



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

Alaska Alcoholic Beverage Control Board  
**Beverage Dispensary – Tourism License**  
**Form AB-17d: 2018/2019 Renewal License Application**

What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing beverage dispensary – tourism liquor license that will expire on December 31, 2017. All fields of this form must be complete and correct, or the application will be returned to you in the manner in which it was received, per AS 04.11.270 and 3 AAC 304.105. The Community Council field only should be verified/completed by licensees whose establishments are located within the Municipality of Anchorage or outside of city limits within the Matanuska-Susitna Borough.

This form must be completed correctly and submitted to the Alcohol & Marijuana Control Office (AMCO)'s main office, along with all other required documents and fees, before any renewal license application will be considered complete.

**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.

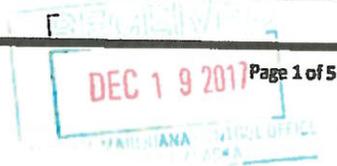
Licensee:	New Lion, LLC	License #:	658
License Type:	Beverage Dispensary - Tourism	Statute:	AS 04.11.400(d)
Doing Business As:	The Lions Den		
Premises Address:	1000 E 36th Avenue		
Local Governing Body:	Municipality of Anchorage		
Community Council:	Tudor Area		

Mailing Address:	1000 E 36 <sup>th</sup> AVENUE		
City:	ANCHORAGE	State:	AK
ZIP:	99508		

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:	KELLY KNEAPER KK		
Contact Phone:	907-561-1522	Business Phone:	907-561-1522
Contact Email:	BWGOLDENLION@GCI.NET		

Seasonal License?  Yes  No  
 If "Yes", write your six-month operating period: \_\_\_\_\_





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**Section 2 – Authorization**

Communication with AMCO staff: Yes    No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?    

If "Yes", disclose the name of the individual and the reason for this authorization:

**Section 3 – Sole Proprietor Ownership Information**

This section must be completed by any sole proprietorship who is applying for license renewal. Entities should skip to Section 4. If more space is needed, please attach a separate sheet with the required information. The following information must be completed for each licensee and each affiliate (spouse).

This individual is an:  applicant     affiliate

Name:					
Mailing Address:					
City:		State:		ZIP:	
Email:					
Contact Phone:					

This individual is an:  applicant     affiliate

Name:					
Mailing Address:					
City:		State:		ZIP:	
Email:					
Contact Phone:					





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**Section 4 – Entity Ownership Information**

This subsection must be completed by any licensee that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). You may view your entity's status or find your CBPL entity number by using the following site: <https://www.commerce.alaska.gov/cbp/main/search/entities>  
 Partnerships may skip to the second half of this page. Sole proprietorships should skip to Section 5.

Alaska CBPL Entity #:	64787D
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You must ensure that you are able to certify the following statement before signing your initials in the box to the right: Initials

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

Initials

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

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

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

Entity Official Name:	KELLY KNEAPER			
Title(s):		Phone:	907-561-1522	% Owned: MEMBER
Mailing Address:	1000 EAST 36 <sup>th</sup> AVENUE			
City:	ANCHORAGE	State:	AK	ZIP: 99508

Entity Official Name:	BRIAN GROSECLOSE			
Title(s):		Phone:	907-561-1522	% Owned: MEMBER
Mailing Address:	1000 EAST 36 <sup>th</sup> AVENUE			
City:	ANCHORAGE	State:	AK	ZIP: 99508





Alaska Alcoholic Beverage Control Board

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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 visiting 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 #: 164787D

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. [Signature]

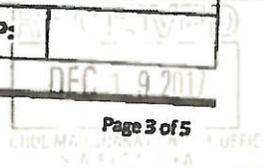
This subsection must be completed by any community or entity, including a corporation, limited liability company, partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

- 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:	RICHARD LINTON				
Title(s):		Phone:	907-561-1522	% Owned:	MEMBER
Mailing Address:	1000 EAST 36TH AVENUE				
City:	ANCHORAGE	State:	AK	ZIP:	99508

Entity Official Name:					
Title(s):	DAWN LINTON WARREN	Phone:	907-561-1522	% Owned:	MEMBER
Mailing Address:	1000 EAST 36TH AVENUE				
City:	ANCHORAGE	State:	AK	ZIP:	99508

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





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**Section 5 – License Operation**

Check a single box for each calendar year that best describes how this liquor license was operated:	2016	2017
The license was regularly operated continuously throughout each year, for 8 or more hours each day.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
The license was regularly operated during a specific season each year, for 8 or more hours each day.	<input type="checkbox"/>	<input type="checkbox"/>
The license was only operated to meet the minimum requirement of 30 days each year, 8 hours each day. 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 type="checkbox"/>	<input type="checkbox"/>

**Section 6 – Violations and Convictions**

Applicant violations and convictions in calendar years 2016 and 2017:	Yes	No
Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2016 or 2017?	<input checked="" type="checkbox"/>	<input type="checkbox"/> <i>ll</i>
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"/>

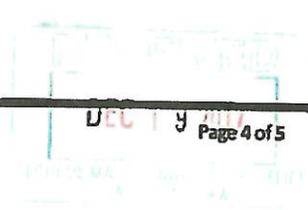
If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or convictions.

