

Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE 550 West 7th Avenue, Suite 1600

Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: May 25, 2023

RE: #6108 Thorne River Brewery Transfer

FROM: Carrie Craig, RLS with Kristina Serezhenkov, OLE

Statutory & Regulatory

Authority:

AS 04.06.090(b): "The board shall review all applications for licenses made under this title and may order the director to issue, renew, revoke, transfer, or suspend licenses and permits authorized under this title."

3 AAC 304.185: "(a) A license is issued for a specific place which is the licensed premises and which must be clearly designated in a line drawing accompanying an application. The address of the licensed premises and the business name under which the licensee is doing business at that address must be indicated on the license application."

Staff Recommendation:

Staff asks the board to review the proposed licensed premises and determine if in compliance with statutes and regulations.

Attachments: AB-02

AB-00



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

Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

Why is this form needed?

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The <u>second page</u> of this form may not be required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's Anchorage office before any license application will be considered complete.

	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.	X	

Section 1 - Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Thorne River Brewen	icense	Number:	2-1	
License Type:	Brewery License				
Doing Business As:	Thorne River Bri	ewer	,		
Premises Address:	1200 Shoreline Dri	ve /			
City:	Thorne Bay	State:	AK	ZIP:	99919

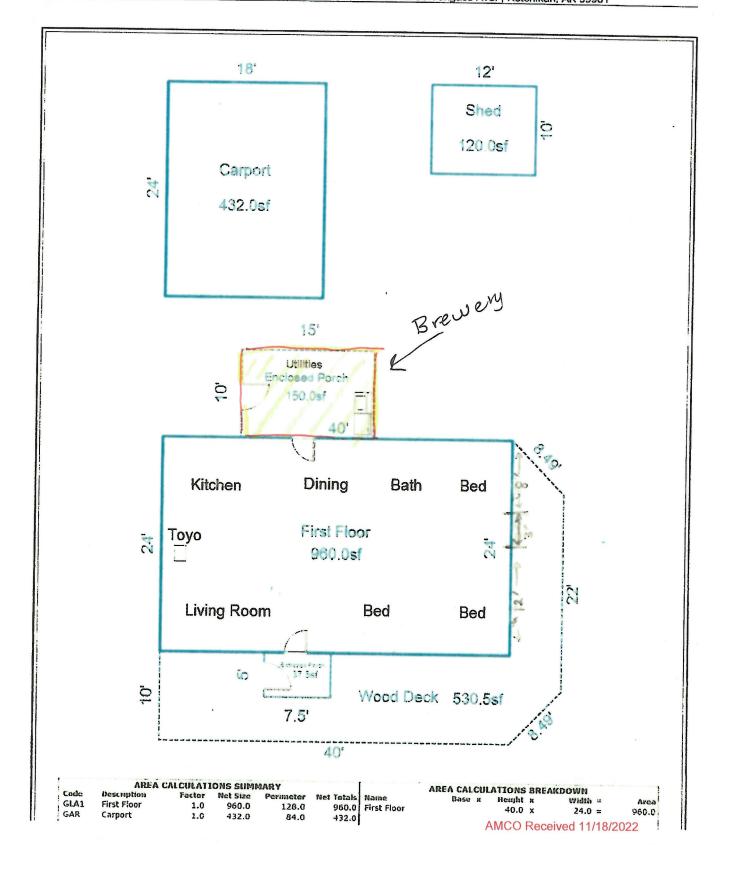
[Form AB-02] (rev 2/28/2022)

Southeast Appraisal Services, LLC **SKETCH ADDENDUM**

File No. 03-20-060

Borrower Mary & Bryan Cook

Property Address	1200 Shoreline Dr.						
City Thorne Bay	Cou	inty City	of Thorne Bay	State	AK	Zip Code	99919
Lender/Client To	ngass Federal Credit Uni	on	Address	2000 Tongass Ave.	Ketchikan		33313





