

Tourism Statement

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u>

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

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.

Enter information for the b	ousiness seeking to have its license renewed.		
Doing Business As:	Copper River Princess Wilderness Lodge	License #:	4206
License Type:	Beverage Dispensary - Tourism Seasonal		
	Section 2 – Tourism Statement		
2.1. Explain how issuance	of a liquor license at your establishment has/will encourage touris	m.	
combines a Gulf of	stays are a primary component of Princess' unique of Alaska cruise with a land tour segment of 3 to 10 dags and group functions.	ays. Conferer	ce facilities are
	y was/will be constructed or improved as required by AS 04.11.400		
While the hotel has upgrade the kitchen been replaced in 10	been closed for the past 2 years due to COVID, we with new hood systems, ducting and roof exhaust f guest rooms.	have taken than than a taken the fans. Bathroom	e opportunity to n flooring has
		YES	NO
	oplicant for this liquor license also operate the childrense is located?	X	
2.4 If "no" who operates tl	ne tourism facility?		



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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?		
85		94014
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)?	or food prepara	ation along
None		
Do you stock or plan to stock alcoholic beverages in guest rooms?	YES	NO X
If "no" is your facility located within an airport terminal?	YES	NO X
2.6 If your establishment includes a dining facility, please describe that facility. If it does not please to	write "none".	
The lodge includes a dining facility that serves a wide variety of unique local s Copper River Red Salmon, Reindeer Osso Bucco and Buffalo London Broil.	specialties s	such as
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 wr		l equipment for
Lodge amenities include: Great Room with fireplace and stunning views of Mi Mt. Blackburn, meeting rooms, giftshop and tour desk. Excursions available river rafting, hiking, fishing, dog sled rides and National Park tours.		

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED 3/07/2022 ABC BOARD LIQUOR LICENSE 2022 - 2023

TEMPORARY

4206

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

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

5/1 - 9/30

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$1,250,00

1103

D/B/A: Copper River Princess Wildo

102 Richardson Highway

Mail Address:

Alaska Hotel Properties, LLC

Attn: Michelle Pipkin 450 Third Ave West

Seattle, WA 98119

CITY / BOROUGH:

Outside City Limits
Unorganized Borough

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

Je Klik

04-900 (REV 7/21)

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

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

ISSUED 3/07/2022

ABC BOARD

LIQUOR LICENSE 2022 - 2023 4206

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

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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:

Copper River Princess Wilderness Lodge 102 Richardson Highway

Mailing Address:

