

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: 9/10/19

License #/Type: 4535 Package Store

Licensee: TLS, Inc.

Address: 50470 Sterling Hwy, Soldotna, AK

DBA: TJ Seggy's

AMCO Case #: 19-1457

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 9-5-19, an inspection was conducted at your establishment. It was learned at that time that you are storing extra stock in your office area. According to the latest diagram listed in your file with AMCO, this area has not been approved for storage.

Your attention is directed to 04.21.060: Warehousing of alcoholic beverages, 04.21.080: Definitions, AS 04.16.150: Licensee responsible for violations and AS 04.21.030: Responsibilities of licensees, agents and employees

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 APPEARANCE, 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. 7th Ave, Suite 1600
Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issuing Investigator: J. Hamilton

Received by:

SIGNATURE:



SIGNATURE:

Delivered VIA: Mail

Date:

The products that were stored in the office were promptly removed after the inspector's visit.

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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

Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	TJ Seggy's	License Number:	4535
License Type:	Package Store		
Examiner:	<i>Carrie</i>	Transaction #:	1165722

Document	Received	Completed	Notes
AB-17: Renewal Application	11/1	12/11	
App and License Fees	11/1	12/11	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement			
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation			
AB-30: Minimum Operation			
AB-33: Restaurant Affidavit			
COI / COC / 5 Star			
FP Cards & Fees / AB-08a			
Late Fee			

Names on FP Cards:	
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	Yes	No
Selling alcohol in response to written order (package stores)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mailing address and contact information different than in database (if yes, update database)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

LGB 1 Response: *KPB*

LGB 2 Response:

Waive
 Protest
 Lapsed
 ~~Waive
 Protest
 Lapsed~~



Alaska Alcoholic Beverage Control Board

Package Store License

Form AB-17b: 2020/2021 Renewal License Application

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?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing package store liquor license that is due to renew by December 31, 2019. 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 and submitted to AMCO's main office before any license renewal application will be reviewed. 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.

Table with license information: Licensee: TLS, Inc., License #: 4535, License Type: Package Store, Doing Business As: TJ Seggy's, Premises Address: 50470 Sterling Highway, Local Governing Body: Kenai Peninsula Borough, Community Council: None

Mailing Address: 2440 E. PEARSON ST 50470 STERLING HWY, City: SOLDOTNA, State: AK, ZIP: 99669

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: JOHN F SEGESSER, Contact Phone: 907-252-3471, Contact Email: SEGGY@PTI ALASKA, NET

Optional: If you wish for AMCO staff to communicate with an 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, Contact Phone, Contact Email fields

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Alaska Alcoholic Beverage Control Board

Form AB-17b: 2020/2021 Package Store Renewal License Application

Section 2 - Entity or Community Ownership Information

Licensees who directly hold a license as an individual or individuals should skip to Section 3. General partnerships and local governments should skip to the second half of this page. All licensees that are corporations or LLCs must complete this section. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). The CBPL Entity # below 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 using the following site: https://www.commerce.alaska.gov/cbp/main/search/entities

Alaska CBPL Entity #: 92327 TLS, INC

You must ensure that you are able to certify the following statement before signing your initials in the box to the right: Initials

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 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 shareholder 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. You must list ALL of your qualifying officials, additional copies of this page or a separate sheet of paper may be submitted if necessary.

Name of Official: JOHN F SEGESER
Title(s): SEC. SHAREHOLDER, VP, DIRECTOR, PRES. Phone: 907 257 3421 % Owned: 100
Mailing Address: 30485 ROSLAND ST
City: SOLDOTNA State: AK ZIP: 99669

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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Form AB-17b: 2020/2021 Package Store Renewal License Application

Section 3 – Sole Proprietor Ownership Information

Entities, such as corporations or LLCs, should skip this section. 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.

The following information must be completed for each licensee and each affiliate.

This individual is an: applicant affiliate

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

This individual is an: applicant affiliate

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:

Initials

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 2019

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.



Section 6 - Written Orders

Written orders in calendar years 2020 and 2021: Yes No
Do you intend to sell alcoholic beverages and ship them to another location in response to written solicitation in calendar years 2020 and/or 2021? [] [X]

Section 7 - Violations and Convictions

Applicant violations and convictions in calendar years 2018 and 2019: Yes No
Have any notices of violation (NOVs) been issued for this license in the calendar years 2018 or 2019? [X] []
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 2018 or 2019? [] [X]

If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or convictions.

Section 8 - Certifications

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

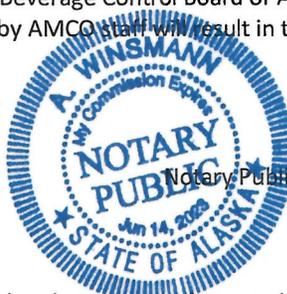
I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business. [Signature]

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

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. [Signature]

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.

Signature of licensee: JOHN F. SEGESSER
Printed name of licensee



Signature of Notary Public: Alaska
Notary Public in and for the State of

My commission expires: June 14, 2023
Subscribed and sworn to before me this 31st day of October, 2019.

Seasonal License? Yes [] No [X] If "Yes", write your six-month operating period: _____

Table with 5 columns: License Fee (\$1500.00), Application Fee (\$300.00), TOTAL (\$1800.00), Miscellaneous Fees, GRAND TOTAL (if different than TOTAL)

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Department of Commerce, Community, and Economic Development
**CORPORATIONS, BUSINESS &
PROFESSIONAL LICENSING**

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database
Download / Corporations / Entity Details

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	TLS, Inc.

Entity Type: Business Corporation

Entity #: 92327

Status: Good Standing

AK Formed Date: 2/24/2005

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2021

Entity Mailing Address: 50470 STERLING HWY, SOLDOTNA, AK 99669

Entity Physical Address: 50470 STERLING HWY, SOLDOTNA, AK 99669

Registered Agent

Agent Name: John F Segesser

Registered Mailing Address: 30485 ROSLAND ST, SOLDOTNA, AK 99669

Registered Physical Address: 30485 ROSLAND ST, SOLDOTNA, AK 99669

Officials

Show Former

AK Entity			
#	Name	Titles	Owned
	John F Segesser	Secretary, Shareholder, Vice President, Director, President, Treasurer	100.00

Filed Documents

Date Filed	Type	Filing	Certificate
2/24/2005	Creation Filing	Click to View	Click to View
9/23/2005	Agent Change	Click to View	
9/23/2005	Initial Report	Click to View	
10/09/2006	Biennial Report	Click to View	
11/12/2010	Biennial Report	Click to View	
11/12/2010	Biennial Report	Click to View	
12/19/2011	Change of Officials	Click to View	
1/02/2013	Biennial Report	Click to View	
12/07/2014	Biennial Report	Click to View	
12/06/2016	Biennial Report	Click to View	
4/03/2017	Change of Officials	Click to View	
4/03/2017	Agent Change	Click to View	
12/14/2018	Biennial Report	Click to View	

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