



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

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Why is this form needed?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing 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, AS 04.11.280, AS 04.11.290, 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 – Transferor Information

Enter information for the **current** licensee and licensed establishment.

Licensee:	JL Sitka, Inc, (John Emmi 50%, and Lisa Laudon 50%)			License #:	1031	
License Type:	Beverage Dispensary - Tourism			Statutory Reference:	AS 4.11.090	
Doing Business As:	Westmark Sitka Hotel					
Premises Address:	330 Seward Street					
City:	Sitka	State:	AK	ZIP:	99835	
Local Governing Body:						

Transfer Type:

- ☒ Regular transfer
- ☐ Transfer with security interest
- ☐ Involuntary retransfer

OFFICE USE ONLY			
Complete Date:		Transaction #:	165-98898
Board Meeting Date:		License Years:	
Issue Date:		Examiner:	

#100598898



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

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 2 – Transferee Information

Enter information for the **new** applicant and/or location seeking to be licensed.

Licensee:	SCOJO, LLC				
Doing Business As:	Westmark Sitka Hotel				
Premises Address:	330 Seward Street				
City:	Sitka	State:	Alaska	ZIP:	99835
Community Council:					

Mailing Address:	PO Box 672049				
City:	Chugiak	State:	AK	ZIP:	99567

Designated Licensee:	John E Emmi, Jr.				
Contact Phone:	907-229-7135	Business Phone:			
Contact Email:	akjohnemmi@gmail.com				

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

Section 3 – 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.

.2 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.

.1 miles



Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application**Section 4 – Sole Proprietor Ownership Information**

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5.

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:	

Section 5 – 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 6.

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:	John E Emmi, Jr.				
Title(s):	Member	Phone:	9072297135	% Owned:	100
Address:	PO Box 672049				
City:	Chugiak	State:	AK	ZIP:	99567



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

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

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:	

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 #:	114445	AK Formed Date:	02/28/2008	Home State:	AK
Registered Agent:	Darryl L. Thompson	Agent's Phone:	907-272-9322		
Agent's Mailing Address:	880 N Street, Suite 101				
City:	Anchorage	State:	AK	ZIP:	99501

Residency of Agent:

Yes No

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





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

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses:

Yes No

Does any representative or owner named as a transferee 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):

John Emmi (Twins, Inc.) The Pool Room, License # 4419, Beverage Dispensary - Tourism; John Emmi (Twins, Inc.) The Grill, License # 4733, Beverage Dispensary
John Emmi (Triplets, Inc.) Locals, License # 5180, Beverage Dispensary - Tourism; John Emmi (JL Sitka, Inc.) Westmark Sitka Hotel, License # 1031, Beverage Dispensary - Tourism; John Emmi (The Sitka Hotel LLC) The Sitka Hotel, Beverage Dispensary - Tourism, License # 5442;
Pending: John Emmi (Baranof Lodge, LLC) 907 Lounge, Beverage Dispensary - Tourism, License # 6137

Section 7 – 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?



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

Darryl L. Thompson, Esq., Thompson Law Group



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

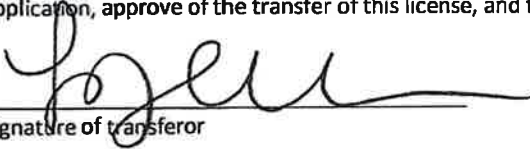
Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.




Signature of transferor

Lisa Laudon 50% Shareholder

Printed name of transferor

Subscribed and sworn to before me this 25th day of JULY, 20 23.





Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 6-16-24

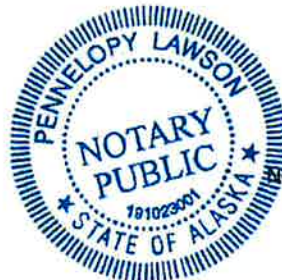


Signature of transferor

John Emmi 50% Shareholder

Printed name of transferor

Subscribed and sworn to before me this 28 day of July, 20 23.





Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 10/23/2023



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

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee 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.

JE

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

JE

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.

JE

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.

JE

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

JE

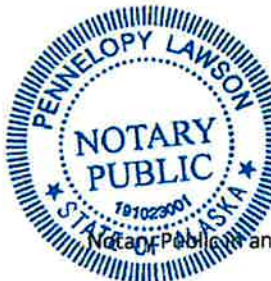
I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand 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.

JE

Signature of transferee

John Emmi Sole Member (100%)

Printed name



Signature of Notary Public

Notary Public and for the State of

Alaska

My commission expires: 10/23/2023

Subscribed and sworn to before me this 28 day of July, 2023.



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:	SCOJO, LLC	License Number:	1031		
License Type:	Beverage Dispensary - Tourism				
Doing Business As:	Westmark Sitka Hotel				
Premises Address:	330 Seward Street				
City:	Sitka	State:	AK	ZIP:	99835



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

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.

SENT BY FAX TELEPHONE 7221 1 7- 1-91 110:28 AM 1 8072507834-804 747 6241

ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSED PREMISES DIAGRAM (RDP)

D/D/A: WISCONSIN

PREMISES LOCATION: 330 SETHCO STREET
SITKA, AK 99815

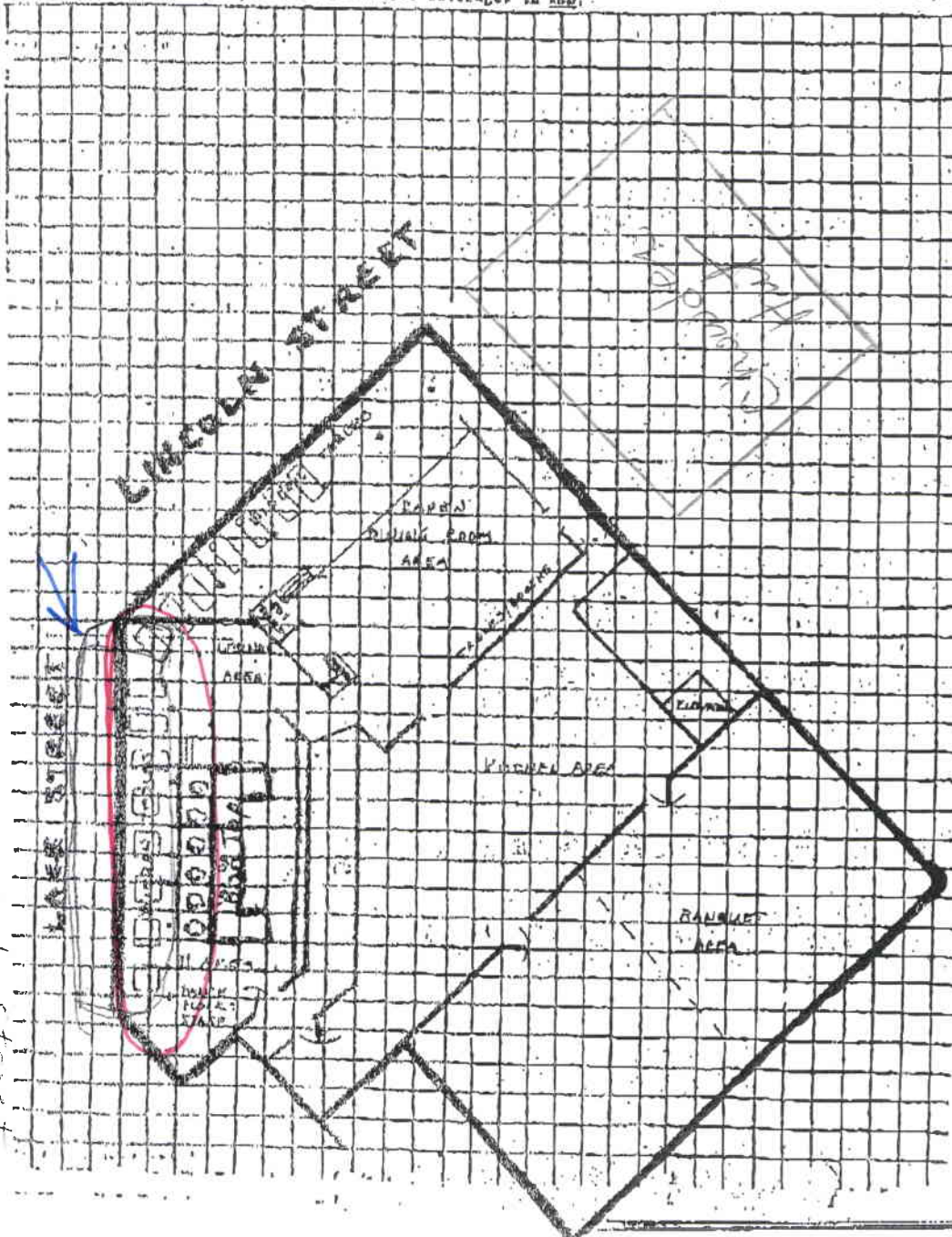
INSTRUCTIONS: Draw a detailed floor plan of your current or proposed licensed premises on the graph below; show all entrances and exits, and all fixtures such as counters, bars, coolers, stages, etc.

