

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

#### Alaska Alcoholic Beverage Control Board

### 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.

	ection 1 – Establishmen	t and Co	ntact Info	rmatio	'n	Annah annah Bana san 1647
Enter information for the bu						
ricensee;	The Rustic Peony, LLC		T			T
License Type:	Winery		Statutory R	eference:		04.11.140
Doing Business As:	Swamp Donkey Beverag	ge Comp	any			
Premises Address:	15705 Brody Rd	_				
City:	Ninilchik	State:	AK		ZIP:	99639
Local Governing Body:	Kenai Peninsula Boroug	h				
Community Council:						
Mailing Address:	PO Box 39641					
City:	Ninilchik	State:	AK		ZIP:	99639
	Tiffanii McCariaan					
Designated Licensee:	Tiffany McCorison	ľ				
Contact Phone:	907-360-3898	Business	Phone:	907-26	67-94	73
Contact Email:	mccorisontiffany@gmail	.com				
Yes Seasonal License?	No  If "Yes", write your s	ix-month o	perating perio	d:		
	OFFICE L	ISE ONLY				
Complete Date:	License Years:			License	e #:	
Board Meeting Date:		Trans	action #:			
Issue Date:		Exam	iner:			

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	Sec	tion 2 – Pren	nises Inf	ormation		
Premises to be licensed is:						
an existing facility	a ne	w building	a propos	ed building		
The next two questions mus	t be completed b	y <u>beverage dispens</u>	ary (including	tourism) and package sto	re applica	ints only:
				nce of the building of you asurement in your answe		d premises to
4 Miles						
				nce of the building of you surement in your answer.	propose	d premises to
3.5 Miles				×		
This section must be comple f more space is needed, plea The following information ma	ted by any <u>sole p</u> ase attach a sepa	oroprietor who is appraise sheet with the	olying for a lic required infor	mation.	PEOR DE TANGE	14.
Name:						
Address:						
City:			State:		ZIP:	
his individual is an: a	pplicant	affiliate				
Name:						
Address:						
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 entity, 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 corporation, 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 limited liability organization, the following information must be completed for each member with an ownership interest of 10% or more, and for each manager.

Entity Official:	Tiffany McCorison					
Title(s):	Member	Phone:	907-360-3898	% Owned: 1(		100
Address:	PO Box 39641					
City:	Ninilchik	State:	AK	ZIP: 99639		39
Entity Official:						
Title(s):		Phone:		% Ow	ned:	
Address:						
City:		State:		ZIP:		
Entity Official:						
Title(s):		Phone:		% Ow	ned:	
Address:						
City:		State:		ZIP:		
Entity Official:						
Title(s):		Phone:		% Ow	ned:	
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.

		¥	r			
DOC Entity #:	10028744	AK Formed Date:	4/13/15	Home State:	AK	
Registered Agent:	Tiffany McCo	orison	Agent's Phone:	907-360-38	898	
Agent's Mailing Address:	PO Box 3964	11				
City:	Ninilchik	State:	AK	ZIP:	99639	9
Residency of Agent:					Yes	No
ls your corporation or LL	C's registered agent	an individual resident of	the state of Alaska?		~	
	Sec	tion 5 – Other L	icenses	iterior (	la de la la	
Ownership and financial intere	est in other alcoholic	beverage businesses:			Yes	No
Does any representative any other alcoholic beve				ancial interest in		
If "Yes", disclose which indi license number(s) and licen		ancial interest, what the	type of business is, a	and if licensed in A	laska, whi	ch
ncense number(s) and ncen	se type(s).					
	Sec	ction 6 – Author	rization	74	de la company	
Communication with AMCO sta	off:				Yes	No
Does any person other th AMCO staff?	an a licensee named	in this application have	authority to discuss t	this license with	~	
If "Yes", disclose the name o	of the individual and	the reason for this auth	norization:			
Brian McCorison, Hu	sband of Owner					



Alaska Alcoholic Beverage Control Board

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

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#### Section 7 - Certifications

Form AB-00: New License Application

Control of the contro	
Read 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.	Inn
I certify that all proposed licensees have been listed with the Division of Corporations.	1mn
I certify 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.	1mm
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.	Jan
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application,	Inn
I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.	Tm
NOTARY PUBLIC Signature of Notary Public in and for the State of Alacka  Notary Public in and for the State of Alacka  Notary Public in and for the State of Alacka  Notary Public in and for the State of Alacka  My commission expires: 04/13/2025  Subscribed and sworn to before me this 5 day of December 3	UL 



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#### 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 second page 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.	~	

