



Alaska Alcoholic Beverage Control Board

Form AB-37: Tourism Statement

This form needs to be included with your application for a beverage dispensary tourism license. A new, transfer, or renewal application for a beverage dispensary tourism license (AS 04.09.350) must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements currently listed under AS 04.09.350 and 3 AAC 305.325.

This form must be completed and submitted to AMCO before any tourism license application will be determined complete.

Section 1 – Establishment Information

Enter information for the licensed establishment or the business seeking to be licensed.

Doing Business As:	THE POOL ROOM	License #:	4419
License Type:	BEVERAGE DISPENSARY TOURISM LICENSE		

Section 2 – Tourism Statement

2.1. Explain how the issuance, renewal, or transfer of the license to another person of the has/will encourage tourism.

THE POOL ROOM OPERATES OUT OF THE GRAND VIEW THAT HOSTS TOUR GROUPS. TOUR GROUPS PURCHASE ALCOHOL AS A PART OF THE BANQUET SERVICES

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.09.350(c)(1):

NO PLANS ---***See attached email answer***

2.3 Licensees licensed 12/31/23 and earlier. Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located?



2.4 If "no" who operates the tourism facility?

GRAND VIEW INN? SUITES



Alaska Alcoholic Beverage Control Board

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2.5 Do you offer room rentals to the traveling public ?

YES
☒

NO
☐

If "yes" answer the following questions AND you must apply for a Hotel or Motel Endorsement under AS 04.09.430
<https://www.commerce.alaska.gov/web/amco/AlcoholLicenseApplication.aspx> :

How many rooms are available?

130 RMS; 70 HOTEL, 40 EXT STAYS

How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)?

40

Do you stock or plan to stock alcoholic beverages in guest rooms? If yes, you must apply for and qualify for a Hotel or Motel Endorsement under AS 04.09.430.

YES
☐

NO
☒

If "no" to the question regarding rooms, 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 please write "none".

BOAT space

2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists), please describe them. If they are not offered, please write "none".

None



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

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Section 3 – Certification

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

Initials

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.



ERNEST EMMI

Printed name of licensee/affiliate

[Signature]

Signature of licensee/affiliate

From: [Chevy Sharlow](#)
To: [Serezhenkov, Kristina R \(CED\)](#)
Subject: Re: Two Incomplete 24-25 License Renewal Applications, 4733 and 4419- Both need signature - Submit Tourism Statement- SEE EMAIL
Date: Tuesday, July 30, 2024 2:01:12 PM

Oh, I misunderstood. Thank you for pointing that out. When the tour groups, or other banquets, request meals they are more times than not accompanied by (alcoholic) drinks. Those sales contribute to the upkeep of the property; We recently (Summer of '22) replaced the carpeting in the banquet space. We have renovated guest rooms and common areas, including updating furnishings, adding new décor, and improving the overall aesthetic appeal of our premises. There are hopes/plans to redo the parking lot for the restaurant patrons, the tour buses, and hotel guests. Tourists coming to the area in the summer time are the most profitable times for the hotel/restaurant.

On Tue, Jul 30, 2024 at 9:29 AM Serezhenkov, Kristina R (CED)
<kristina.serezhenkov@alaska.gov> wrote:

Good morning,

When going over the attached tourism statement I noticed that questions 2.2 is answered with 'no plans'. See the below regulations:

3 AAC 305.325. Beverage dispensary tourism licenses. (a) For the purposes of AS 04.09.350(c)(1), an applicant for the issuance, transfer of location, or renewal of a beverage dispensary tourism license shall include a description of how the requested license encourages the tourist trade by promoting the construction or improvement of a hotel, motel, or business as set out under AS 04.09.350(c)(1) or an airport terminal as set out under AS 04.09.350(c)(2).

Please send me via email, a fuller answer for question 2.2 and keep in mind that 'constructed or improved' has a wide meaning. Perhaps, if you have not constructed something new in the last two years then you may have 'improved' existing facilities?

Should you wish to move forward with 'no plans' as the answer, please let me know as this may require special board consideration to see if the application

License Renewal

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

Yes

Explanation

Office admin

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 ordinance 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



License Number:
4419



License Expiration Date:
12/31/2023



License Trade Name:
The Pool Room



Mailing Address:
2900 E Parks Hwy
Wasilla , AK
99654



Document reference ID : 1730

Licensing Application Summary

Application ID: 1730

Applicant Name: Twins Inc.

License Type applied for: Beverage Dispensary Tourism License (BDTL) (AS 04.09.350)

Application Status: In Review

Application Submitted On: 12/27/2023

Entity Information

Business Structure: Corporation

Alaska Entity Number (CBPL): 85265D

Entity Contact Information

Entity Address: 2900 E Parks Hwy, Wasilla, AK, 99654, USA

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Twins Inc.	Eric Croft JOHN EMMI	President, Stockholder/Shareholder, Treasurer	50
Twins Inc.	Ernest Emmi	Secretary, Stockholder/Shareholder, Vice President	50

Premises Address

Nearest municipality, city, and/or borough: Wasilla

Country, State, Zip: AK, United States, 99654

Basic Business information

Business/Trade Name: The Pool Room

Local Government and Community Council Details

City/Municipality Wasilla

Borough Matanuska-Susitna 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

A handwritten signature in black ink, consisting of a series of connected loops and strokes, extending horizontally across the page.

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

Payment Info

Payment Type : CC

Payment Id: 3b594653-e0c0-46e0-ae02-952d53796950

Receipt Number: 100739817

Payment Date: 12/27/2023 1:30:59 PM