MEMORANDUM

TO: Alcoholic Beverage Control Board

DATE: December 24, 2020

FROM: Glen Klinkhart, Interim Director

RE: 383 Fairview Inn

Requested Action: Review the facts and provide guidance to staff in accordance with statutes and regulations.

Statutory & Regulatory Authority:

AS 04.11.510(b)(1) “if an application is denied, the notice of denial shall be furnished the applicant immediately in writing stating the reason for the denial in clear and concise language; the notice of denial must inform the applicant that the applicant is entitled to an informal conference with either the director or the board, and that, if not satisfied by the informal conference, the applicant is then entitled to a formal hearing conducted by the office of administrative hearings (AS 44.64.010); if the applicant requests a formal hearing, the office of administrative hearings shall adhere to AS 44.62.330 – 44.62.630 (Administrative Procedure Act); all interested persons may be heard at the hearing and unless waived by the applicant and the board, the formal hearing shall be held in the area for which the application is requested”

3 AAC 304.145(h) “The board may uphold a protest of an application or continued operation with a single abeyance period not to exceed 180 days if the local governing body indicates that the protest is subject to rescission and that it will be withdrawn if the applicant meets conditions set by the local governing body. If the local governing body notifies the board within the period of the abeyance that the protest has been removed, the application or continued operation is approved when all other applicable requirements have been met. If the local governing body has not notified the board within the period of the abeyance that it has removed the protest, the application or continued operation is denied. The period of abeyance may not be extended or renewed.”

Background:
At the March 31 – April 1, 2020 ABC Board meeting, the board voted to uphold the Matanuska-Susitna Borough protest for the renewal of this beverage dispensary, pending payment of taxes and debts owed as well as a violation of the Conditional Use Permit. The licensee was given a 180-day abeyance. The Board Action Letter was sent on April 22, 2020 which set the 180-day deadline to October 19, 2020.
On October 23, 2020, staff sent the appropriate denial letter and attached a blank Notice of Defense to the licensee.

On October 27, 2020, staff received the lift of protest by and from the Matanuska-Susitna Borough, a completed Notice of Defense with proof of payment.

Because AMCO received the lift after the deadline, staff decided it would be in everyone’s best interest to ask the Board for guidance on how to proceed in this situation in the event this occurs in the future.

Options: Continue with the denial and hold an informal conference with either the director or the board or a formal hearing with OAH, whichever the applicant chooses, in accordance with AS 04.11.510(b)(1).

Or the Board could instruct staff to accept the protest lift, renew the license and issue the updated license.

Attachment: Notice of Defense (pg 3)
Proof of tax payment (pgs 4-5)
Protest lift by Matanuska-Susitna Borough (pg 6)
AMCO Denial Letter (pgs 7-8)
Board Action Letter (pg 9)
2020/2021 Renewal Application (10-13)
ALASKA DEPARTMENT OF COMMERCE, COMMUNITY, AND
ECONOMIC DEVELOPMENT
ALCOHOL AND MARIJUANA CONTROL OFFICE

In the matter of:  

Denali Fairview Inn, Inc.  
PO Box 1106  
Talkeetna, AK 99676  

Respondent  

License 383 DBA Fairview Inn

NOTICE OF DEFENSE / REQUEST FOR HEARING

The Respondent, pursuant to AS 44.62.390, hereby gives Notice of Defense in this proceeding. A hearing on the matters set forth in the Decision is hereby requested.

I. Respondent Initiating Request

Date: 10/24/20  Respondent’s Name (printed): Phillip Paul Weidner

Respondent’s Signature: Phillip Paul Weidner

Mailing Address: 943 W 6th Ave, Suite 300

Anchorage  
AK  
99501

City  
State  
Zip Code

Phone Number: 907-276-1200 or 907-306-3320

OR

II: Attorney Representing Respondent  (Note: An attorney is not required for this proceeding.)

Name of Attorney Representing Respondent: 

Mailing Address: 

City  
State  
Zip Code

Phone Number: 

Date:  

Signature: 

NOTE: This Notice of Defense/Request for Hearing must be signed by or on behalf of Respondent, must set forth Respondent’s current mailing address, and must be filed within 15 days after the enclosed Decision was mailed or delivered to the Respondent (time period held in abeyance for informal conference). It shall be filed accordingly:

Administrative Officer
Department of Commerce, Community, and Economic Development
Alcohol and Marijuana Control Office
550 West 7th Ave, Suite 1600
Anchorage, AK 99501
Step 3: Confirmation and Receipt

Result: Payment Authorized
Confirmation Number: 83296714

Your payment has been authorized successfully and payment will be processed.

