

Notice of Violation

(3AAC 304.525)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25 #3890

Date:

License #/Type:

Licensee:

Address:

DBA:

AMCO Case #:

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.

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:

Received by:

SIGNATURE:

J.R. Hamilton

SIGNATURE:

Delivered VIA:

Date:

April 29, 2019

Ms. Erika McConnell, Director
Alcoholic & Marijuana Control Office
ATTN: Enforcement
550 W. 7th Ave, Suite 1600
Anchorage, AK 99501

Dear Ms. McConnell,

We received a Notice of Violation #AM19-0616 (License #3890) on April 24, 2019. The Notice is about an incident at our Red Robin Wasilla restaurant that occurred on April 18, 2019. This letter serves to provide you with the actions we have taken at our restaurant to cure the violation and to prevent this type of incident from occurring again.

After receiving the notice, we reviewed all the other employees that work at this location to verify that all servers and bartenders have a valid unexpired TAP card not only on their persons but also on file in the office area located in the back of the restaurant. As an extra precaution, we engaged our payroll processor, ADP to generate a biweekly report indicating the upcoming expiration dates of current TAP's cards. This report will be reviewed by our Support Office each payroll cycle, to ensure that reminders are sent to the managers of our Red Robin locations about upcoming TAP card expirations.

The Team Member that was involved in this incident, Mr. Heath Brazfield, has been a very responsible member of our staff and has worked at this location since October 2012. He immediately took action to renew his TAP card that was expired on the date of the incident. I've attached to this letter a copy of Mr. Brazfield TAP card.

We hope and trust that the actions we have taken will not only satisfy the AMCO with respect to this incident, but that it will strengthen our procedures to prevent this type of incident from ever occurring again.

Thank you for your understanding and consideration.

Sincerely,

Wasilla Robin Alaska LLC

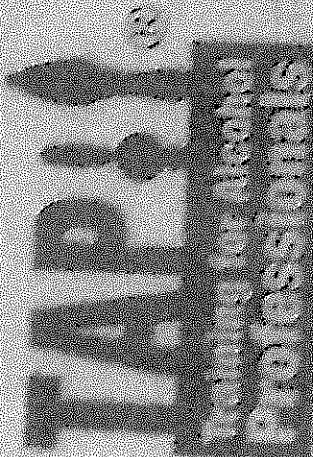


John Fabiano
Vice President

Tikahtnu Commons
1190 N. Muldoon Road
Anchorage, AK 99504
907.276.7788

Dimond
401 E. Dimond Blvd.
Anchorage, AK 99515
907.522.4321

Wasilla
1891 E. Parks Highway
Wasilla, AK 99654
907.373.7373



CERTIFICATE #

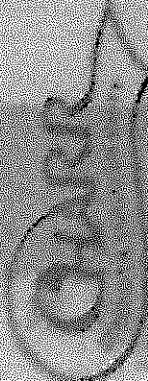
172757

Name Heath Brezford

Name

08-25-74

Birthdate



800-478-2427 or
800-274-8136

www.oarrachet.com

Signature

EXPIRES ON

SERGIO W FRAZON

05/01/2022



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:	Red Robin	License Number:	3890
License Type:	Beverage Dispensary		
Examiner:	<i>Came</i>	Transaction #:	1179870

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

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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<i>Nov</i>	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 type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>

LGB 1 Response: *city of wasilla*

LGB 2 Response: *Watson Bar*

<input type="checkbox"/> Waive	<input type="checkbox"/> Protest	<input type="checkbox"/> Lapsed	<input type="checkbox"/> Waive	<input type="checkbox"/> Protest	<input type="checkbox"/> Lapsed
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Alaska Alcoholic Beverage Control Board

Form AB-17: 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 liquor license that are 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:	Wasilla Robin Alaska, LLC	License #:	3890
License Type:	Beverage Dispensary		
Doing Business As:	Red Robin		
Premises Address:	1891 E Park Highway, Wasilla		
Local Governing Body:	City of Wasilla (Matanuska-Susitna Borough)		
Community Council:	None		
Mailing Address:	4450 Cordova St #200		
City:	Anchorage	State:	AK
		ZIP:	99503

