

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**

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 com	pleted and submitted to AMCO's main office before any	tourism lice	ense applicatio	n will be reviewed.
	Section 1 – Establishment Info	rmation		
Enter information for the bus	iness seeking to have its license renewed.			
Doing Business As:	Anchorage Marriott Hotel		License #:	3945
License Type:	Beverage Dispensary - Tourism			L 400
	Section 2 - Tourism Statem			
	a liquor license at your establishment has/will encourag			
This operation is a ful beverages is a critical property.	I service hotel that caters to tourists and loc ingredient in attracting customers to stay a	als. The s	serving of a te their eve	alcoholic ents at our
	was/will be constructed or improved as required by AS 0			
As all hotels, it is nece This keeps the hotel of	essary to constantly keep upgrading and reform competitive in today's market.	urbishing	the rooms	and interior.
2.3 Does the licensee or appl tourism facility in which	icant for this liquor license also operate the this license is located?		X	NO
2.4 If "no" who operates the	tourism facility?			



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# **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?	•	
1392 Rooms		
How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink f with refrigeration and cooking appliance devices, including a microwave)?	or food prepara	ation along
There are no kitchens and/or microwaves in guest rooms. Some guest rooms i	nclude a min	i-fridge
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	write "none".	
Full service restaurant available on the property		
2.7 If additional amenities are available to your guests through your establishment (eg: guided tour guests, other activities that attract tourists), please describe them. If they are not offered, please we	s or trips, renta rite "none".	l equipment for
Banquet rooms for parties and/or conferences		
	•	

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

3945

XXXX

**ISSUED** 02/11/2022 ABC BOARD LIQUOR LICENSE 2022 - 2023

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

**TEMPORARY** 

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$2,500.00

1106

D/B/A: Anchorage Marriott Hotel

820 W. 7th Avenue

Mail Address:

Columbia Properties Anchorage Limited

740 Centre View Blvd.

Crestview Hills, KY 41017-5434

CITY / BOROUGH: Anchorage, Muni. of Anchorage

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

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** 02/11/2022 ABC BOARD LIQUOR LICENSE

2022 - 2023

3945

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

**TEMPORARY** 

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TYPE OF LICENSE: Beverage Disper

LICENSE FEE: \$2,500.00

D/B/A:

Mailing Address:

CITY / BOROUGH: Anchorage, Muni. of Anchorage

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

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 7/21)

Columbia Properties Anchorage Limited 740 Centre View Blvd.

Anchorage Marriott Hotel

Crestview Hills, KY 41017-5434

820 W. 7th Avenue



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Phone: 907.269.0350

# 2022-2023 Master Checklist: Renewal License Application

Doing Business As:	Anchorage Mar	riott Hotel		License Number:	3945
License Type:	Beverage Dispe	enşary - Tourisr	n		
Examiner:	Colleen B	thon		Transaction #:	100307977
Document	Received	Completed	Notes		
AB-17: Renewal Applic	cation 11/23 /	1/243/11/00			
App and License Fees	_11/23	1/24129(21			
Supplemental Docume		Completed	Notes		
Tourism/Rec Site State	ement 11/23	1/242/11/22			
AB-25: Supplier Cert (V					
AB-29: Waiver of Oper	ation			-	
AB-30: Minimum Oper	ation				
AB-33: Restaurant Affi	davit	-			
COI / COC / 5 Star / FA	A Cert				
FP Cards & Fees / AB-0	)8a				
Late Fee					
Names on FP Cards:					
		Yes No	N/A		
CBPL Entity Printout in	cluded?				
Business License Copy	included?				
Background(s) Comple	ted & Date:				
Special Consideration:	Torrism		Board Meet	ing Date: 4/12	100
LGB Sent Date: <u>H</u>	ular	LGB Dead	ine Date:	4/12/20	_
LGB 1 Name: MO	9	LGB 2 Nan	ne: <u>CC</u> I	Downtown	
Waive	Protest Laps	ed Waiv	ve Pro	otest Lapsed	



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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.

