



alcohol.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board LASKA

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 - Trans	feror Inf	ormation		
Enter information for the <i>cur</i>	rent licensee and licensed establishme	ent.			
Licensee:	SEALEVEL INC.		License #: 3520		
License Type:	PACKAGE Store		Statutory Reference:		04.09.23
Doing Business As:	Fritz Creek Gen		tore		
Premises Address:	55770 EAST EN	_			
City:	Homex	State:	AF	ZIP:	99603
Local Governing Body:	Kenai Peninsula	B0 1006	H		
Transfer Type: Regular transfer Transfer with securit Involuntary retransf	er				
	OFFICE U	JSE ONLY			11.1.—
Complete Date:		Transe	action #:	0 804	f663
Board Meeting Date:		Licens	e Years:		
Issue Date:		Exami	iner:		





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	Section 2 - Trans	feree Inf	ormation				
Enter information for the new	v applicant and/or location seeking to	be licensed.					
Licensee:	Fritz Greak G	eneral	-Store				
Doing Business As:	Fritz Creek G	enerse	- Store	(1) = (1)			
Premises Address:	55 770 EAST E						
City:	Homex	State:	AK	ZIP:	99603		
Community Council: Kenzi Peninsula Borough							
			<u>. </u>				
Mailing Address:	60744 EAST END	. Rd					
City:	Homer	State:	AK	ZIP:	99603		
Designated Licensee:	Justin Cole				هې		
Contact Phone:	907-299-6177	Business	Phone:				
Contact Email:	ratone 1975@	4 Alros.	iom				
Seasonal License? Yes	If "Yes", write your section 3 - Pren				=		
	Section 3 - Fren	nises inii	ormation				
Premises to be licensed is:			3				
an existing facility	a new building	a propose	ed building				
The next two questions mus	et be completed by <u>beverage dispens</u> e	ary (including	tourism) and pag	ckage store applica	nts only:		
What is the distance of t the outer boundaries of	he shortest pedestrian route from the the nearest school grounds? Include t	e public entra	nce of the buildings	ng of your propose ur answer.	d premises to		
3 miles							
the public entrance of th	he shortest pedestrian route from the enearest church building? Include the	e public entra e unit of mea	nce of the building surement in your	ng of your propose ranswer.	d premises to		
1/2 mile							



MAY 13 2024

Alaska Alcoholic Beverage Control Board

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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). affiliate This individual is an: applicant Name: Address: ZIP: State: City: applicant affiliate This individual is an: Name: Address: State: ZIP: City:

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 <u>corporation</u>, 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 <u>limited liability organization</u>, 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 <u>partnership</u>, including a <u>limited partnership</u>, the following information must be completed for each <u>partner</u> with an interest of 10% or more, and for each <u>general partner</u>.

Entity Official:	Justin Cole				
Title(s):	Managing Member	Phone:	907-299-6177	% Owr	ned: 100
Address:	GOTHY EAST END		***************************************		
City:	Homer	State:	AK	ZIP:	99603





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1					
Entity Official:					
Title(s):		Phone	: :	% Ow	ned:
Address:					
City:		State:		ZIP:	
Entity Official:		1			
Title(s):		Phone): 	% Ow	ned:
Address:					
City:		State:		ZIP:	
E . II Official					
Entity Official:				0/ 0	
Title(s):		Phone		% Ow	nea:
Address:					
City:		State:		ZIP:	
This subsection must be comp standing with the Alaska Divi Alaska. DOC Entity #:	sion of Corporations (D	OC) and have a registe AK Formed Date:	red agent who is an	and LLCs are required individual resident Home State:	ed to be in goo
Registered Agent:	T- 500 (0)	م ا	Agent's Phone:	907-299-	6177
Agent's Mailing Address	10744 EN	st 5 at Rd		10 1 0 11	
City:	110 144 CD	le 8+ End Rd State: AK		ZIP: 99603	
Residency of Agent:				,	Yes No
is your corporation or t	LC's registered agent a	ri individual resident of	trie State Of AldSKa?		



