



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: November 12, 2019
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FROM: Erika McConnell, Director RE: 780 North Pole Alehouse

Requested Transfer of ownership and DBA change **Action:**

StatutoryAS 04.11.040(a): "A license issued under this title may not be transferred to anotherAuthority:person except with the written consent of the board."

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 review an application for the issuance, renewal, transfer of location, or transfer to another person of a license without affording the applicant notice or hearing, except...(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 and DBA change of a beverage dispensary license in North Pole. An objection from the Department of Labor – Employment Security has been received due to non-compliance. Responses from the local governing bodies and creditors are still pending, as are the background investigations.

Attachment: Department of Labor objection Transfer application





Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West Seventh Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

October 21, 2019

Department of Revenue Department of Labor, Employment Security Department of Labor, Workers' Compensation Via email: theresa.mitchell@alaska.gov

elizabeth.glooschenko@alaska.gov rizalina.olde@alaska.gov velma,thomas@alaska.gov erwin.fariolan@alaska.gov dor.tax.collections@alaska.gov

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License Number:	780
License Type:	Beverage Dispensary
Applicant:	The North Pole Pub, LLC
Doing Business As:	North Pole Alehouse
Transferee EIN:	84-2043396
Transferor EIN:	20-5741328

ITransfer of Ownership Application

Transfer of Controlling Interest

AS 04.11.330(b) and AS 04.11.370(a)(6) require that an applicant for a liquor license operate in compliance with each applicable public health, fire, safety, and tax code and ordinance of the state and the local governing body in which the applicant's proposed licensed premises are located.

This letter serves to provide written notice and request for compliance status from the above referenced entities regarding the above application (see attached application documents for more information). Please complete and return this form to the AMCO office at alcohol.licensing@alaska.gov.

Liz Gloose Leako REVIEWER: ____ DATE: ________ PHONE: _______ 269-4836

Employment Security U Workers' Compensation

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Compliant Ser Ron-compliant

COMMENTS: ____

If you have any questions, please send them to alcohol.licensing@alaska.gov.

Sincerely,

Euha McConnell

Erika McConnell Director, ABC Board



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.

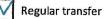
This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 – Transferor Information

Enter information for the current licensee and licensed establishment.

Licensee:	Red Pants, Inc.	License #:	780
License Type:	Beverage Dispensary	Statutory Reference:	04.11.090
Doing Business As:	The Refinery Lounge		
Premises Address:	6th & old Richard sor	1 HWU	
City:	North Pole State:	Alaska	ZIP: 99705
Local Governing Body:	The city of North Pole	レ	

Transfer Type:



Transfer with security interest

Involuntary retransfer

······································	OFFICE USE ONLY	
Complete Date:	Transaction #:	1155369
Board Meeting Date:	License Years:	
Issue Date:	BRE:	

[Form AB-01] (rev 10/10/2016)



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 2 – Transferee Information

Enter information for the net	wapplicant and/or location seeking to-	be licensed.
Licensee:	The North Pole Pi	Wb, LLC.
Doing Business As:	North Pole Alchou	ise
Premises Address:	2643 Old Richard	dson Huy.
City:	North Pole	State: Alaska ZIP: 99705
Community Council:	City of North Pt	ble
-	,	
Mailing Address:	431 Santa Clau	15 LN.
City:	North Pole	State: Alaska ZIP: 99705
	-	
Designated Licensee:	Ariette Eagle-La	velle
Contact Phone:	907.378.22.33	Business Phone: 907.378.2233
Contact Email:	ariettelavelle@gr	nail.com
Yes Seasonal License?	If "Yes", write your si	ix-month operating period:
Premises to be licensed is: an existing facility	a new building	a proposed building
The next two questions mus	t be completed by <u>beverage dispensa</u>	ry (including tourism) and <u>package store</u> applicants only:
	he nearest school grounds? Include th	public entrance of the building of your proposed premises to ne unit of measurement in your answer.
		public entrance of the building of your proposed premises to e unit of measurement in your answer.

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Form AB-01: Transfer License Application

Section 4 – Sole Proprietor Ownership Information

This section must be completed by any <u>sole proprietor</u> who is applying for a license. Entities should skip to Section 5. If more space is needed, please attach a separate sheet with the required information. The following information must be completed for each licensee and each affiliate (spouse).

This individual is an:	applicant affiliate				
Name:					Monormage
Address:					
City:		State:		ZIP:	
This individual is an: 🔲 a	affiliate				
Name:			6 - A F		
Address:					
City:		State:		ZIP:	

Section 5 - Entity Ownership Information

This section must be completed by any <u>entity</u>, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.

