information leted by any sole proprietorship who is applying for license renewal. Entities should s	kip to Section 4.
This individual is an:	lease attach a separate sheet with the required information. must be completed for each licensee and each affiliate (spouse). applicant affiliate	
Name:	Elizabeth F. Smith	
Mailing Address:	P.O. Box 280	
City:	Skacusau State: AK ZIP:	99841
Email:	=Kacpier vahon.com	
Contact Phone:	(907) 613-0100	
This individual is an:	applicant affiliate	
Name:	mark Smith (husband)	
Mailing Address:	P.O BOX 280	
City:	5 Kaguray State: AK ZIP:	99840
Email:	hotelmorningwoodayahoo.com	
Contact Phone:	(907) 612-20101	



Alaska CBPL Entity #:

Alaska Alcoholic Beverage Control Board

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ALCOHOL MARIJUANA CONTROL OFFICE STATE OF ALASKA

Phone: 907.269.0350

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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 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.

You must ensure that you ar	re able to certify the following statem	ent before si	gning your initials in the b	ox to the right	t: Initials
I certify that this entity is in a are also currently and accura	good standing with CBPL and that all c ately listed with CBPL.	urrent entity	officials and stakeholders	(listed below)	
 If the applicant is a corporate the stock in the corporate If the applicant is a limite ownership interest of 10 If the applicant is a partnership in the applicant is a pa	npleted by any community or entity, in pplying for renewal. If more space is coration, the following information mustion, and for each president, vice-presided liability organization, the following low or more, and for each manager. Description including a limited partnership or more, and for each general partnership or more, and for each general partnership.	needed, please the completedent, secretary information in o, the following	se attach additional comp ed for each stockholder w ry, and managing officer. must be completed for each	leted copies o tho owns 10% och th member with	f this page. or more of th an
Title(s):		Phone:		% Owned:	
Mailing Address:					- Carlo
City:		State:		ZIP:	78.597
Entity Official Name:					
Title(s):		Phone:	% Owned:		
Mailing Address:				4.	
City:		State:		ZIP:	1120
Entity Official Name:	,			1000	
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	
F AD 47-11/				RECEIV	
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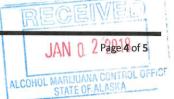
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Section 5 – License Operation		
Check a single box for each calendar year that best describes how this liquor license was operated:	2016	2017
The license was regularly operated continuously throughout each year, for 8 or more hours each day.	V	W
The 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?		V
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?		V
If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or co	nviction	ıs.
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 part have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of the course completion cards on the licensed premises during all working hours, as required under AS 04.21.025 and 3 AAC 304.465.		238
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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.					n. 48	
I certify that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interior in the licensed business.					l interest	
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.						
Leertify 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 Controllibration 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. Signature of licensee Natary Public in and for the State of Alaska Subscribed and sworn to priore me this 29% day of December 1, 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:						



GRAND TOTAL (if different than TOTAL):

The Station Bar & Grill Elizabeth F. Smith P.O. Box 280 Skagway, AK 99840

The State of Alaska Alcohol Beverage Control Board 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

January 31, 2017

Dear Board of Directors,

My name is Elizabeth Smith, and I am, and have been, the owner and operator of this liquor license for over 15 years!

The Station Bar & Grill is a year-round establishment that serves breakfast, lunch and dinner. Currently, we encourage tourism through our 18-room hotel (The Morning Wood Hotel), and our restaurant/bar, by trying to entice travelers to stay longer than just a day. We offer discounts throughout the winter months to encourage travelers from Whitehorse, Juneau and Haines to come visit Skagway and spend a weekend without it costing a fortune. Our rooms at the Morning Wood Hotel are offered at a discounted rate as well as discounts to the restaurant for our guests. However, we do NOT stock these rooms with any alcohol. We also try and encourage travelers to spend a night or two by providing live entertainment at the bar, such as local bands or local game shows.

The Station Bar & Grill's and Morning Wood Hotel's staff are all trained to answer any questions our customers may have regarding tours and other local attractions whether it be historical sites or hikes. We provide various phone numbers to different tour companies, or book the tours for them depending on what the customer is requesting, or we directly contact Skagway's local tour brokerage, M&M Tours to get the information our guests need. The hotel also offers free Wi-Fi to our guests in case they want to book their own tours on line.

The Station Bar & Grill and the Morning Wood Hotel are constantly trying to make improvements for its guests. In July of 2016, our hotel expansion project was completed! This expansion added an additional 8 hotel rooms to our hotel, all with private bathrooms, fridges, coffee makers, satellite TV and free Wi-Fi. The expansion also created a larger lobby, gift shop and hotel bar.

I hope this letter provides all the answers to your questions, however please feel free to contact me if you have any further questions. My phone number is (907) 612-0100. Thank you for taking the time to read this letter. Have a wonderful New Year.

Sincerely.

Phabett J. Smith

FFR U8 2016