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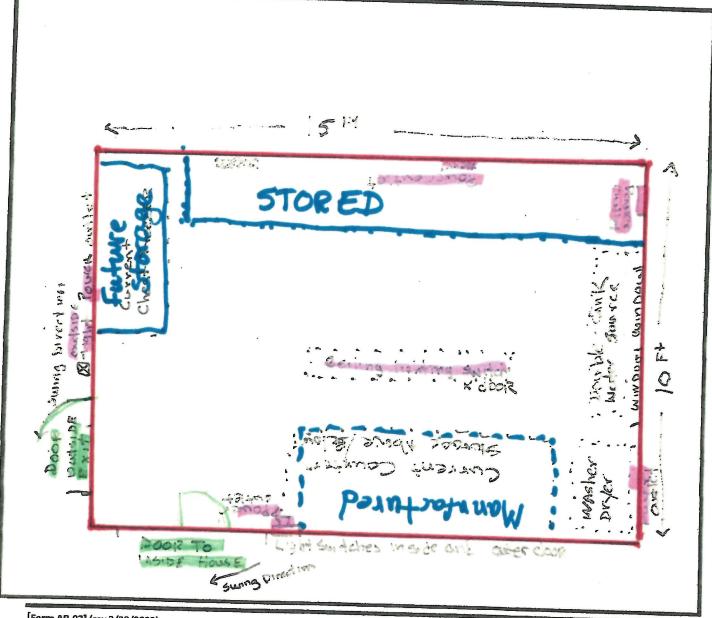
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Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

Section 2 – Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, and fixtures, and outline in red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Include dimensions, crossstreets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of



[Form AB-02] (rev 2/28/2022)

To: Alcohol and Marijuana Control Office

From: Thorne River Brewery

This letter is being submitted to address changes requested to the application for Thorne River Brewery.

- 1.) There will be no consumption on premises 1200 Shoreline Drive, Thorne Bay, Alaska 99919, at this time. We are starting out small, a nanobrewery, until we can establish a clientele. We will be hoping to distribute to local establishments for sale.
- II.) There is just a single primary residence attached to Thorne River Brewery with no B&B, nor any other business associated with the area. We will be utilizing the "enclosed porch" as a brewing and storage site. This area also has a washer/dryer within the area for commercial use ONLY for brewery sanitation purposes.

Respectfully,

Mary E. Auburn-Cook



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Form AB-00: New License Application

Why is this form needed?

This new license application form is required for all individuals or entities seeking to apply for a new liquor license. Applicants should review **Title 04** of **Alaska Statutes** and **Chapter 304** of the **Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260 and 3 AAC 304.105.

This form must be completed and submitted to AMCO's Anchorage office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 - Establishment and Contact Information

	Enter information for the bu	siness seeking to be licensed.					
	Licensee:	Thorne River Brewery	LLC				
	License Type:	Brewery License		Statutory Ro	eference:		AS.04.11.130
	Doing Business As:	Thorne River Brewery					
	Premises Address:	1200 Shoreline Drive					
	City:	Thorne Bay	State:	Alaska		ZIP:	99919
	Local Governing Body:	Thorne Bay City Council			6		
one	Community Council:	J. Heustis Commissioner	r : L. Be	erger May	vor)		
1		1					
	Mailing Address:	P O Box 19608					
	City:	Thorne Bay	State:	Alaska		ZIP:	99919
		1					
	Designated Licensee:	Mary E. Auburn-Cook					
	Contact Phone:	607-206-5850	Business		607-20		
	Contact Email:	Thorneriverbrewery@gm	nail.com	/mau	burn	C00k	e Ogmai
·	Yes Seasonal License?	No If "Yes", write your si					
	<u></u>	OFFICE U	ISE ONLY				**************************************
	Complete Date:	3/22 /2073 License Years:			Licens	e #:	6108
	Board Meeting Date:	5/30-31/2013	Trans	action #:	1	0049	6108
	Issue Date:	1	Exam	iner:			7

[Form AB-00] (rev 2/24/2022)

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Form AB-00: New License Application

	Se	ection 2 – Pre	nises Inf	ormation		
Premises to be licensed is:						
an existing facility	a	new building	a propos	ed building		
The next two questions mu	st be completed	d by <u>beverage dispens</u>	ary (including	tourism) and package sto	<u>re</u> applica	ants only:
What is the distance of the outer boundaries of	the shortest per the nearest sch	destrian route from th lool grounds? Include	e public entra the unit of me	nce of the building of you easurement in your answe	r propose r.	ed premises to
Thorne Bay Sch	nool > .52	mile N-NE of p	remises			
What is the distance of t	the shortest peo	destrian route from the	e public entra e unit of mea	nce of the building of you surement in your answer.	r propose	ed premises to
Thorne Bay Cor						
This section must be comple If more space is needed, ple The following information m This individual is an:	ase attach a se _l	parate sheet with the i	required infor	mation.	to Section	n 4.
Name:						
Address:						
City:			State:		ZIP:	
This individual is an: a	applicant	affiliate				
Name:						
Address:		- A				
City:			State:		ZIP:	,



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Form AB-00: New License Application

Section 4 – Entity Ownership Information

This section must be completed by any <u>entity</u>, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 5.

