8/14/24, 9:18 AM Workitem Process

License Renewal

Is this application being made by you for the benefit of someone else? If "YES," indicate below or attach explanation.

No

Has the applicant, applicant's spouse, partner, officer, director or stockholders, of the licensed entity become disqualified by law or by facts and conditions from holding a license or permit under the Alcohol and Cannabis Control Information System Alcoholic Beverage Code? If "YES," indicate below or attach explanation.

No

Have there been changes since your original application that have not been reported on this or previous applications? If "YES," indicate below or attach explanation.

No

How many hours did you operate in 2022 as set forth in AS 04.11.330?

Operated to meet the minimum 240 hrs.

How many hours did you operate in 2023 as set forth in AS 04.11.330?

Operated to meet the minimum 240 hrs.

Are you a seasonal license and has your operation times/dates/seasons changed?

No

Has any person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordanince adopted under AS 04.21.010 in 2022 or 2023.?

No

Have any Notices of Violation been issued for this license in 2022 or 2023?

No

Supporting Additional Document

• Tourism 2023.pdf



License Number:

555

License Expiration Date: 12/31/2023



Mailing Address:



P.O. box 39150 15652 sterling hwy Ninilchik , AK 99639



Document reference ID: 1535

Licensing Application Summary

Application ID: 1535

Applicant Name: Inlet View Restaurant & Bar, Inc.

License Type applied for: Beverage Dispensary Tourism License (BDTL) (AS

04.09.350)

Application Status: In Review

Application Submitted On: 12/21/2023

Entity Information

Business Structure: Corporation

Alaska Entity Number (CBPL): 36525D

Entity Contact Information

Entity Address: PO Box 39150, Ninilchik, AK, 99639, USA

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Inlet View Restaurant & Bar, Inc.	Debbie V. Cary	President	85
Inlet View Restaurant & Bar, Inc.	Robert John Ferguson	Secretary,Treasurer	15

Premises Address

Nearest municipality, city, and/or

Outside City Limits

borough:

Country, State, Zip:

AK, United States,

Basic Business information

Business/Trade Name:

Inlet View Restaurant & Bar

Local Government and Community Council Details

City/Municipality

No Local Government

Borough

Kenai Peninsula Borough

Public Notice Posting Attestation and Publishers Affidavit

Attestations

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

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 305.700.

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.

I certify that all proposed licensees have been listed with Division of Corporation, Business, and Professional Licensing.

I certify that I and any individual identified in the business entity ownership section of this application, has or will read AS 04 and its implementing regulations.

The proposed changes conform to all applicable public health, fire, and safety laws.

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

Electronic Signature not collected; application submitted based on paper form.

Payment Info

Payment Type: CC

Payment Id: 4a730ce5-91b5-4b5f-8ced-ee41f36565df

Receipt Number:

Payment Date: 12/21/2023 10:15:02 AM



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-37: Tourism Statement

A new, transfer, or renewal application for a Beverage Dispensary – Tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements currently listed under AS 04.11.400(d) and 3 AAC 304.325 which will be repealed when AS 04.09.350 is in effect January 1, 2024.

This document must be completed and submitted to AMCO's Anchorage office before any tourism license application will be reviewed.

reviewed.				
	Section 1 – Establishm	ent Information		
Enter information for the lice	ensed establishment or the business seeking	g to be licensed.		
Doing Business As:			License #:	
License Type:				
	Section 2 – Tourisr			
2.1. Explain how issuance of	a liquor license at your establishment has	/will encourage tourism.		
2.2. Explain how the facility	was/will be constructed or improved as re	quired by AS 04.11.400(d	I)(1):	
		4	- //-/-	
			YES	NO
2.3 Does the licensee or app tourism facility in which	licant for this liquor license also operate the	ne		
tourism facility in which	this license is locateur			
2.4 If "no" who operates the	tourism facility?			



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Form AB-37: Tourism Statement

2.5 Do you offer room rentals to the traveling public?	YES	NO
"yes" answer the following questions:		
How many rooms are available?		
How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink with refrigeration and cooking appliance devices, including a microwave)?	for food prepara	ation along
Do you stock or plan to stock alcoholic beverages in guest rooms?	YES	NO
If "no" is your facility located within an airport terminal?	YES	NO
2.6 If your establishment includes a dining facility, please describe that facility. If it does not plea	se write "none".	
2.7 If additional amenities are available to your guests through your establishment (eg: guided tou guests, other activities that attract tourists), please describe them. If they are not offered, please	·-	l equipment for



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Form AB-37: Tourism Statement

Section 3 – Certification				
Read the statement below, and then sign your initials in th	ne box to the right of the statement:	Initials		
application, and I know the full content thereof. I declare the same $\frac{1}{2} \frac{1}{2} \frac{1}{2}$	that it is a Class A misdemeanor under Alaska Statute			
Printed name of licensee/affiliate Sign	nature of licensee/affiliate			