



Alcohol and Marijuana Control Office

550 W 7<sup>th</sup> Avenue, Suite 1600

Anchorage, AK 99501

[alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov)

<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.

### Section 1 – Establishment and Contact Information

Enter information for the business seeking to be licensed.

Licensee:	The Rustic Peony, LLC				
License Type:	Winery Retail	Statutory Reference:	04.09.330		
Doing Business As:	Swamp Donkey Beverage Company				
Premises Address:	15705 Brody Rd				
City:	Ninilchik	State:	AK	ZIP:	99639
Local Governing Body:	Kenai Peninsula Borough				
Community Council:					

Mailing Address:	PO Box 39641				
City:	Ninilchik	State:	AK	ZIP:	99639

Designated Licensee:	Tiffany McCorison				
Contact Phone:	907-360-3898	Business Phone:	907-267-9473		
Contact Email:	mccorisonstiffany@gmail.com				

Seasonal License? ☐ Yes ☒ No If "Yes", write your six-month operating period: \_\_\_\_\_

OFFICE USE ONLY				
Complete Date:		License Years:		License #:
Board Meeting Date:		Transaction #:		
Issue Date:		Examiner:		



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### Section 2 – Premises Information

Premises to be licensed is:

☐

an existing facility

☐

a new building

☒

a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer.

4 Miles

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.

3.5 Miles

### Section 3 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 4.

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

The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	



## Alaska Alcoholic Beverage Control Board

**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*.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

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

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

Entity Official:					
Title(s):		Phone:		% Owned:	
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 #:	10028744	AK Formed Date:	4/13/15	Home State:	AK
Registered Agent:	Tiffany McCorison		Agent's Phone:	907-360-3898	
Agent's Mailing Address:	PO Box 39641				
City:	Ninilchik	State:	AK	ZIP:	99639

Residency of Agent: Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?

☒☐

### Section 5 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses: Yes No

Does any representative or owner named in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?

☐☐

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

### Section 6 – Authorization

Communication with AMCO staff: Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

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If "Yes", disclose the name of the individual and the reason for this authorization:

Brian McCorison, Husband of Owner



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### Section 7 – Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

I certify that all proposed licensees have been listed with the Division of Corporations.

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.

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.

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

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.

Signature of licensee

Printed name of licensee

Signature of Notary Public

NOTARY PUBLIC  
Tandra K. Wallace  
STATE OF ALASKA

Notary Public in and for the State of Alaska  
My commission expires: 04/13/2025

My Commission Expires 04/13/2025  
Subscribed and sworn to before me this 5<sup>th</sup> day of December, 2023





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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	License Number:	
License Type:	04.09.330 Winery		
Doing Business As:	Swamp Donkey Beverage Company		
Premises Address:	15705 Brody Rd		
City:	Ninilchik	State:	AK
		ZIP:	99639



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## 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