Indicate scale used by 1 after appropriate statement.

SCALE A
1 square = 1 sq. ft.

SCALE B
1 square = 4 sq. ft.

Outline the area to be designated for sale, service and consumption of consumption of alcoholic beverages in RBD.



48 x 48
State of Alaska
Department of Public Safety
Alcoholic Beverage Control Board
5848 E. Tudor Road
Anchorage, Alaska 99507
12890001



Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

The new endorsement application form is required to apply for a restaurant endorsement to support your underlying license or pending license application. Applicants should review and become familiar with AS 04.09.450, **Title 04 of Alaska Statutes** and **Chapter 305 of the Alaska Administrative Code**. This form must be completed and submitted along with all other required forms and documents before any endorsement application will be considered complete and placed in the queue for our licensing examiners review.

Section 1 – Establishment and Contact Information

Enter information for the **current** licensee and licensed establish.

Licensee:		License #:	
License Type:		Doing Business As:	
Licensee Mailing Address:			
Full Premises Address:			
City:		State:	
		ZIP:	
Local Governing Body:		Email:	

Section 2 – Endorsement Requested

Restaurant Endorsement:	AS 04.09.450. A restaurant endorsement authorizes the holder of a beverage dispensary license, fair license, golf course license, sporting activity or event license, club license, outdoor recreation lodge license, destination resort license, or beverage dispensary tourism license. The biennial fee for a restaurant endorsement is \$200 with a \$25 application fee.
-------------------------	---

An application for a restaurant endorsement must specify the establishment or portion of the establishment that constitutes a bona fide restaurant, that there is supervision on the premises adequate to reasonably ensure that a person under 21 years of age will not obtain alcoholic beverages. This **endorsement** application is for the request of a designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

- ☐ Dining after standard closing hours: AS 04.16.010(c)
- ☐ Dining by persons 16 – 20 years of age: AS 04.16.049(a)
- ☐ Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)
- ☐ Employment for any persons under 21 years of age: AS 04.16.049(c)

NOTE: Under AS 04.16.049(d), a Department of Labor and Workforce Development work permit is not required to employ a person 18 - 20 years of age.

Section 3 – Minor Access

Review AS 04.16.049(a); AS 04.16.049(c)

Be specific in your list where within the premises minors are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Minors will only be allowed in the dining area OR minors will only be employed and present in the kitchen).

--



Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

Describe the policies, practices and procedures that will be in place to ensure that minors do not gain access to alcohol while dining or employed at your premises. Outline how and where alcohol is stored on premises. Acknowledge that employees who sell and serve alcohol must have a current Server Education Card.

Is an owner, manager, or assistant manager who is 21 years of age or older always present on the premises during business hours?

Yes

☐

No

☐

Section 4 – ADEC Food Service Permit

Per AS 04.21.080(b) for an establishment to qualify as a bona fide restaurant, a Food Service Permit or (for licenses within the Municipality of Anchorage) corresponding Department of Health and Human Services documentation is required.

Link to the Alaska Department of Environmental Conservation (ADEC) Food Safety Website:

<http://dec.alaska.gov/eh/fss/food/>

Link to the Municipality of Anchorage Food Safety Website:

<http://www.muni.org/Departments/health/Admin/environment/FSS/Pages/fssfood.aspx>

IF you are unable to certify the below statement, please discuss the matter with the AMCO office:

Initials

I have attached a copy of the current food service permit for this premises OR the plan review approval.

***Note:** If a plan review approval is submitted, a final permit will be required before finalization of any permit or license application.

Section 5 – Hours of Operation

Review AS 04.16.010(c).

Include variances in weekend/weekday hours, and indicate AM/PM:

Days/Hours of Operation

Weekday	Hours	Hours
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		



Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

Section 6 – Areas Covered by Endorsement

Does the endorsement apply to your entire licensed premises as approved by the ABC Board? Yes ☒ No ☐

Does the requested endorsement expand your currently licensed premises? Yes ☐ No ☒

- If No, attach the approved diagram, no larger than 8 1/2" x 11" of the layout, and identify the portions of the premises covered by various requested endorsements. You must use a solid, contiguous colored line in any color other than red to outline the outer perimeter of the area of the premises covered by the requested endorsement(s).
- If endorsements are overlapping, provide a conspicuous means to distinguish each endorsement from the other (e.g., keyed map with varying colors for each requested endorsement).
- Your drawing MUST include:
 - Dimensions in feet **not** square feet of all exterior walls and major interior walls (we do not accept diagrams drawn to scale)
 - Include cross-streets
 - A north arrow, and any significant geographical features. Points of reference, such as a compass showing North.
 - All entrances, exits, walls, bars, and fixtures
- If your premises includes multiple floors, please include a separate diagram of each floor. You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- **Any endorsement applications that include outdoor space** are required to submit a security plan that includes information about the barriers, practices, and personnel that are to be used to ensure that alcohol is not introduced or removed from the permitted premises and to prevent the access of alcohol by a minor during the permitted event. A security plan may be requested for other proposed locations on a case-by-case basis.

Section 7 – Attestations

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.

Initials

JE

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 3AAC 305.340.

JE

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

JE

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 of 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, and or endorsement. I further understand that this is a Class A misdemeanor under AS 11.56.210 to falsify an application and commit the crime of unsworn falsification.

JE

John E. Emmi, Jr.

