Document reference ID : 4361

Licensing Application Summary

Application ID:	4361
Applicant Name:	Beck's Company
License Type applied for:	Beverage Dispensary License(BDL) (AS 04.09.200)
Application Status:	In Review
Application Submitted On:	11/25/2024 09:17 AM AKST

Entity Information

Business Structure:	Corporation
Alaska Entity Number (CBPL):	121731

Entity Contact Information

Entity Address:	HC 60 Box 152, Copper Center, AK, 99573, USA

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Beck's Company	Elena Beck	Secretary,Treasurer	50
Beck's Company	Serge Beck	President	50

Premises Address

Address:	Mile 79 Richardson Hwy, Outside City Limits, AK, USA

Does the proposed site include a valid street address?	Yes

Basic Business information

Business/Trade Name:	Tonsina River Lodge

Local Government and Community Council Details

City/Municipality	No Local Government
Borough	Unorganized Borough

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

This application was digitally signed by : Elena Beck on 11/25/2024 09:18 AM AKST

Payment Info

Payment Type : CC

Payment Id: 1ad000a0-5540-479c-af53-927984239f43

Receipt Number: 100969476

Payment Date: 11/25/2024 09:23 AM AKST

Document reference ID : 4361

Renewal Application Summary

Application ID:	4361
License No:	4318
License Type applied for Renewal:	Beverage Dispensary License(BDL)
Licensee Name:	Beck's Company
Application Status:	In Review
Application Submited On:	11/25/2024 09:17 AM AKST

Entity Information

Business Structure:	Corporation
FEIN/SSN Number:	
Alaska Entity number (CBPL):	121731
Alaska Entity Formed Date:	
Home State:	

Entity Contact Information

Entity Address:	HC 60 Box 152, Copper Center, AK, 99573

Renewal Information

Are there any changes to your ownership structure that have not been reported to AMCO prior to this application?:

No

As set forth in AS 04.11.330, how many hours did you operate during the first calendar year for this renewal period?:

The license was regularly operated continuously throughout the first calendar year for this renewal period.

As set forth in AS 04.11.330, how many hours did you operate during the second calendar year for this renewal period?:

The license was regularly operated continuously throughout the second calendar year for this renewal period.

Please select the seasonality:

Seasonal

Please Provide your six-month operating period:

05/01-10/15

Operation Period Details:

The business operates seasonal (5.5-6month), in average 9hr a day (12pm-9), 6days a week

Has any person or entity in this application been convicted or disciplined for a violation of Title 04, 3 AAC 304 or 305, or a local ordinance adopted under AS 04.21.010 in the preceding two calendar years?:

No

Have any notices of violation or citations been issued for this license during the preceding two years?:

No

Attestations

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.

Signature

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