

Department of Commerce, Community, and Economic Development

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

MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: September 10, 2019

FROM: Erika McConnell, Director RE: 3572 Gallo's Mexican Restaurant #2

Requested Transfer of ownership

Action:

Statutory

AS 04.11.040(a): "A license issued under this title may not be transferred to another

person except with the written consent of the board." Authority:

> AS 04.11.470: "A person may object to an application for issuance, renewal, transfer of location, or transfer to another person of a license, or for issuance of a permit, by serving upon the applicant and the board the reasons for the objection. The board shall consider the objections and testimony received at a hearing conducted under AS 04.11.510(b)(2) when it considers the application..."

> AS 04.11.510(b)(2): "the board may, on its own initiative or in response to an objection or protest, hold a hearing to ascertain the reaction of the public or a local governing body to an application if a hearing is not required under this subsection;"

Staff Rec.: Hold a public hearing; approve the transfer with delegation

Background: This is an application for transfer of ownership of a beverage dispensary license in Anchorage from Gallo's Mexican Restaurant, Inc., to Acapulco, Inc. A creditor has filed an objection.

Attachment: Creditor objection

Transfer application



3572

Beverage Dispensary

Gallo's Mexican Restaurant, Inc.

Gallo's Mexican Restaurant #2

Department of Commerce, Community, and Economic Development

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

August 15, 2019

GMW Fire Protection, Inc. 6108 MacKay Street Anchorage, AK 99518

License Number:

Transferor Doing

License Type:

Transferor:

Business As:

Sincerely,

Euka M'Connell

Erika McConnell Director, ABC Board

☑ Transfer of Ownership Application	☐ Transfer of Controlling Interest
the transferor has not paid all debts or taxes arisi title unless the transferor gives security for the pa	application for transfer of a license to another person if ing from the conduct of the business licensed under this ayment of the debts or taxes satisfactory to the creditor are listed as a creditor or taxing authority for the
of AS 04.11.360(4) and in compliance with AS 04.	wnership for the above liquor license. For the purposes 11.280(b), this letter serves to provide written notice dentity regarding the above application (see attached CO office at alcohol.licensing@alaska.gov.
NAME: Told Hecsch, fresident GMW Five Protection, Inco Do you have an objection to the transfer of this li	PHONE: <u>907-250-028</u> (cense? □ No
AMOUNT OWED: \$13,402.36	DATE: 8/16/19
COMMENTS: <u>Pebt arose from work</u>	to maintain facility crucial to this business
f you have any questions, please send them to <u>al</u>	cohol.licensing@alaska.gov.



https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

What is this form?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing 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, AS 04.11.280, AS 04.11.290, 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 – Trans	sferor In	formation		
Enter information for the cu	rrent licensee and licensed establishme	ent.			
Licensee:	Gallo's Mexican Restaura	ant, Inc	License #:		3572
License Type:	Beverage Dispensary		Statutory Reference	:	AS 04.11.090
Doing Business As:	Gallo's Mexican Restaura	ant #2			
Premises Address:	8615 Old Seward Highwa	——— ау			
City:	Anchorage	State:	AK	ZIP:	99515
Local Governing Body:	Municipality of Anchorage	9			100010
Transfer Type: Regular transfer Transfer with securit Involuntary retransfe		ć a			
	OFFICE US	SE ONLY			
Complete Date:			action #:	5844	
Board Meeting Date:		License	e Years:	0079	
Issue Date:		BRE:			



https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

	Section 2 - Trans		formation			
Enter information for the <i>ne</i>	w applicant and/or location seeking to	be licensed.				
Licensee:	Acapulco, Inc					
Doing Business As:	Gallo's Mexican Restaura	ant #2•				
Premises Address:	8615 Old Seward Highwa	ау				
City:	Anchorage	State:	AK		ZIP:	99515
Community Council:	Taku/Campbell	I				100010
24 111 2 2 2						
Mailing Address:	PO Box 111846	· · · · · · · · · · · · · · · · · · ·				
City:	Anchorage	State:	AK		ZIP:	99511
Designated Licensee:	Abraham Gallo					
Contact Phone:	907-771-6060	Business F	Phone			
Contact Email:	renee.gallos@outlook.cor			com		
Yes Seasonal License?	No ✓ If "Yes", write your si	x-month op	erating period	l:		
	Section 3 – Prem	ises Info	rmation			
Premises to be licensed is:						
✓ an existing facility	a new building	a proposed	d building			
The next two questions must	be completed by <u>beverage dispensary</u>	(including to	ourism) and pac	kage store	annlican	ats only
What is the distance of the	e shortest pedestrian route from the p se nearest school grounds? Include the	uhlic ontran	00 of the build:			
1.4 miles		unit of filed.	sarement in you	ii aliswer.	-	
What is the distance of the the public entrance of the 2.5 miles	e shortest pedestrian route from the p nearest church building? Include the u	ublic entrand unit of measu	e of the building	g of your p	roposed	premises to
				-		



