Date: November 1st, 2021

From: Breakwater Inn

To: Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501

RE: Tourism Statement Guidelines

To the Alaska Alcoholic Beverage Control Board;

Please see the following statement for response to the Tourism Statement Guidelines (rev10/30/2017)

1) Issuance of a liquor license at our establishment has/will encourage tourism by allowing visitors to branch out further from the downtown port area to farther reaches of the downtown area, providing views of our harbors, having a themed/scenic lodging, and easy access to the downtown tourism industry.

2) The facility was/will be constructed or improved by having an antique ship themed interior decor, scenic views overlooking Aurora Harbor and on site bar/restaurant/lounge for out of town guests.

3) The owners operate the facility for which the liquor license is being applied.

4) We do offer room rentals to the traveling public.
   a) We have 49 rooms available, of which 30 are available with kitchenettes. We do not stock alcoholic beverages in the guest rooms.
   b) Our facility is not located within an airport terminal.

5) Our establishment does include a dining facility.

6) Additional amenities are leaflets, brochures, booklets and handouts of local trips, tours, and other tourist activities in each room and in the lobby.
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 accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

This document must be completed and submitted to AMCO’s main office before any tourism license application will be reviewed.

Section 1 – Establishment Information

Enter information for the business seeking to have its license renewed.

<table>
<thead>
<tr>
<th>Doing Business As:</th>
<th>Breakwater Inn Restaurant &amp; Lounge</th>
<th>License #:</th>
<th>125</th>
</tr>
</thead>
<tbody>
<tr>
<td>License Type:</td>
<td>Beverage Dispensary - Tourism</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Section 2 – Tourism Statement

2.1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.

please see attached statements

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.11.400(d)(1):

Please see attached statements.

2.3 Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located?

YES [ ] NO [x]

2.4 If “no” who operates the tourism facility?

[ ]

[Tourism Statement] (rev 9/22/2021)
2.5 Do you offer room rentals to the traveling public?

If “yes” answer the following questions:

How many rooms are available?

49 Rooms

How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)?

30 Rooms are Kitchenettes

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 write “none”.

dining Facility serve American and Korean Food

2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists), please describe them. If they are not offered, please write “none”.

leaflets, brochures, booklets and hand out of local trips, tours, and other activities.
STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

FORM CONTROL

XXXX

LIQUOR LICENSE
2022 - 2023
TEMPORARY

LICENSE NUMBER
175

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2023 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

ADDRESS: Breakwater Inn Restaurant
1711 Glacier Avenue

CITY / BOROUGH: Juneau

LICENSE FEE: $2,500.00

ISSUED 11/30/2021
ABC BOARD

TYPE OF LICENSE: Beverage Dispens

Mail Address:
CNH Holding, LLC
1711 Glacier Ave
Juneau, AK 99801

04-900 (REV 7/21)

DIRECTOR

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

FORM CONTROL

XXXX

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2022 - 2023
TEMPORARY

LICENSE NUMBER
175

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LICENSE FEE: $2,500.00

ISSUED 11/30/2021
ABC BOARD

TYPE OF LICENSE: Beverage Dispens

Mail Address:
CNH Holding, LLC
1711 Glacier Ave
Juneau, AK 99801

04-900 (REV 7/21)

DIRECTOR

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES
Alaska Alcoholic Beverage Control Board

Form AB-17: 2022/2023 General Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2021 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 02/28/2022 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
- 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.

**Establishment Contact Information**

<table>
<thead>
<tr>
<th>Licensee (Owner):</th>
<th>Hyun a Chi-mott</th>
<th>License #:</th>
<th>175</th>
</tr>
</thead>
<tbody>
<tr>
<td>License Type:</td>
<td>Beverage Dispensary - Tourism</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doing Business As:</td>
<td>Breakwater Inn Restaurant &amp; Lounge</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Premises Address:</td>
<td>1711 Glacier Ave. Juneau, AK 99801</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Governing Body:</td>
<td>City and Borough of Juneau.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Council:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If your mailing address has changed, write the NEW address below:

<table>
<thead>
<tr>
<th>Mailing Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>City:</td>
</tr>
</tbody>
</table>

**Section 1 – Licensee Contact Information**

Contact Licensee: The individual listed below must be listed in Section 2 or 3 as an Official/Owner/Shareholder of your entity and must be listed on CBPL with the same name and title.

