

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

Alaska Alcoholic Beverage Control Board

Tourism Statement

A new, transfer, or renewal application for a beverage dispensary – tourism or restaurant / eating place – tourism license must be

under AS 04.11.400(d) and	statement that explains how the establish 3 AAC 304.325.	ment encourages tourism ar	nd meets the rec	quirements listed
This document must be sui	bmitted to AMCO's main office before an	y tourism license applicatio	n will be review	ved.
	Section 1 - Establish	nment Information	1	
Enter information for the b	usiness seeking to have its license renewe	d. If any populated informati	on is incorrect in	alease contact AMCO
Doing Business As:	Nome Nugget Inn		License #:	5334
License Type:	Beverage Dispensary - Tourism		I	
2.1. Explain how issuance of	Section 2 - Touri			
host the Iditarod Trail We work hard to be a	t tourists all year round at the Nom the summer and we are proud to be Committee every year. We are also positive part of our community wit ting local artists and we have week i.	De the building at the Id The Nome home for the hosting weekly meeting the hosting weekly meeting the best in the Id	itarod finish l ne Iron Dog Si	line. We also nowmobile Race.
2.2. Explain how the facility	was/will be constructed or improved as	required by AS 04.11.400(d))(1):	
for rental to public. The rooms. There are micro	the Nome Nugget Inn built in 196 U.S. Census Bureau, 2017. The Non ere are no kitchen facilities in the ro wave and refrigerator in all the roo oms and all public areas.	ne Nugget Inn has 47 ro Doms and we do not off	oms and one	suite avaliable
tourism facility in which		the	YES	NO
2.4 If "no" who operates the	tourism facility?			



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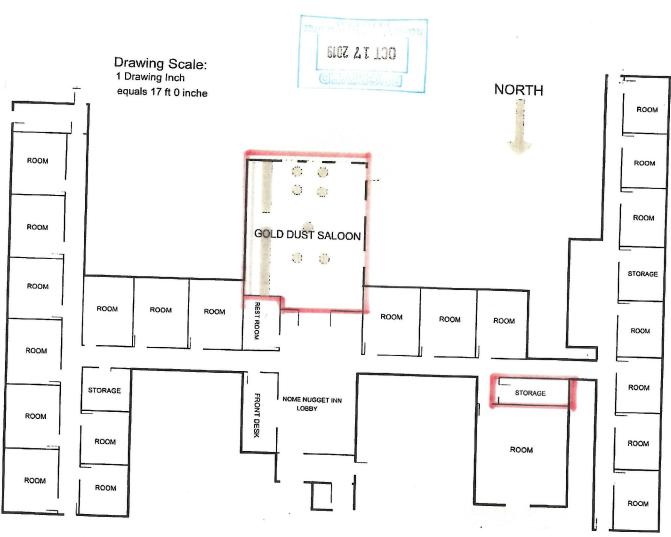
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Tourism Statement

2.5 Do you offer room rentals to the traveling public?	YES	NO
If "yes" answer the following questions:	لـــــــا	
How many rooms are available? Total 48 Rooms		
Total 40 Noons		
How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink f with refrigeration and cooking appliance devices, including a microwave)?	or food prepara	ation along
1 Oute		
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 v	Write "none".	
The hotel is sharing the same building with Bering Sea Bar & Grill which is connected by a har restaurant owned by the same owners, the dining facility is available to patrons of the hotel, food service from the restaurant available for order in the bar		g room and e hotel bar has
2.7 If additional amenities are available to your guests through your establishment (eg: guided tours guests, other activities that attract tourists), please describe them. If they are not offered, please wri	or trips, rental te "none".	equipment for
None		





315 W FRONT ST.

Deck Nome Nugget Inn Lobby Nome Nugget Inn

Nome Nugget Inn



TOURISM

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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:	JPS Enterprises, Inc.	License #:	5334			
License Type:	Beverage Dispensary - Tourism					
Doing Business As:	Nome Nugget Inn					
Premises Address:	315 Front Street					
Local Governing Body:	City of Nome					
Community Council:	None					

Mailing Address:	PO Box 1305				
City:	Nome	State:	Alaska	ZIP:	99762

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:	Jason Song	Contact Phone:	907 304 3351
Contact Email:	mhsong@email.com		

Optional: If you wish for AMCO staff to communicate with an individual who is <u>not a licensee</u> 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:	Conner Thomas	Contact Phone:	907 443 5226
Contact Email:	conner@nome.law		



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 #:	10104019	
The state of the s		

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 <u>corporation</u>, the following information must be completed for each <u>shareholder who owns 10% or more</u> of the stock in the corporation, and for each <u>president</u>, <u>vice-president</u>, <u>secretary</u>, and <u>managing officer</u>.
- 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 <u>partnership</u>, including a limited partnership, the following information must be completed for each <u>partner</u> with an interest of 10% or more, and for each <u>general partner</u>.