https:/

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

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

		1				
100	Section 4 – Sole Propriet	or Owne	ership Informatio	on		
i more space is needed, p	pleted by any <u>sole proprietor</u> who is ap lease attach a separate sheet with the must be completed for each licensee an	required info	rmation.	p to Sectio	n 5.	
his individual is an:	applicant affiliate					
Name:		· · ·				-
Address:						
City:		State:		ZIP:		
nis individual is an:	applicant affiliate					
		٧				
Address:		T				
City:		State:		ZIP:		
more space is needed, plant is a corporation of the applicant is a corporation of the applicant is a limit ownership interest of 1 applicant is a part	eted by any entity, including a corpora g for a license. Sole proprietors should ease attach a separate sheet with the reporation, the following information mustion, and for each president, vice-presided liability organization, the following 0% or more, and for each manager. Intership, including a limited partnership for more, and for each general partner	tion, limited skip to Section equired information information in the following, the following the section in the following section in the followin	liability company (LLC), pa on 6. mation. ed for each stockholder w ry, and managing officer. must be completed for each	tho owns 1	!0% o r witl	r more of n an
Entity Official:	Abraham Gallo					
Title(s):	Pres, Shareholder,Sec, Treasurer, Director	Phone:	907-771-6060	% Own	ed:	100
Address:	PO Box 111846			<u> </u>	***	
City:	Anchorage	State:	AK	ZIP:	995	511

AMCO



https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Entity Official:					14	1000		
Title(s):			Phon	ie:		% Owned:		-
Address:								
City:			State	::		ZIP:		
F 000								
Entity Official:			1					
Title(s):		-	Phon	e:	9	% Owned:		
Address:				•				
City:			State	:	7	ZIP:		
Entity Official:								
Title(s):			Phon	۵۰		V 0		
Address:		.,	FIIOII	е.	,	% Owned:		
City:				1	- T			
City.	TOTAL WEST		State	:	Z	IP:		
This subsection must be comp standing with the Alaska Divis Alaska. DOC Entity #:	leted by any applican ion of Corporations (I 65014D	at that is a corp DOC) and have AK Formed	a registe	or LLC. Corporations red agent who is ar 10/20/1998	and LLCs are in individual res	sident of the	e in go state o	ood of
Registered Agent:	Abraham Gall	О		Agent's Phone:	907-771	-6060		
Agent's Mailing Address:	PO Box 1118	46						
City:	Anchorage	State:		AK	ZIP:	995	11	
Residency of Agent:						Yes		- О



https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

vnership and financial interest in other alcoholic beverage businesses:	Yes	No
Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?	✓	
If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in license number(s) and license type(s):	Alaska, wh	ich
Abraham Gallo owner of all restaurants -Beverage Dispensary-Northern Lights Business Inc #4314 -Beverage Dispensary-Eureka Services, Inc #2973 -Beverage Dispensary-Gallo's Mexican Restaurant #2833		
Section 7 – Authorization	Vas	No
	Yes	No
	Yes	No
nmunication with AMCO staff: Does any person other than a licensee named in this application have authority to discuss this license with	Yes	No
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?	Yes	No



https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 - Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

trial i, as the current licensee (either the sole proprietor or the	e controlling interest of the current licensee. I additionally certify controlling interest of the currently licensed entity) have examined this
Application, approve of the transfer of this license, and find the	e information on this application to be true, correct, and complete.
Signature of transferor	8
Printed name of transferor	and to
Subscribed and sworn	to before me this 2 rd day of February 2019
NOTAR, OF ALASMINING	Migue A. Signature of Notary Public
PUBLIC 2	Notary Public in and for the State of
OF ALASMINI	My commission expires full of De
Obrodem Holl	4
Signature of transferor Abyaham Gallo	
Printed name of transferor	Telapon 10
Subscribed and sworn t	o before me this 200 day of 1000 day of 2019 .
MINION COMMISSION OF THE PROPERTY OF THE PROPE	My migration
MOTARL OF Z	Signature of Notary Public
PUBLIC /	\sim
11/2/2019	Notary Public in and for the State of
Subscribed and sworn to the subscribed and sworn to the subscribed and subscr	My commission expires: June 17 208