Printed name of licensee

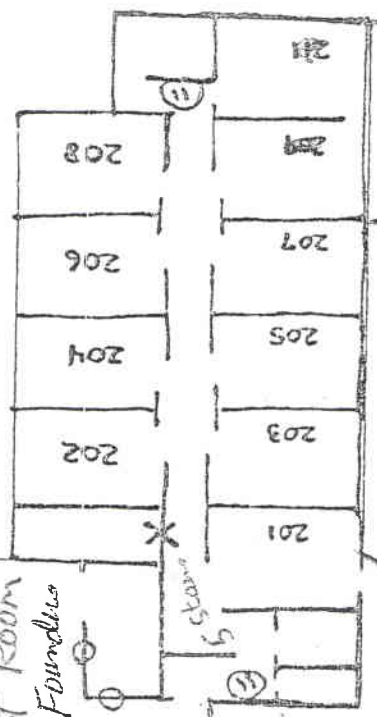
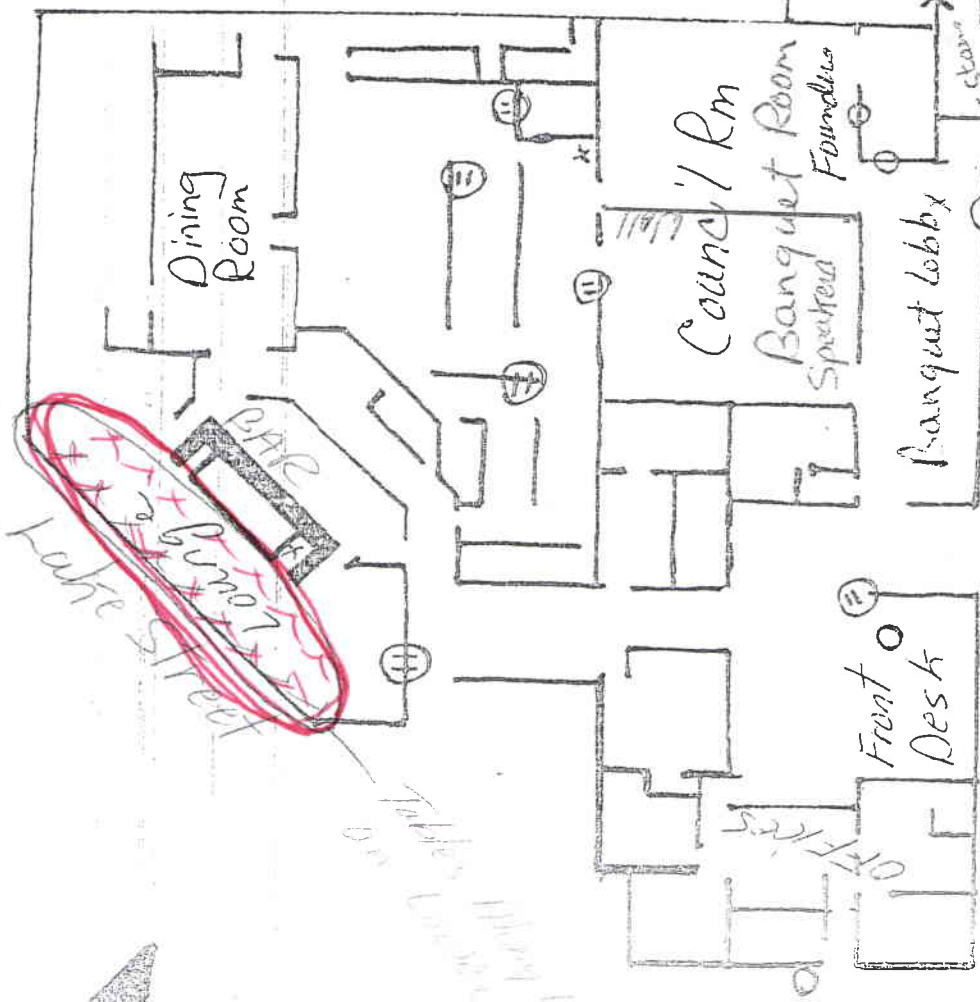
Signature of licensee

1-29-2024
Date

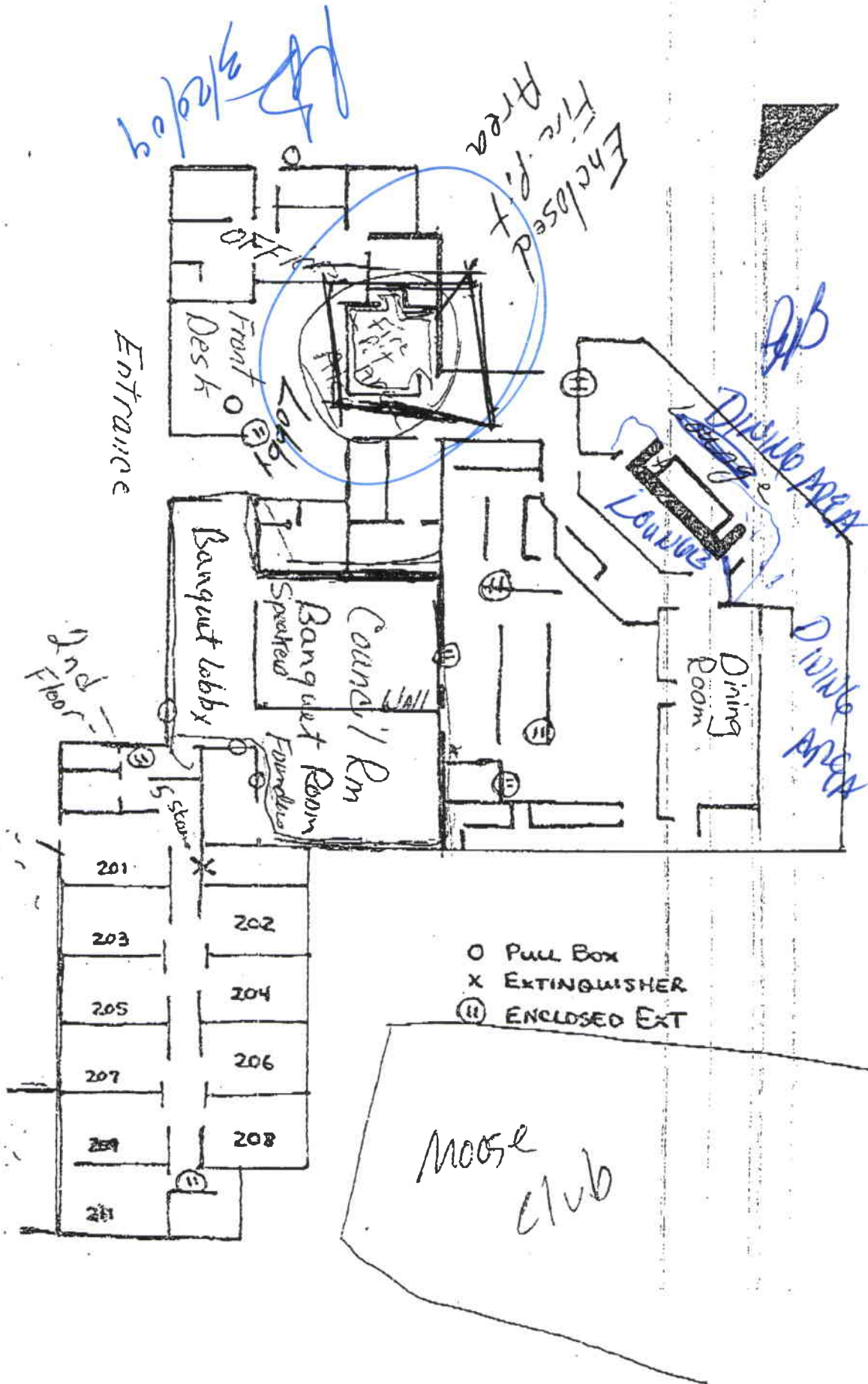
2nd
LOBBY LEVEL

Moose Club

0 Pull Box
X EXTINGUISHER
II ENCLOSED EXT



State of Alaska
Department of Public Safety
Alcoholic Beverage Control Board
5848 E. Tudor Road
Anchorage, Alaska 99507
12890001