This person will be the designated point of contact regarding this license, unless the Optional contact is completed.

<table>
<thead>
<tr>
<th>Contact Licensee:</th>
<th>Hyun a Chi-mott</th>
<th>Contact Phone:</th>
<th>907-586-6303</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Email:</td>
<td><a href="mailto:info@breakwaterinn.com">info@breakwaterinn.com</a></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Optional: If you wish for AMCO staff to communicate with anyone other than the Contact Licensee about your license, list them below:

<table>
<thead>
<tr>
<th>Name of Contact:</th>
<th>James Hargett</th>
<th>Contact Phone:</th>
<th>907-586-6303</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Email:</td>
<td><a href="mailto:manager@breakwaterinn.com">manager@breakwaterinn.com</a></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Contact:</th>
<th>Contact Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Email:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Contact:</th>
<th>Contact Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Email:</td>
<td></td>
</tr>
</tbody>
</table>

[Form AB-17] (rev09/21/2021)
## 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](https://www.commerce.alaska.gov/cbp/main/search/entities)

<table>
<thead>
<tr>
<th>Alaska CBPL Entity #</th>
<th>100274-71</th>
</tr>
</thead>
</table>

**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:
  - All shareholders who own 10% or more stock in the corporation
  - Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned

- **Limited Liability Corporations**, of **any** type must list ONLY the following:
  - All Members with an ownership interest of 10% or more
  - All Managers (of the LLC, not the DBA) regardless of percentage owned

- **Partnerships** of **any** type, **including Limited Partnerships** must list ONLY the following:
  - Each Partner with an interest of 10% or more
  - All General Partners regardless of percentage owned

**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, 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. If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Hyun O Chimoit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title(s)</td>
<td>Member, Owner</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>1711 Glacier Ave</td>
</tr>
<tr>
<td>City</td>
<td>Juneau</td>
</tr>
<tr>
<td>Phone</td>
<td>907-586-5303</td>
</tr>
<tr>
<td>% Owned</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>James Hargett</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title(s)</td>
<td>Manager</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>1711 Glacier Ave</td>
</tr>
<tr>
<td>City</td>
<td>Juneau</td>
</tr>
<tr>
<td>Phone</td>
<td>907-586-5303</td>
</tr>
<tr>
<td>% Owned</td>
<td>0</td>
</tr>
</tbody>
</table>

**Name of Official:**

<table>
<thead>
<tr>
<th>Name of Official</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Title(s)</td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td></td>
</tr>
<tr>
<td>Phone</td>
<td></td>
</tr>
<tr>
<td>% Owned</td>
<td></td>
</tr>
</tbody>
</table>

**AMCO**

[Form AB-17] (rev09/21/2021)
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: State: ZIP:

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:

1. The license was regularly operated continuously throughout each year. (Year-round)
   - 2020 [ ] 2021 [ ]

2. The license was only operated during a specific season each year. (Seasonal)
   If your operation dates have changed, list them below:

   ________________________________________________

   ________________________________________________

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.
   - 2020 [ ] 2021 [ ]

4. 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 calendar years. A complete 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.
   - 2020 [ ] 2021 [ ]

If you have not met the minimum number of hours of operation in 2020 and/or 2021, 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

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 2020 or 2021?

Yes [ ] No [ ]

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

[Form AB-17] (rev09/21/2021)  

Page 3 of 4
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 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.

Signature of licensee

Printed name of licensee

Signature of Notary Public

Notary Public Seal

Printed seal for the State of: Alaska

My commission expires: Jan 22, 2022

Subscribed and sworn to before me this 1 day of Nov., 2021.

