

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> 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

#### **Tourism Statement Form**

- A new, transfer, or renewal application for a Tourism Site License must be accompanied by this form which
  explains how the establishment satisfies the requirements listed under AS 04.11.400 (d), 3 AAC 304.325.
  - You must <u>provide complete responses to all questions</u> or your application will be returned and will not be scheduled for the next ABC board meeting until the application is deemed complete by AMCO staff.
- All questions must be answered on this form. Do not attach other documents, or they will be returned.
- Do not provide documents and/or statements not requested.

#### Mandatory Points to be Included

1. Explain how issuance of a liquor license at your establishment has/will keep encouraging tourism:

GLACIER SOUND ZAN, INC HAVE BEEN PROMOTE TO ALASKA RESIDENT AND TOUR COMPANY TO BRING IN THEIR TOUR GROUP TO VALDES. I THEY WOULD LIKE TO HAVE MORE ENTERTHINMENT OPTION IN VALDER SUCH AS REFRESHHENT, BETTER FOOD, AND OTHERS TO ENTOY THEIR VISIT IN VALDER.

J. WOULD LIKE TO KEEP PROVIDE THEIR NEEDS,

2. Explain how the facility was or will be improved in accordance with this application: (this includes planned renovations, repairs, updates to the facility/grounds)

GLACIER SOUND DON, ENC. PLANNED TO PAINTING &
REPLACE 20 QUEST BATHROOM AND 2 PUBLIC BATHROOM
RENOVATION IN SPRING OF 2021.



GU	ACIER SOUND ENN, ZNC./OPERATED ITSELF
Do you of	er room rentals to the traveling public? Yes No (if no, skip to question 5)
a. If s	o, how many of these rooms are available?
	40 ROOMS
	any of the rental rooms have kitchen facilities (such as: a separate sink for food preparation and frigeration/cooking appliance devices, including a microwave)? Yes No i. If yes, how many of the rental rooms have kitchen facilities that meet this definition?
	you stock alcoholic beverages in guest rooms? Yes No
Is your fac	ility located within an airport terminal? Yes No
Is your fac Does your Are addition	
Does your Are addition	establishment include a dining facility? Yes No
Does your Are addition	establishment include a dining facility? Yes No

AMCO



Licensee (Owner):

License Type:

Alcohol and Marijuana Control Office
550 W 7<sup>th</sup> Avenue,
Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
https://www.commerce.alaska.gov/web/amco

3523

License #:

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

# Form AB-17: 2021/2022 License Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2020 per AS 04.11.270, 3 AAC 304.160, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.
- Any complete application for renewal or any fees for renewal that have not been postmarked by 02/28/2021 will be expired per AS 04.11.540,3 AAC 304.160(e).
- All fields of this application must be deemed complete by AMCO staff and must be accompanied by the required fees and all documents required, or the application will be returned without being processed, per AS 04.11.270, 3 AAC 304.105

**Establishment Contact Information** 

BEVERAGE DISPENSARY - TOURISM

 Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees in any way that an application will be deemed complete, renewed, or that it will be scheduled for the next ABC Board meeting.

GLACKER SOUND INN, INC

Doing Business As:	GEACIER SOU	ND INN			
Premises Address:	210 EGAN !	DRIVE			100
Local Governing Body					
Community Council:	NONE		9=		S. Francis
f your mailing address h	as changed, write the NEW	address below:			
Mailing Address:	P 0 Box 510	D			
City:	VACDEZ	State:	AK	ZIP:	99686
nust be listed on CBPL with	dividual listed below must be li the same name and title. nated point of contact regardin				of your entity and
		g this license, unless t	the Optional contact is c	ompleted.	
Contact Licensee:	MYUNG H U		Contact Phone:	(206).	434-84-01
Contact Email:	glaciersounding	@ yahoo. Co	оМ		- 2
Optional: If you wish for AMC	O staff to communicate with <b>anyo</b>	ne other than the Cont	act Licensee about your lic	cense, list the	m below:
Name of Contact:		-	Contact Phone:		
Contact Email:					
Name of Contact:			Contact Phone:		
Name of Contact: Contact Email:			Contact Phone:		
			Contact Phone:		



#### Alaska Alcoholic Beverage Control Board

# Form AB-17: 2021/2022 License Renewal Application

#### Section 2 – Entity or Community Ownership Information

#### Sole Proprietors should skip this Section.

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #. https://www.commerce.alaska.gov/cbp/main/search/entities

Alaska CBPL Entity #:	55034 D
-----------------------	---------

**READ BEFORE PROCEEDING:** Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

#### DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.

- Corporations of any type including non-profit must list ONLY the following:
  - o All shareholders who own 10% or more stock in the corporation
  - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- . Limited Liability Corporations, of any type must list ONLY the following:
  - o All Members with an ownership interest of 10% or more
  - o All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
  - o Each Partner with an interest of 10% or more
  - All General Partners regardless of percentage owned

<u>Important Note</u>: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. <u>If more space is needed: attach additional completed copies of this page.</u> Additional information not on this page will be rejected.