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Alaska Alcoholic Beverage Control Board UANA CONTROL OFFICE STATE OF ALASKA Form AB-01: Transfer License Application

rship and financial interest in other alcoholic beverage businesses:				
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?				
Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in ense number(s) and license type(s):	n Alaska, wh	ich		
Justin Cole				
Down EAST SALOON LLC 2300				
Cole's Market LLC 1350				
Section 7 – Authorization				
Section 7 – Authorization nunication with AMCO staff:	Yes	7		
		7		
nunication with AMCO staff:				
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?				
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? (Yes", disclose the name of the individual and the reason for this authorization:				
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?				
Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? (Yes", disclose the name of the individual and the reason for this authorization:				





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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
SEAN C (MaryoT)
Printed name of transferor Subscribed and sworn to before me this transferor 2024.
RENEE ORIANS Notary Public State of Alaska My Commission Expires July 8, 2025 Signature of Notary Public
Notary Public in and for the State of
My commission expires: JULY 8, 2005
Signature of transferor
DIANA M CARBONELL
Drinted name of transform
Subscribed and sworn to before me this day of
Signature of Notary Public
Notary Public

State of Alaska My Commission Expires July 8, 2025

Notary Public in and for the State of

My commission expires: July 8, 2075





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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.	h
I certify that all proposed licensees have been listed with the Division of Corporations.	4
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.	4
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.	9
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	An
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.	gr
RENEE ORIANS Notary Public State of Alaska My Commission Expires July 8, 2025 Signature of Notary Public Signature of Notary Public	_
Printed name Notary Public in and for the State of HASKA My commission expires: July 8.	2025

Subscribed and sworn to before me this jok day of April



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Why is this form needed?

A detailed diagram of the proposed licensed premises is required for all alcohol license applications, per AS 04.11.260, 3 AAC 305.630 and 3 AAC 305.660. 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.

This form must be completed and submitted to AMCO's Anchorage office before any license application will be considered complete. You may attach blueprints or other detailed drawings that meet the requirements of this form.

Form AB-02: Premises Diagram

The diagram MUST include:

- You must use a solid, contiguous red line to outline the outer perimeter of your premises with no breaks or separations.
 - o The red outline is required to follow a physical barrier (wall, fence and even across doorways).
 - o There should be no red lines within the perimeter
- Each area should be clearly labeled in any color other than red where alcohol is:
 - o Stored
 - o Served/Sold
 - Manufactured
 - Consumed
- All diagrams must include:
 - o Dimensions (AMCO does not accept diagrams drawn to scale)
 - Cross streets
 - o Points of reference, such as a compass rose indicating True North
 - All entrances, exits, walls, bars, and fixtures
- If your premises include multiple floors, please include a separate diagram of each floor.
 - o You must identify the stairs between each floor, and each hallway/corridor that leads to each set of stairs.
- 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.
- 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.
- Any license 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 1 - Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Fritz (real General Stare LLC	License I	Number:	359	0	
License Type:	PACKAGE LIQUEL Steam					
Doing Business As:	Fritz Creek General St	ene				44
Premises Address:	55770 EAST End Rd					
City:	Homer	State:	Ar	ZIP:	99603	



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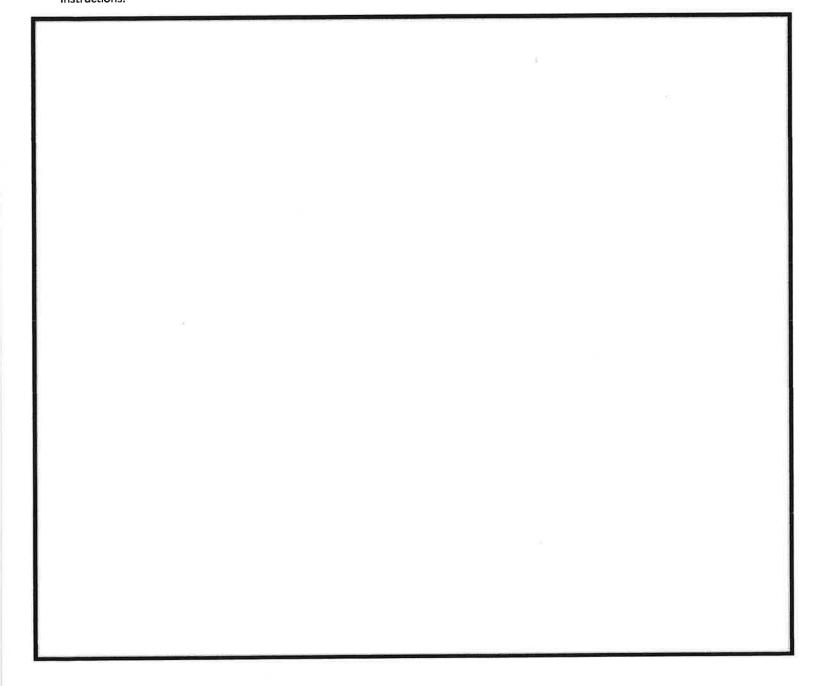
Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