#### Section 1 - Establishment Information

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

Licensee:	The Rustic Peony, LLC	, LLC License Number:				
License Type:	04.11.140 Winery					
Doing Business As:	Swamp Donkey Beverage Con	mpany				
Premises Address:	15705 Brody Rd					
City:	Ninilchik	State:	AK	ZIP:	99639	

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Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u> tbs://www.commerce.alaska.gov/web/amco

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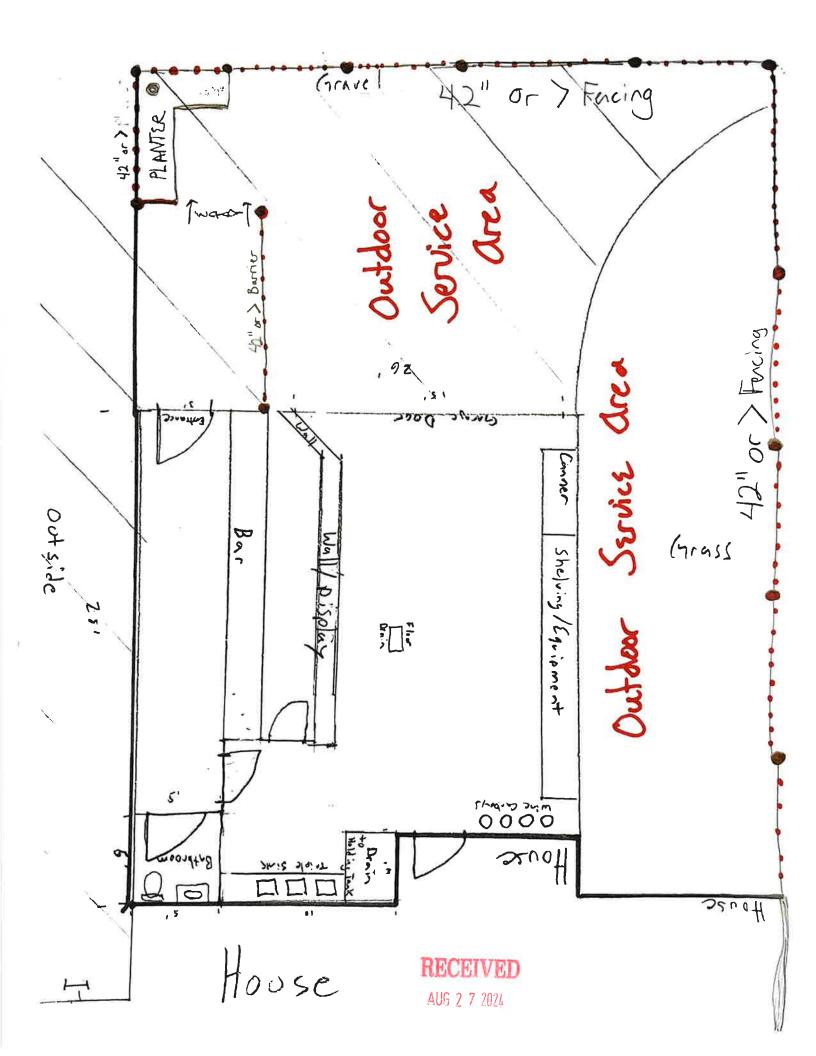
Alaska Alcoholic Beverage Control Board

### 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, cross-streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of this form.

SEE attachEd



# Swamp Donkey Beverage Company, LLC

#### Outdoor/Indoor Serving Security Plan

- 1. All minors must be accompanied by an adult (age over 21) while in the restricted area when any alcohol is being served/sold/consumed.
- 2. All new patrons are carded upon ordering alcohol.
- 3. All staff are trained in the identification of fake IDs.
- 4. Railing/Fencing/Rope or physical barrier will be at minimum 42" in height around the outdoor servicing area.
- 5. Underaged persons will be monitored closely by our professionally trained alcohol servers.
- 6. Proper egress from the outdoor service area will always remain unobstructed.
- ABC mandated posters as required by law are posted inside Swamp Donkey Beverage Company.
- 8. All entrances and exits will provide clear notice that NO ALCOHOL IS ALLOWED BEYOND THE OUTDOOR SEATING AREA.
- 9. Keeping outdoor seating area viable without any increased risk to minors exposed to alcohol WILL continue to be a part of our training for our staff.
- 10. All safety related operations for our current liquor service will additionally be enforced in the new service area.
- 11. Proper signage at points of entry indicating no minors without a parent or legal guardian will be posted.
- 12. All servers will closely monitor that only the guests that have been carded will have alcoholic beverages.
- 13. Our top priority continues in providing safety for all guests regarding the service of alcoholic beverages.
- 14. Servers will be monitoring the outdoor area physically, periodically and otherwise through a security camera in place, to monitor consumption.