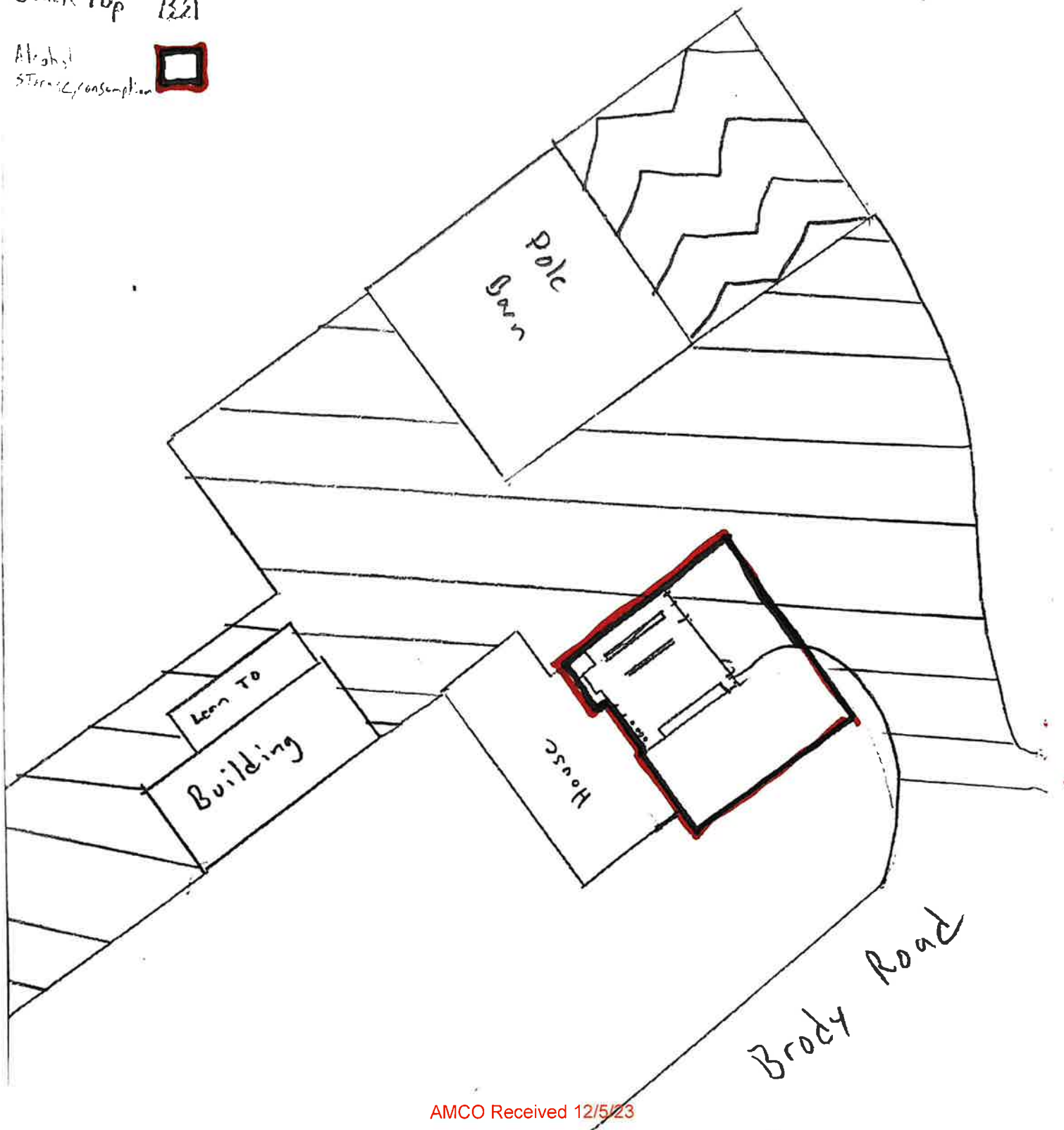
Key

Gravel 

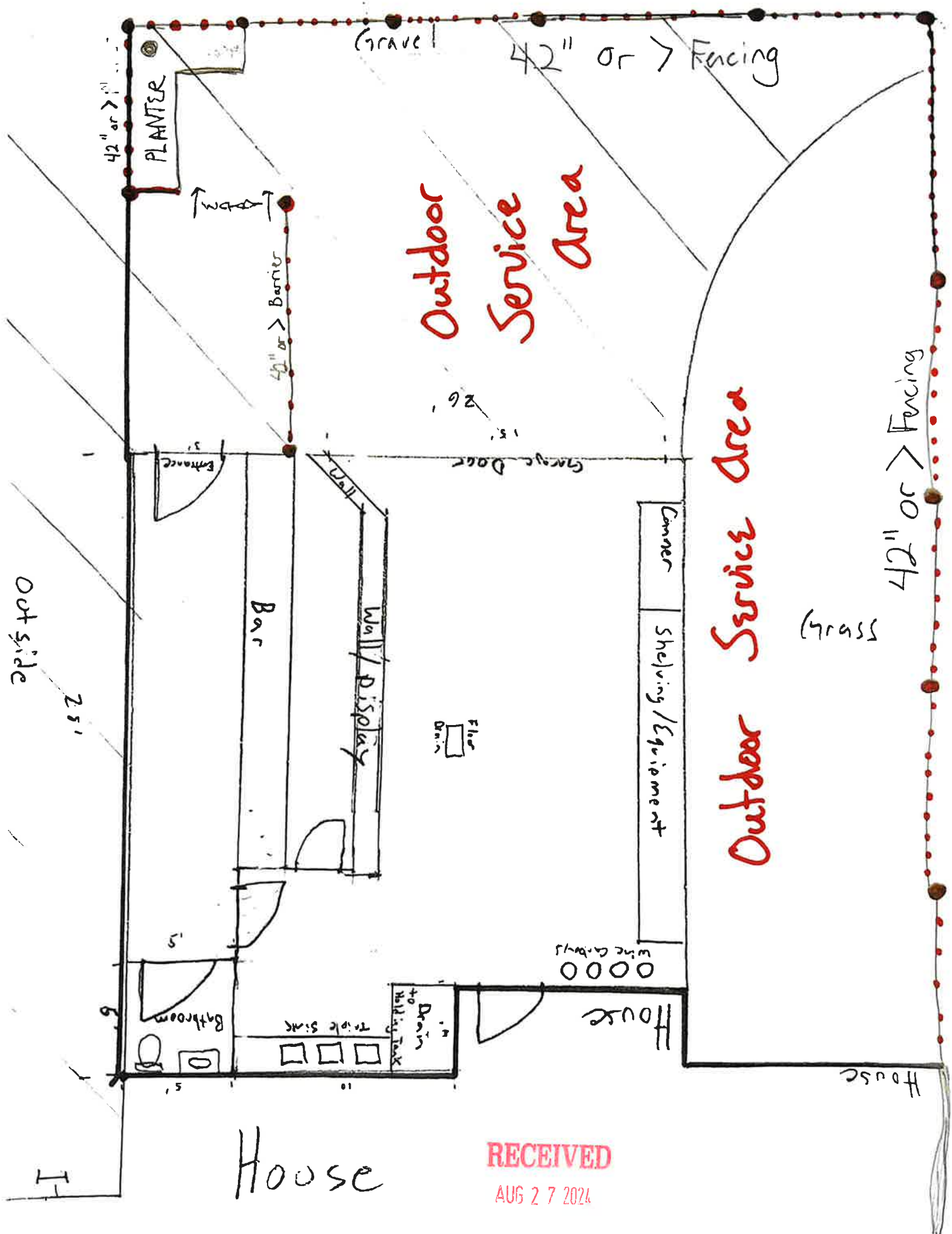
Grass 

Black Top 

Alcohol  
Storage/Consumption 







RECEIVED  
AUG 27 2024

# **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.**
- 7. 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.**

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**AUG 27 2024**