LOBBY LEVEL

2.1

SENT BY: Xerox telecopier 7021 17-2-01 11:01:28AM 0072507834-004 747 6241

ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSED PREMISES DIAGRAM (RDP)

D/D/A: WESTMARK SITHAPREMISES LOCATION: 330 SELMA STREET
SITKA AK 99835

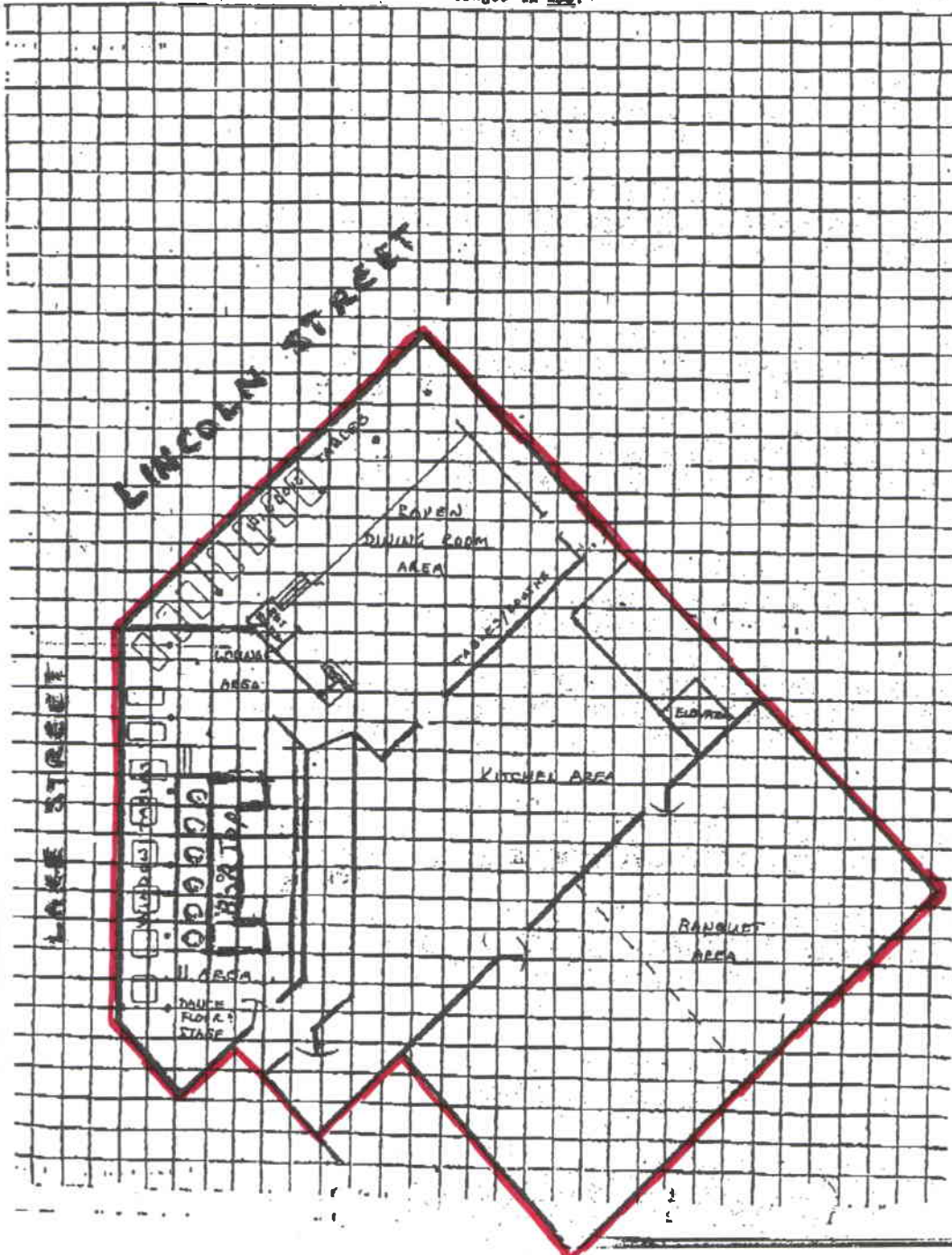
INSTRUCTIONS: Draw a detailed floor plan of your current or proposed licensed premises on the graph below; show all entrances and exits, and all fixtures such as counters, bars, coolers, stages, etc.

Indicate scale used by X after appropriate statement..

SCALE A
1 square = 1 sq. ft.

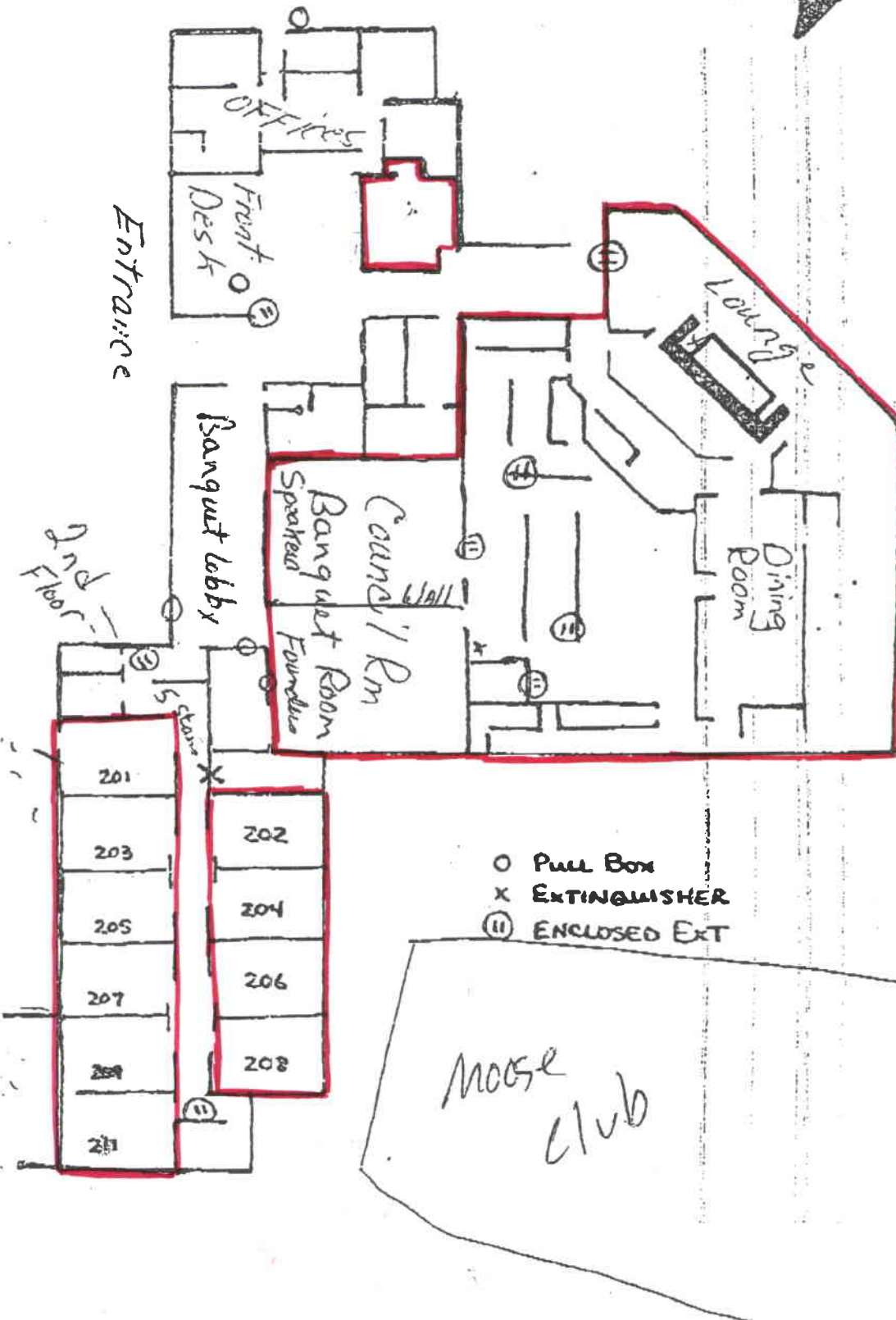
SCALE B ✓
1 square = 4 sq. ft.

