

Notice of Violation

(3AAC 304.625)

Information provided and responses are public documents per Alaska Public Access Law.

Date: [Redacted] License #/Type: #2673 **Restaurant/Eating Place**
 Licensee: John Patties Fish House, Inc. Address: 4241 Homer Spit Road, Homer, AK
 DBA: John Patties Fish House AMCO Case #: 19-0740

This Notice is given to you as licensee that an alleged violation has occurred. If the Alcoholic Beverage Control Board decides against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accounting and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

On 12-19, an inspection was conducted at your establishment. It was noted that the premises had significantly expanded. The expansion was not approved by the Director. Licensee John Mische was asked to provide proof of server education to which he replied he works in the back and was unaware he had to have it. It was explained to him that as a licensee and a supervisor he is required to have server education.

Your attention is directed to 3AAC 304.184: Licensed premises, AS 04.21.025: Alcohol server education, 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.

3 AAC 304.185 (B) provides that upon receipt of a Notice of Violation, a licensee may request to appear before the Director and be heard on the Notice of Violation. The request must be made within ten days after receipt of the Notice and the Director must grant an appearance without cost. A Licensee shall respond, either orally or in writing, to the Notice.

Alcoholic Beverage Control Office
 Attention: Enforcement
 550 West 12th Avenue, Suite 1600
 Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issued by: **J. Hamilton**

Received by:

SIGNATURE: [Redacted]

SIGNATURE:

Delivered by: **Mail**

Date:

AMCO

From: [John Michels](#)
To: [CED AMCO Enforcement \(CED sponsored\)](#)
Subject: Notice of Violation - Captain Pattie's Fish House - License #2673
Date: Tuesday, May 28, 2019 11:52:17 AM

May 28,2019

ATTN: Enforcement

In response to the notice of violation dated 05/10/2019, and received today, the following corrections have taken place:

1. Captain Pattie's instantly made the correction of serving alcohol ONLY in the original part of the establishment originally approved. The expansion went through the process of approvals by engineers, architects, City of Homer authorities and the Fire Marshalls and it was believed the ABC Board had also been notified. I emailed the Amended Premises Diagram Friday, May 24 2019 with the necessary corrections, signatures and fee.
2. I am the author of this response. My name is John Michels. I am not a server, never have been and was also unaware I am required to obtain and hold a server education card. I have scheduled myself to attend the next class conducted at the Best Western Bidarka Inn in Homer and taught by David Ahlberg. I contacted him instantly after being notified by Officer Hamilton during his inspection of our premises.

Captain Pattie's has had no violations since we opened in 2000 nor have we ever intended to do so. We are well respected by the community, the local and state police and the City of Homer. We contribute to numerous nonprofit organizations, charities and individuals in need. We will continue to do so if allowed.

Sincerely,

John Michel, owner
Captain Pattie's Fish House, Inc.

12-26-19

Dear Amco,

I am requesting my license # 2673 be moved back to a seasonal license for 2020/2021 renewal.

I have also enclosed documentation on the violation I was issued 5/10/19.

Please e-mail me (pattynensley1@hotmail.com) or call 907-399-1925, with any questions.

Thank you,

Patty Nensley

CAPT. PATTIE'S FISH HOUSE, INC.

AMCO

DEC 30 2019



Alaska Alcoholic Beverage Control Board
Restaurant or Eating Place License
Form AB-17a: 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 restaurant or eating place 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:	Captain Patties Fish House, Inc.	License #:	2673
License Type:	Restaurant/Eating Place		
Doing Business As:	Captain Patties Fish House		
Premises Address:	4241 Homer Spit Road #1		
Local Governing Body:	City of Homer (Kenai Peninsula Borough)		
Community Council:	None		

Mailing Address:	Po Box 210				
City:	Anchorage	State:	AK	ZIP:	99556

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:	Patty Hensley	Contact Phone:	907.399.1925
Contact Email:	Pattyhensley1@hotmail.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:			



Form AB-17a: 2020/2021 Restaurant 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 #:	739780
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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:	Patty Hensley			
Title(s):	Pres.	Phone:	907-399-1925	% Owned: 100
Mailing Address:	PO Box 210			
City:	Anchorage AK	State:	AK	ZIP: 99504

Name of Official:	John Michels			
Title(s):	Sec/Treas.	Phone:	399-1902	% Owned: 5
Mailing Address:	PO Box 210			
City:	Anchorage AK	State:	AK	ZIP: 99504

Name of Official:				
Title(s):		Phone:		% Owned: 5
Mailing Address:				
City:		State:		ZIP:

AMCO
DEC 30 2019



Form AB-17a: 2020/2021 Restaurant 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.



Form AB-17a: 2020/2021 Restaurant 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 <u>this license</u> in the calendar years 2018 or 2019?	See Attached	<input checked="" type="checkbox"/>
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?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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.	<input checked="" type="checkbox"/>
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.	<input checked="" type="checkbox"/>
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.	<input checked="" type="checkbox"/>
I am submitting as part of this application a completed copy of Form AB-33: Restaurant Receipts Affidavit, to provide evidence to the ABC Board that this establishment met the food sales requirement set forth in AS 04.11.100(e).	<input checked="" type="checkbox"/>

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

Printed name of licensee

MARILEE A NIELSEN
Notary Public
State of Washington
Notary Public in and for the State of Washington
My Appointment Expires Jul 20, 2020

Signature of Notary Public

My commission expires: 7-25-20

Subscribed and sworn to before me this 26 day of Dec, 2019.

Seasonal License? Yes No

If "Yes", write your six-month operating period: 4/15 - 10/15

License Fee:	\$ 600.00 <u>300</u>	Application Fee:	\$ 300.00	TOTAL:	\$ 900.00 <u>Leto</u>
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					