

Holland & Knight

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Jessica M. Brown
(907) 263-6309
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March 16, 2018

VIA HAND DELIVERY

Alaska Alcoholic Beverage Control Board
Attn: Sarah Oates
550 West 7th Ave, Suite 1600
Anchorage, AK 99501

Re: #5484 DBA Captain Steve's Fishing Lodge Liquor License Renewal

Dear Sarah:

My clients are in receipt of your March 8, 2018 letter informing them of the expiration of their alcohol license. They have ceased the service, sale, consumption, manufacture, and/or distribution of alcohol on their premises, per your direction.

Please consider this cover letter a written request to reinstate their license. Enclosed please find a complete renewal application, all required fees (including penalty fees), in the form of a credit card number (which I will provide upon walking the application over today), and proof of good cause for the failure to file and pay by February 28, 2018. The proof of good cause for the failure to file and pay by February 28, 2018 is detailed in my client's signed and sworn affidavit.

My clients urge that this matter be considered by the ABC Board at its meeting on April 3, 2018, in Nome. Please let me know if my clients need to take additional steps to come back into compliance. We appreciate your assistance in this matter.

Sincerely,

HOLLAND & KNIGHT LLP



Jessica M. Brown

JMB/jmh

Enclosures



BEFORE THE ALCOHOL MARIJUANA CONTROL OFFICE
Re: License #5484 DBA Captain Steve's Fishing Lodge Liquor License Renewal

AFFIDAVIT OF LICENSEE IN SUPPORT OF AB-17:

2018/2019 Renewal License Application

STATE OF CALIFORNIA)
) ss.
)

I, LeAnne Smith, being first duly sworn upon oath, depose and state as follows:

1. I am over the age of 21 and competent to attest to matters contained in this document and in its accompanying AB-17: 2018-2019 Renewal License Application.
2. License #5484 DBA Captain Steve's Fishing Lodge was issued to me and my husband, Steven Smith, on or around August 1, 2016.
3. Our fishing lodge only operates in the summer months, and we had already concluded our 2016 operations when the license was issued.
4. Because our license had not yet issued, we did not serve alcohol or operate a bar in 2016.
5. I understood, after paying biennial license fee for a two-year period, that I would be permitted to operate under our existing license for two years starting in August 2016, when the license was issued.
6. On or after October 16, 2017, I received from AMCO the attached AB-17: 2018-2019 Renewal License Application
7. I filled out the attached AB-17: 2018-2019 Renewal License Application on or before January 2, 2018.



8. I submitted the attached AB-17: 2018-2019 Renewal License Application on or before January 2, 2018, with all required fees.
9. I inadvertently neglected to check a box for Section 5 – License Operation, for the 2016 year.
10. I understand now that I was required to check the last box in this section for 2016, that states, “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.”
11. I understand now that I was required to complete a Form AB-29: Waiver of Operation Application, along with a corresponding late fee of \$1,000, in order to complete my application.
12. I understand now pursuant to AMCO correspondence on March 9, 2018, that AMCO took administrative action and canceled my and my husband’s license, effective midnight on February 28, 2018, pursuant to AS 04.11.540.
13. I aim, with this affidavit, to follow the suggested course of action contained in the March 9, 2018 correspondence from AMCO, and “submit a written request to reinstate the license,” “accompanied by complete renewal application,” as well as “all required fees (including penalty fees)” and “proof of good cause for the failure to file and pay by February 28, 2018.”
14. First, please consider this affidavit my written request to reinstate the license.
15. Second, I attest that I cannot locate a new AB-17: 2018-2019 Renewal License Application online on the AMCO website in order to complete a totally new application, and that all



the information contained in my January 2, 2018 application remains true and correct. I attest that I have instead checked the last box of Section 5 – License Operation for the 2016 year, and that I intend for this application to serve as a complete renewal application, with the correct box checked. I intend for the notary stamp on this affidavit to serve as a renewed notarization for that box, now correctly checked.

16. Third, with this affidavit I have included payment, by check or credit card number, for \$2,950 in fees and late fees due. I authorize AMCO to run my credit card for any fees above or below this amount.

17. Finally, my good cause reasons for failing to file and pay for my renewal application by February 28, 2018 are threefold:

18. First, I am in and out of Ninilchik and was in California when I received the latest correspondence from AMCO notifying me of this deadline; once I received it, I promptly contacted my attorney. It was never my intention to delay on clearing up this issue, and I certainly did not intend to be dilatory.

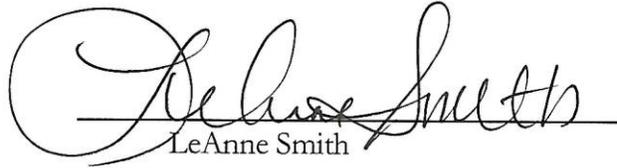
19. Second, I was confused by the correspondence indicating my application was incomplete, as I was under the impression that I completed it to the best of my ability and never intended to mislead AMCO.

20. Third, I was under the mistaken impression that by paying for a biennial license in 2016, that our license would be effective through the summer of 2018.

21. I urge AMCO to please grant my renewal request, as I have undertaken my best efforts to comply with the spirit and purpose of the law.



FURTHER AFFIANT SAYETH NAUGHT.