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 Fabiano	Contact Phone:	561-5555
Contact Email:	john@rralaska.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:		Contact Phone:	
Contact Email:			

NOV 15 2019

**Form AB-17: 2020/2021 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 visiting the following site:** <https://www.commerce.alaska.gov/cbp/main/search/entities>

Alaska CBPL Entity #:	125222
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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:	Gourmet Ventures, Inc				
Title(s):	Member	Phone:	561-5555	% Owned:	100
Mailing Address:	4450 Cordova St #200				
City:	Anchorage	State:	AK	ZIP:	99503

Name of Official:	Fred Rosenberg				
Title(s):	Manager	Phone:	561-5555	% Owned:	0
Mailing Address:	4450 Cordova St #200				
City:	Anchorage	State:	AK	ZIP:	99503

Name of Official:	John Fabiano				
Title(s):	Manager	Phone:	561-5555	% Owned:	0
Mailing Address:	4450 Cordova St #200				
City:	Anchorage	State:	AK	ZIP:	99503

**Form AB-17: 2020/2021 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

This section must be completed only by the holder of a beverage dispensary, club, or pub license or conditional contractor's permit. The holders of all other license types should skip to Section 5.

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.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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The license was regularly operated during a specific season each year.

<input type="checkbox"/>	<input type="checkbox"/>
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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.

<input type="checkbox"/>	<input type="checkbox"/>
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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.

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

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-17: 2020/2021 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 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.

☒

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

Signature of Notary Public

John Fabiano

Printed name of licensee

Notary Public in and for the State of AlaskaMy commission expires: 5-17-2022Subscribed and sworn to before me this 4th day of October, 2019.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):					<u>2800.00</u>

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: 4/22/19

License #/Type: Beverage Dispensary

Licensee: Wasilla Robin Alaska, LLC

Address: 1891 E. Parks Highway, Wasilla, AK

DBA: Red Robin

AMCO Case #: 19-0616

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 4-18-19, an inspection was conducted at your establishment. Heath Anthony Brazfield was identified by employees as the manager. Mr. Brazfield was asked to provide proof of current server education. He seems distracted and I later learned he was training new employees in the back of the house. I asked once again for his card but did not receive a response. I contacted Alaska CHARR and learned that Mr. Brazfield's TAP card had expired on 6-12-16. Other on-duty employees did have current server education.

Your attention is referred to AS 04.21.025: Alcohol server education course, AS 04.21.030: Responsibility of licensees, agents and employees and AS 04.16.150: Licensee responsible for violations

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.

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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:

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	Wasilla Robin Alaska LLC

Entity Type: Limited Liability Company

Entity #: 125222

Status: Good Standing

AK Formed Date: 12/4/2009

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2021

Entity Mailing Address: 4450 CORDOVA STREET, SUITE 200, ANCHORAGE, AK
99503-7273

Entity Physical Address: 4450 CORDOVA ST #200, ANCHORAGE, AK 99503-7273

Registered Agent

Agent Name: John Fabiano

Registered Mailing Address: 4450 CORDOVA STREET, SUITE 200, ANCHORAGE, AK
99503-7273

Registered Physical Address: 4450 CORDOVA STREET, SUITE 200, ANCHORAGE, AK
99503-7273

Officials

☐ Show Former

AK Entity #	Name	Titles	Owned
	FRED ROSENBURG	Manager	
	Gourmet Ventures, Inc.	Member	100.00
	JOHN FABIANO	Manager	

Filed Documents

Date Filed	Type	Filing	Certificate
12/04/2009	Creation Filing	Click to View	
12/04/2009	Initial Report	Click to View	
5/12/2010	Initial Report	Click to View	
11/07/2011	Biennial Report	Click to View	
9/23/2013	Biennial Report	Click to View	
12/04/2014	Biennial Report	Click to View	
12/09/2014	Amendment	Click to View	Click to View
1/07/2015	Change of Officials	Click to View	
1/07/2015	Agent Change	Click to View	
12/29/2016	Biennial Report	Click to View	
12/13/2018	Biennial Report	Click to View	

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