Matanuska-Susitna Borough Thanks You For Your Payment. Thank you for using our bill payment services.

Please save or print a copy of this receipt for record keeping purposes.

My Bills

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Real Property Tax payment of $634.64 on Account Number 57000B12L019</td>
<td>$634.64</td>
</tr>
<tr>
<td>Real Property Tax payment of $634.64 on Account Number 57000B12L019</td>
<td>$634.64</td>
</tr>
<tr>
<td>Real Property Tax payment of $4,182.27 on Account Number 57000B12L020-1</td>
<td>$4,182.27</td>
</tr>
</tbody>
</table>

Subtotal: $5,451.55
Convenience Fee: $0.00
Total Payment: $5,451.55

Customer Information

First Name: Philip
Last Name: Weidner
Address Line 1: 943 W 6th Avenue
City: Anchorage
State: Alaska
Zip Code: 99501
Phone Number: 9072761200
Email Address: accounting@weidnerjustice.com

Payment Information

Payment Date: 10/26/2020
Card Type: MasterCard
Card Number: **********8567
Step 3: Confirmation and Receipt

Result: Payment Authorized
Confirmation Number: 83343409

Your payment has been authorized successfully and payment will be processed.

Matanuska-Susitna Borough Thanks You For Your Payment. Thank you for using our bill payment services.

Please save or print a copy of this receipt for record keeping purposes.

My Bills

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Real Property Tax payment of $273.03 on Account Number 57000B12L018</td>
<td>$273.03</td>
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<tr>
<td>Real Property Tax payment of $326.74 on Account Number 57000B12L019</td>
<td>$326.74</td>
</tr>
<tr>
<td>Real Property Tax payment of $1,758.08 on Account Number 57000B12L020-1</td>
<td>$1,758.08</td>
</tr>
</tbody>
</table>

Subtotal: $2,357.85
Convenience Fee: $0.00
Total Payment: $2,357.85

Customer Information

First Name: PHILLIP
Last Name: WEIDNER
Address Line 1: 943 W 6th Avenue
Address Line 2: Suite 300
City: Anchorage
State: Alaska
Zip Code: 99501
Phone Number: 9072761200
Email Address: accounting@weidnerjustice.com

Payment Information

Payment Date: 10/27/2020
Card Type: MasterCard
Card Number: **********8567
October 27, 2020

Alcohol & Marijuana Control Office
550 W. 7th Avenue, Suite 1600
Anchorage, AK  99501

SUBJECT:  Fairview Inn; License #383
101 Main St
Renewal – Beverage Dispensary

Please be advised that the Matanuska-Susitna Borough hereby rescinds its protest against the beverage dispensary at the above address. All debts paid and CUP violations resolved by 10/27/2020. Should you have any questions or require additional information please contact me at the above address or phone 861-8608.

Sincerely,

Adam Bradway, Planner II
Development Services Division
Matanuska-Susitna Borough

cc: applicant
October 23, 2020

Denali Fairview Inn, Inc.
PO Box 1106
Talkeetna, AK 99676
VIA email: phillippaulw@gmail.com
fairviewinn@live.com

Re: Renewal of Beverage Dispensary License #383

Dear Phillip Weidner:

On April 22, 2020 you received a Board Action from the Alcoholic Beverage Control Board with the following information:

At the April 1, 2020, meeting of the Alcoholic Beverage Control Board in Anchorage, Alaska, the board upheld the protest of the license renewal application by the Matanuska-Susitna Borough, and denied the application with a 180-day abeyance. This means that the Matanuska-Susitna Borough must withdraw its protest of your license application by October 19, 2020; otherwise the application is denied. The borough protested the renewal application pending payment of taxes and/or debts owed in addition to a violation of the Condition Use Permit.

To date, the Matanuska-Susitna Borough has not withdrawn its protest. Therefore, your application for renewal of your license is denied under 3 AAC 304.145(h).