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 percessary.

Name of Official:	Sunny Kim Song					
Title(s):	President	Phone:	907 304 3353	% Owr	ned:	40
Mailing Address:	PO Box 1305					
City:	Nome	State:	Alaska	ZIP:	997	'62

Name of Official:	Peter Sangbeom Lee					
Title(s):	Vice President	Phone:	213 300 5900	% Ow	ned:	30
Mailing Address:	PO Box 1812					
City:	Nome	State:	Alaska	ZIP:	997	62

Name of Official:	Jason Moohyuk Song					
Title(s):	Secretary	Phone:	907 304 3351	% Ow	ned:	30
Mailing Address:	PO Box 1305					
City:	Nome	State:	Alaska	ZIP:	997	62



Alaska Alcoholic Beverage Control Board

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:

inis malvidual is an:	applicant	affiliate (spouse	e)				
Name:				Contact Phone:			***************************************
Mailing Address:		7		1	L		
City:			State:		ZIP:		
Email:			-L			J	
This individual is an:	applicant	affiliate (spouse))			···	
Name:				Contact Phone:			
Mailing Address:					West Alexander	*****	
City:			State:		ZIP:	<u> </u>	
Email:		-	I.		***************************************	J	
Read the line below, and the I certify that all licensees, age have completed an alcohol se course completion cards on the	n sign your initia ints, and employ erver education on the licensed pren	yees who sell or serve course approved by th	ght of the sta alcoholic bevo e ABC Board g hours, as se	tement: erages or check identificati and keep current, valid cop et forth in AS 04.21.025 and	aine of ale	_* `	Initials
Check a single box for each ca	lendar year tha	t best describes how t	his liquor lice	nse was operated:		2018	2019
The license was regularly oper							
The license was regularly opera						X	X
The license was only operated If this box is checked, a comple documentation must be provided.	rte copy of I-orm	1 AB-30: Proof of Minir	240 total hou num Operatio	ers each calendar year. On Checklist, and all necesse	ary		
The license was not operated a each year, during one or both of this box is checked, a comple be submitted with this applicate minimum requirement, unless of	n the calendar y te copy of Form tion for each cale	years. 1 AB-29: Waiver of Ope Jendar vear during whi	ration Applica	ation and corresponding fe	es must		

[Form AB-17d] (rev 09/17/2019) License # 5334 DBA Nome Nugget Inn AMICO

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Alaska Alcoholic Beverage Control Board

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 long 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	t/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 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 premise 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.	25,
I certify on behalf of myself or of the organized entity that I understand that providing a false statement on this f any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any licens	orm or se 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.	95
As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar wi 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and correctly provide all information required by the Alcoholic Beverage Control Board or AMCO staff in support of this application that failure to do so by any deadline given to me by AMCO staff will result in this application being returned to me Signature of licensee Signature of Notary Public in and for the State of Motary Public i	omplete. I agree to tion and understand gas incomplete.
My commission expires:	20 <u>20</u>
Yes No Seasonal License? If "Yes", write your six-month operating period:	
License Fee: \$ 2500.00 Application Fee: \$ 300.00 TOTAL:	\$ 2,800.00
Miscellaneous Fees:	\$ 500.00
GRAND TOTAL (if different than TOTAL):	\$ 3,300.00



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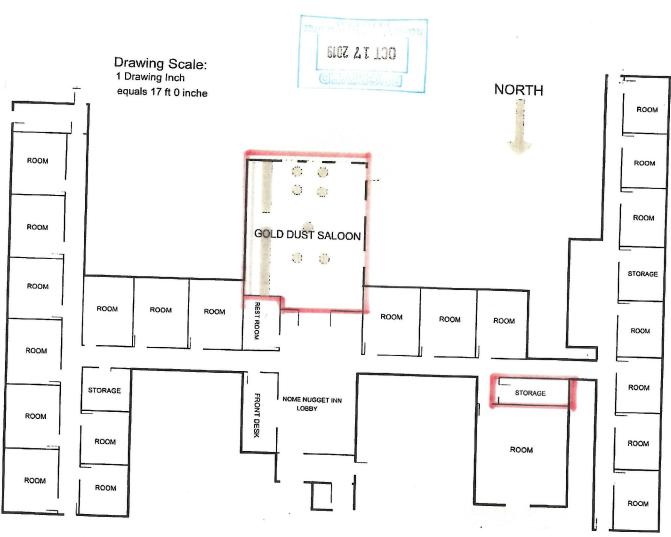
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None		





315 W FRONT ST.

Deck Nome Nugget Inn Lobby Nome Nugget Inn

Nome Nugget Inn