Outline the area to be designated for sale, service and consumption of alcoholic beverages in RDP.

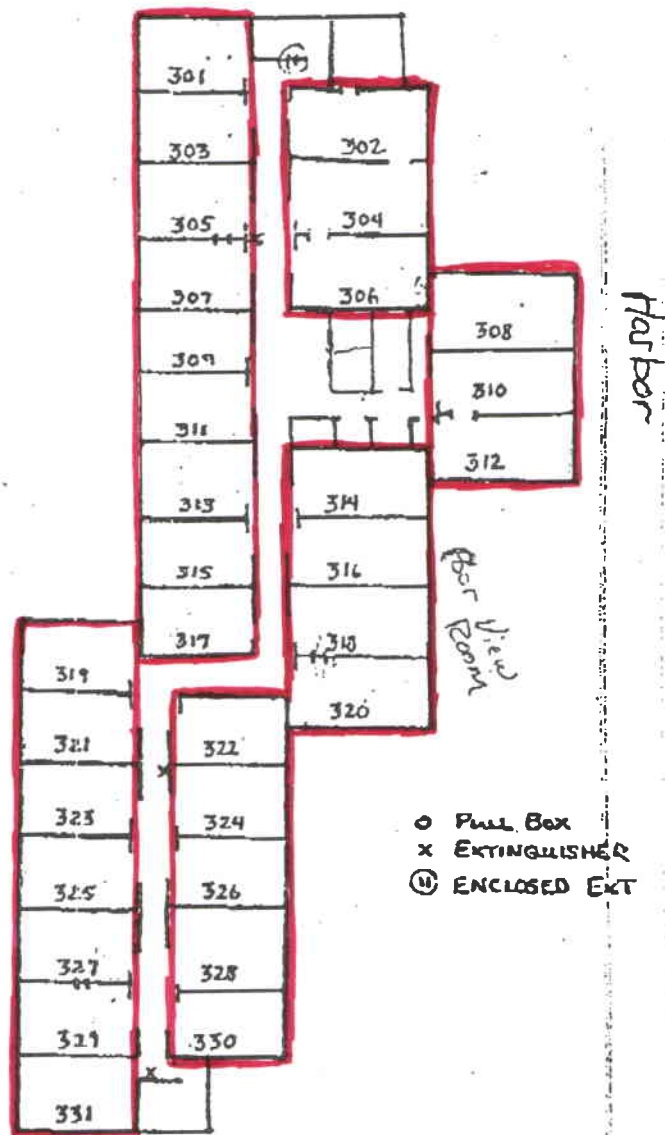


Address:
330 Seward St.
Sitka, AK 99835

Premise Diagram
JL Sitka, Inc. and Westmark Hotels, Inc
d/b/a Westmark Sitka Hotel