Title(s):	MYUNG H W	Phone:	(206) 434-8401	% Owr	ned:	50 %
Mailing Address:	p o Box 570	>				
City:	VALDEZ	State:	AK	ZIP:	99	686

Name of Official:	JIN H	WON				
Title(s):	SECRETARY	/TREASURER	Phone:	(907) 835-4485	% Owned:	50%
Mailing Address:						
City:			State:	and the second	ZIP:	

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

AMCO



#### Alaska Alcoholic Beverage Control Board

# Form AB-17: 2021/2022 License Renewal Application

#### Section 3 - Sole Proprietor Ownership Information

#### Corporations, LLC's and Partnerships of ALL kinds should skip this section.

READ BEFORE PROCEEDING: Any new or changes to the ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI approved cardstock, AB-08a's, payment of \$48.25 for each new owner or officer and a date stamped copy of the CBPL change per AS 04.11.045, or a Notice of Violation will be issued to your establishment and your application will be returned.

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, phone number, and mailing address for each owner or partner whose information we require. If more space is needed, attach additional copies of this page. Additional owners not listed on this page will be rejected. This individual is an: Applicant Affiliate Name: Contact Phone: Mailing Address: City: ZIP: State: Email: This individual is an: Applicant Affiliate Name: Contact Phone: Mailing Address: City: State: ZIP: Email: Section 4 - License Operation Check ONE BOX for EACH CALENDAR YEAR that best describes how this liquor license was operated: 2019 2020 The license was regularly operated continuously throughout each year. (Year-round) The license was only operated during a specific season each year. (Seasonal) If your operation dates have changed, list them below: to SEPTEMBER 30TH 155 3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year. A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form. 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 calendaryears. <u>A complete Form AB-29: Waiver of Operation Application</u> and corresponding fees must be submitted with this application for each calendar year during which the license was not operated. If you have not met the minimum number of hours of operation in 2020, you are not required to pay the fees, however a complete AB-29 is required with Section 2 marked "OTHER" and COVID is listed as the reason. Section 5 - Violations and Convictions Yes No Have ANY Notices of Violation been issued for this license OR has ANY person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2019 or 2020? If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)

If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.

AMCO



#### Alaska Alcoholic Beverage Control Board

# Form AB-17: 2021/2022 License Renewal Application

#### Section 6 - Certifications

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, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by 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 and potentially expired if I do not comply with statutory or regulatory requirements.
- 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 this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity officials and stakeholders are current and accurately listed, and I have provided AMCO with all required changes of Shareholders (10% or more), Managers, Corporate Officers/Board of Directors, Partners, Controlling Interest or Ownership of the business license, and have provided all required documents for any new or changes in officers.
- I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons 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, if applicable for this license type as set forth in AS 04.21.025 and 3 AAC 304.465.
- 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 from what is currently approved and on file with the Alcoholic Beverage Control

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. NOTARY PUBLIC

Signature of licensee

O. NORDGAARDEN STATE OF ALASKA Y COMMISSION EXPIRES September 16, 2024

Signature of Notary Public

Notary Public in and for the State of:

Printed name of licensee

Subscribed and sworn to before me this

d for the State of:

My commission expires:

2 day of December

Restaurant/Eating Place applications must include a completed AB-33: Restaurant Receipts Affidavit Recreational Site applications must include a completed Recreational Site Statement Tourism applications must include a completed Tourism Statement Wholesale applications must include a completed AB-25: Supplier Certification

All renewal and supplemental forms are available online

Any application that is not complete or does not include ALL required completed forms and fees will not be processed and will be returned per AS 04.11.270, 3 AAC 304.105.

#### FOR OFFICE USE ONLY

License Fee:	\$ 1,250.00	Application Fee:	\$ 300.00	Misc. Fee:	\$ 0
	The Grand	Total Fees Due:			\$ 1,55000



# Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West Seventh Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

April 13, 2021

Glacier Sound Inn Inc. DBA: Glacier Sound Inn

Via Email: glaciersoundinn@yahoo.com

Re: Beverage Dispensary - Tourism - Seasonal License #3523 DBA: Glacier Sound Inn

#### Dear Applicant:

I have received your application for renewal of your liquor license. Our staff has reviewed your application after receiving your application and required fees. Your renewal documents appear to be in order, and I have determined that your application is complete for purposes of AS 04.11.510, and AS 04.11.520.

Your application is now considered complete and will be sent electronically to your local governing body, your community council if your proposed premises is in Anchorage or certain locations in the Matanuska-Susitna Borough, and to any non-profit agencies who have requested notification of applications. The local governing body will have 60 days to protest the renewal of your license or waive protest.

