

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

## **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.

	usiness seeking to have its license renewed.	-	<del></del>
Doing Business As:	Denali Backcountry Lodge	License #:	5130
License Type:	Beverage Dispensary - Tourism Season	onal	harani karana majaran majaja majaja ja j
	Section 2 – Tourism Stateme	ent	
.1. Explain how issuance	of a liquor license at your establishment has/will encourage	tourism.	
oring guests to Alasl	aller marketing campaigns throughout the year ka and to our properties. The liquor license allot to our guests and ensure a quality experience	ows our business	to provide
The Denali Backcou his summer), a day he bar/lounge area. not tubs are also ava	y was/will be constructed or improved as required by AS 04.  ntry Lodge has 42 guest cabins (in a normal ye lodge, and the main lodge where overnight gue There is also a small gift shop in the main lod ailable to the guests along with a spa building fees an onsite employee housing area.	ear; only planning e ests check-in, dine ge. Amenities like	and relax in saunas and
•	oplicant for this liquor license also operate the this license is located?	YES	NO
.4 If "no" who operates th	ne tourism facility?	Maria - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	ANALONINES MAINE POLYAPORE MAINE MAINEMAN MAINEMAN MAINEMAN MAINEMAN MAINEMAN MAINEMAN MAINEMAN MAINEMAN MAINE



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u> 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?		
42 but only 12 are planning on being used this su	ımmer	
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)?	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 we All meals are provided to overnight guests as part of their stay. Breakfast, lund served to those guests either via buffet style or plated service depending on the	ch and din	
2.7 If additional amenities are available to your guests through your establishment (eg: guided tours of guests, other activities that attract tourists), please describe them. If they are not offered, please write Guests have the following options while on property: gold panning, fishing, biki wildlife viewing, paddle boarding, kayaking, saunas, hot tubs, spa services, and	e "none". ng, guided	I hikes,

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

**ISSUED** 05/16/2022 ABC BOARD LIQUOR LICENSE 2022 - 2023

**TEMPORARY** 

5130

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

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

4/15 - 10/14

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$1,250.00

1103

D/B/A: Denali Backcountry Lodge

Mile 92 Denali Park Road

Mail Address:

CATC Alaska Tourism Corporation

509 W 4th Avenue Anchorage, AK 99501 CITY / BOROUGH: Outside City Limits

Denali 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

04-900 (REV 5/9/22)

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** 05/16/2022 ABC BOARD LIQUOR LICENSE

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ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

DIRECTOR

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

04-900 (REV 5/9/22)

D/B/A:

Denali Backcountry Lodge Mile 92 Denali Park Road

Mailing Address:

**CATC Alaska Tourism Corporation** 

509 W 4th Avenue Anchorage, AK 99501



550 W 7th Avenue, Anchorage, AK 99501 alcohol.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Suite 1600

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.

	T				
Licensee (Owner):	CATC Alaska Tourisr	m Corp	oration	License #:	5130
License Type:	Beverage Dispensary - Tourism Sesaonal				
Doing Business As:	Denali Backcountry Lodg	е			
Premises Address:	Mile 92 Denali Park Road	d			<del></del>
Local Governing Body:	Denali Borough	Marie de la companion de la co			
Community Council:	None		and the second seco	<del>anna a de la capacida de la capacida</del>	<del>inis a managama a managa</del>
your mailing address ha	s changed, write the NEW address	s below:	ger gegi in de engrangen en e		di di di manana di di di manana di di di manana di di di manana di
Mailing Address:	509 W. 4th Ave.				
City:	Anchorage	State:	AK	ZIP:	99501
	ne same name and title. ated point of contact regarding this lice				,
				ct is completed	,
is person will be the designation of the Contact Licensee:	ated point of contact regarding this lice	ense, unless	the Optional conta	ct is completed	
is person will be the designation contact Licensee:  Contact Email:	Fernando Salvador fsalvador@pursuitcollection	ense, unless	the Optional conta	ct is completed	-777-2868
Contact Licensee: Contact Email: otional: If you wish for AMCO	Fernando Salvador fsalvador@pursuitcollectionstaff to communicate with anyone other to	ense, unless	the Optional conta	ct is completed e: 907- our license, list t	-777-2868 hem below:
Contact Licensee: Contact Email:  ctional: If you wish for AMCO Name of Contact:	Fernando Salvador fsalvador@pursuitcollection	ense, unless	Contact Phon	ct is completed e: 907- our license, list t	-777-2868
Contact Licensee: Contact Email:  ctional: If you wish for AMCO Name of Contact:	Fernando Salvador fsalvador@pursuitcollection staff to communicate with anyone other to Mike Archiopoli	ense, unless	Contact Phon	ct is completed e: 907- our license, list t	-777-2868 hem below:
Contact Licensee: Contact Email: ptional: If you wish for AMCO	Fernando Salvador fsalvador@pursuitcollection staff to communicate with anyone other to Mike Archiopoli	ense, unless	Contact Phon	ct is completed e: 907- our license, list t e: 602-	-777-2868 hem below:
Contact Licensee: Contact Email: ctional: If you wish for AMCO Name of Contact: Contact Email:	Fernando Salvador fsalvador@pursuitcollection staff to communicate with anyone other to Mike Archiopoli	ense, unless	Contact Phon  tact Licensee about y  Contact Phon	ct is completed e: 907- our license, list t e: 602-	-777-2868 hem below:
Contact Licensee: Contact Email:  ctional: If you wish for AMCO Name of Contact: Contact Email:	Fernando Salvador fsalvador@pursuitcollection staff to communicate with anyone other to Mike Archiopoli	ense, unless	Contact Phon  tact Licensee about y  Contact Phon	ct is completed e: 907- our license, list t e: 602-	-777-2868 hem below:



