



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:	August 14, 2018
FROM:	Erika McConnell, Director	RE:	5650 Adventure Karts
Requested Action:	New license application		
Statutory Authority:	AS 04.06.090(b): "The board shall review this title and may order the director to issu licenses and permits authorized under this	e, renew, r	
Staff Rec.	Deny the application		

Background: This recreational site license application 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.

According to their recreational site statement, Adventure Karts provides "seasonal ATV tours to cruise line guests and independent travelers...guests will have the opportunity to purchase alcohol while they de-gear, shop and wait for their transportation."

There appear to be no games, races, or other types of events that are regularly held during a season.

Attachment: License application



To Whom It May Concern:

The Adventure Karts Expedition is a tour company based in Ketchikan Alaska that offers seasonal ATV tours to cruise line guests and independent travelers. We are submitting a liquor license application because we believe the ability to serve alcohol will enhance the customer experience for our guests.

Our hours of operation vary day to day. Departures often begin at 7:00am. There will not be an opportunity for guests to purchase alcohol at the start of their tour. Guests must wait until the driving portion of their tour is completed before purchasing and consuming any alcoholic beverages. For a 7:00am tour guests will return to our base no earlier than 9:00am. At this point guests will have the opportunity to purchase alcohol while they de-gear, shop and wait for their transportation. The tour timing allows approximately 30 minutes for this portion of the tour. The latest we have guests on our property is 6:00pm. Opened or closed containers will not be permitted off the premises and signage will be posted accordingly.

We only operate our scheduled ATV tours during the months of May through September and do not host outside events on the property. On average, we provide tours to 10,000 guests per season and believe that this figure number gives us the opportunity to have a positive economic impact for the community. By allowing us to serve alcohol, we hope to promote Alaskan business by providing Alaskan beers and recommendations for local bars and restaurants.

Thank you for your consideration,





Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

What is this form?

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.

Section 1 - Establishment and Contact Information

Enter information for the business seeking to be licensed.

Licensee:	Alaska Rainforest Sanctuary, LLC					
License Type:	Recreational Site	ecreational Site Statutory Reference:				
Doing Business As:	Adventure Karts					
Premises Address:	12609 Whipple Sp	ur Road			NUMBER OF STREET, STREE	
City:	Ketchikan	State:	AK	ZIP:	99901	
Local Governing Body:	Ketchikan Gatewa	y Borough				
Community Council:						

Mailing Address:	4085 Tongass Ave				
City:	Ketchikan	State:	AK	ZIP:	99901

Designated License	e: Alaska	aska Rainforest Sanctuary, LLC			
Contact Phone:	(907)	25-8800 Business Phone: (907) 821-1		(907) 821-1290	
Contact Email:	operat	operations@adventurekarts.com			
Seasonal License?	Yes No	lf "Yes", write y	our six-month operating pe	riod: April- September	

	OFFICE USE	ONLY		
Complete Date:	License Years:	18/19	License #:	5650
Board Meeting Date:		Transaction #:	51339	63413 6341
Issue Date:		BRE:		CDC
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ALCOHOL MARIJUANA CONTROL OFFICE STATE OF ALASKA

Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application

Section 2 – Premises Information

Premises to be licensed is:					
✓ an existing facility	a new building	a proposed building			
The next two questions mus	st be completed by <u>beverage dispens</u> a	ary (including tourism) and package sto	ore applicants only:		
		e public entrance of the building of you the unit of measurement in your answe			
5 Miles					
What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer. 5 Miles					
0 1011163					
S	ection 3 – Sole Propriet	or Ownership Informatic	on		
If more space is needed, ple	eted by any <u>sole proprietor</u> who is app ase attach a separate sheet with the r sust be completed for each licensee an	이는 것은 것에 해야 하는 것이 있는 것이 이가 있는 것이 되었다. 이가 있는 것이 가지 않는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있는 것이 있다. 이가 있는 것이 있는 것이 가지 않는 것이 있는 것이 없는 것이 없다. 것이 없는 것이 없는 것이 없는 것이 없는 것이 없다. 것이 없는 것이 있	o to Section 4.		
This individual is an:	applicant affiliate				
Name:					
Address:					
City:		State:	ZIP:		
This individual is an:applicantaffiliate					
Name:					
Address:					
City:		State:	ZIP:		
			REGEIMED		

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



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 partner with an interest of 10% or more, and for each general partner.

Entity Official:	Gerald O'Brien Salazar					
Title(s):	Member, Manager	Phone:	(907) 225-8800	% Owr	ned:	100
Address:	4085 Tongass Ave					
City:	Ketchikan	State:	AK	ZIP:	999	901

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

Title(s):	Phone:	% Owned:
Address:		water a second a second se
City:	State:	ZIP:

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

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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 #:	83509D	AK Formed Date:	08/25/2005	Home State:	AK	
Registered Agent:	Gerald O'Brie	n Salazar	Agent's Phone:	(907) 225-8	3800	
Agent's Mailing Address:	PO Box 8495					
City:	Ketchikan	State:	AK	ZIP:	99901	
Residency of Agent:			, <u>, , , , , , , , , , , , , , , , , , </u>	-	Yes	No
Is your corporation or LL	C's registered agent a	an individual resident of	the state of Alaska?		✓	
	Sect	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		\checkmark
If "Yes", disclose which ind license number(s) and licen	ise type(s):			and if licensed in <i>i</i>	Alaska, whi	ich
	9e0	tion 6 – Autho	rization			
Communication with AMCO st	aff:			•	Yes	No
Does any person other t AMCO staff?	han a licensee named	l in this application have	e authority to discuss	this license with	\checkmark) /
If "Yes", disclose the name	of the individual and	the reason for this aut	horization:			
Lawrence Gaffaney	- President					
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					Pa	ge 4 of 5
					APR 1	912018



Department of Commerce, Community, and Economic Develop Date Filed: 09/09/2005 08:00 AM Corporations, Business, and Professional Licensing **Corporations Section** PO Box 110808 Juneau AK 99811-0808

AK Entity #: 83509D Department of Commerce

STATEMENT OF CHANGE

Registered Agent or Registered Agent Address

Pursuant to Alaska Statutes the undersigned entity submits the following statement for the purpose of changing its registered agent or the registered agent address in the State of Alaska.

