



ALCOHOL AND MARIJUANA CONTROL OFFICE 550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

TO:		n, Chair, and Members of the Beverage Control Board	DATE:	February 19, 2019
FROM:	Erika Mc	Connell, Director	RE:	2433 O.K. Restaurant
Requeste Action:	ed	License renewal		
Statutory Authority		AS 04.06.090(b): "The board sha under this title and may order th suspend licenses and permits auth	ne director	to issue, renew, revoke, transfer, or
Staff Recomm	endation:	Deny the renewal per AS 04.11.3	30(a)(6)	

Background: On the renewal application for the O.K. Restaurant, a restaurant or eating place license issued to Dae J. Chung, the licensee indicated that in 2017, 20% of the gross receipts were from food sales, and in 2018, 15% of the gross receipts were from food sales.

AS 04.11.100(e) states, "A license may be renewed under this section only if the licensee provides evidence to the board's satisfaction that gross receipts from the sale of food upon the licensed premises constitute no less than 50 percent of the gross receipts of the licensed premises for each of the two preceding calendar years."

Attachments: Renewal application



Alaska Alcoholic Beverage Control Board

Form AB-33: 2017/2018 Restaurant Receipts Affidavit

What is this form?

A restaurant or eating place licensee must file a complete copy of this form along with its 2019/2020 license renewal application, in order to provide evidence to the Alcoholic Beverage Control Board that this licensed restaurant's receipts from the sale of food upon the licensed premises constitute no less than 50% of the gross receipts (food + alcohol sales) of the licensed premises for each calendar year in 2017 and 2018, as required by AS 04.11.100(e). This form is considered to be confidential.

This form must be completed correctly and submitted along with a complete and correct copy of Form AB-17a before a license renewal application may be considered to be complete.

Section 1 – Establishment Information

This form is being submitted for the following license:

Licensee:	Dae J Chung	License #:	2433
License Type:	Restaurant or Eating Place		
Doing Business As:	O.K. Restaurant		
Premises Address:	616 1st Street		
Local Governing Body:	City of Cordova		

Section 2 - Gross Receipts for 2017 and 2018

Enter the dollar amounts of the food and gross (food + alcohol) receipts on the licensed premises, and calculate the percentage of gross receipts that are from food sales on the licensed premises for each calendar year. (Food Receipts ÷ Gross Receipts x 100 = %)

2017 Food Receipts:	\$ 2017 Gross Receipts:	\$ % From Food:	20 %
2018 Food Receipts:	\$ 2018 Gross Receipts:	\$ % From Food:	15 %

I declare under penalty of perjury that this form, including all accompanying schedules and statements, is true, correct, and complete.

111 wille Signature of Notary Public TEONG My commission expires: Subscribed and sworn to before me this [Form AB-33] (rev 09/18/2018) Page 1 of 198 2 7 211 NTROL OFFICE ALCOHOL MARIJUAN



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing restaurant or eating place liquor license that will expire on December 31, 2018. 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. Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees that an application will be considered complete, or that a license will be renewed.

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:	Dae J Chung	License #:	2433
License Type:	Restaurant or Eating Place	Statute:	AS 04.11.100
Doing Business As:	O.K. Restaurant		
Premises Address:	616 1st Street		
Local Governing Body:	City of Cordova		
Community Council:	None		

Mailing Address:	P 0 Box 67	0			
City:	Cordova	State:	Alaska	ZIP:	99574

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.

Contact Licensee:	Dae J CHUNG	Contact Phone:	907-424-3432
Contact Email:	gracebick@gmail.com		

Optional: If you wish for AMCO staff to communicate with individual who is <u>not a licensee</u> named on this form (eg: legal counsel) about this application and other matters pertaining to the license, please provide that person's contact information in the fields below.