If more space is needed, please attach a separate sheet with the required information.

- 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 <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 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.

		(AL)		-		
Entity Official:	Arlette	Eaglen Lave	elle			
Title(s): . Resident	Manag	ing member	Phone:	907.378.2233	% Owned:	25
Address: Minuber	828 8th	Ave				L
City:	Fairba	nks	State:	Alaska	ZIP: 90	1701

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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Entity Official:	Michael Jeffrent Vay	nsick	e	
Title(s):	Secretary Member	Phone:	907.347.4484	% Owned: 25
Address:	2235 Flight Street			
City:	North Pole	State:	Alaska	ZIP: 99705
	. A			
Entity Official:	XI Bin Lin			
Title(s):	Freasurer Member	Phone:	907.388.7000	% Owned: 25
Address:	431 Santa Claus L	n.		
City:	North Pole	State:	Alaska	ZIP: 99705
	R			
Entity Official:	Lane Watter Kea	tor		
Title(s): Member	Vile-President®	Phone:	907.707.6575	% Owned: 25
Address:	959 West Chena	ulls D	Drive	
City:	Fairbanks	State:	Alaska	ZIP: 99709

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10107462	AK Formed Date:	44	2019	Home State:	Alaska
Registered Agent:	Lane Keo	itor	Ager	nt's Phone:	907.707.	6575
Agent's Mailing Address:	959 West	Chena hills	Dr	ive		
City:	Fairbanks	State: AL			ZIP:	99709

Residency of Agent:		Yes	No
Is your corporation or LLC's registered agent a	n individual resident of the state of Alaska?		
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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 – Other Licenses

	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?	\checkmark	
If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in A license number(s) and license type(s): Attlette Eagle-Lavelle OWNS Beverage Dispensary License #270 Lavelle's Taphouse, LLC.	17	
Xi Bin Lin owns Pagoda Chinese Restaurant Beverage Dispensan		

Section 7 – Authorization

Communication with AMCO staff:		No
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?		

If "Yes", disclose the name of the individual and the reason for this authorization:

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Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u> Phone: 907.269.0350

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Form AB-01: Transfer License Application

Section 8 - Transferor Cortifications

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

I declare under penalty of perjury that the undersigned represents a controlling interest of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

Signature of transland

Printed name of transferor

U

Subscribed and sworn to before me this 2 day of ζ

JESSICA CROWELL Notary Public - State of Kanes My Appl. Expires ||- |L

Notary Public In and for the State of

nsferon

Alorgianh Kannenberg Printed name of transferor



Subscribed and sworn to before me this _____ day of 20 19 Signature of Notar

Notary Public in and for the State of ____ My commission expires: APYI 12,2023

My commission expires:

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

Signature of Notary Public

Phone. 907.269.0350

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

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – 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 on this application.	AA
I certify that all proposed licensees have been listed with the Division of Corporations.	AA
I certify 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.	AA
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.	AR
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	Æ
As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AA that this application, including all accompanying schedules and statements, is true, correct, and complete.	C 304, and

Ell & Lavelle Insferee Eagle-Lavelle

Printed name

Subscribed and sworn to before me this 224 day of <u>Angnst</u>, 20<u>19</u>, <u>Conla Lilligom</u> Signature of Notary Public



Notary Public in and for the State of Alas Ka My commission expires: 06/1972073

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Alaska Alcoholic Beverage Control Board Form AB-02: Premises Diagram

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 <u>second page</u> 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 any 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.	\checkmark	