1.	Name of Entity:	Alaska Entity #:	
	Alaska Rainfores	f Sinchury, LLC 83509D	
Τh	to redistored exact must be an Ind		

ndividual resident of Alaska or a corporation in good standing authorized to transact business in Alaska. A corporation my not act as its own agent. The registered agent address must be in Alaska.

2. Prior Registered Agent Information:

Name:	H Clay Keene	·····	
Mailing Address:	540 Water St. St. 302 City: Ketchikan	State: AK	Zip Code: 99901
Physical Address if Mailing Address is		- !	
a Post Office Box:			

3. New Registered Agent Information:

Name:	Gerald O. Salazar	-			
Mailing Address:	P.O. Box 8495	City: Kcthika	State: AK	Zip Code: 99201	
Physical Address if Mailing Address is a Post Office Box:					

Check this box if this is also the principal office address for the entity shown above.

4. Authorization:

Date this change was authorized:	8/25/05		
This change was authorized by (check appropriate box)	Resolution of the board of directors (Corporation) AA member (Limited Liability Company) General Partner (Limited Partnership or Limited Liability Partnership)		
The president or vice president of the corporation, a member of a limited liability company, or a general partner			

of a limited partnership or limited liability partnership must sign this statement.

Signature of Authorized Person Title Date Member Monaging Miller ber.

If you have specific legal questions or concerns about this filing, you are strongly advised to consult an attorney or other professional to assist you. Mail the completed filing and the \$25.00 fee (in U.S. dollars) to:

State of Alaska **Corporations** Section PO Box 110808 Juneau, AK 99811

For additional information or forms please visit our web site at: www

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State of Alaska Filing Changes 1 Page(s)





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:

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

I certify that all proposed licensees have been listed with the Division of Corporations.

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.

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.

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

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 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete.

Signa oflicensee

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Notary Public in and for the State of

My commission expires:

Subscribed and sworn to before me this _____ day of ______



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

Printed name of licensee









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

Initials



Alaska Alcoholic Beverage Control Board Form AB-02: Premises Diagram

What is this form?

page of 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 complex.

The <u>second page</u> 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
have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second		

Section 1 – Establishment Information

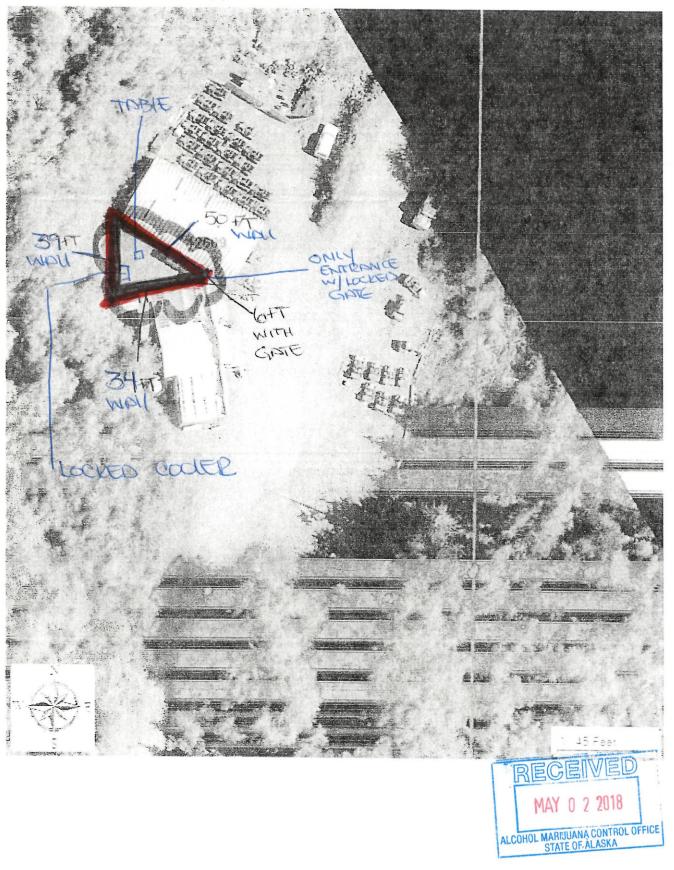
Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Alaska Rainforest Sanctuary, LLC	License Number:				
License Type:	Recreational Site			<u>_</u>		
Doing Business As:	Adventure Karts			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
Premises Address:	12069 Whipple Spur Road					
City:	Ketchikan	State:	AK	ZIP:	99901	-

[Form AB-02] (rev 06/24/2016)

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12609 WHIPPIE SPOR RD KETCHIKANI, AK 9990



To whom it may concern:

Our proposed licensed premises is an outdoor area. This area is gated in. We will provide a security personnel on site at all times. This personnel will be checking IDs to ensure there will be no underage consumption. Our gate, to enter is nine (9) feet tall and guests must show ID before entering outdoor area. Once guests are in the gated premises there will be an employee working at a locked cooler. He will be administering the alcoholic beverages and then guests are welcome to walk around the courtyard or sit at designated tables within the gated area. There is no bar at this time.

Thank you.

