



Alaska Alcoholic Beverage Control Board
Tourism Statement

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

A new, transfer, or renewal application for a beverage dispensary – tourism or restaurant / eating place – tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

This document must be submitted to AMCO's main office before any tourism license application will be reviewed.

Section 1 – Establishment Information

Enter information for the business seeking to have its license renewed. If any populated information is incorrect, please contact AMCO.

Table with 4 columns: Field, Value, License #, Value. Rows: Doing Business As (Anchorage Marriott Hotel), License Type (Beverage Dispensary - Tourism).

Section 2 – Tourism Statement

2.1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.

This operation is a full service hotel that caters to tourists and locals. The serving of alcoholic beverages is a critical ingredient in attracting customers to stay and execute their events at our property.

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.11.400(d)(1):

As all hotels, it is necessary to constantly keep upgrading and refurbishing the rooms and interior. This keeps the hotel competitive in today's market.

2.3 Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located? YES [X] NO []

2.4 If "no" who operates the tourism facility?

AMCO OCT 15 2019



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2.5 Do you offer room rentals to the traveling public? YES NO

If "yes" answer the following questions:

How many rooms are available?

392 Rooms

How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)?

There are no kitchens and/or microwaves in guest rooms. Some guest rooms include a mini-fridge

Do you stock or plan to stock alcoholic beverages in guest rooms? YES NO

If "no" is your facility located within an airport terminal? YES NO

2.6 If your establishment includes a dining facility, please describe that facility. If it does not please write "none".

Full service restaurant available on the property

2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists), please describe them. If they are not offered, please write "none".

Banquet rooms for parties and/or conferences



Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	Anchorage Marriott Hotel	License Number:	3945
License Type:	Beverage Dispensary - Tourism		
Examiner:	<i>John</i>	Transaction #:	1157774

Document	Received	Completed	Notes
AB-17: Renewal Application	10/15	<i>11/5</i>	
App and License Fees	10/15	<i>10/15</i>	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement	10/15	<i>10/15</i>	
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:

LGB 2 Response:

- Waive
 Protest
 Lapsed
 Waive
 Protest
 Lapsed



Alaska Alcoholic Beverage Control Board
Beverage Dispensary – Tourism License
Form AB-17d: 2020/2021 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 beverage dispensary-tourism 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.

Licensee:	Columbia Properties Anchorage Limited Partnership	License #:	3945
License Type:	Beverage Dispensary - Tourism		
Doing Business As:	Anchorage Marriott Hotel		
Premises Address:	820 W. 7th Avenue		
Local Governing Body:	Municipality of Anchorage		
Community Council:	Downtown		

Mailing Address:	740 Centre View Blvd.				
City:	Crestview Hills	State:	KY	ZIP:	41017

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:	Christopher Ballard	Contact Phone:	859-669-1505
Contact Email:	cballad@columbiasussex.com		

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:	Elizabeth Williams	Contact Phone:	972-354-6476
Contact Email:	ewilliams@bluebonnetconsulting.com		



Alaska Alcoholic Beverage Control Board
Form AB-17d: 2020/2021 Tourism 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 vising the following site: <https://www.commerce.alaska.gov/cbp/main/search/entities>**

Alaska CBPL Entity #:	63196PF
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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:	See Attachment A				
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