Your application will be scheduled for the *April 2021* board meeting for Alcoholic Beverage Control Board consideration. The address and call-in number for the meeting will be posted on our home page. The board will not grant or deny your application at the meeting unless your local government waives its right to protest per AS 04.11.480(a).

Please feel free to contact us through the <u>alcohol.licensing@alaska.gov</u> email address if you have any questions.

Sincerely,

Olivia Frank

Occupational Licensing Examiner



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> 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:				License Number:			
License Type:							
Examiner:				Transaction #:			
Document	Received	Completed	Notes				
AB-17: Renewal Applic	ation						
App and License Fees							
Supplemental Docume	ent Received	Completed	Notes				
Tourism/Rec Site State	ment						
AB-25: Supplier Cert (V	VS)						
AB-29: Waiver of Oper	ation						
AB-30: Minimum Oper	ation						
AB-33: Restaurant Affic	davit						
COI / COC / 5 Star							
FP Cards & Fees / AB-0	8a						
Late Fee							
Names on FP Cards:							
					Yes	No	
Selling alcohol in respo	nse to written order (p	ackage stores)?					
Mailing address and co	ntact information diffe	rent than in datab	ase (if yes, upda	ate database)?			
In "Good Standing" wit	th CBPL (skip this and ne	ext question for so	le proprietor)?				
Officers and stockholde	ers match CBPL and dat	abase (if "No", de	termine if trans	fer necessary)?			
LGB 1 Response:		LGB 2 Res	sponse:				
Waive	Protest Lapse	d Wa	ive Pro	otest Lapsed			

# 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)

Туре	Name
Legal Name	GLACIER SOUND INN, INC.

**Entity Type:** Business Corporation

**Entity #**: 55034D

Status: Good Standing

**AK Formed Date**: 12/14/1994

**Duration/Expiration:** Perpetual

**Home State:** ALASKA

**Next Biennial Report Due: 1/2/2022** 

Entity Mailing Address: PO BOX 570, VALDEZ, AK 99686

Entity Physical Address: 210 EGAN DRIVE, VALDEZ, AK 99686

# **Registered Agent**

Agent Name: Myung H Won

Registered Mailing Address: BOX 570, VALDEZ, AK 99686

Registered Physical Address: 210 EGAN DR, VALDEZ, AK 99686

### **Officials**

□Show Former

AK Entity #	Name	Titles	Owned
	Jin H Won	Secretary, Shareholder, Treasurer, Director	50.00
	Myung H Won	President, Shareholder, Director	50.00

1 of 2 1/8/2021, 7:57 AM

# **Filed Documents**

Date Filed	Туре	Filing	Certificate
12/14/1994	Creation Filing	Click to View	
9/18/1996	Biennial Report	Click to View	
9/11/1998	Biennial Report	Click to View	
1/04/2001	Biennial Report	Click to View	
12/02/2002	Biennial Report	Click to View	
4/04/2003	Change of Officials	Click to View	
7/06/2004	Biennial Report	Click to View	
4/30/2007	Admin Dissolution	Click to View	Click to View
6/20/2007	Biennial Report	Click to View	Click to View
6/10/2011	Biennial Report	Click to View	
6/10/2011	Biennial Report	Click to View	
6/10/2013	Admin Dissolution		Click to View
7/25/2014	Biennial Report	Click to View	
7/25/2014	Biennial Report	Click to View	
7/25/2014	Reinstatement	Click to View	Click to View
5/28/2016	Biennial Report	Click to View	
6/15/2018	Admin Dissolution		Click to View
11/29/2018	Biennial Report	Click to View	
11/29/2018	Agent Change	Click to View	
11/29/2018	Reinstatement		Click to View
4/26/2020	Biennial Report	Click to View	

 ${\tt COPYRIGHT} @ {\tt STATE} \ OF \ {\tt ALASKA} \cdot \underline{{\tt DEPARTMENT}} \ OF \ {\tt COMMERCE}, \ \underline{{\tt COMMUNITY}}, \ \underline{{\tt AND}} \ \underline{{\tt ECONOMIC}} \ \underline{{\tt DEVELOPMENT}} \cdot \underline{{\tt NOMIC}} \ \underline{{\tt NOMIC$ 

2 of 2

#### Alaska Department of Commerce, Community, and Economic Development

Division of Corporations, Business, and Professional Licensing PO Box 110806, Juneau, AK 99811-0806

This is to certify that

## **GLACIER SOUND INN**

PO BOX 570, VALDEZ, AK 99686

owned by

**GLACIER SOUND INN INC** 

is licensed by the department to conduct business for the period

December 30, 2020 to December 31, 2022 for the following line(s) of business:

72 - Accommodation and Food Services



This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State or of the United States.

This license must be posted in a conspicuous place at the business location. It is not transferable or assignable.

Julie Anderson Commissioner