# **Notice of Violation**

(3AAC 304.525)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

Date: Thursday, November 2nd, 2017

License #/Type: #615 Beverage Dispensary.

Licensee: Hellroaring Partners, LLC

Address: 1027 East 5th Ave Anchorage, AK 99501

DBA: Van's Dive Bar

AMCO Case #: AB17-0488

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.

On November 2nd, 2017. At approximately 4:00 pm. A customer at The Lucky Wishbone drive-through witnessed an intoxicated male patron come out of Van's Dive Bar with a bottle of beer. Once outside the patron walked east and beside of the witnesses vehicle and in full view of the public. The radio was playing in the witness' vehicle and once the intoxicated patron heard the music he began to dance while holding the bottle of beer. This was in full view of the witness and off the licensed premise of Van's Dive Bar.

This is a violation of:

Sec. 04.16.120. Removal or introduction of alcoholic beverages.

(a) A person may not remove from licensed premises alcoholic beverages that have been sold or furnished for consumption only on the premises.

You are directed to respond in writing to this Notice of Violation within 10 days of receipt to explain what action you have taken to prevent a re-occurrence of this violation. FAILURE TO RESPOND TO THIS NOTICE OF VIOLATION WITHIN 10 DAYS WILL RESULT IN YOUR APPREARANCE, EITHER IN PERSON OR TELEPHONICALLY, BEFORE THE ABC BOARD AT THEIR NEXT REGULARLY SCHEDULED BOARD MEETING.

\*Please send your response to the address below and include your alcohol license number in your response.

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 the Notice.

Alcohol & Marijuana Control Office ATTN: Enforcement 550 W. 7<sup>th</sup> Ave, Suite 1600 Anchorage, Alaska 99501 amco.enforcement@alaska.gov

Issuing Investigator: K. Whiteman

Received by:

SIGNATURE:

SIGNATURE:

Delivered VIA: Mail

Date:



November 16, 2017

K. Whiteman AMCO Case # AB17-0488 #615 Beverage Dispensary

In response to notice of violation:

I understand the seriousness of this violation and did go straight to our security footage to review. I watched the entire day up until 6 pm when we had shift change. That period was extremely slow as are most of our day shifts. Since we ID all patrons our day business is fallen off entirely. There was a few patrons in the bar I recognized most of the guests as regulars. No one that was intoxicated during that time frame. We don't let anyone in that we won't serve to use the bathroom, ATM or just get warm. Also I ran a report on the sales for that period and no bottle beer was sold. We do get a fair number of people coming up from the nearby shelters and people walking around intoxicated is common. We have called Anchorage Safety Patrol on numerous occasions to report problems. We are working closely with all of our neighbors to keep our corner well maintained and safe for all of our customers.

Please advice

Richard Van Hale

Nicki Hale

907-782-7681

haleyeahak@gmail.com





Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> 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

## Form AB-17: 2019/2020 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 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.

| Se   | ection 1 – Establishment and Contact Infor | mation      |              |  |  |  |
|--|--|-------------|--------------|--|--|--|
| Enter information for the business seeking to have its license renewed. If any populated information is incorrect, please contact AMCO.  |  |             |              |  |  |  |
| Licensee:  | Hellroaring Partners, LLC                  | License #:  | 615          |  |  |  |
| License Type:  | Beverage Dispensary                        | Legal Ref.: | AS 04.11.090 |  |  |  |
| Doing Business As:   | Van's Dive Bar                             |             |              |  |  |  |
| Premises Address:  | 1027 E 5th Avenue                          |             |              |  |  |  |
| Local Governing Body:  | Municipality of Anchorage                  |             |              |  |  |  |
| Community Council:   | Fairview                                   |             |              |  |  |  |
| Mailing Address:   | 1027 E 5 xh ave                            |             |              |  |  |  |
| City:  | Inchorage State:                           | ZIP:        | 19501        |  |  |  |
| 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:  | Richard Harl Contact Phon                  | e: 907      | -229-3271    |  |  |  |
| Contact Email:   |  |             |              |  |  |  |
| <b>Optional:</b> 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:   | Nicki Habe Contact Phon                    | O au        | 7-782-2681   |  |  |  |
| Contact Email:   | Contact Email: hate Yeah AK & Smail, com   |             |              |  |  |  |
| 10000  |  |             |              |  |  |  |



### Alaska Alcoholic Beverage Control Board

## Form AB-17: 2019/2020 Renewal License Application

### Section 2 - Entity or Community Ownership Information

This top 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). 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: https://www.commerce.alaska.gov/cbp/main/search/entities

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.

| P-5-44   |   |               |                            |  |                               |
|--|---|---------------|----------------------------|--|-------------------------------|
| Alaska CBPL Entity #:  | 100320  | SS            |                            |  |                               |
| 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 gare also currently and accura  | good standing with CBPL and that all cately listed with CBPL. | urrent entity | officials and stakeholders | (listed below)                         | طلح                           |
| 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. |   |               |                            |  | is page.<br>r more of<br>h an |
| 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:  | Kichand   | 6             | Jahl                       |  |                               |
| Title(s):  | Member  | Phone:        | 907229-377                 | % Owned:                               | 100                           |
| Mailing Address:   | 1009 LSt  |               |                            |  |                               |
| City:  | anchorage   | State:        | H-K                        | ZIP: 99                                | 100                           |
| Name of Official:  |   | D-144         |                            |  |                               |
| Title(s):  |   | Phone:        |                            | % Owned:                               |                               |
| Mailing Address:   | ***************************************                       | L             |                            |  |                               |
| City:  |   | State:        |                            | ZIP:                                   | •                             |
| Name of Official:  |   |               |                            |  |                               |
|  |   |               | •                          | ************************************** |                               |
| Title(s):  |   | Phone:        |                            | % Owned:                               |                               |

