

Document reference ID: 1266

Licensing Application Summary

Application ID: 1266

Applicant Name: Trail Lake Lodge Corp

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

04.09.350)

Application Status: In Review

Application Submitted On: 12/14/2023

Entity Information

Business Structure: Corporation

Alaska Entity Number (CBPL): 10117106

Entity Contact Information

Entity Address: PO Box 5, Moose Pass, AK, 99631, USA

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Trail Lake Lodge Corp	Scott Rohr	President	50
Trail Lake Lodge Corp	Timothy Rohr	Secretary	50

Premises Address

Nearest municipality, city, and/or

Outside City Limits

borough:

Country, State, Zip: AK, United States,

Basic Business information

Business/Trade Name: Trail Lake Lodge

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: aae79ebb-fe7b-46ce-91d1-8fc2f9bf93ab

Receipt Number:

Payment Date: 12/13/2023 9:41:02 PM

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?

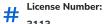
No

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



License Expiration Date:



Mailing Address:





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 or Restaurant/Eating Place – Tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

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

reviewed.					
Section 1 – Establishment Information					
Enter information for the lice	nsed establishment or the business seeking to be licensed.				
Doing Business As:	Trail Lake Lodge	License #:	3113		
License Type:	Beverage Dispensary - Tourism				
	Section 2 – Tourism Statement				
2.1. Explain how issuance of	a liquor license at your establishment has/will encourage tourism.				
travelers to visit the c visitors to explore the Seward Hwy corridor owner-rented lodging	vides dining services, lodging, and a venue for group entral Kenai area. Its central location provides and a myriad of outdoor recreational opportunities and to . Our full-service dining facilities provide the only foc s in the area. A liquor license enhances and broade at attract guests to our lodging.	an excellent urist activitiend od sercies fo	base for es along the or the many		
2.2. Explain how the facility v	was/will be constructed or improved as required by AS 04.11.400(d)(1):			
population of the Mod nightly rental. Well ab	ose Pass, an unincorporated area within the Kenai I use Pass census area is less than 200. The lodge of ove the 10 room minimum requirement noted in AS dining facility on the licensed premises.	feres a total	of 22 rooms for		
2.3 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?			NO		
2.4 II no wno 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
If "yes" answer the following questions:	<u></u>	
How many rooms are available?		
22		
How many of the available rooms (if any) have kitchen facilities (defined as: a separat with refrigeration and cooking appliance devices, including a microwave)?	e sink for food prepara	ation along
1		
Do you stock or plan to stock alcoholic beverages in guest rooms?	YES	NO X
If "no" is your facility located within an airport terminal?	YES	NO X
2.6 If your establishment includes a dining facility, please describe that facility. If it does not	please write "none".	
The lodge provides a full-service restaurant seating approximately 65	guests.	
2.7 If additional amenities are available to your guests through your establishment (eg: guidguests, other activities that attract tourists), please describe them. If they are not offered, pl	• •	l equipment for
A third-party operates a kayak rental and tour business next to our prop concierges directing guests and travelers to their business as well as ou company. We also display promotional material and advise guests on the opportunities in the Seward and Cooper Landing area.	ur other neighbor	, a flight-seeing

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Form AB-37: Tourism Statement

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.



Scott Rohr	Sutt Kolin	
Printed name of licensee/affiliate	Signature of licensee/affiliate	

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