https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

* Transferee Certifications	
Read each line below, and then sign your initials in the box to the right of each statement:	Initials
I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed or	n this application.
I certify that all proposed licensees have been listed with the Division of Corporations.	p. 72
I certify that I understand that providing a false statement on this form or any other form provided for rejection or denial of this application or revocation of any license issued.	d by AMCO is grounds
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the patron will complete an approved alcohol server education course, if required by AS 04.21.025, are serving alcoholic beverages, will carry or have available to show a current course card or a photococcertifying completion of approved alcohol server education course, if required by 3 AAC 304.465.	nd, while selling or
l agree to provide all information required by the Alcoholic Beverage Control Board in support of t	his application.
As an applicant for a liquor license, I declare under penalty of perjury that I have read and am fami that this application, including all accompanying schedules and statements, is true, correct, and co	iliar with AS 04 and 3 AAC 304, and
Moroham Hall	
Signature of transferee Abyaham (Sallo Printed name	· · · ·
Subscribed and sworn to before me this day of	0 170
My commissi	on expires: 11, 001



Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

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

What is 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 within the building or building complex.

The second page 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 an	y license application will be considered complete
---	---

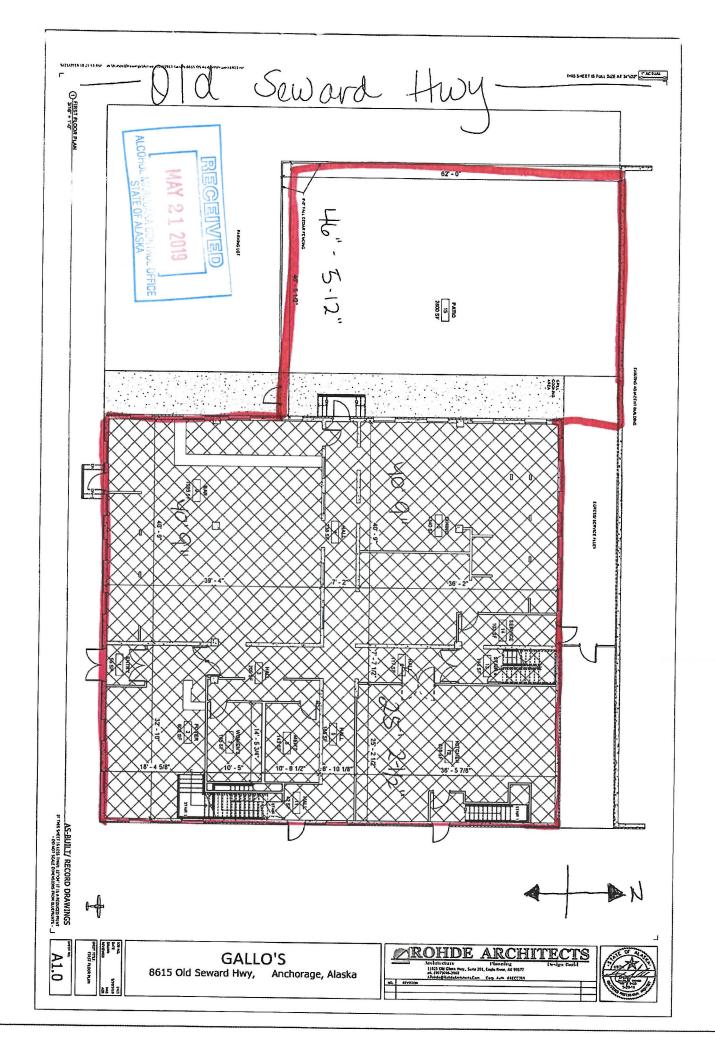
	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.	1	

Section 1 - Establishment Information

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

Licensee:	Acapulco, Inc	apulco, Inc License Numb		3572	
License Type:	Beverage Dispensary				
Doing Business As:	Gallo's Mexican Restaurant #2				
Premises Address:	8615 Old Seward Highway				
City:	Anchorage	State:	AK	ZIP:	99515

BECEINED MAY 03 2019 MARIJUANA CONTROL OFFICE STATE OF ALASKA





APR 08 2019
ALCOHOL MARIUDANA CONTROL OFFICE
STATE OF ALASKA

Security for patio

There are always 1-2 servers working the patio who card all customers consuming alcohol. Only way to patio is through the restaurant. No alcohol can leave the premises through the roughly 5 ft. fencing surrounding the patio.

For special events we hire security guards to make sure no alcohol leaves the premises. Patio is only seasonal from May to end of August depending on weather.