## 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 #: 60827D

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

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:	Alaskan Park Propertie	s, Inc.			
Title(s):	Shareholder	Phone:	907-777-2808	% Ow	ned: 100
Mailing Address:	509 W. 4th Avenue				
City:	Anchorage	State:	AK	ZIP:	99501

Name of Official:	David Barry					
Title(s):	President	Phone:	602-317-8006	% Owi	ned:	0
Mailing Address:	1401 17th Street, Suite 4	1401 17th Street, Suite 400				
City:	Denver	State:	СО	ZIP:	802	202

Name of Official:	Samuel Auck						
Title(s):	Vice President	Phone:	312-343-6227	% Owr	ned:	0	
Mailing Address:	1401 17th Street, Suite 4	1401 17th Street, Suite 400					
City:	Denver	State:	CO	ZIP:	802	202	



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

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Name of Official:	Ellen Ingersoll				
Title(s):	Vice President	Phone:	602-207-1051	% Owr	ied: 0
Mailing Address:	7000 E. 1st Avenue				
City:	Scottsdale	State:	Arizona	ZIP:	85251

Name of Official:	Fernando Salvador				
Title(s):	Vice President	Phone:	907-777-2868	% Ow	ned: 0
Mailing Address:	509 W. 4th Avenue				
City:	Anchorage	State:	AK	ZIP:	99501

Name of Official:	Derek Linde	1					
Title(s):	Vice President /	CCU	Phone:	602-207-1067	% Owi	ned:	0
Mailing Address:	7000 E. 1st Avenue						
City:	Scottsdale		State:	AZ	ZIP:	852	?51



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

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Alaska CBPL Entity #:	60827D
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Jason Creed

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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.

Title(s):	Vice President	Phone:	602-207-1051	% Ow	ned: 0
Mailing Address:	7000 E. 1st Avenue				
City:	Scottsdale	State:	Arizona	ZIP:	85251
Name of Official:					
Title(s):		Phone:		% Ow	ned:

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

State:

ZIP:

Name of Official:

Mailing Address:

City:



## 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: App	licant	Affiliate		<u> </u>		<del>ojeuteu.</del>	
Name:				Contact Phone:		***************************************	
Mailing Address:			· · · · · · · · · · · · · · · · · · ·				<del></del>
City:	<del></del>	<del>a ja ja</del>	State:		ZIP:		
Email:	eren in de la companya de la company		. <del> </del>	<del>January y garage la garag</del>		L	
This individual is an: App	licant	Affiliate				<del></del>	
Name:				Contact Phone:			
Mailing Address:					ATTENDO 11.1.		
City:			State:		ZIP:		
Email:				<u> </u>		<u> </u>	
<ol> <li>The license was regularly opera</li> <li>The license was only operated d         If your operation dates have chi     </li> <li>The license was only operated to         A complete AB-30: Proof of Mini     </li> <li>The license was not operated at</li> </ol>	ted continuously uring a specific se anged, list them is meet the minimum Operation o	throughout each year. (Year- eason each year. (Seasonal) below: to	ours each calend on must be provi	ar year. ded with this form. 240 total		2020	2021
	<i>submitted with ti</i> um number of ho	nis application for each calend ours of operation in 2020 and	<i>ar year during w</i> I/or 2021, you a	hich the license was not operated re not required to pay the fees,	-		أجنبا
	Secti	ion 5 – Violatio	ns and C	onvictions			
Have ANY Notices of Violation convicted of a violation of Title	04, 3AAC 304	l or a local ordinance ad	opted under		217	Yes	No ✓

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



## 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.

	entity that I understand that providing a false statement on this form or any other form rejection or denial of this application or revocation of any license issued.  OFFICIAL SEAL Cassidy R. Owen NOTARY PUBLIC - STATE OF ALASHAFUTE OF STATE OF ALASHAFUTE OF NOTARY PUBLIC - STATE OF ALASHAFUTE OF STATE OF ALASHAFUTE OF STATE OF ALASHAFUTE OF ALASHA
Printed name of licensee	My commission expires: 61/08/2024
Subsariba	d and awarn to before me this? 3 day of Talana Ad

