### Breakwater Inn

## **Tourism Statement**

1711 Glacier Avenue Phone: 586-6303 Fax: 463-4820

Date: November 1<sup>st</sup>, 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.

AMCO

NOV 0 4 2021

Updated: 11/23/2010



**Tourism Statement** 

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

# 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 Inform	nation	
nter information for the bu	isiness seeking to have its license renewed.		
Doing Business As:	Breakwater Inn Rostaurant &	Lourge License #:	175
License Type:	Beverage Dispensary - Tourism	n	
	Section 2 – Tourism Stateme	ent	
1. Explain how issuance of	f a liquor license at your establishment has/will encourage	tourism.	
Please See	attached statements		
	was/will be constructed or improved as required by AS 04.	11.400(d)(1):	
3 Does the licensee or app tourism facility in which	olicant for this liquor license also operate the name that the name is located?	YES	NO
4 If "no" who operates the	e tourism facility?		

[Tourism Statement] (rev 9/22/2021)

Page 1 of 2



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**

2.5 Do you offer room rentals to the traveling public?	YES	NO		
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 with refrigeration and cooking appliance devices, including a microwave)?	r food preparati	ion along		
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 w	rite "none".			
dining Facility Serve American and Korean		,		
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.				
leaflets, brochures, booklets and hand out of tours, and other activities.		• • •		

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED 11/30/2021 ABC BOARD **LIQUOR LICENSE 2022 - 2023** 

**TEMPORARY** 

175

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

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$2,500.00

1106

D/B/A: Breakwater Inn Restaurant

1711 Glacier Avenue

Mail Address:

CNH Holding, LLC 1711 Glacier Ave Juneau, AK 99801 CITY / BOROUGH:

Juneau

Juneau

This license cannot be transferred without permission of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

DIRECTOR

04-900 (REV 7/21)

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

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED 11/30/2021 ABC BOARD LIQUOR LICENSE

2022 - 2023

175

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

**TEMPORAR** 

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Disper

LICENSE FEE: \$2,500.00

CITY / BOROUGH: Juneau

Juneau

This license cannot be transferred without permission of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

**COPY** 

DIRECTOR

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

04-900 (REV 7/21)

D/B/A:

Breakwater Inn Restaurant & Lounge 1711 Glacier Avenue

Mailing Address:

CNH Holding, LLC 1711 Glacier Ave Juneau, AK 99801



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

# Form AB-17: 2022/2023 General Renewal Application

<ul> <li>AS 04.11.270, 3 AAC 302</li> <li>Any complete application 04.11.540,3 AAC 304.16</li> <li>All fields of this applicating required, or the applicating Receipt and/or processing</li> </ul>	ired supplemental forms must be comp 4.160, with all required fees paid in full, on for renewal or any fees for renewal th 0(e). cion must be deemed complete by AMC tion will be returned without being proon ng of renewal payments by AMCO staff n enewed, or that it will be scheduled for the	or a non-refunda at have not bee O staff and mus cessed, per AS O either indicates	able \$500.00 late fee applien postmarked by 02/28/20 t be accompanied by the result 1.11.270, 3 AAC 304.105 nor guarantees in any way	es. 22 will be expired per A equired fees and all doo	S
Holding LLC	Establishment (	Contact I	nformation		
Licensee (Owner):	Hyun o Ct	:- mott	CNHHOlding LL Lic	ense #: 175	5
License Type:	Beverage Dis		, and a second s		
Doing Business As:	Breakwater 1			ounge	
Premises Address:	1711 Glacier Ave				
Local Governing Body:	City and Boroug	th of Ji	uneau.		
Community Council:	U				
If your mailing address ha	s changed, write the NEW addre	ess below:			
Mailing Address:	(				
City:		State:		ZIP:	
must be listed on CBPL with th	Section 1 – Licensed ividual listed below must be listed in the same name and title. The same of contact regarding this listed point of contact regarding this listed point of contact regarding this listed.	Section 2 or 3	B as an Official/Owner/S		itity and
Contact Licensee:	Hyun och:-mott		Contact Phone:	907-586-	6303
Contact Email:	into D breakwo	terinn,	Com		
Optional: If you wish for AMCO	staff to communicate with anyone other	er than the Cont	act Licensee about your lic	ense, list them below:	
Name of Contact:				907-586-6	303
Contact Email:	James Hargett manager@breck	watering	1. com	1,01000	
Name of Contact:			Contact Phone:		
Contact Email:					

AMCO

**Contact Phone:** 

Name of Contact:

**Contact Email:** 



## Form AB-17: 2022/2023 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 #. <a href="https://www.commerce.alaska.gov/cbp/main/search/entities">https://www.commerce.alaska.gov/cbp/main/search/entities</a>

Alaska CBPL Entity #: 10027471

**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 <u>any</u> 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
  - o 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.

Name of Official:	Hyun o chim	off	*		
Title(s): MEM	BER OWNEV	Phone:	907-586-6303	% Owned:	100
Mailing Address:	1711 Glacier Ave	-			
City:	Juneau	State:	AK	ZIP: 98	80/
Name of Official:	11-1-0	alt			
	James Hard	CTI			
Title(s):	manager	Phone:	921-586-6303	% Owned:	0
Mailing Address:	James Harg Manager 1711 Glacier Ave	2 July			
City:	Juneau	State:	AK	ZIP: 9	3801
Name of Official:					
Title(s):		Phone:		% Owned:	
Mailing Address:					L
City:		State:		ZIP:	

**AMCO** 



## Form AB-17: 2022/2023 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: State: ZIP: **Email:** This individual is an: **Affiliate Applicant** 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: 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 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. 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. 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 Yes 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?

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: 2022/2023 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 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

NOTARY

Printed name of licensee

Subscribed and sworn to before me this 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

License Fee:	\$	2500	Application Fee:	\$ 300.00	Misc. Fee:	\$
Total Fees Due:			\$ 2800			

AMCO

# 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)

Type Name

Legal Name CNH HOLDING LLC

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 Hargett

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

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

## **Officials**

			☐Show Former
AK Entity #	Name	Titles	Owned
	Hyun Chi-Mott	Member	100.00
	James Hargett	Manager	

# **Filed Documents**

Date Filed	Туре	Filing	Certificate
3/02/2015	Creation Filing	Click to View	Click to View
3/22/2015	Initial Report	Click to View	
6/12/2017	Biennial Report	Click to View	
4/10/2019	Biennial Report	Click to View	
4/02/2021	Biennial Report	Click to View	

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

# Department of Commerce, Community, and Economic Development DIVISION OF CORPORATIONS, BUSINESS & PROFESSIONAL LICENSING

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Business License / License #1024868

# LICENSE DETAILS

License #: 1024868

**Print Business License** 

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**

Line of Business	NAICS	Professional License #
72 - Accommodation and Food Services	721110 - HOTELS (EXCEPT CASINO HOTELS) AND MOTELS	

## **Endorsements**

End # Issue	Renew Expiration	Action End Action No	e Address
1 12/17/2019	12/31/2020		1711 Glacier Ave, Juneau, AK 99801-1470

# **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.