



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

MEMORANDUM

TO:		n, Chair, and Mem c Beverage Control		DATE:	April 29, 2019
FROM:	Erika Mo	Connell, Director		RE:	3467 Lin's Asian Bistro
Requested Action:	d Lice	ense renewal			
Statutory Authority:	this licer AS relo app boa testi con boa	title and may order hses and permits au 04.11.480(a): "A loo cation, or transfer t licant a protest and rd of notice of filin imony received at a siders the application	the director to a thorized under t cal governing bo to another perso the reasons for g of the applicat hearing conduc on If an applic oplication or con	issue, renet this title." ody may pro- n of a licer the protest ion The ted under cation or co- tinued ope	lications for licenses made under w, revoke, transfer, or suspend otest the issuance, renewal, use by sending the board and the t within 60 days of receipt from the board shall consider a protest and AS 04.11.510(b)(2) or (4) when it ontinued operation is protested, the eration unless the board finds that ble."
	tran app resp pub	sfer of location, or licant notice or hea ponse to an objectio	transfer to another to another to another to another to another the transfer to another to another the transfer to another to anothe	her person) the board ld a hearin	plication for the issuance, renewal, of a license without affording the d may, on its own initiative or in g to ascertain the reaction of the if a hearing is not required under
Staff Rec.	: Hol	d a public hearing;	deny the applica	tion with a	a 180-day abeyance

Background: The City of Fairbanks protests the renewal of this restaurant or eating place license pending a complete fire inspection.

The licensee should be notified that under 3 AAC 304.145(h), this abeyance period may not be extended or renewed.

Attachment: City Fairbanks protest Renewal application

City of Fairbanks

Office of the City Clerk

800 Cushman Street

Fairbanks, AK 99701

(907)459-6702 Fax (907)459-6710

April 10, 2019

John Church, Occupational Licensing Examiner Alcohol and Marijuana Control Office 550 W. 7th Avenue, Suite 1600 Anchorage, Alaska 99501-3567

Re: Liquor License Renewal

Mr. Church:

Please be advised that at the Regular Meeting of April 8, 2019, the Fairbanks City Council voted to **PROTEST** the following Liquor License renewal application <u>until fire inspections are complete</u>:

Lic. #	DBA	License Type	Licensee	Premises Address
3467	Lin's Asian Bistro	Restaurant/ Eating Place	Lin's Panda Garden, Inc.	1900 Airport Way

I will notify AMCO when the fire inspections have been completed by the Fairbanks Fire Department. If you have any questions or would like further information please contact me at 907-459-6774.

Sincerely,

jill Lik

D. Danyielle Snider, CMC Fairbanks City Clerk

cc: File

Ai Hao Lin, Lin's Asian Bistro Moira O'Bryant, Deputy Fire Marshal Jim Styers, City Fire Chief



Alaska Alcoholic Beverage Control Board **Restaurant or Eating Place License** Form AB-17a: 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 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:	Lin's Panda Garden Inc	License #:	3467
License Type:	Restaurant or Eating Place	Statute:	AS 04.11.100
Doing Business As:	Lin's Asian Bistro		-
Premises Address:	1900 Airport Way		
Local Governing Body:	City of Fairbanks (Fairbanks North Star Borough)		and the state of the
Community Council:	None		

Mailing Address:	1302 POLOV 1	OV		1	
City:	Fairburk	State:	AK	ZIP:	99712

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:	Ai Hao Lin	Contact Phone:	907 678-3589
Contact Email:	Calvin/inaka Gmail.	om	

Optional: If you wish for AMCO staff to communicate with individual who is not a licensee 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:	sellina im	Contact Phone:	907978-2781
Contact Email:	Er Dna linak 88 (2) g	muil.com	
[Form AB-17a] (rev 09/17/2018)		AMCO	

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Alaska Alcoholic Beverage Control Board

Form AB-17a: 2019/2020 Restaurant Renewal License Application

Section 2 – Entity or Community Ownership Information

This top subsection must be completed by any licensee that is a general area to be for 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.

Alaska CBPL Entity #:	11 25 15	
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Initials

Page 2 of 4

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

1 .

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 <u>corporation</u>, the following information must be completed for each stockholder who awns 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 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.

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president	Phone:	907 687 814	/ % Ow	ned: 66
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Faitbanks	State:	Åk	ZIP:	199712
	president 1302 Polar Di	president Phone: 1302 Palar Dr	president Phone: 907 687 814 1302 POILAR OF	president Phone: 907 687 8141 % Own 1302 POILAT DI

Name of Official:	Alva Lin	
Title(s):	VP	Phone: 907 347-1388 % Owned: 11
Mailing Address:	1302 POLON 1	0/
City:	Fairburks	State: AK ZIP: 99712

Name of Official:	Selona L	h	aller services and		
Title(s):	- spere tury	Phone:	\$x 978-278	% Owned:	IT
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City:	Fallanks	State:	AR	ZIP: 99	7/2

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[Form AB-17a] (rev 09/17/2018) License #3467 DBA Lin's Asian Bistro

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https://www.commerce.alaska.gov/web/amco **Alaska Alcoholic Beverage Control Board Renewal License Application** Form AB-17a: Restaurant / Eating Place

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 alcohol.licensing@alaska.gov

Phone: 907.269.0350

This subsection must be completed by any entity, including a corporation, limited liability company (LLC), 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:	Riang	Lin	a state			
Title(s):	Directer S	ecretary	Phone:	907978 3590	% Owned:	11
Address:	1302 Pi	dar B	r			
City:	Failbonks		State:	AK	ZIP: 9	17/2
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Entity Official:	1-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	- Apidica				
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City:	NEW STREET	×	State:	(Company)	ZIP:	
[Form AB-17a] (rev 10/25/2010	1)		TED	28 2019	-bowned	Page 3 of 5



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).

Name:	Contact F	Phone:	
Mailing Address:	L		
City:	State:	ZIP:	

Name:	Contact	Phone:
Mailing Address:		
City:	State:	ZIP:
Email:		

Section 4 – Alcohol Server Education

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.

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Initials

Section 5 – License Operation		
Check a single box for each calendar year that best describes how this liquor license was operated:	2017	2018
The license was regularly operated continuously throughout each year.	1	\checkmark
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-17a] (rev 09/17/2018) License #3467 DBA Lin's Asian Bistro

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Form AB-17a: 2019/2020 Restaurant Renewal License Application

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

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 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.	AL
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	AL

Alon 7 Andre at

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 will result in this application being returned to me as incomplete.

adi

Signature of licensee

AZHAOLIN

Yes

No

Printed name of license

Notary Public in and for the State of

Signature of Notary Public

My commission expires

My Commission Expires 12/13/2022

Subscribed and sworn to before me this $\int S day of \partial$

Seasonal License?

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

License Fee:	\$ 600.00	Application Fee:	\$ 300.00	TOTAL:	\$ 900.00
Miscellaneous	Fees:				
CRAND TOTAL	(if different than 1	OTALL			

[Form AB-17a] (rev 09/17/2018) License #3467 DBA Lin's Asian Bistro

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