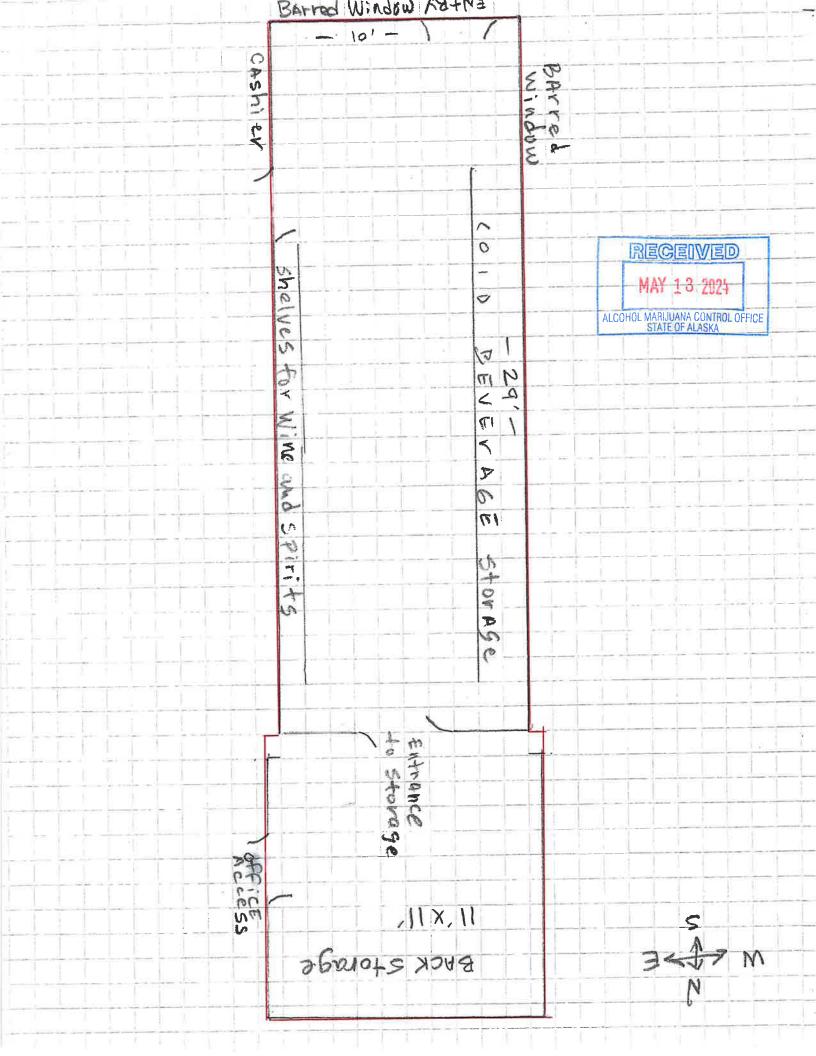
Alaska Alcoholic Beverage Control Board STATE OF ALASKA

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. See above for detailed instructions.





Google Maps Fritz Creek General Store



Imagery ©2024 Airbus, Maxar Technologies, Map data ©2024 50 f



Fritz Creek General Store

4.0 ★★★★ (51)
Convenience store
Temporarily closed

Overview		Reviews		About
Directions	D Save	Nearby	Send to phone	Share