[Form AB-17] (rev 09/17/2018) License #615 DBA Van's Dive Bar

**Mailing Address:** 

City:

AMCO

State:

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ZIP:

ALCOHOL MARIJUANA CONTROL OFFICE STATE OF ALASKA



### **Alaska Alcoholic Beverage Control Board**

### Form AB-17: 2019/2020 Renewal License Application

### **Section 3 – Sole Proprietor Ownership Information**

This section must be completed by any licensee who directly holds the license as an <u>individual or multiple individuals</u> 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:  | Ric                  | haroll                 | take            | Contact Phone:     | 907- | -229-327  |
| Mailing Address:   | 1009 2               | St /                   |                 |                    |      |           |
| City:  | anch                 | apage                  | State:          | ak                 | ZIP: | 99501     |
| Email:   | bate                 | Yeah AKE               | Lonail          | 1.com              |      |           |
| This individual is an:   | applicant            | affiliate (spouse      |                 |                    |      |           |
| Name:  |                      |                        |                 | Contact Phone:     |      | 15. 186-2 |
| Mailing Address:   |                      |                        | _               |                    |      |           |
| City:  |                      |                        | State:          |                    | ZIP: |           |
| Email:   |                      |                        | ¥4000           |                    |      |           |
| Section 4 – Alcohol Server Education  This section must be completed only by the holder of a beverage dispensary, club, or pub license or conditional contractor's permit. The holders of all other license types should skip to Section 5.  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 set forth in AS 04.21.025 and 3 AAC 304.465.  Section 5 – License Operation  |                      |                        |                 |                    |      |           |
| Check a single box for e   | ach calendar year th | nat best describes how | this liquor lic | ense was operated: |      | 2017 2018 |
| 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 240 total hours each calendar year.  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.   |                      |                        |                 |                    |      |           |
| 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.   |                      |                        |                 |                    |      |           |

[Form AB-17] (rev 09/17/2018) License #615 DBA Van's Dive Bar AMCO

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### Alaska Alcoholic Beverage Control Board

# Form AB-17: 2019/2020 Renewal License Application

| Sect   | tion 6 – Violatio   | ns and Convi   | ctions   |  |
|--|---|--|--|--|
| Applicant violations and convictions in cal  | endar years 2017 and 20   | 018:   |  | Yes No   |
| Have any notices of violation (NOVs) been i  | issued to this licensee in  | the calendar years 20  | 17 or 2018?  | 図口   |
| Has any person or entity named in this appoordinance adopted under AS 04.21.010 in t   |   |  | 4, of 3 AAC 304, or a local  |  |
| If "Yes" to either of the previous two ques  | tions, attach a separate  | page to this applicat  | ion listing all NOVs and/o   | r convictions.   |
|  | Section 7 – C   | Certifications   |  |  |
| Read each line below, and then sign your i   | initials in the box to the  | right of each stateme  | ent:   | Initials   |
| I certify that all current licensees (as define<br>in accordance with AS 04.11.450, no one o<br>licensed business.   |   |  | • •  | M (1) (1)  |
| I certify that I have not altered the function<br>and I have not changed the business name<br>stakeholders) from what Is currently appro   | or the ownership (included)   | ding officers, manager   | s, general partners, or  | V  |
| I certify on behalf of myself or of the organ any other form provided by AMCO is groun   | and the analysis are an analysis of the same and the same a | DEN ANALY ANTI-MARIE ANALASANIA DE TAMBIÉN DE MARIE PAR PARA PARA DE LA CARA |  | 11 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \                                 |
| As an applicant for a liquor license renewal 3 AAC 304, and that this application, includ provide all information required by the Alcothat fallure to loo so by any deadline given that fallure of licensee    Climan   Cli | ling all accompanying sci<br>oholic Beverage Control<br>to me by AMCO staff wil                                 | JADA ALEXAND Notary Public, State of otany Public, State of otany 26, 2019   | ts, is true, correct, and co<br>in support of this applicati<br>itop being returned to me<br>Calca (U) | mplete. I agree to lon and understand as incomplete.  SKC.  an 24, 200 |
| Yes No Seasonal License?   | If "Yes", write your  |  | •  |  |
| License Fee: \$ 2500.00  | Application Fee:  | \$ 300.00  | TOTAL:   | \$ 2800.00   |
| Miscellaneous Fees:  |   |  |  |  |
| GRAND TOTAL (if different than TO  | TAL):   |  |  |  |
|  |   |  |  | TEID I   |

[Form AB-17] (rev 09/17/2018) License #615 DBA Van's Dive Bar

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ALCOHOL MARIJUANA CONTROL OFFICE STATE OF ALASKA

#### 1-3-2019

### Occupational Licensing Examiner

This is to inform you that on 11/2/2017 we did get a notice of violation NOV. At our location 1027 East 5<sup>th</sup> Ave, a man with a backpack came into our establishment, and was asked to leave. He had been drinking and we did not want to serve him. He was asked to leave, he got a can of Olympia out of his back and opened it as he walked out singing. He was observed by a passerby and a complaint was issued. We reviewed the films and the bartender on staff did not serve him. We don't carry that brand of beer. I did correspond with the Alcohol Beverage Control Board about this at the time but was not aware it was considered a NOV. I have corrected the form.

Richard V Hale