**Section 7 – Alcohol Server Education**

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 *ll*





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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:

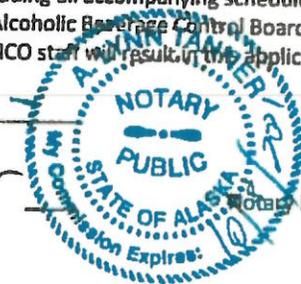
Initials

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

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 the application being returned to me as incomplete.

Kelly Kneaper  
 Signature of licensee

Kelly Kneaper  
 Printed name of licensee



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

My commission expires: 10/8/2021

Subscribed and sworn to before me this 12<sup>th</sup> day of December, 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):					

DEC 19 2017





January 17, 2018 (amended from December 12, 2017)

Department of Commerce, Community

And Economic Development

Alcoholic & Marijuana Control Office

550 W. 7<sup>th</sup> Avenue Ste. 1600

Anchorage, Alaska 99501

The Best Western Golden Lion Hotel is an 83 room property with a full service restaurant and lounge. All of our guest rooms include a refrigerator and microwave. We do not provide kitchen or kitchenette like facilities in any of our guest rooms and we do not stock alcohol in any of our rooms. We also have a guest laundry facility, fitness room, business center, and hair salon.

In the last several years we have made substantial improvements to the property. We have redone the exterior of the building, put all new furniture and bedding packages in the rooms, remodeled the lobby, put in new carpet and tile in public spaces, and completed several other aesthetic improvements to promote our hotel and Anchorage area hotels in general. We will be continuing property improvements into 2018 including but not limited to a full-scale renovation of our lounge area. The issuance of a renewed liquor license for our establishment will help us to market the lounge in the hotel which will lead to increased occupancy and room revenue thus growing the tourism industry for Anchorage.

Our hotel is actively involved in the Alaska travel industry association, Anchorage convention and visitor's borough, Alaska Hotel and Lodging association. We host several tour groups annually and always do our best to promote not only our hotel but all of Alaska and the surrounding activities and attractions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Adam M Winslow', written over a horizontal line.

Adam M Winslow

General Manager

### Golden Lion Hotel

1000 East 36th Avenue, Anchorage, AK 99508 P: (907) 561-1522 Reservations: (800) 528-1234  
bestwestern.com



Wherever Life Takes You, Best Western Is There.®

Each Best Western® branded hotel is independently owned and operated.



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Date: 12-7-16  
 Number AB14-1338  
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## Notice of Violation

(3AAC 304.525)

Licensee <b>New Lion, LLC</b>	License Number <b>658</b>	Type of License <b>Beverage Dispensary - Tourism</b>
D.B.A. <b>The Lions Den</b>	How Delivered <b>Via USPS Certified Mail</b> 7013 2250 0000 9617 5040	Law Enforcement Agency <b>Anchorage Police Department</b>
Street or P.O. Box <b>1000 E. 36<sup>th</sup> Avenue</b>	City, State <b>Anchorage, AK</b>	Zip <b>99508</b>

This is a notice to you as licensee that an alleged violation has occurred. If the Alcoholic Beverage Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

**VIOLATION:** During an inspection in December of 2014, it was noted that your establishment had leased out the restaurant. As of 12-7-16, other than contacting your attorney, I have not been advised of how you are going to correct this violation.

Your attention is directed to 3AAC302.325: License issued to encourage tourism and AS 04.21.030: Responsibility of licensees, agents, and employees

You are directed to respond to the Director of the Alcohol & Marijuana Control Office in writing to this Notice of Violation within 10 days of receipt to explain what action you have taken to prevent a recurrence of this violation. FAILURE TO RESPOND TO THIS NOTICE OF VIOLATION WITHIN 10 DAYS WILL RESULT IN YOUR APPEARANCE, EITHER IN PERSON OR TELEPHONICALLY, BEFORE THE ABC BOARD OF DIRECTORS AT THEIR NEXT REGULARLY SCHEDULED BOARD MEETING.

\*Please include your Alcohol License Number in your response.

Cynthia Franklin, Director  
 Alcohol & Marijuana Control Office  
 550 W. 7<sup>th</sup> Ave, Suite 1600  
 Anchorage, Alaska 99501

### A Response is Required

3 AAC 304.525 (B) provides that upon receipt of a Notice of Violation, a licensee may request to appear before the Director and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice and the Director must grant an appearance within ten days after receipt of a request. A licensee shall respond, either orally or in writing, to this Notice.

Receipt:	Violation Observed By: <b>F.R. Hamilton</b>
Filed By: <b>FR Hamilton</b>	Title: <b>Investigator III</b>