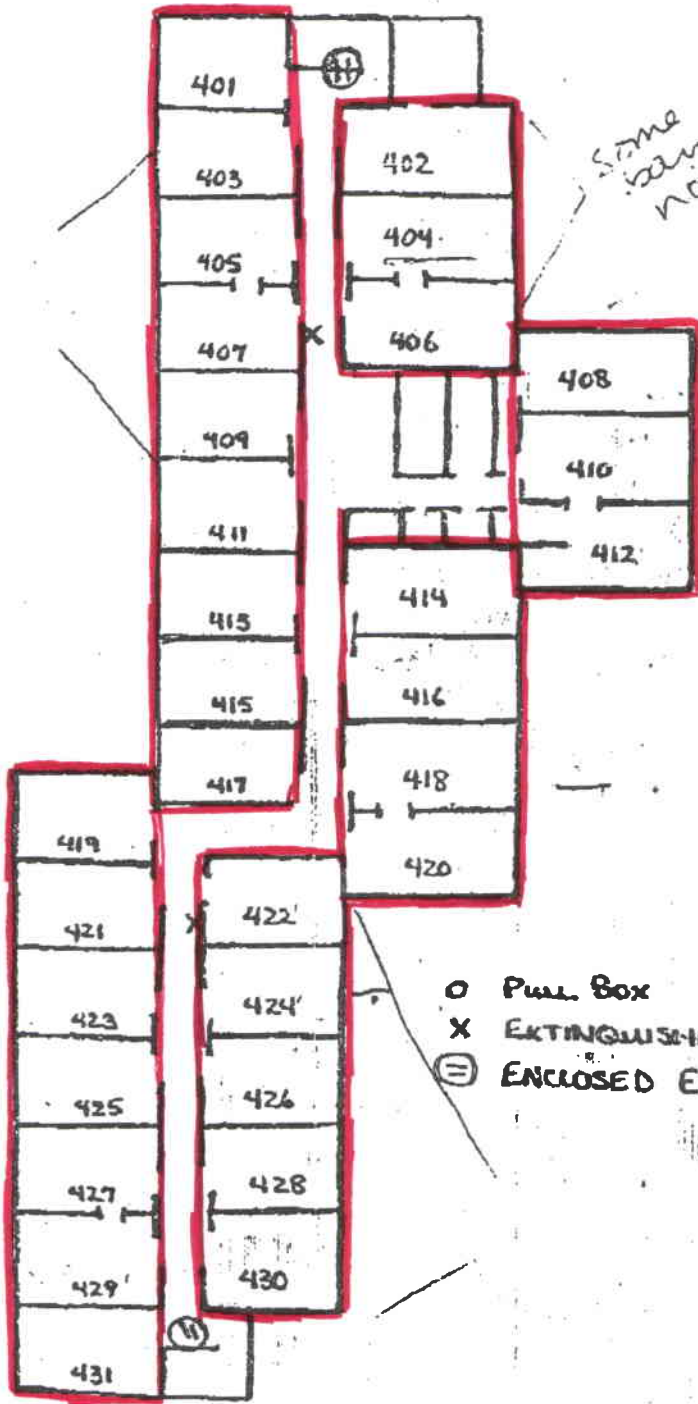
LOBBY LEVEL



Guest Rooms
THIRD FLOOR

Layout of
4th & 5th Floor
Same

front
door
noise

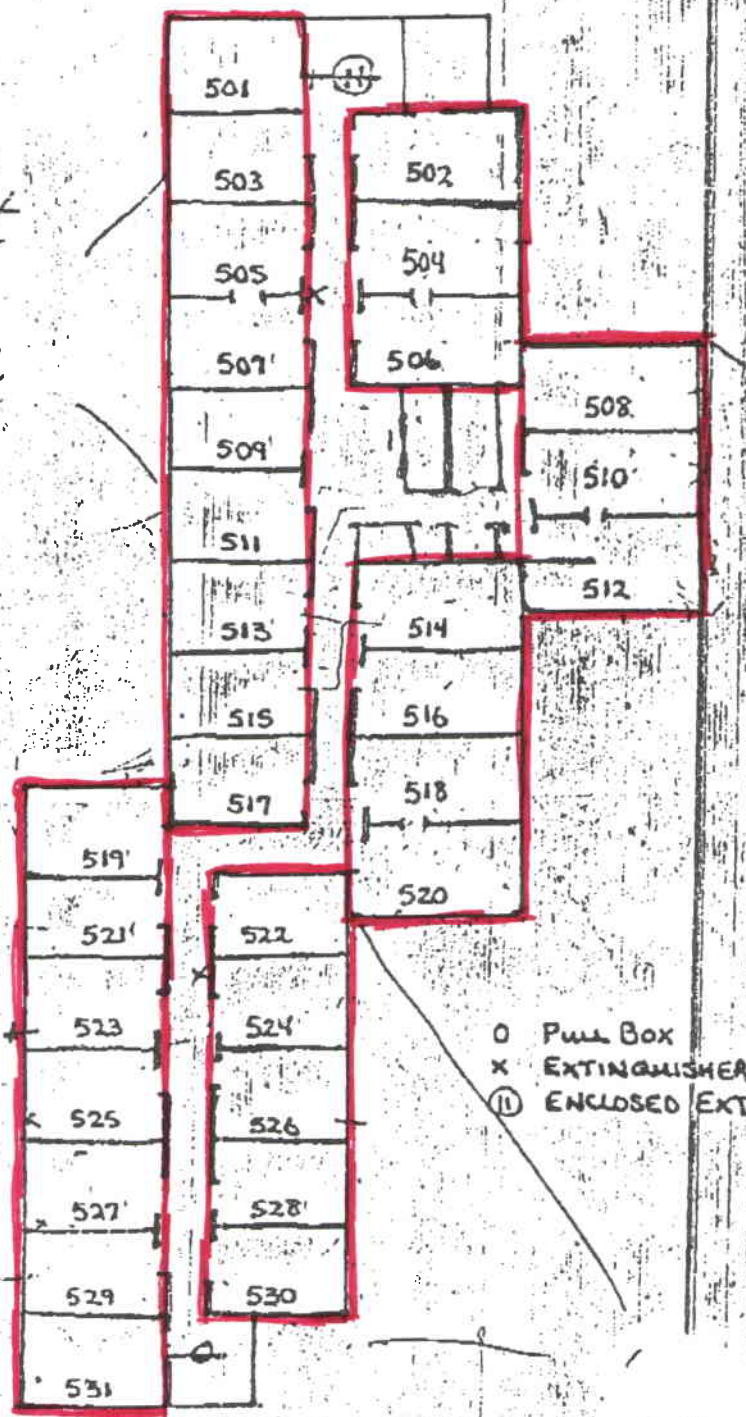


Some
band car
noise

~~Elevator
noise &
band noise~~

Harbor

Front
door
noise



~~CREATOR~~
~~NOISE &~~
~~ENCLOSURE~~

Harbor

907-272-9412

STATE OF ALASKA
ALCOHOL BEVERAGE CONTROL BOARD
Licensed Premises Diagram

INSTRUCTIONS: Draw a detailed floor plan of your present or proposed licensed premises on the graph below; show all entrances and exits, and all fixtures such as tables, booths, games, counters, bars, coolers, stages, etc.

DBA:

Westmark Sitka

PREMISES LOCATION:

330 Seward Street Sitka AK

99835

Indicate scale by x after appropriate statement or show length and width of premises.

SCALE A: 1 SQ. = 4 FT.

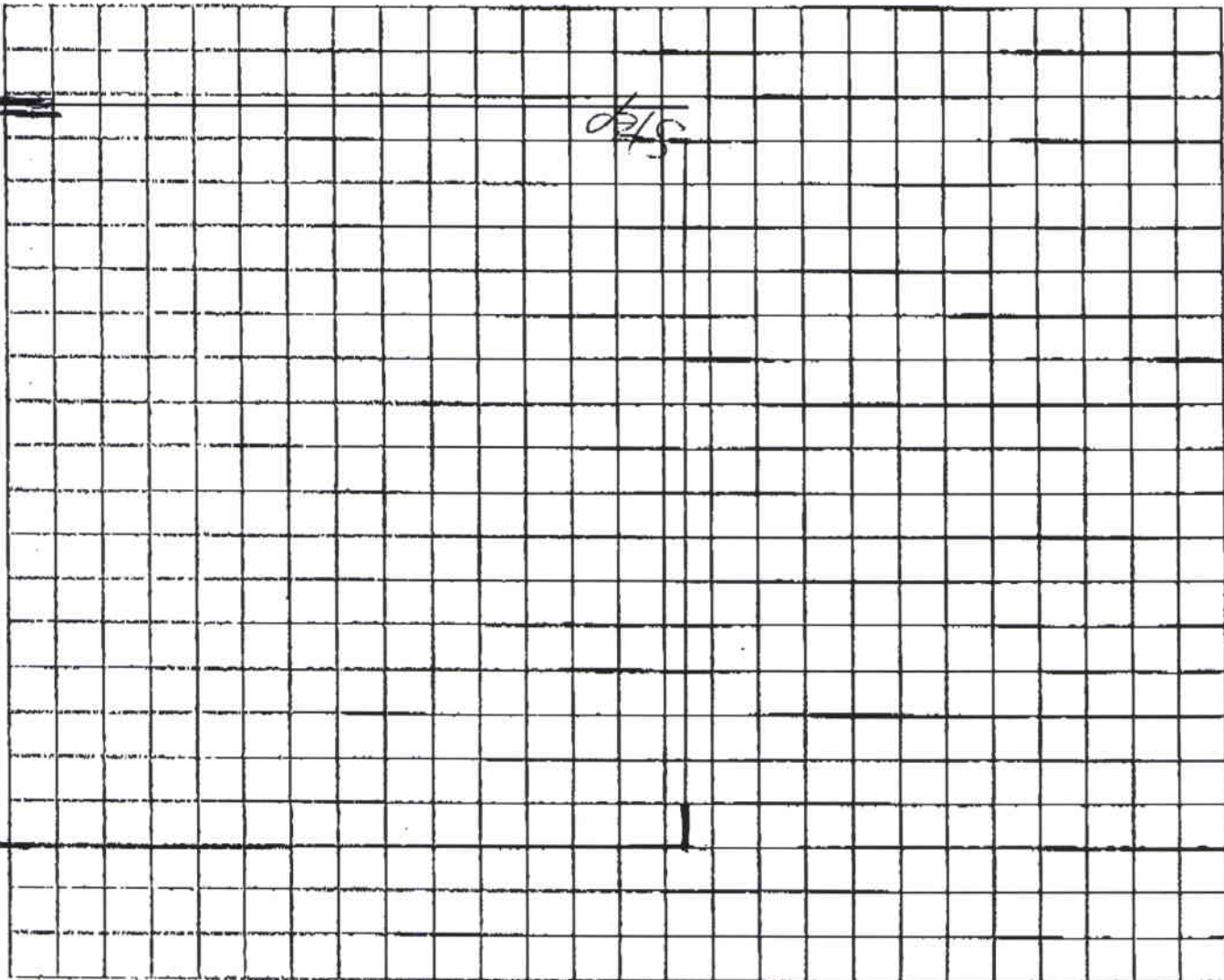
SCALE B:

