



Alaska Alcoholic Beverage Control Board

Form AB-17: 2024/2025 General Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than January 2, 2024 per AS 04.11.270, 3 AAC 305.050, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.
- Any complete application for renewal or any fees for renewal that have not been postmarked by February 28, 2024 will be expired per AS 04.11.540, 3 AAC 305.050(e).
- All fields of this application must be deemed complete by AMCO staff and must be accompanied by the mandatory fees and all documents required, or the application will be returned without being processed, per AS 04.11.270.
- Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees in any way that an application will be deemed complete, renewed, or that it will be scheduled for the next ABC Board meeting.

Section 1 - Establishment Contact Information

Doing Business As:	Salmon Falls Resort	License #:	4966
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If your mailing address has changed, write the NEW address below:

Mailing Address:	16707 N Tongass Hwy			
City:	Ketchikan	State:	AK	ZIP: 99901

Section 2 - Licensee Contact Information

Contact Licensee: The individual listed below must be part of the ownership structure of the licensee listed in Section 1. This person will be the designated point of contact regarding this license unless the Optional contact is completed.

Contact Licensee:	John C Loeffler	Contact Phone:	619-647-7829
Contact Email:	chris@caliberco.com		

Optional: If you wish for AMCO staff to communicate with anyone other than the Contact Licensee (such as legal counsel) about your license, list their information below:

Name of Contact:	Matthew Herod	Contact Phone:	907-570-4420
Contact Email:	mherod@salmonfallsresort.com		

Section 3 - for Package Stores ONLY: Written Order Information

Do you intend to sell alcoholic beverages and ship them to another location in response to written solicitation in calendar years 2024 and/or 2025? If so, you will need to apply for a Shipping Endorsement here:
<https://accis.elicense365.com/#>

YES ☐ NO ☒

Section 4 - Ownership Structure Certification

YES ☐ NO ☒

Did the ownership structure of the licensed business change in 2022/2023?

If Yes, and you have **NOT** notified AMCO, list the updated information on form AB-39: Change of Officers and submit with your renewal application.
If No, certify the statement below by initialing the box to the right of the statement:

I certify that the ownership structure of the business who owns this alcohol license did not change in any way during the calendar years 2022 or 2023.

JCL

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Form AB-17: 2024/2025 License Renewal Application

Section 5 – License Operation

Unless you operated more than 240 hours in 2022 or 2023, check ONE BOX for EACH CALENDAR YEAR that best describes how this alcoholic beverage license was operated as set forth in AS 04.11.330:

- | | 2022 | 2023 |
|---|-------------------------------------|-------------------------------------|
| 1. The license was only operated during a specified time each year. (Not to exceed 6 months per year)
<i>If your operation dates have changed, list them below:</i>
May 1 _____ to Sept 30 _____ | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.
<i>A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both calendar years. <i>A complete Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated.</i> | <input type="checkbox"/> | <input type="checkbox"/> |

Section 6 - Violations and Convictions

- | | YES | NO |
|---|--------------------------|-------------------------------------|
| Have any Notices of Violation been issued for this license in 2022 or 2023?
— | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 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? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2). If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.*

Section 7 – Certifications

As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 305, and that this application, including all accompanying schedules and statements, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned and the license being potentially expired if I do not comply with statutory or regulatory requirements.
- I certify that in accordance with AS 04.11.450, no one other than the licensee(s), as defined in AS 04.11.260, has a direct or indirect financial interest in the licensed business.
- I certify that this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity officials and stakeholders are current and I have provided AMCO with all required changes of the ownership structure of the business license and have provided all required documents for any new or changes of officers.
- I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, if applicable for this license type as set forth in AS 04.21.025 and 3 AAC 305.700.
- 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.

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Form AB-17: 2024/2025 License Renewal Application

John C Loeffler

Printed name of licensee

DocuSigned by:

Signature of licensee

Restaurant and Eating Place applications must include a completed AB-33: Restaurant Receipts Affidavit**Recreational Site** applications must include a completed AB-36: Recreational Site Statement**Tourism** applications must include a completed AB-37: Tourism Statement**Wholesale** applications must include a completed AB-25: Supplier Certification**Common Carrier** applications must include a current safety inspection certificate

All renewal and supplemental forms are available online:

<https://www.commerce.alaska.gov/web/amco/AlcoholLicenseApplication.aspx>

FOR OFFICE USE ONLY

License Fee:	\$ 1250	Application Fee:	\$ 300.00	Misc. Fee:	\$ 500.00 late fee
Total Fees Due:					\$ 2050.00

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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.

Section 1 – Establishment Information

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

Doing Business As:	Salmon Falls Resort	License #:	4966
License Type:	Beverage Dispensary- Tourism License		

Section 2 – Tourism Statement

2.1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.

The business plan for Salmon Falls involves catering to local, regional and out of state tourist. Salmon Falls will continue to bolster its presence online and through publications in order to increase visibility of Alaska, Ketchikan, and Salmon Falls. Our clientele on vacation look forward to enjoying what all a full service resort has to offer and Salmon Falls does a great job attracting tourist to its location.

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.11.400(d)(1):

Building was constructed appx 33 years ago. No Major renovations planned at this time.

2.3 Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located?

YES

☐

NO

☒

2.4 If "no" who operates the tourism facility?

Highgate Hotels L.P.



Alaska Alcoholic Beverage Control Board

Form AB-37: Tourism Statement

2.5 Do you offer room rentals to the traveling public?

YES
☒

NO
☐

If "yes" answer the following questions:

How many rooms are available?

52 Rooms

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)?

No rooms have cooking appliances except for the restaraunt on site, 16 rooms have Mini fridges

Do you stock or plan to stock alcoholic beverages in guest rooms?

YES
☐

NO
☒

If "no" 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".

Timbers restsaraunt is a full service establishment with good being served from 530AM-10PM ' daily

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".

Full service fishing and adventure resort that offers fully guided and self guided fishing along with other 3rd party adventure tours such as kayaking.



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

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.

JL

John Loeffler

Printed name of licensee/affiliate

[Signature]
Signature of licensee/affiliate