



MEMORANDUM

TO: Bob Klein, Chair, and Members of the
Alcoholic Beverage Control Board

DATE: June 12, 2018

FROM: Erika McConnell, Director

RE: 4969 Fireweed Meadows

Requested Action: License renewal

Statutory 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."

Staff Rec.: Deny the renewal

Background: This recreational site license does not appear to meet the statutory requirements of the license type:

Sec. 04.11.210. Recreational site license.

(a) The holder of a recreational site license may sell beer and wine at a recreational site during and one hour before and after a recreational event that is not a school event, for consumption on designated areas at the site.

(b) The biennial fee for a recreational site license is \$800.

(c) In this section, "recreational site" includes a location where baseball games, car races, hockey games, dog sled racing events, or curling matches are regularly held during a season.

This license was first issued in 2010.

There is a golf course license in statute at AS 04.11.115. In the statute, golf course is defined as a course having at least nine holes, covering at least 2,950 yards, and open to the public. Fireweed Meadows Golf Course is not eligible for a golf course license as it has only 1,551 yards (according to www.golfadvisor.com). Placing a minimum yardage in the golf course license provisions prohibits smaller golf courses from obtaining a license and serving alcohol, so the issuance of a different license type to smaller golf courses with insufficient yardage to be eligible for a golf course license is contrary to the intent of the statute.

While each golfer plays a “game,” a golf course is clearly different from the examples given in AS 04.11.210(c) of the types of locations and events that qualify for a recreational site license.

Attachment: Renewal application



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

Recreational Site License Form AB-17c: 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 recreational site 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: | Kyllonen Enterprises, Inc. | License #: | 4969 |
| License Type: | Recreational Site - Seasonal | Statute: | AS 04.11.210 |
| Doing Business As: | Fireweed Meadows | | |
| Premises Address: | 72749 Milo Fritz Avenue | | |
| Local Governing Body: | Kenai Peninsula Borough | | |
| Community Council: | None | | |

| | | | |
|------------------|--------------|--------|--------|
| Mailing Address: | | | |
| City: | Anchorage PT | State: | Alaska |
| | | ZIP: | 99556 |

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: | Buzz Kyllonen | | |
| Contact Phone: | 907 399 3001 | Business Phone: | Same |
| Contact Email: | Buzzk@xyz.NET | | |

Seasonal License? Yes No

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





Alaska Alcoholic Beverage Control Board

Recreational Site License

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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:

Susan Hylton

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: | | | | | |





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 #: | 81889 D |
|-----------------------|---------|

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: | Kyllonen Enterprises Inc | | |
| Title(s): | Pres | Phone: | 907 399 3001 % Owned: 50 |
| Mailing Address: | PO Box 49 | | |
| City: | ANCHORAGE | State: | ALASKA ZIP: 99556 |

| | | | |
|-----------------------|--------------------------|--------|--------------------------|
| Entity Official Name: | Kyllonen Enterprises Inc | | |
| Title(s): | Sec Susan Kyllonen | Phone: | 907 299 1200 % Owned: 50 |
| Mailing Address: | | | |
| City: | | State: | |

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

RECEIVED
 ZIP:
 DEC 11 2017
 ALCOHOL MARIJUANA CONTROL OFFICE
 STATE OF ALASKA

RECEIVED
 JAN 23 2018
 ALCOHOL MARIJUANA CONTROL OFFICE
 STATE OF ALASKA



Alaska Alcoholic Beverage Control Board

Recreational Site License

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Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

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Phone: 907.269.0350

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.

The license was regularly operated during a specific season each year.

The license was only operated to meet the minimum requirement of one time during the calendar year.

The license was not operated at all during the calendar year.

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?

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?

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: Initials

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a patron have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, as required under AS 04.21.025 and 3 AAC 304.465.





Alaska Alcoholic Beverage Control Board

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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.

AK

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.

AK

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.

AK

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.

AK

I am submitting as part of this application a written statement that meets the attached Recreational Site Statement Guidelines, for review by the Alcoholic Beverage Control Board.

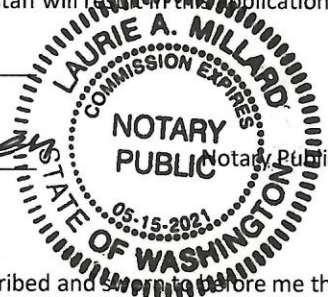
AK

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 my application being returned to me as incomplete.

[Signature]
Signature of licensee

Laurie A. Millard
Signature of Notary Public

Harvey V. Kyllonen
Printed name of licensee



Notary Public in and for the State of WA

My commission expires: 5/15/21

Subscribed and sworn to before me this 7th day of Dec., 2017.

| | | | | | |
|---|-----------|------------------|-----------|--------|-----------|
| License Fee: | \$ 400.00 | Application Fee: | \$ 200.00 | TOTAL: | \$ 600.00 |
| Late Fee of \$500.00 – if received or postmarked after 01/02/2018: | | | | | |
| Miscellaneous Fees: | | | | | |
| GRAND TOTAL (if different than TOTAL): | | | | | |



Craig, Carrie D (CED)

From: Alcohol Licensing, CED ABC (CED sponsored)
Sent: Tuesday, January 09, 2018 3:33 PM
To: 'SUSAN KYLLONEN'
Cc: Alcohol Licensing, CED ABC (CED sponsored)
Subject: RE: Kyllonen Enterprises, Inc.

Received, thank you!

Sincerely,

Carrie Craig

Occupational Licensing Examiner
State of Alaska DCCED
Alcohol & Marijuana Control Office
550 W 7th Ave, Ste. 1600
Anchorage, AK 99501

From: SUSAN KYLLONEN [mailto:drsusank@me.com]
Sent: Tuesday, January 09, 2018 3:20 PM
To: Alcohol Licensing, CED ABC (CED sponsored) <alcohol.licensing@alaska.gov>
Subject: Kyllonen Enterprises, Inc.

Attn: Carrie Craig

Re: Application Renewal corrections for Liquor License
4747 and 4969

Page 1 Section 1

Buzz and Harvey Kyllonen are one and the same.

Current mailing address is
PO Box 49
Anchor Point, Alaska 99556

Page 3 Section 4

Alaska CBPL entity is #111415

Entity Official Name

Harvey Kyllonen (President)
Susan Kyllonen (Secretary)

Recreational site statement:

Fireweed Meadows operates a Golf Course Pub during the hours of 10 am and 7 pm seven days per week in the months of May through September.

Please confirm when you receive this. THANK YOU!