1 SQ. = 1 FT.

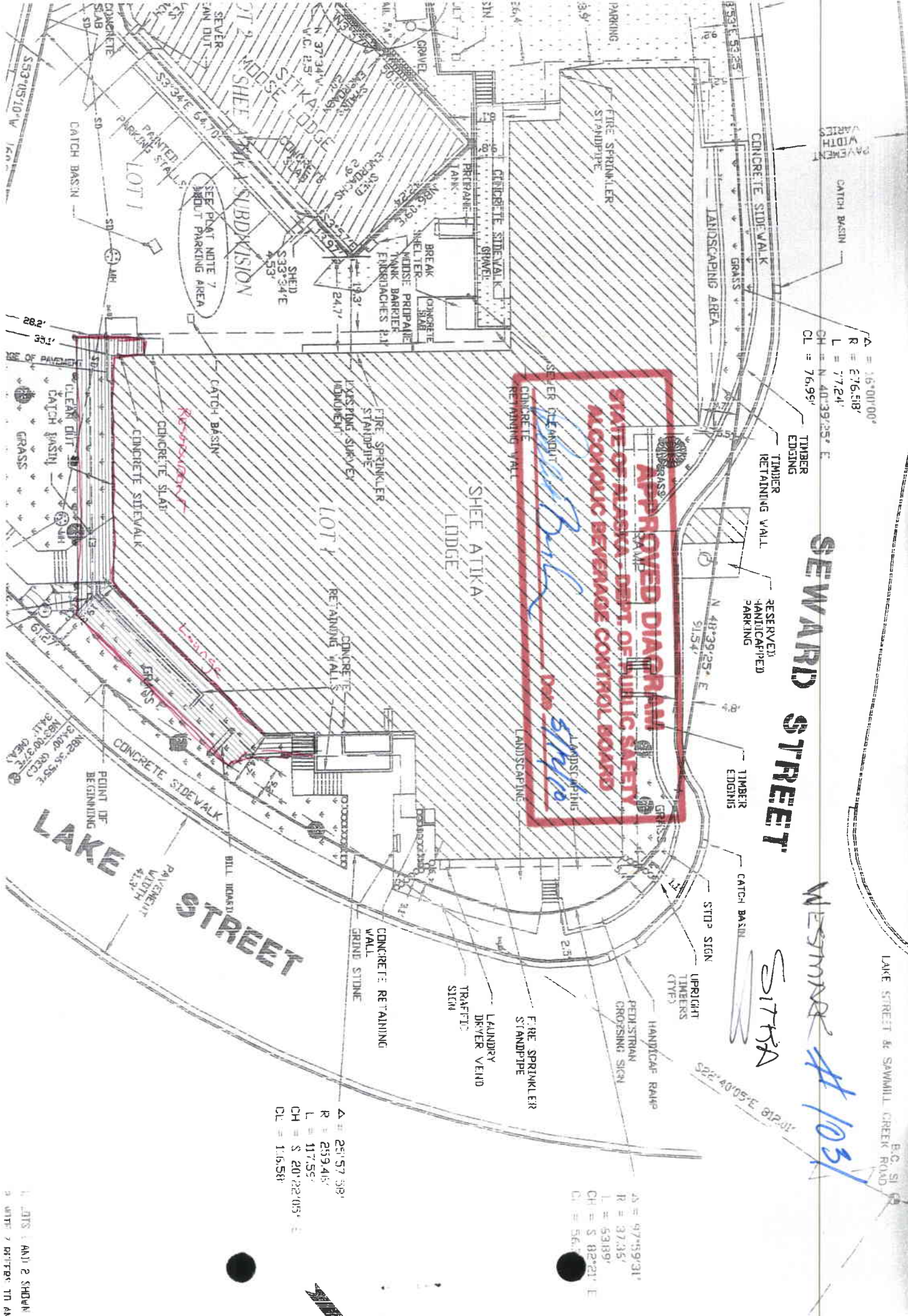
Length and width of premises in feet:

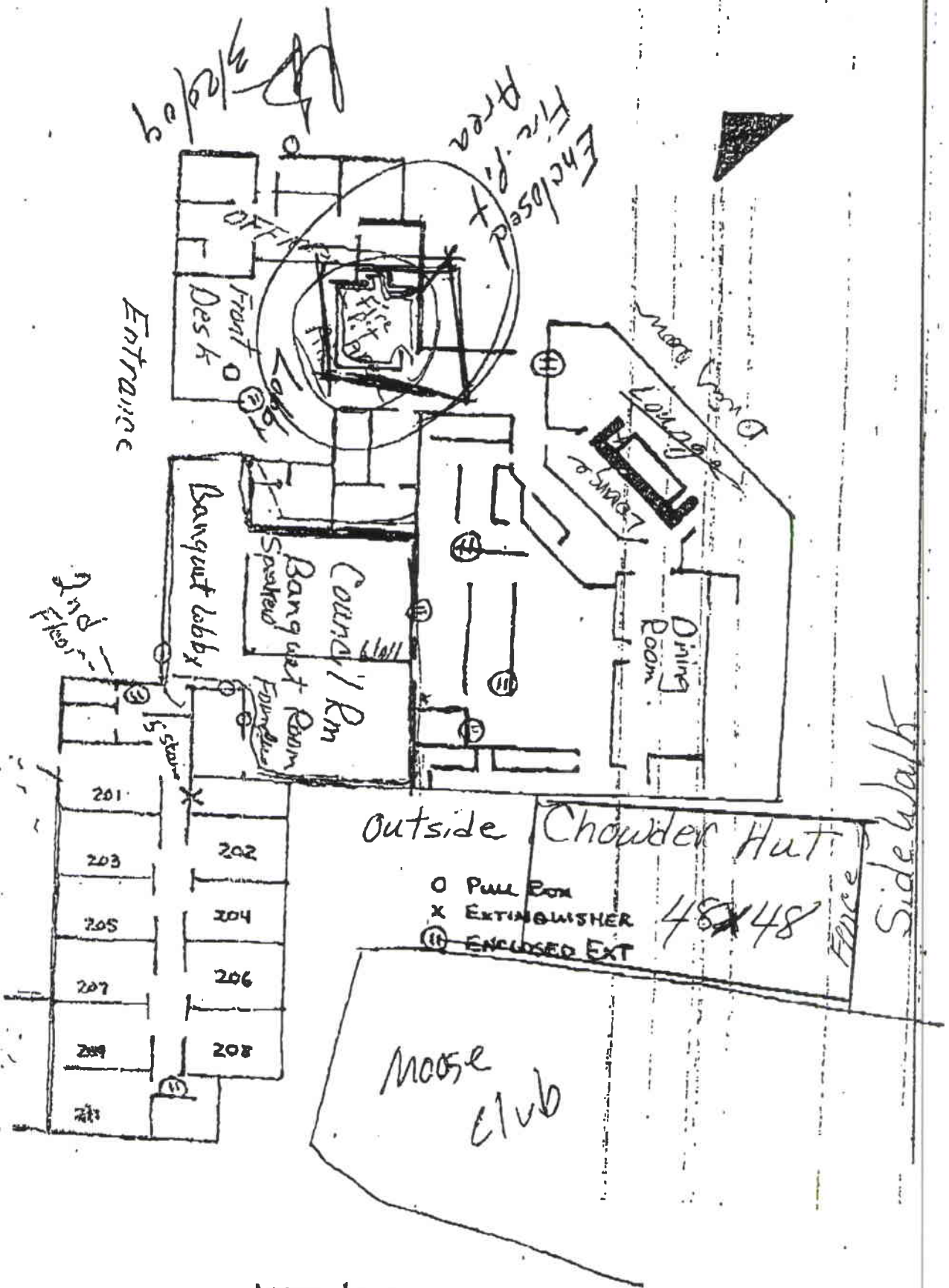
16'8" X 14'5"