To contest this denial, you have the right to an informal conference with the director or the Board under AS 04.11.510(b)(1), which you may initiate in writing within 15 days of receiving this letter. You also have the right to forego an informal conference and proceed directly to hearing. As such, please consider this letter as a Statement of Issues as required by AS 44.62.370. If you intend to request a formal hearing, you must notify AMCO in writing, within 15 days of receiving this notice. If you request an informal conference, the 15 days to request a formal hearing will be paused until the informal conference is held. A Notice of Defense form is enclosed for this purpose; however, you may submit any written notice that meets the requirements of AS 44.62.390.

Your Notice of Defense must be sent to:

Administrative Officer
Failure to request an informal conference or to request a hearing waives your right to further appeal.

You may contact the office with any questions or to request additional information. However, we cannot provide you with any legal advice.

Respectfully,

Carrie Craig
Records and Licensing Supervisor
April 22, 2020

Denali Fairview Inn, Inc.
PO Box 1109
Talkeetna, AK 99679

Re: Fairview Inn #383

Dear Licensee:

At the April 1, 2020, meeting of the Alcoholic Beverage Control Board in Anchorage, Alaska, the board upheld the protest of the license renewal application by the Matanuska-Susitna Borough, and denied the application with a 180-day abeyance. This means that the Matanuska-Susitna Borough must withdraw its protest of your license application by October 19, 2020; otherwise the application is denied. The borough protested the renewal application pending payment of taxes and/or debts owed in addition to a violation of the Condition Use Permit.

If the protest is lifted by the deadline, your license application is approved with delegation, meaning the it can be effectuated as soon as all outstanding approvals are received.

Please contact alcohol.licensing@alaska.gov with any questions.

Sincerely,

Carrie Craig
Records and Licensing Supervisor

For
Glen Klinkhart,
Interim Director

cc: License File
    Matanuska-Susitna Borough
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.

<table>
<thead>
<tr>
<th>Licensee:</th>
<th>Denali Fairview Inn, Inc.</th>
<th>License #:</th>
<th>383</th>
</tr>
</thead>
<tbody>
<tr>
<td>License Type:</td>
<td>Beverage Dispensary</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doing Business As:</td>
<td>Fairview Inn</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Premises Address:</td>
<td>101 Main St</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Governing Body:</td>
<td>Matanuska-Susitna Borough</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Council:</td>
<td>Talkeetna</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Mailing Address: | PO Box 1109 |
| City: | Talkeetna | State: | Ak | ZIP: | 99676 |

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: | Phillip Paul Weidner |
| Contact Email: | phillippaulweidner@gmail.com |
| Contact Phone: | 907-276-1200 |

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: | Marne Gundersickle |
| Contact Email: | fairviewinn@live.com |
| Contact Phone: | 907-841-6209 |
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 #: 6232410

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

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: Phillip Paul Weidner
Title(s): President, Vice-President, Shareholder
Mailing Address: 943 W 6th Ave ste 300, Anchorage, AK 99501
City: Anchorage
State: AK
Phone: 907-306-3326
% Owned: 100
ZIP: 99501

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

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

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

[Form AB-17] (rev 09/17/2019) License # 353 DBA Fairview Inn

AMCO
DEC 19 2019
### 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.

<table>
<thead>
<tr>
<th>This individual is an:</th>
<th>applicant</th>
<th>affiliate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
<td>ZIP:</td>
</tr>
<tr>
<td>Email:</td>
<td></td>
<td></td>
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<tr>
<td>City:</td>
<td>State:</td>
<td>ZIP:</td>
</tr>
<tr>
<td>Email:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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:

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.

![Initials]

### Section 5 – License Operation

Check a single box for each calendar year that best describes how this liquor license was operated:

- [ ] The license was regularly operated continuously throughout each year.
- [x] 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-17] (rev 09/17/2019)

License # 383 DBA Fairview Inn

[Signature]

DEC 19, 2019
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:

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

Printed name of licensee

My commission expires: Aug 24, 2020

Subscribed and sworn to before me this 10th day of December 2019

Seasonal License? ☐ Yes ☒ No

If “Yes”, write your six-month operating period: ____________________________

<table>
<thead>
<tr>
<th>License Fee:</th>
<th>$ 2500.00</th>
<th>Application Fee: $ 300.00</th>
<th>TOTAL: $ 2800.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Miscellaneous Fees:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GRAND TOTAL (if different than TOTAL):</td>
<td></td>
<td></td>
<td>2,800 -</td>
</tr>
</tbody>
</table>

[Form A9-17] (rev 09/17/2019)
License # 383 DBA Fairview Inn