If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a <u>corporation</u>, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president*, *vice-president*, *secretary*, and *managing officer*.
- If the applicant is a <u>limited liability organization</u>, the following information must be completed for each member with an ownership interest of 10% or more, and for each manager.
- If the applicant is a <u>partnership</u>, including a <u>limited partnership</u>, the following information must be completed for each *partner* with an interest of 10% or more, and for each general partner.

With an interest of 10%	or more, and for each general partner	ſ .				
Entity Official:	MARY E. AUBURN	1-COOK		,		
Title(s):	MANAGER	Phone:	(907)401-8525	% Owi	ned:	55
Address:	P.O.BOX 19608 /	200 Sho	reline Drive			<u> </u>
City:	Thorne BAY	State:	AK	ZIP:	99	919
	/					
Entity Official:	BRYAN T. COOK					1
Title(s):	MEMBER/MANAGER	Phone:	(907)401-8545	% Owr	ned:	45
Address:	201 Fuller Lake A					
City:	Susquehanna	State:	PA	ZIP:	18	847
	<u>/</u>					
Entity Official:						
Title(s):		Phone:		% Own	red:	
Address:						
City:		State:		ZIP:		
			<u> </u>			
Entity Official:		***************************************				
Title(s):		Phone:		% Own	ied:	
Address:						
City:		State:		ZIP:		



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Form AB-00: New License Application

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10213606	AK Formed Date:	7/22/2022	Home State:	Alas	KA
Registered Agent:	MARY E. AUL	BURN-COOK	Agent's Phone:	907) 401-	8525	
Agent's Mailing Address:	P.O. Box	19608				
City:	Thorne Bay	State:	ALASKA	ZIP:	999	19
Residency of Agent:					Yes	No
Is your corporation or LLC	c's registered agent ar	n individual resident of	the state of Alaska?		V	
	Secti	ion 5 – Other L	icenses			
Ownership and financial interes	st in other alcoholic b	everage businesses:			Yes	No
Does any representative of any other alcoholic bever				ncial interest in		V
If "Yes", disclose which individense number(s) and license	vidual(s) has the finan	interest, what the	type of business is, a	nd if licensed in Al	aska, whi	ch
	- type(o):					·
	Sect	tion 6 – Author	ization			
Communication with AMCO sta	ff:				Yes	No
Does any person other the AMCO staff?	an a licensee named i	n this application have a	authority to discuss th	nis license with	V	
If "Yes", disclose the name o	COOK . ME	he reason for this author MBER/MAN 45% interes	IAGER			
		1010 INTEVES	7			

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Form AB-00: New License Application

Section 7 - Certifications

ead each line below, and then sign your initials in the box to the right of each statement:	Initials
certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.	me
ertify that all proposed licensees have been listed with the Division of Corporations.	me
ertify that I understand that providing a false statement on this form or any other form provided by AMCO is ground rejection or denial of this application or revocation of any license issued.	is me
ertify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a tron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or wing alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card tifying completion of approved alcohol server education course, if required by 3 AAC 304.465.	hie
gree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	me
ereby certify that I am the person herein named and subscribing to this application and that I have read the implete application, and I know the full content thereof. I declare that all of the information contained herein, devidence or other documents submitted are true and correct. I understand that any falsification or steppersentation of any item or response in this application, or any attachment, or documents to support this ollication, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A steppers of the company o	mo
May Cluber Ooh Nature of licensee Signature of Notary Public	
MARY E. AUBURN. COOK Notary Public in and for the State of Alaske	·
Official Seal My commission expires:	1,26,20
Notary Public-State of Alaska My Comm. Expires	20 <u> 4 3</u> .
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