Alaska Hotel Properties, LLC

Attn: Michelle Pipkin 450 Third Ave West

Seattle, WA 98119



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 Phone: 907.269.0350

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				
Licensee (Owner):	Alaska Hotel Properties	s, LLC	L	icense #:	4206
License Type:	Beverage Dispensary -	Tourism Se	easonal		•
Doing Business As:	Copper River Princess	Wilderness	Lodge		
Premises Address:	102 Richardson Highwa	ay			
Local Governing Bod	y: None				
Community Council:	None				
vour mailing address	has changed, write the NEW addr	ess below:			
Mailing Address:					
City:		State:		ZIP:	
ust be listed on CBPL wit	Section 1 – License individual listed below must be listed in the same name and title. gnated point of contact regarding this	n Section 2 or 3 a	as an Official/Owner		
	individual listed below must be listed i			/Shareholde	er of your entity ar
ust be listed on CBPL with is person will be the desi	individual listed below must be listed i h the same name and title.	n Section 2 or 3 a	as an Official/Owner		
ust be listed on CBPL wit is person will be the desi Contact Licensee:	individual listed below must be listed i h the same name and title.	n Section 2 or 3 a	as an Official/Owner	completed	
ust be listed on CBPL with is person will be the desi	individual listed below must be listed in the same name and title. gnated point of contact regarding this	n Section 2 or 3 a	as an Official/Owner, ne Optional contact i	completed	
ust be listed on CBPL wit is person will be the desi Contact Licensee: Contact Email:	individual listed below must be listed in the same name and title. gnated point of contact regarding this David McGlothlin	n Section 2 or 3 a license, unless th	es an Official/Owner, ne Optional contact is Contact Phone:	(206	3) 336-5910
ust be listed on CBPL wit is person will be the desi Contact Licensee: Contact Email:	individual listed below must be listed in the same name and title. gnated point of contact regarding this David McGlothlin dmcglothlin@hagroup.	n Section 2 or 3 a license, unless th	es an Official/Owner, ne Optional contact is Contact Phone:	(206	3) 336-5910
ust be listed on CBPL with is person will be the desing person with the desing person will be t	individual listed below must be listed in the same name and title. gnated point of contact regarding this David McGlothlin dmcglothlin@hagroup.	n Section 2 or 3 a license, unless th COM	es an Official/Owner, ne Optional contact is Contact Phone:	(206	b) 336-5910
ust be listed on CBPL with is person will be the desing person will be	individual listed below must be listed in the same name and title. gnated point of contact regarding this David McGlothlin dmcglothlin@hagroup. CO staff to communicate with anyone oth Michelle Pipkin mpipkin@hagroup.com	n Section 2 or 3 a license, unless th COM	es an Official/Owner, se Optional contact is Contact Phone: ct Licensee about your Contact Phone:	license, list t	hem below: 5) 336-6105
ust be listed on CBPL with its person will be the desired contact Licensee: Contact Email: Ditional: If you wish for AM Name of Contact: Contact Email:	individual listed below must be listed in the same name and title. gnated point of contact regarding this David McGlothlin dmcglothlin@hagroup. CO staff to communicate with anyone oth Michelle Pipkin mpipkin@hagroup.com Philippe Janicka	n Section 2 or 3 a license, unless the COM er than the Contact	es an Official/Owner, ne Optional contact is Contact Phone:	license, list t	b) 336-5910
ust be listed on CBPL with is person will be the desing person will be	individual listed below must be listed in the same name and title. gnated point of contact regarding this David McGlothlin dmcglothlin@hagroup. CO staff to communicate with anyone oth Michelle Pipkin mpipkin@hagroup.com	n Section 2 or 3 a license, unless the COM er than the Contact	es an Official/Owner, se Optional contact is Contact Phone: ct Licensee about your Contact Phone:	license, list t	hem below: 5) 336-6105
ust be listed on CBPL with its person will be the desired contact Licensee: Contact Email: Ditional: If you wish for AM Name of Contact: Contact Email:	individual listed below must be listed in the same name and title. gnated point of contact regarding this David McGlothlin dmcglothlin@hagroup. CO staff to communicate with anyone oth Michelle Pipkin mpipkin@hagroup.com Philippe Janicka	n Section 2 or 3 a license, unless the COM er than the Contact	es an Official/Owner, se Optional contact is Contact Phone: ct Licensee about your Contact Phone:	license, list t	hem below: 5) 336-6105



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 #. https://www.commerce.alaska.gov/cbp/main/search/entities

Alaska CBPL Entity #: 70654F

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

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 <u>any</u> type including non-profit must list ONLY the following:
 - o 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 <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

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.

Name of Official:	Westmark Hotels, Inc					
Title(s):	Member, Manager	Phone:	(206) 336-6105	% Owr	ed:	100
Mailing Address:	450 3rd Ave W					
City:	Seattle	State:	WA	ZIP:	981	19

Name of Official:	Charles E Ball				
Title(s):	Affiliate	Phone:	(206) 336-5980	% Owr	ned: 0
Mailing Address:	450 3rd Ave W				1
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Daniel Howard							
Title(s):	Affiliate	Phone:	(661) 753-1550	% Owr	ned:	0		
Mailing Address:	lailing Address: 24305 Town Center Drive							
City:	Santa Clarita	State:	CA	ZIP:	913	355		

AMCO



Form AB-17: 2022/2023 License Renewal Application

Section 2 - Entity or Community Ownership Information

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 - 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:
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 - 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.

Name of Official:	David McGlothlin				
Title(s):	Affiliate	Phone:	(206) 336-5910	% Ow	ned: 0
Mailing Address:	450 3rd Ave W				
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Lisa K Syme					
Title(s):	Affiliate	Phone:	(206) 336-5901	% Owr	ned: 0	
Mailing Address:	450 3rd Ave W				•	
City:	Seattle	State:	WA	ZIP:	98119	

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

AMCO

[Form AB-17] (rev09/21/2021) DEC 2 7 2021 Page 2 of 4



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.