LeAnne Smith

SUBSCRIBED AND SWORN to before me this _____ day of March, 2018, at Long
Beach, California.

See Attached
Notary Public in and for California
My Commission Expires: _____



JURAT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

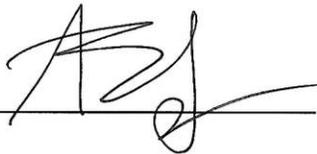
State of California

County of Los Angeles

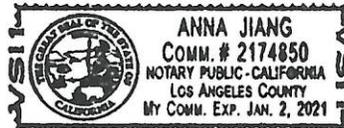
Subscribed and sworn to (or affirmed) before me on this 13 day of March,
2018 by Leanne Marie Smith

proved to me on the basis of satisfactory evidence to be the person(§) who appeared before me.

Signature



(Seal)



OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Affidavit of Licensee
(Title or description of attached document)

in Support of AB-17:
(Title or description of attached document (continued))
2018/2019 Renewal License Application

Number of Pages 4 Document Date _____

Additional information _____



INSTRUCTIONS

The wording of all Jurats completed in California after January 1, 2015 must be in the form as set forth within this Jurat. There are no exceptions. If a Jurat to be completed does not follow this form, the notary must correct the verbiage by using a jurat stamp containing the correct wording or attaching a separate jurat form such as this one with does contain the proper wording. In addition, the notary must require an oath or affirmation from the document signer regarding the truthfulness of the contents of the document. The document must be signed AFTER the oath or affirmation. If the document was previously signed, it must be re-signed in front of the notary public during the jurat process.

- State and county information must be the state and county where the document signer(s) personally appeared before the notary public.
- Date of notarization must be the date the signer(s) personally appeared which must also be the same date the jurat process is completed.
- Print the name(s) of the document signer(s) who personally appear at the time of notarization.
- Signature of the notary public must match the signature on file with the office of the county clerk.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different jurat form.
 - ❖ Additional information is not required but could help to ensure this jurat is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
- Securely attach this document to the signed document with a staple.



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

Alaska Alcoholic Beverage Control Board

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.

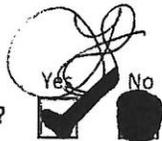
Licensee:	Steven Smith & LeAnne Smith	License #:	5484
License Type:	Outdoor Recreation Lodge	Statute:	AS 04.11.225
Doing Business As:	Captain Steve's Fishing Lodge		
Premises Address:	22780 Shady Drive (Ninilchik)		
Local Governing Body:	Kenai Peninsula Borough		
Community Council:	None		

Mailing Address:	P.O. Box 39143				
City:	Ninilchik	State:	AK	ZIP:	99639

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:	LeAnne Smith		
Contact Phone:	907-567-1043	Business Phone:	907-567-1043
Contact Email:	Trophies@Captainstevesfishinglodge.com		

Seasonal License?



If "Yes", write your six-month operating period: May 1 - October 31





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Form AB-17: 2018/2019 Renewal License Application

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:

Teresa Riddle - Holland & Knight L.L.P.

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:	Steven Smith				
Mailing Address:	P.O. Box 39143				
City:	Ninilchik	State:	AK	ZIP:	99639
Email:	akfisherman2000@yahoo.com				
Contact Phone:	907-398-7335 (cell)				

This individual is an: applicant affiliate

Name:	LeAnne Smith				
Mailing Address:	P.O. Box 39143				
City:	Ninilchik	State:	AK	ZIP:	99639
Email:	kaytersmom@yahoo.com				
Contact Phone:	907-394-1044 (cell)				





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Form AB-17: 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 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 #:	
-----------------------	--

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

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

--

This subsection must be completed by any community or entity, including a corporation, limited liability company, partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

- If the applicant is a corporation, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president, vice-president, secretary, and managing officer*.
- If the applicant is a limited liability organization, the following information must be completed for each *member with an ownership interest of 10% or more*, and for each *manager*.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

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

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

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





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Form AB-17: 2018/2019 Renewal License Application

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 type="checkbox"/>	<input type="checkbox"/>
The license was regularly operated during a specific season each year, for 8 or more hours each day.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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.	<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. 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.	<input checked="" 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 type="checkbox"/>	<input checked="" 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:

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.

Initials





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Alaska Alcoholic Beverage Control Board
Form AB-17: 2018/2019 Renewal License Application

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
<div style="border: 1px solid black; padding: 2px; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">LS</div> |
| 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. | <div style="border: 1px solid black; padding: 2px; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">LS</div> |
| 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. | <div style="border: 1px solid black; padding: 2px; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">LS</div> |
| 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. | <div style="border: 1px solid black; padding: 2px; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">LS</div> |

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.

LeAnne Smith
 Signature of licensee
LeAnne Smith
 Printed name of licensee

[Signature]
 Signature of Notary Public
 Notary Public in and for the State of Alaska

My commission expires: Sept 10, 2021

ROBERT E. CROSBY
 Notary Public, State of Alaska
 Commission # 170910002
 My Commission Expires
 September 10, 2021

Subscribed and sworn to before me this 2 day of January, 2018.

License Fee:	\$ 1250.00	Application Fee:	\$ 200.00	TOTAL:	\$ 1450.00
Late Fee of \$500.00 – if received or postmarked after 01/02/2018:					
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					