Outline the area to be designated for sale, service, storage, and consumption of alcoholic beverages in red

DO NOT USE BLUE INK OR PENCIL ON THIS DIAGRAM.

WESTMARK SITKA





Sitka Borough Telephones 7271 & 7-1-1 (10:00 AM - 6:00 PM) 7072581034-906 767 6241

ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSED PREMISES DIAGRAM (RDP)

DIVISION: WESTMARK SITKA

PREMISES LOCATION: 330 SALMON STREET
SITKA AK 99834

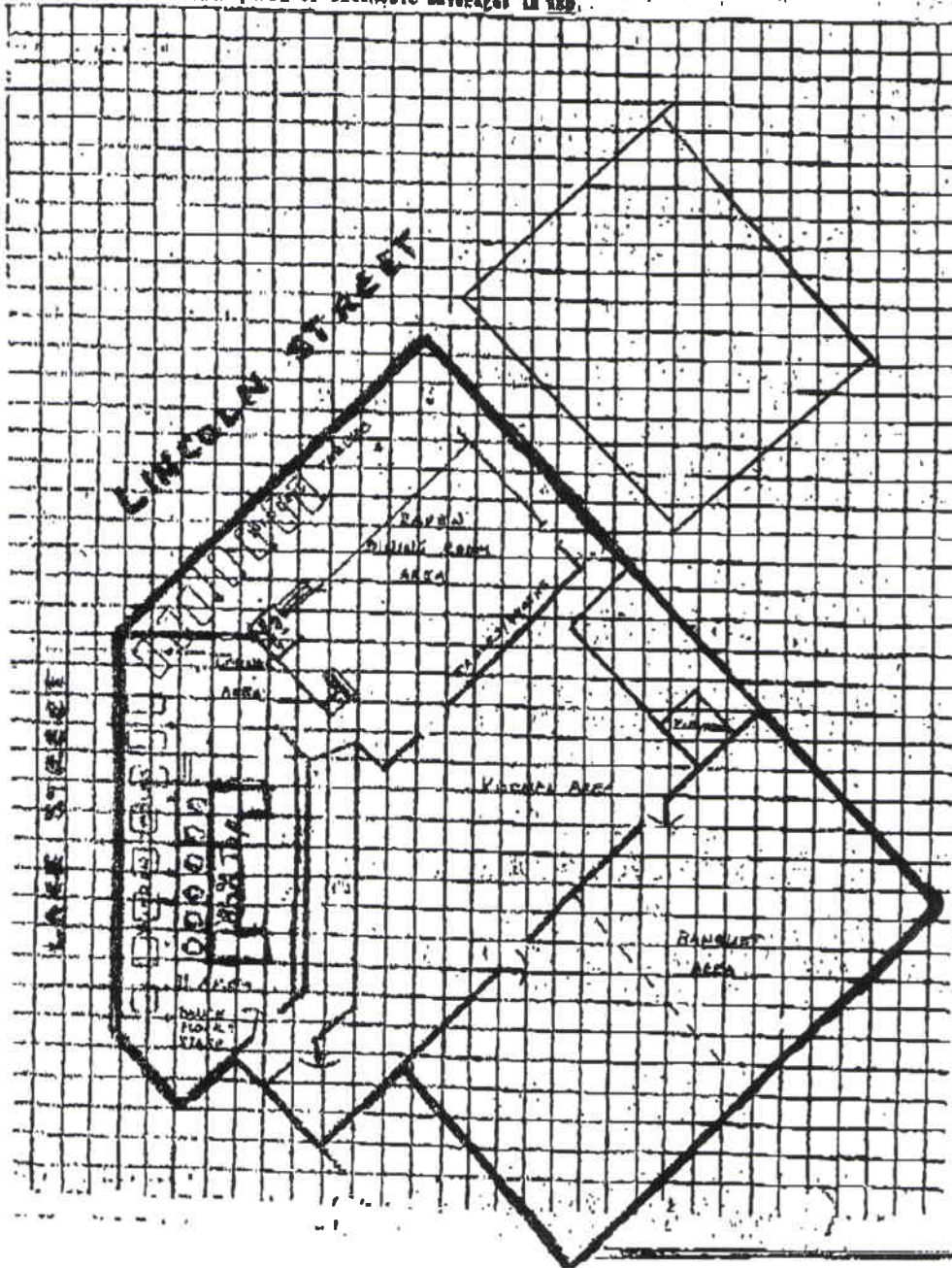
INSTRUCTIONS: Draw a detailed floor plan of your current or proposed licensed premises on the graph below; show all entrances and exits, and all fixtures such as counters, bars, coolers, stages, etc.

Indicate scale used by 1 after appropriate statement.

SCALE 1
1 square = 1 sq. ft.

SCALE 2 ☒
1 square = 1 sq. ft.

Outline the area to be designated for sale, storage and consumption of alcoholic beverages in RED.



48 x 48

SCOJO, LLC

dba Westmark Sitka Hotel

Security Plan

To ensure that restricted persons, including minors will not be served or consume alcohol on the premises, SCOJO, LLC, will do the following:

- Check IDs for every member purchasing alcohol.
- Underage people will be monitored closely by the professionally trained alcohol servers.
- All servers will closely monitor that only the guests that have been carded will have alcohol beverages.
- All staff are trained to identify fake IDs.
- ABC mandated posters as required by law are posted inside the business and at the entrances of the outdoor seating area.
- All entrances and exits will provide clear notice that NO ALCOHOL IS ALLOWED OUTDOORS.
- Alcohol WILL continue to be a part of our training for our staff.
- Providing safety for all guests regarding the service of alcoholic beverages.
- Any alcohol purchased in the bar area may be allowed to be taken to the guest's room, however will not be allowed to leave the hotel with the alcohol.
- No outside alcohol will be allowed into the service area
- All staff is trained to identify fake IDs
- All staff will be of the age of 21 or older
- There will always be a manager of or above the age of 21 present
- Any employees handling/serving alcohol must have current server training certification, aka Training for Professionals (TAP) as required by the State of Alaska
- ABC mandated posters as required by law are posted inside the business
- Alcohol sales will continue to be a part of SCOJO, LLC's training
- All safety related operations for any liquor service will be enforced
- Providing safety for all guests regarding the service of alcoholic beverages will be strictly enforced