This individual is an:		plicant	Affiliate	. Additional owr	ners not listed on this pa	ge will be	rejected.	
Name:					Contact Phone:			
Mailing Address:								8
City:				State:	I	ZIP:		•
Email:					1			
This individual is an:	Арј	plicant	Affiliate					
Name:					Contact Phone:		134 321	
Mailing Address:					-			
City:				State:		ZIP:		
Email:								
			Section 4 – I	License Or	peration			
2. The license was only op If your operation date.	perated of the second s	during a specifi hanged, list the	usly throughout each year. (\forall icseason each year. (Seasona em below:to nimum requirement of 240 to)	lar year.			
A complete AB-30: Pro	of of Mii	nimum Operati	on Checklist, and all documer	ntation must be provi	ided with this form.			Ш
hours each year, durin	g one or	both calendar	operated for at least the mini years. <u>A complete Form AB-2</u> th this application for each co	9: Waiver of Operation		<u>ed.</u>	\checkmark	\checkmark
			of hours of operation in 2020 narked "OTHER" and COVID		are not required to pay the fee on.	s, however	<u>a</u>	
		Sec	ction 5 – Violat	tions and C	Convictions			
Have ANY Notices of Vi convicted of a violation	olatior of Titl	n been issue le 04, 3AAC	d for this license OR has 304 or a local ordinance	s ANY person or e e adopted under	entity in this application b AS 04.21.010 in 2020 or 2	een 2021?	Yes	No 🗸
<u>If you chec</u>	ked YE	S, you MUS	T attach a list of all No	otices of Violatio	n and/or Convictions pe	r AS 04.11	.270(a)(2)
If you are	unsure	if you have	received any Notices	of Violation, con	ntact the office before su	bmitting	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 e	entity that Junder stand, that pr	oviding a false statement on this form or any other form
provided by AMCO is grounds for	rejection of deniel of this appli	ication or revocation of any license issued.
alnuly Wh	NOTARY	Janez Jones
Signature of licensee	S PUBLIC S	Signature of Notary Public
David McGlothlin		in and for the State of: Washington
Printed name of licensee	OF WASHINGTON	My commission expires: 1) 24 2025
Subscribe	d and sworn to before me this	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:	\$1,250.00	Application Fee:	\$ 300.00	Misc. Fee:	\$	
		Total Fees Due:			\$1,550.00	

AMCO

DEC 27 2021

Details

ENTITY DETAILS

Name(s)

Type Name
Legal Name ALASKA HOTEL PROPERTIES, LLC

Entity Type: Limited Liability Company

Entity #: 70654F

Status: Good Standing

AK Formed Date: 8/18/2000

Duration/Expiration: Perpetual

Home State: DELAWARE

Next Biennial Report Due: 1/2/2024

Entity Mailing Address: ATTN: MICHELLE PIPKIN, 450 3RD AVE W, SEATTLE, WA 98119-4002

Entity Physical Address: 450 3RD AVE W, SEATTLE, WA 98119-4002

Registered Agent

Agent Name: C T Corporation System

Registered Mailing Address: 9360 Glacier Hwy Ste 202, JUNEAU, AK 99801

Registered Physical Address: 9360 Glacier Hwy Ste 202, JUNEAU, AK 99801

Officials

		Show Former		
AK Entity #	Name	Titles	Owned	
	WESTMARK HOTELS, INC	Member	100.00	

Filed Documents

Date Filed	Туре	Filing	Certificate
8/18/2000	Creation Filing	Click to View	
8/18/2000	Merger	Click to View	
8/18/2000	Creation Filing	Click to View	
12/24/2001	Biennial Report	Click to View	
1/02/2004	Biennial Report	Click to View	
12/21/2005	Biennial Report	Click to View	
12/19/2007	Biennial Report	Click to View	
12/31/2009	Biennial Report	Click to View	
1/09/2012	Biennial Report	Click to View	
1/03/2014	Biennial Report	Click to View	

Date Filed	Туре	Filing	Certificate
12/16/2015	Biennial Report	Click to View	
12/15/2017	Biennial Report	Click to View	
12/13/2019	Biennial Report	Click to View	
12/23/2021	Biennial Report	Click to View	

Close Details

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