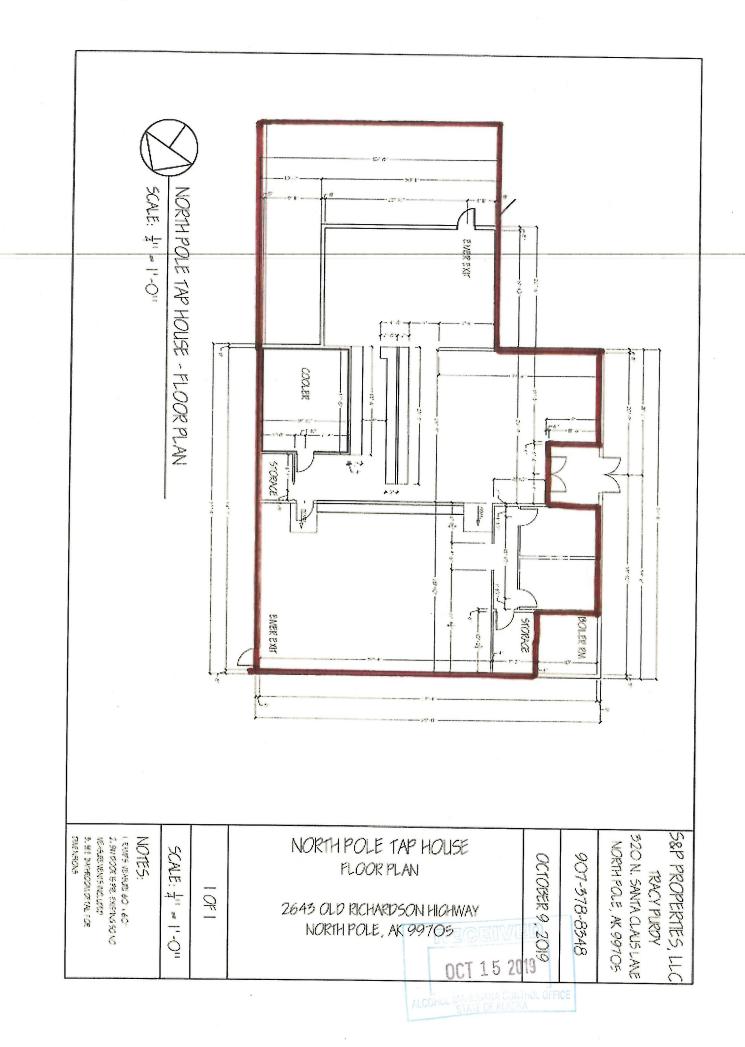
Section 1 – Establishment Information

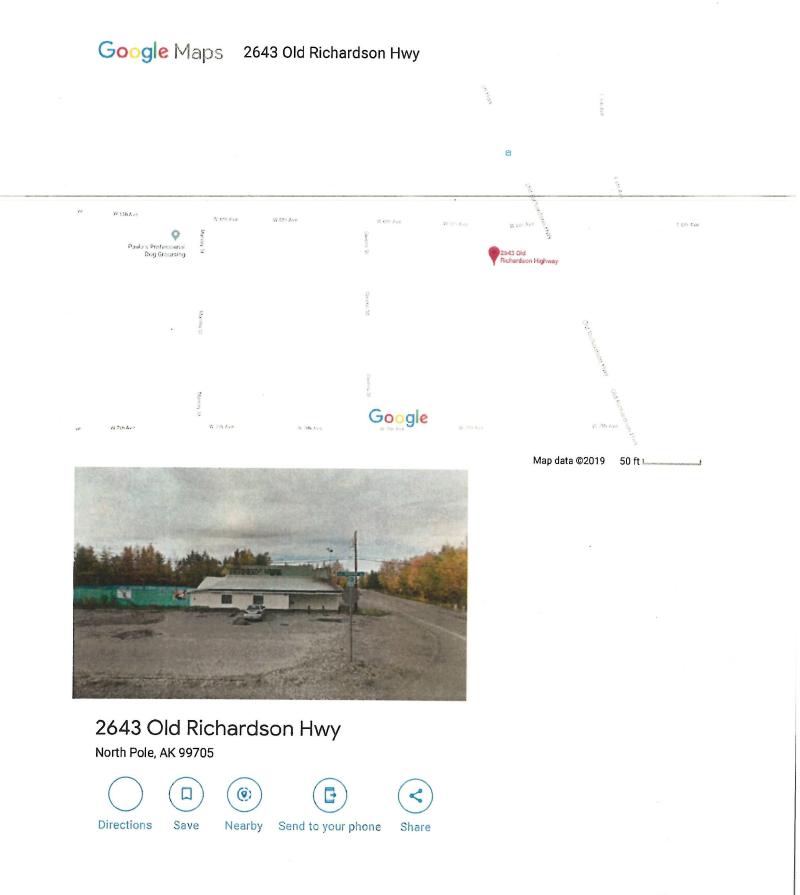
Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	The North Pole Pub.LLC.	License Number:	780
License Type:	Beverage Dispensory		·
Doing Business As:	North Pole Alehouse		
Premises Address:	2643 Old Richardson 1	twy.	
City:	North Pole	State: AK	ZIP: 99705

[Form AB-02] (rev 06/24/2016)

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