

Notice of Violation

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

Date: 11/8/23

Licensee: Addie Camp, LLC

DBA: Addie Camp

License #/Type: 5712 Restaurant/Eating Place

Address: 43550 Whistie Hill Loop, Soldotna, AK

AMCO Case #: 23-1909

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 9-28-23, an inspection was conducted of your establishment. At that time, it was learned that you employee persons under the age of 18. From 5-21-22 to 10-21-23, there were 110 violations of AS 04.16.049 for under 18 persons not obtaining work permits from the Dept. of Labor. Ten of those violations include a 15 year old being employed.

Your attention is referred to AS 04.16.049(c) which in part reads, "Notwithstanding any other provision in this section, a person 16 or 17 years of age may enter and remain within the licensed premises of a hotel, golf course, or restaurant or eating place in the course of employment if (1) the employment does not involve the serving, mixing, delivering, or dispensing of alcoholic beverages; (2) the person has the written consent of a parent or guardian; and (3) an exemption from the prohibition of AS 23.10.355 is granted by the Department of Labor and Workforce Development."

Certified Mail 7021 0950 0001 6767 0076

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 alleged 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. 7th Ave, Suite 1600
Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issuing Investigator: J. Hamilton

SIGNATURE: *J. Hamilton*

Delivered VIA: Mail

Received by: *Mary Krull*

SIGNATURE: *Mary Krull*

Date:

11-17-23

Mailed 11-17-23

TO: Joe Hamilton

FROM: Mary Krull, owner
Addie Camp
43550 Whistle Hill Loop
Soldotna, Ak. 99669
License 5712

RE: Steps taken to correct violations

Hello, Joe

Per our conversations by email, once we became aware of the regulations for work permits after your visit on 9-27-23, we immediately submitted work permits for the 3 minors whom we employed. All 3 were approved before the individuals returned to work. We are currently compliant.

The steps we have taken to prevent another violation are as follows:

1. Updating all required forms.
2. Include a work permit form in new-hire paperwork.
3. Schedule first shift to start ONLY after work permit has been approved.
4. Educate all managers on Title IV regulations.

Again, we were unfamiliar with Title IV requirements that required work permits for employees 16-17 years-old. This error was by no means intentional, and we will enforce the law moving forward.

Thank you for working with us to correct this oversight.

Sincerely,

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?

Yes

Notices of Violation Document

- [AMCO Violation Notice.pdf](#)

Supporting Additional Document

- [AMCO Violation Notice Response.pdf](#)



License Number:
5712



License Expiration Date:
12/31/2023



License Trade Name:
Addie Camp



Mailing Address:
43550 Whistle Hl Lp
Soldotna , AK
99669



Document reference ID : 1522

Licensing Application Summary

Application ID:	1522
Applicant Name:	Addie Camp Llc
License Type applied for:	Restaurant Eating Place License (REPL) (AS 04.09.210)
Application Status:	In Review
Application Submitted On:	12/21/2023

Entity Information

Business Structure:	Limited liability company
Alaska Entity Number (CBPL):	10070508

Entity Contact Information

Entity Address:	43550 Whistle Hill Loop, Soldotna, AK, 99669, USA
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Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Addie Camp Llc	Mary Krull	Member	100

Premises Address

Nearest municipality, city, and/or borough:	Soldotna
Country, State, Zip:	AK, United States,

Basic Business information

Business/Trade Name:

Addie Camp

Local Government and Community Council Details

City/Municipality

Soldotna

Borough

Kenai Peninsula Borough

Restaurant Detail

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

Entertainment & Service

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.

Signature

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

Payment Info

Payment Type : Check

Check Number: 002575

Payment Date: 12/20/2023 4:03:53 PM