



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**

**Form AB-29: Waiver of Operation Application**

**What is this form?**

This form is the means by which a licensee may request that the Alcoholic Beverage Control (ABC) Board waive the operating requirement of AS 04.11.330(a)(3) or (d). If a recreational site license has not been operated at least once in a calendar year, or if a license of any other type has not been operated for at least 30 eight-hour days in a calendar year, then a complete copy of this form and the corresponding fees must be submitted for that calendar year, per 3 AAC 304.170.

**This application must be accompanied by a non-refundable waiver application fee of:**

- for a 1<sup>st</sup> request, an amount equal to ½ the applicable biennial license fee; or
- for a 2<sup>nd</sup> or subsequent request, double the amount of the fee paid for the previous waiver application.

The ABC Board will determine whether, through no fault of the licensee or because the premises are under construction, the licensed premises could not be operated for the required time during the calendar year. The ABC Board may impose conditions along with the approval of an application for waiver, and it may deny a third or subsequent application for waiver. If an application for waiver is denied, an application for license renewal for the succeeding license period will be denied by the Board. In addition to the waiver application fee, the applicant must pay a late fee of \$1,000 for an application that is received too late for Board consideration at its meeting before November 30 of the year for which the waiver is requested. Please check AMCO's website for meeting agenda deadlines.

**Please note that a licensee must submit a separate completed copy of this form and pay a separate corresponding fee for each license and for each calendar year during which a license was not operated in compliance with AS 04.11.330.**

**Section 1 – Establishment Information**

Enter information for the license that has not been operated for the time required under AS 04.11.330.

<b>Licensee:</b>	Carr-Gottstein Foods Co.	<b>License Number:</b>	795
<b>License Type:</b>	Package Store		
<b>DBA:</b>	Oaken Keg #1806		
<b>Premises Address:</b>	600 E. Northern Lights Blvd.		
<b>City:</b>	Anchorage	<b>State:</b>	Alaska
		<b>ZIP:</b>	99503
<b>Local Governing Body:</b>	<b>Municipality of Anchorage</b>		

**Section 2 – Request Number and Calendar Year**

1<sup>st</sup> Request       2<sup>nd</sup> Request       3<sup>rd</sup> Request       Other \_\_\_\_\_

Request for Calendar Year 2018





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**Section 3 – Reason for Non-operation**

Provide an explanation as to why the licensed premises were not operated:

Carr-Gottstein Foods Co. ("Owner") acquired this license in 1999. Owner operated the license at the Sears Mall location until September 2015 when it ceased operations opting to look for a new location for this license. Owner has been actively looking for a suitable location to lease or purchase for the operation of the license and is currently in negotiations with a lessor for a new premises for this license. Owner anticipates being in the new location by the fourth quarter 2019. As soon as the negotiations are finalized, Owner will file an application for the transfer of the license to the new location.

**Section 4 – Certifications**

The following must be completed for establishments located within the boundaries of a local governing body:

Read the line below, and then sign your initials in the box to the right of the statement:

Initials

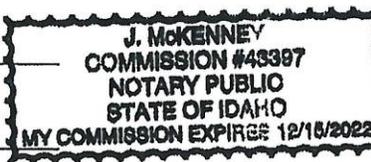
I certify that I will provide a true copy of this application to the local governing body listed on Page 1 of this form prior to ABC Board consideration of this application.

*mg*

As a liquor licensee, I declare under penalty of perjury that this form, including all attachments, is true, correct, and complete.

*Robert Gordon*  
 Signature of licensee

Robert Gordon, Vice President  
 Printed name of licensee



*J. McKenney*  
 Notary Public in and for the State of Alaska, Idaho

My commission expires: 12/15/22

Subscribed and sworn to before me this 28 day of Sept, 2018.

Office Use Only			
Waiver Application Fee:	<u>3,000</u>	Late Fee:	<u>/</u>
Transaction #:	<u>923004</u>		