Licensee (Owner):	Columbia Properties Anchora	ige Limite	d Partnership	License #:	3945
License Type:	Beverage Dispensary · T	ourism			
Doing Business As:	Anchorage Marriott Hotel				
Premises Address:	820 W. 7th Avenue				
Local Governing Body:	Municipality of Anchorage	9			
Community Council:	Downtown				
your mailing address ha	es changed, write the NEW address	s below:			
Mailing Address:	740 Centre View Blvd.				
City:	Crestview Hills	State:	KY	ZIP	41017
ust be listed on CBPL with the design will be the design	ated point of contact regarding this lice	ection 2 or :	3 as an Official/Ow the Optional conta	ner/Sharehold	d.
ust be listed on CBPL with the	lividual listed below must be listed in S he same name and title.	ection 2 or :	3 as an Official/Ow	ner/Sharehold	d.
ust be listed on CBPL with the design will be the design	lividual listed below must be listed in S he same name and title. ated point of contact regarding this lice	ection 2 or a	3 as an Official/Ow the Optional conta	ner/Sharehold	
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ust be listed on CBPL with the design contact Licensee:  Contact Email:  ptional: If you wish for AMCC	lividual listed below must be listed in She same name and title. ated point of contact regarding this lice Thomas Drake tdrake@columbiasussex.	ense, unless COM	as an Official/Ow the Optional conta  Contact Phon tact Licensee about y Contact Phon	ner/Sharehold act is complete e: 859 your license, list	d. -578-1184 them below:
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ust be listed on CBPL with the list person will be the design Contact Licensee:  Contact Email:  ptional: If you wish for AMCO Name of Contact:  Contact Email:	ividual listed below must be listed in She same name and title. ated point of contact regarding this lice Thomas Drake tdrake@columbiasussex.  staff to communicate with anyone other Haley Wilson	ense, unless COM	as an Official/Ow the Optional conta  Contact Phon tact Licensee about y  Contact Phon OM	ner/Sharehold act is complete e: 859  /our license, list e: 972 e:	d. -578-1184 them below:

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

AMCO Page 1 of 4

JAN 1 3 2022



# 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 #: 63196PF

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

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

- 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
  - All General Partners regardless of percentage owned

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

State:

	A A	0
А	V	

ZIP:

City:

## Attachment A - Ownership Information

Title	Name	Mailing Address	Phone	% Ownership
Affiliate	Christopher Ballad	740 Centre View Blvd,	859-578-1100	0%
		Crestview Hills, KY 41017		
Affiliate	Thomas Drake	740 Centre View Blvd,	859-578-1100	0%
		Crestview Hills, KY 41017		
Limited Partner	Columbia Hospitality Mezz,	740 Centre View Blvd,	859-578-1100	99%
	LLC	Crestview Hills, KY 41017		1
General Partner	CP Anchorage GP, LLC	740 Centre View Blvd,	859-578-1100	1%
		Crestview Hills, KY 41017		1