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:	\$ 1250	Application Fee:	\$ 300.00	Misc. Fee:	\$ 500
Total Fees Due:				\$ 2050	

#### Details

## **ENTITY DETAILS**

## Name(s)

Туре	Name
Legal Name	CATC Alaska Tourism Corporation
Previous Legal Name	CIRI ALASKA TOURISM CORPORATION

Entity Type: Business Corporation

Entity #: 60827D

Status: Good Standing

AK Formed Date: 4/30/1997

**Duration/Expiration:** Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2023

Entity Mailing Address: 1850 N CENTRAL AVE #1900, PHOENIX, AZ 85004

Entity Physical Address: 1850 N CENTRAL AVE, STE 1900, PHOENIX, AZ 85004

## **Registered Agent**

Agent Name: ROBERT BLASCO

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
10000002	Alaskan Park Properties, Inc.	Shareholder	100.00
	DAVID BARRY	Director, President	
	Derek Linde	Director, Secretary, Vice President	
	Ellen Ingersoll	Vice President	
	Elyse Newman	Treasurer	
	Fernando Salvador	Vice President	
	IRMA VILLARREAL	Assistant Secretary	
	JASON CREED	Vice President	
	Jennifer Kaleta	Assistant Secretary	
	Jonathan Massimino	Assistant Secretary	
	Leslie Striedel	Assistant Secretary	
	SAMUEL AUCK	Vice President	
	Steven Moster	Director	

# **Filed Documents**

Date Filed	Туре	Filing	Certificate
4/30/1997	Creation Filing	Click to View	
5/12/1997	Biennial Report		
4/28/1998	Restated and Amended Articles	Click to View	
12/14/1998	Biennial Report	Click to View	
6/12/2000	Amendment	Click to View	
1/09/2001	Biennial Report	Click to View	
6/11/2003	Biennial Report	Click to View	
6/11/2003	Change of Officials	Click to View	
6/14/2005	Biennial Report	Click to View	
10/20/2005	Agent Change	Click to View	
12/27/2006	Biennial Report	Click to View	
2/12/2007	Change of Officials	Click to View	
12/24/2008	Biennial Report	Click to View	
3/19/2009	Agent Change	Click to View	
4/02/2010	Change of Officials	Click to View	
1/24/2011	Biennial Report	Click to View	
9/26/2011	Change of Officials	Click to View	
9/26/2011	Agent Change	Click to View	
12/20/2012	Biennial Report	Click to View	
3/25/2014	Change of Officials	Click to View	
7/30/2014	Agent Change	Click to View	
12/04/2014	Biennial Report	Click to View	
9/25/2015	Entity Address Change	Click to View	
1/27/2016	Certificate of Compliance		Click to View
3/01/2016	Certificate of Compliance		Click to View
3/15/2016	Certificate of Compliance		Click to View
4/07/2016	Change of Officials	Click to View	SHOK to VIOW
8/18/2016	Certificate of Compliance		Click to View
3/19/2016	Certificate of Compliance		Click to View
9/09/2016	Entity Address Change	Click to View	Official to view
9/23/2016	Amendment	Click to View	Click to View
12/16/2016	Certificate of Compliance		Click to View
12/22/2016	Certificate of Compliance		Click to View
12/27/2016	Biennial Report	Click to View	Click to view
1/12/2018	Change of Officials	Click to View	
5/08/2018	Change of Officials	Click to View	
5/10/2018	Certificate of Compliance	Official to view	Click to View
7/11/2018	Agent Change	Click to View	Click to View
10/12/2018	Certificate of Compliance	Click to View	Click to Marri
/02/2019	Biennial Report	Olials to Mann	Click to View
3/20/2019		Click to View	
6/08/2020	Change of Officials	Click to View	
	Certificate of Compliance		Click to View
7/30/2020 H/19/2021	Certificate of Compliance		Click to View
N 13/2U2 I	Biennial Report	Click to View	

Date FiledTypeFilingCertificate7/29/2021Certificate of ComplianceClick to View

Close Details

**Print Friendly Version** 

License Detail

# LICENSE DETAILS

License #: 1042812

**Print Business License** 

**Business Name: CATC ALASKA TOURISM CORPORATION** 

Status: Active

Issue Date: 10/03/2016

Expiration Date: 12/31/2022

Mailing Address: 509 W 4TH AVE

ANCHORAGE, AK 99501

Physical Address: 509 W 4TH AVE

ANCHORAGE, AK 99501

### **Owners**

CATC ALASKA TOURISM CORPORATION

### **Activities**

Line of Business 56 - Administrative, Support, Waste Management and Remediation Services	NAICS 561110 - OFFICE ADMINISTRATIVE SERVICES	Professional License #
56 - Administrative, Support, Waste Management and Remediation Services	561520 - TOUR OPERATORS	

## **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.

 Start Date
 End Date

 1/1/2021
 1/20/2021

Close License Detail

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