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
Common Carrier applications must include a current safety inspection certificate

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

<table>
<thead>
<tr>
<th>License Fee:</th>
<th>$ 2,500</th>
<th>Application Fee:</th>
<th>$ 300.00</th>
<th>Misc. Fee:</th>
<th>$ 2,800</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Fees Due:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 2,800</td>
</tr>
</tbody>
</table>

[Form AB-17] (rev09/21/2021)
Department of Commerce, Community, and Economic Development  
CORPORATIONS, BUSINESS & PROFESSIONAL LICENSING


ENTITY DETAILS

Name(s)

<table>
<thead>
<tr>
<th>Type</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Name</td>
<td>CNH HOLDING LLC</td>
</tr>
</tbody>
</table>

**Entity Type:** Limited Liability Company

**Entity #:** 10027477

**Status:** Good Standing

**AK Formed Date:** 3/2/2015

**Duration/Expiration:** Perpetual

**Home State:** ALASKA

**Next Biennial Report Due:** 1/2/2023

**Entity Mailing Address:** 1711 GLACIER AVE, JUNEAU, AK 99801

**Entity Physical Address:** 1711 GLACIER AVE, JUNEAU, AK 99801

Registered Agent

**Agent Name:** James Hargott

**Registered Mailing Address:** 1711 GLACIER AVE, JUNEAU, AK 99801

**Registered Physical Address:** 1711 GLACIER AVE, JUNEAU, AK 99801

Officials

<table>
<thead>
<tr>
<th>AK Entity #</th>
<th>Name</th>
<th>Titles</th>
<th>Owned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Hyun Chi-Mott</td>
<td>Member</td>
<td>100.00</td>
</tr>
<tr>
<td></td>
<td>James Hargott</td>
<td>Manager</td>
<td></td>
</tr>
</tbody>
</table>
# Filed Documents

<table>
<thead>
<tr>
<th>Date Filed</th>
<th>Type</th>
<th>Filing</th>
<th>Certificate</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/02/2015</td>
<td>Creation Filing</td>
<td>Click to View</td>
<td></td>
</tr>
<tr>
<td>3/22/2015</td>
<td>Initial Report</td>
<td>Click to View</td>
<td></td>
</tr>
<tr>
<td>6/12/2017</td>
<td>Biennial Report</td>
<td>Click to View</td>
<td></td>
</tr>
<tr>
<td>4/10/2019</td>
<td>Biennial Report</td>
<td>Click to View</td>
<td></td>
</tr>
<tr>
<td>4/02/2021</td>
<td>Biennial Report</td>
<td>Click to View</td>
<td></td>
</tr>
</tbody>
</table>
License Details

License #: 1024868

Business Name: BREAKWATER INN RESTAURANT AND LOUNGE

Status: Active

Issue Date: 08/06/2015

Expiration Date: 12/31/2021

Mailing Address: 1711 GLACIER AVE

JUNEAU, AK 99801

Physical Address: 1711 GLACIER AVE

JUNEAU, AK 99801

Owners

CNH HOLDING LLC

Activities

<table>
<thead>
<tr>
<th>Line of Business</th>
<th>NAICS</th>
<th>Professional License #</th>
</tr>
</thead>
<tbody>
<tr>
<td>72 - Accommodation and Food</td>
<td>721110 - HOTELS (EXCEPT CASINO HOTELS)</td>
<td></td>
</tr>
<tr>
<td>Services</td>
<td>AND MOTELS</td>
<td></td>
</tr>
</tbody>
</table>

Endorsements

<table>
<thead>
<tr>
<th>End #</th>
<th>Issue</th>
<th>Renew</th>
<th>Expiration</th>
<th>Action End</th>
<th>Action Note</th>
<th>Address</th>
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<tbody>
<tr>
<td>1</td>
<td>12/17/2019</td>
<td></td>
<td>12/31/2020</td>
<td></td>
<td></td>
<td>1711 Glacier Ave, Juneau, AK 99801-1470</td>
</tr>
</tbody>
</table>

License Lapse(s)

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.