

# Notice of Violation

(3AAC 304.525)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

AMCO  
JUN 15 2023

Date: 5/31/23

License #/Type: 5621

Restaurant/Eating Place

Licensee: The Highliner Restaurant, LLC

Address: 303 Adams St, Seward, AK

DBA: The Highliner Restaurant

AMCO Case #: 23-0933

This is a notice to you as licensee that an alleged violation has occurred. If the Alcoholic Beverage Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

On 5-22-23 an inspection was conducted at your establishment. As part of the inspection, Manager Stanislav Calenci was asked to provide proof of server education. Mr. Calenci could not find his server card. He was told to stop serving alcoholic beverages until he provided proof of training to the Alcoholic Beverage Control Board. On 5-24-23 Inv. Hamilton contacted Alaska CHARR and learned that Mr. Calenci's TAP Card, #152783, had expired on 4-1-20.

Your attention is directed to AS 04.21.025: Alcohol server education, 3ACC 304.465: Alcohol server education course, AS 04.21.030: Responsibility of licensee, agents, and employees and AS 04.16.150

Certified Mail 7021 0950 0001 6766 8899

You are directed to respond in writing to this Notice of Violation within 10 days of receipt to explain what action you have taken to prevent a re-occurrence of this violation. FAILURE TO RESPOND TO THIS NOTICE OF VIOLATION WITHIN 10 DAYS WILL RESULT IN YOUR APPEARANCE, EITHER IN PERSON OR TELEPHONICALLY, BEFORE THE ABC BOARD AT THEIR NEXT REGULARLY SCHEDULED BOARD MEETING.

\*Please send your response to the address below and include your alcohol license number in your response.

3 AAC 304.525 (B) provides that upon receipt of a Notice of Violation, a licensee may request to appear before the Director and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice and the Director must grant an appearance within ten days after receipt of a request. A Licensee shall respond, either orally or in writing, to the Notice.

Alcohol & Marijuana Control Office  
ATTN: Enforcement  
550 W. 7<sup>th</sup> Ave, Suite 1600  
Anchorage, Alaska 99501  
[amco.enforcement@alaska.gov](mailto:amco.enforcement@alaska.gov)

Received by:

SIGNATURE:

Date:

Issuing Investigator: J. Hamilton

SIGNATURE: *F.R. Hamilton*

Delivered VIA: Mail

Regarding the Notice of Violation, Stanislav Calenici's latest hire date is May 11<sup>th</sup>, 2023.

He has already completed his education as were requested. (see attached file )

To prevent the reoccurrence of a violation, several actions have been taken.

1. Periodic retraining and updates: Conducted regular refresher training sessions to reinforce responsible alcohol service practices and ensure staff members are aware of any regulation updates or changes.
2. Provided comprehensive training to all staff involved in the alcohol serving process, including bartenders, servers, and managers. The training covered responsible alcohol service, recognizing fake IDs, identifying signs of intoxication, and understanding local laws and regulations related to alcohol service.
3. Implemented rigorous procedures for verifying documents and alcohol serving certificates (TAP).
4. Established clear and enforceable policies that promote responsible alcohol service.
5. Monitoring and supervision of the Paperwork process for all staff members.
6. Compliance with regulations: Checked up to date with local, state, and federal regulations regarding alcohol service. Ensure that all licenses and permits are obtained and displayed appropriately. Conduct regular audits to verify compliance with applicable laws.
7. Incident reporting and documentation: Established a process for reporting and documenting incidents related to alcohol service, including instances where policies were violated or concerns were raised. This helps identify areas for improvement and enables appropriate action to be taken.
8. Continuous staff communication and feedback: Encourage open communication among staff members to address concerns, share best practices, and learn from each other's experiences. Create channels for staff to provide feedback on the alcohol serving process and suggest improvements.
9. Collaboration with local authorities: Maintained a positive and cooperative relationship with local law enforcement agencies and regulatory bodies. Seeking guidance and assistance when needed and cooperating fully in any investigations related to alcohol service violations.

By implementing these actions, the establishment will significantly reduce the likelihood of alcohol serving violations and create a safer and more responsible environment for community.

Thank you.

AMCO  
JUN 15 2023

PROFESSIONALS  
TAP



# CERTIFICATE *of* COMPLETION

THIS ACKNOWLEDGES THAT

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## Stanislav Calenici

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HAS SUCCESSFULLY COMPLETED THE

Online Alaska TAP® Responsible Beverage  
Server and Seller Training Program



Date of Completion:  
This Certificate Expires on: June 20th, 2023

*David Daniel*

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SIGNED, *David Daniel*, TAP Instructor



**NOTE - This is your temporary certification form. Your official certification card will be mailed to you within 5 business days.**

**This certificate is NOT valid if the person listed is under the age of 21.**

**Please contact Alaska CHARR at 907-274-8133 with questions regarding this certification**

# 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 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~~ YES \*per email response to inquiry- 2023 examiner K.R.S.

#

License Number:  
5621

#

License Expiration Date:  
12/31/2023

#

License Trade Name:  
The Highliner Restaurant

Mailing Address:  

#

303 Adams St PO BOX 1532  
Seward , AK  
99664 - 1532



Document reference ID : 3240

# Licensing Application Summary

**Application ID:** 3240

**Applicant Name:** The Highliner Restaurant, Llc

**License Type applied for:** Restaurant Eating Place License (REPL) (AS 04.09.210)

**Application Status:** In Review

**Application Submitted On:** 06/27/2024

## Entity Information

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**Business Structure:** Limited liability company

**Alaska Entity Number (CBPL):** 10072580

## Entity Contact Information

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**Entity Address:** 33318 Bear Lake Road, Seward, AK, 99664, USA

## Ownership / Principal Party Details

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Principal Parent Entity	Principal Party	Role	%Ownership
The Highliner Restaurant, Llc	Philip Zimmerman	Member	50
The Highliner Restaurant, Llc	Vivian Zimmerman	Member	50

## Premises Address

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**Nearest municipality, city, and/or borough:** Seward

Country, State, Zip:

AK, United States,

## Basic Business information

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**Business/Trade Name:**

The Highliner Restaurant

## Local Government and Community Council Details

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**City/Municipality**

Seward

**Borough**

Kenai Peninsula Borough

## Restaurant Detail

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**Dining after standard closing hours: AS 04.16.010(c)**

No

**Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)**

Yes

**Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)**

Yes

**Employment for any persons under 21 years of age: AS 04.16.049(c)**

Yes

## Food Service Permit

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## Entertainment & Service

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## Public Notice Posting Attestation and Publishers Affidavit

## Attestations

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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.

## Signature

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

## Payment Info

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Payment Type : CC

Payment Id: 47e58a54-832b-4c62-ac0f-e2a8c441dcf6

Receipt Number: 100813315

Payment Date: 6/27/2024 12:59:59 PM