# 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 04.11.04S, 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

Th	s individual is an:	App	licant		Affiliate					
	Name:	-1					Contact Phone:			
	Mailing Address:							L		
-	City:					State:		ZIP:		
П	Email:									
Th	s individual is an:	App	licant	Γ	Affiliate	<u> </u>				-
	Name:						Contact Phone:			
	Mailing Address:			_						
_	City:				***************************************	State:		ZIP:		
	Email:			-				L		
					04 4 11			in cir		
					Section 4 – Lie	ense Op	eration			
Ch	ock ONE BOX for FACE	4 CAI	FNDAR VE	AR	that best describes how	this liquor lie	anca was an arated		2020	2021
1.					y throughout each year. (Year		ense was operated:		2020	2021
-				_		,			V	<b>V</b>
2.	The license was <b>only oper</b> If your operation dates he		-		eason each year. (Seasonal) below:					
					***					
3.	The license was only open	ated to	o meet the mi	inim	toto num requirement of 240 total i	ours each calend	arvear			
					Checklist, and all documentat					
4.	The license was not opera	ted at	t all or was not	t ope	erated for at least the minimu	m requirement of	240 total			
					ars. <u>A complete Form AB-29: V</u>					
	and corresponding fees m	ust be	submitted w	ith t	this application for each calen	dar year during w	hich the license was not operated	<u>d.</u>		
	If you have not met the	minim	num number	of h	ours of operation in 2020 an	d/or 2021, you a	ere not required to pay the fees	, however	a	
	complete AB-29 is require	red w	ith Section 2	mar	ked "OTHER" and COVID is li	sted as the reaso	n.		_	
			Se	ct	ion 5 - Violatio	ns and C	onvictions			
									Vaa	NI.
Ha	e ANY Notices of Viol	ation	been issue	ed f	or this license OR has Al	VY person or e	entity in this application be	en	Yes	No
cor	victed of a violation o	f Titl	e 04, 3AAC	30	4 or a local ordinance a	dopted under	AS 04.21.010 in 2020 or 20	021?		$\checkmark$
							n and/or Convictions per		.270(a)(2)	1
	16		if you have							

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

AMCC



# 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
- 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.

	entity that I understand that providing a false statement on this form or any other form
provided by AMCO is grounds for i	rejection or denial of this application or revocation of any license issued.
the fl	m = c0 0
Signature of licensee	Signature of Notary Public
Thomas Drake	Notary Public in and forthe State of: Notary Public, Kentucky State at Large
Printed name of licensee	My Commission Expires March 23, 2024
	My commission expres: Notary LD KYNEATOT
	The sail.

Subscribed and sworn to before me this 1976 day of Novemb

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

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

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

License Detail

## LICENSE DETAILS

License #: 268009

Print Business License

**Business Name: ANCHORAGE MARRIOTT** 

Status: Active

Issue Date: 06/02/1998

Expiration Date: 12/31/2023

Mailing Address: 740 CENTRE VIEW BLVD

CRESTVIEW HILLS, KY 41017

Physical Address: 820 W 7TH AVE

ANCHORAGE, AK 99501

#### **Owners**

COLUMBIA PROPERTIES ANCHORAGE LP

### **Activities**

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

### **Endorsements**

No Endorsements Found

# 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.

No Lapses on record for the last 4 years.

Close License Detail

**Print Friendly Version** 

#### Details

## **ENTITY DETAILS**

## Name(s)

Туре	Name
Legal Name	COLUMBIA PROPERTIES ANCHORAGE, L.P.
Assumed Name	COLUMBIA PROPERTIES ANCHORAGE, LIMITED PARTNERSHIP

Entity Type: Limited Partnership

Entity #: 63196PF

Status: Good Standing

AK Formed Date: 3/6/1998

Duration/Expiration: 05/20/2024

Home State: OHIO

**Next Biennial Report Due:** 

Entity Mailing Address: 740 CENTRE VIEW BLVD, CRESTVIEW HILLS, KY 41017

Entity Physical Address: 740 CENTRE VIEW BLVD, CRESTVIEW HILLS, KY 41017

# **Registered Agent**

Agent Name: Corporation Service Company

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
	COLUMBIA HOSPITALITY MEZZ, LLC	Limited Partner	99.00
	COLUMBIA PROPERTIES ANCHORAGE GP, LLC	General Partner	

## **Filed Documents**

Date Filed	Туре	Filing	Certificate
3/06/1998	Creation Filing	Click to View	
7/12/2012	Agent Change	Click to View	
10/01/2013	Entity Address Change	Click to View	
12/16/2013	Correction	Click to View	Click to View
9/22/2015	Certificate of Compliance		Click to View
5/20/2019	Correction	Click to View	Click to View
11/23/2020	Certificate of Compliance		Click to View

**Close Details** 

**Print Friendly Version**