Name of Official:					
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

Name of Official:					
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

Attachment A – Ownership Information

Title	Name	Mailing Address	Phone	% Ownership
President of CP Anchorage GP, LLC & Columbia Hospitality Mezz, LLC	William J Yung, III	740 Centre View Blvd, Crestview Hills, KY 41017	859-578-1100	0%
CFO of CP Anchorage GP, LLC & Columbia Hospitality Mezz, LLC	Christopher Ballard	740 Centre View Blvd, Crestview Hills, KY 41017	859-578-1100	0%
Vice President of CP Anchorage GP, LLC & Columbia Hospitality Mezz, LLC	Derek Haught	740 Centre View Blvd, Crestview Hills, KY 41017	859-578-1100	0%
Vice President, Secretary, Treasurer of CP Anchorage GP, LLC & Columbia Hospitality Mezz, LLC	Thomas Drake	740 Centre View Blvd, Crestview Hills, KY 41017	859-578-1100	0%
Limited Partner	Columbia Hospitality Mezz, LLC	740 Centre View Blvd, Crestview Hills, KY 41017	859-578-1100	99%
General Partner	CP Anchorage GP, LLC	740 Centre View Blvd, Crestview Hills, KY 41017	859-578-1100	1%





Form AB-17d: 2020/2021 Tourism 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 (spouse)

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

This individual is an: applicant affiliate (spouse)

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.*



Form AB-17d: 2020/2021 Tourism Renewal License Application

Section 6 – 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?

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?

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

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.

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.

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 the attached Tourism Statement form, for review by the Alcoholic Beverage Control 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.

Christopher Ballard
Signature of licensee

Christopher Ballard
Printed name of licensee

Mary Sheanshang
Signature of Notary Public

Notary Public in and for the State of KENTUCKY
MARY SHEANSHANG

My commission expires Notary I.D. 551949
Notary Public, Kentucky State at Large

Subscribed and sworn to before me this 9th day of October My Commission Expires March 23, 2020

Seasonal License? Yes No

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

License Fee:	\$ 2500.00	Application Fee:	\$ 300.00	TOTAL:	\$ 2800.00
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):	\$2,800.00				

Details

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	COLUMBIA PROPERTIES ANCHORAGE, L.P.
Assumed Name	COLUMBIA PROPERTIES ANCHORAGE, LIMITED PARTNERSHIP

Entity Type: Limited Partnership

Entity #: 63196PF

Status: Good Standing

AK Formed Date: 3/6/1998

Duration/Expiration: 05/20/2024

Home State: OHIO

Next Biennial Report Due:

Entity Mailing Address: 740 CENTRE VIEW BLVD, CRESTVIEW HILLS, KY 41017

Entity Physical Address: 740 CENTRE VIEW BLVD, CRESTVIEW HILLS, KY 41017

Registered Agent

Agent Name: Corporation Service Company

Registered Mailing Address: 9360 Glacier Hwy Ste 202, JUNEAU, AK 99801

Registered Physical Address: 9360 Glacier Hwy Ste 202, JUNEAU, AK 99801

Officials

AK Entity #	Name	Titles	Owned	<input type="checkbox"/> Show Former
	COLUMBIA HOSPITALITY MEZZ, LLC	Limited Partner	99.00	
	COLUMBIA PROPERTIES ANCHORAGE GP, LLC	General Partner		

Filed Documents

Date Filed	Type	Filing	Certificate
3/06/1998	Creation Filing	Click to View	
7/12/2012	Agent Change	Click to View	
10/01/2013	Entity Address Change	Click to View	
12/16/2013	Correction	Click to View	Click to View
9/22/2015	Certificate of Compliance		Click to View
5/20/2019	Correction	Click to View	Click to View

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October 14, 2019

Carrie Craig
Alaska Alcoholic Beverage Control Board
550 West 7th Ave
Suite 1600
Anchorage, AK 99501

RE: RENEWAL FOR:
Columbia Properties Anchorage Limited Partnership
License #: 3945
Anchorage Marriott Hotel
820 W. 7th Avenue
Anchorage, AK 99501

Dear Carrie:

Enclosed are the required documents needed to process the renewal for the above referenced property.

- A. Executed AB-17D Renewal Application and attachment
 - B. Completed Tourism Statement
 - C. Company Check for \$2,800.00
-

Please contact me directly if you need anything else to complete the processing of this request.

Sincerely,

Elizabeth Williams

Elizabeth Williams
972-354-6476
ewilliams@bluebonnetconsulting.com

AMCO

OCT 15 2019