Name of Contact:	Contact Phone:
Contact Email:	

[Form AB-17a] (rev 09/17/2018)

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Section 2 – Entity or Community Ownership Information

This top subsection must be completed by any licensee that is a <u>corporation</u> or <u>LLC</u>. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). This number is neither your EIN/tax ID number, nor your business license number. You may view your entity's status or find your CBPL entity number by vising the following site: <u>https://www.commerce.alaska.gov/cbp/main/search/entities</u>

General partnerships and local governments should skip to the second half of this page. Licensees who directly hold a license as an individual or individuals should skip to Section 3.

Alaska CBPL Entity #:	
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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:

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 <u>community</u> or <u>entity</u>, 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 <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 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**.

Important Note: The information provided in the below fields (including spelling of names, specific titles, and percentages held) must match that which is listed with CBPL. If one individual holds multiple titles mentioned in the bullets above, all titles must be listed for that individual on this application and with CBPL. Failure to list all required titles constitutes an incomplete application.

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

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

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

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Initials

DEC 21 20 ...



Alaska Alcoholic Beverage Control Board Form AB-17a: 2019/2020 Restaurant Renewal License Application

Section 3 – Sole Proprietor Ownership Information

This section must be completed by any licensee who directly holds the license as an **individual or multiple individuals** and is applying for license renewal. If more space is needed, please attach a separate sheet that includes all of the required information. Entities should skip to Section 4. The following information must be completed for each licensee and each affiliate (spouse).

This individual is an:	applicant 🗹 affiliate (spouse)			
Name:	Grace CHU	LNG	Contact Phone:	907-	424-3432
Mailing Address:	P & Box 6	70			5120-
City:	Cordova	State:	Alnskn	ZIP:	99514
Email:	grace 610K@	gmail. Com			· · · · ·
This individual is an: 1	applicant 🔲 affiliate (s	spouse)			
Name:	DAE J G	HUNG	Contact Phone:	901	4243432
Mailing Address:	POBOX 6170	the second s			
City:	Cordara	State:	Alaska	ZIP:	99574
Email:	grace 610KG	2mail.co		- I	

Section 4 – Alcohol Server Education

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

Initials

ALCOHOL MARIJUANA CONTROL OFFICE

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 set forth in AS 04.21.025 and 3 AAC 304.465.

Section 5 - License Operation

Check a single box for each calendar year that best describes how this liquor license was operated:				2018			
The license was regularly operated continuously throughout each year.			N	V			
The license was regularly operated during a specific season each year.							
The license was only operated to meet the minimum If this box is checked, a complete copy of Form AB-30 documentation must be provided with this application	Proof of Minimum Operation Chec	n calendar year. klist, and all necessary					
The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, 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, unless a complete copy of the form (including fees) has already been submitted for that year.							
	DECENDRED		AMO	P			
[Form AB-17a] (rev 09/17/2018) License #2433 DBA O.K. Restaurant	JAN 18 2019	JAN 17 201	Page 9	3 of 4			



Section 6 – Violations and Convictions		
Applicant violations and convictions in calendar years 2017 and 2018:		No
Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2017 or 2018?		\square
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 2017 or 2018?		\checkmark
If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or co	nvictio	ns.
Section 7 – 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, and t 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.	that	T)
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		a

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.

I am submitting as part of this application a completed copy of Form AB-33: Restaurant Receipts Affidavit, to provide evidence to the ABC Board that this establishment met the food sales requirement set forth in AS 04.11.100(e).

stakeholders) from what is currently approved and on file with the Alcoholic Beverage Control (ABC) Board.

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 or AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff with estimation being returned to me as incomplete.

Signature of Notary Public Signature of licensee For the State of Printed name of licensee My commission expires:

Subscribed and sworn to before the this 8 day of December

Seasonal	License?
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Yes

No

If "Yes", write your six-month operating period: ______

License Fee:	\$ 600.00	Application Fee:	\$ 300.00	TOTAL:	\$ 900.00
Miscellaneous	Fees:				
GRAND TOTAL	(if different than 1	OTAL):			
					AMCO

[Form AB-17a] (rev 09/17/2018) License #2433 DBA O.K. Restaurant DEC 21 2 Page 4 of 4