



Alaska Alcoholic Beverage Control Board

Form AB-00: New License Application**Why is this form needed?**

This application for a license is required for all individuals or entities seeking to apply for a new alcoholic beverage license. Applicants should review **Title 04 of Alaska Statutes** and **Chapter 305 of the Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260 and 3 AAC 305.045.

This form must be completed and submitted to AMCO's Anchorage office, along with all other required forms and fees before any license application will be considered complete and placed in the queue for a licensing examiner review.

Section 1 – Establishment and Contact Information

Enter information for the business seeking to be licensed.

Applicant:	Grace Ridge Brewing, Inc.				
License Type:	Distillery manufacture and retail	Statutory Reference:	04.09.040 and .340		
Doing Business As:	Grace Ridge Brewing				
Premises Address:	870 Smoky Bay Way				
City:	Homer	State:	AK	ZIP:	99603
Local Governing Body/Bodies:	City of Homer, Kenai Peninsula Borough				
Community Council, (If applicable):					

Mailing Address:	870 Smoky Bay Way				
City:	Homer	State:	AK	ZIP:	99603

Designated Individual with Binding Authority to apply for this License:	Steven Stead				
Contact Phone:	541-829-9408	Business Phone:	907-435-0601		
Contact Email:	graceridgebrewing@gmail.com				

Seasonal License? ☐ Yes ☒ No ☐ If "Yes", write your operating period not exceeding Six months each year: _____

OFFICE USE ONLY				
Complete Date:		License Years:		License #:
Board Meeting Date:		Transaction #:	100904373	
Issue Date:		Examiner:		





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Form AB-00: New License Application**Section 2 – Premises Information**

Premises to be licensed



an existing facility



a new building



a proposed building

The next two questions must be completed by an applicant for a beverage dispensary or beverage dispensary tourism license and package store applicant only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer.

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.

Section 3 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 4.

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).

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:		Phone Number:			

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	
Email:		Phone Number:			





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Section 4 – 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 5.

If more space is needed, please attach a separate sheet with the required information.

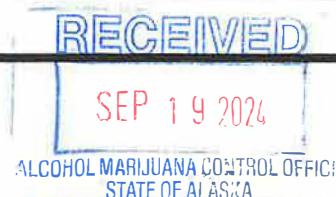
- If the applicant is a corporation, the application shall be executed by an authorized officer of the Corporation. Information must be completed below for each **stockholder who owns 10% or more** of the stock in the corporation, and for each **president, vice-president, secretary, and managing officer**.
- If the applicant is a limited liability organization, whether manager managed or member managed, the following information must be completed for each **member with an ownership interest of 10% or more** and for each **manager regardless of ownership share**.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each **partner with an interest of 10% or more**, and for each **general partner**.
- For any entity, identify all affiliates for your organization as defined at 3 AAC 305.950.

Entity Official:	Donald Stead				
Title(s):	President	Phone:	907-399-5222	% Owned:	55.17
Address:	1401 Candlelight Court				
City:	Homer	State:	AK	ZIP:	99603
Email:	don.stead.53@gmail.com				

Entity Official:	Steven Stead				
Title(s):	Vice President, Treasurer	Phone:	541-829-9408	% Owned:	37.93
Address:	1401 Candlelight Court				
City:	Homer	State:	AK	ZIP:	99603
Email:	stead.steve@gmail.com				

Entity Official:	Meagan Stead				
Title(s):	Secretary	Phone:	925-698-7204	% Owned:	3.45
Address:	1401 Candlelight Court				
City:	Homer	State:	AK	ZIP:	99603

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	





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This subsection must be completed by any applicant that is a corporation or LLC or who has registered as a business entity with the Division of Corporations, Business, and Professional Licensing (CBPL). Any entity registered or required to be registered with CBPL must be in good standing and have a registered agent as defined at AS 04.11.430.

CBPL Entity #:	10028849	AK Formed Date:	April 16 th , 2015	Home State:	AK
Registered Agent:	Donald Stead	Agent's Phone:	907-399-5222		
Agent's Mailing Address:	870 Smoky Bay Way				
City:	Homer	State:	AK	ZIP:	99603
Email:	graceridgebrewing@gmail.com				

Does your registered agent satisfy the requirement of AS 04.11.430?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Section 5 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses.

Yes No

Does any representative or owner named 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?

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

Donald Stead, Steven Stead, Meagan Stead hold ownership of Grace Ridge Brewing, Inc. which holds BML #5433 and BRL #15274 both dba Grace Ridge Brewing Company. Steven Stead and Meagan Stead hold ownership of Brew Alaska, LLC which holds SREPTL #16586 dba Brew Alaska

Section 6 – Authorization

Communication with AMCO staff:

Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

<input type="checkbox"/>	<input checked="" type="checkbox"/>
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If "Yes", disclose the name of the individual and contact information for the individual, including phone number and email, and the authority for this authorization:

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Section 7 – Attestations

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.

[Handwritten initials]

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.

[Handwritten initials]

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.

[Handwritten initials]

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

[Handwritten initials]

I hereby certify that I am the person herein named and subscribing to this 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.

[Handwritten initials]

I certify that all proposed licensees have been listed with Division of Corporation, Business and Professional Licensing.

[Handwritten initials]

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.

[Handwritten initials]

DONALD P. STEAD

Printed name of licensee

[Handwritten signature]
Signature of licensee



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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.

SS

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SS

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.

SS

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

SS

I hereby certify that I am the person herein named and subscribing to this 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.

SS

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SS

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.

SS

STEVEN STEAD

Printed name of licensee

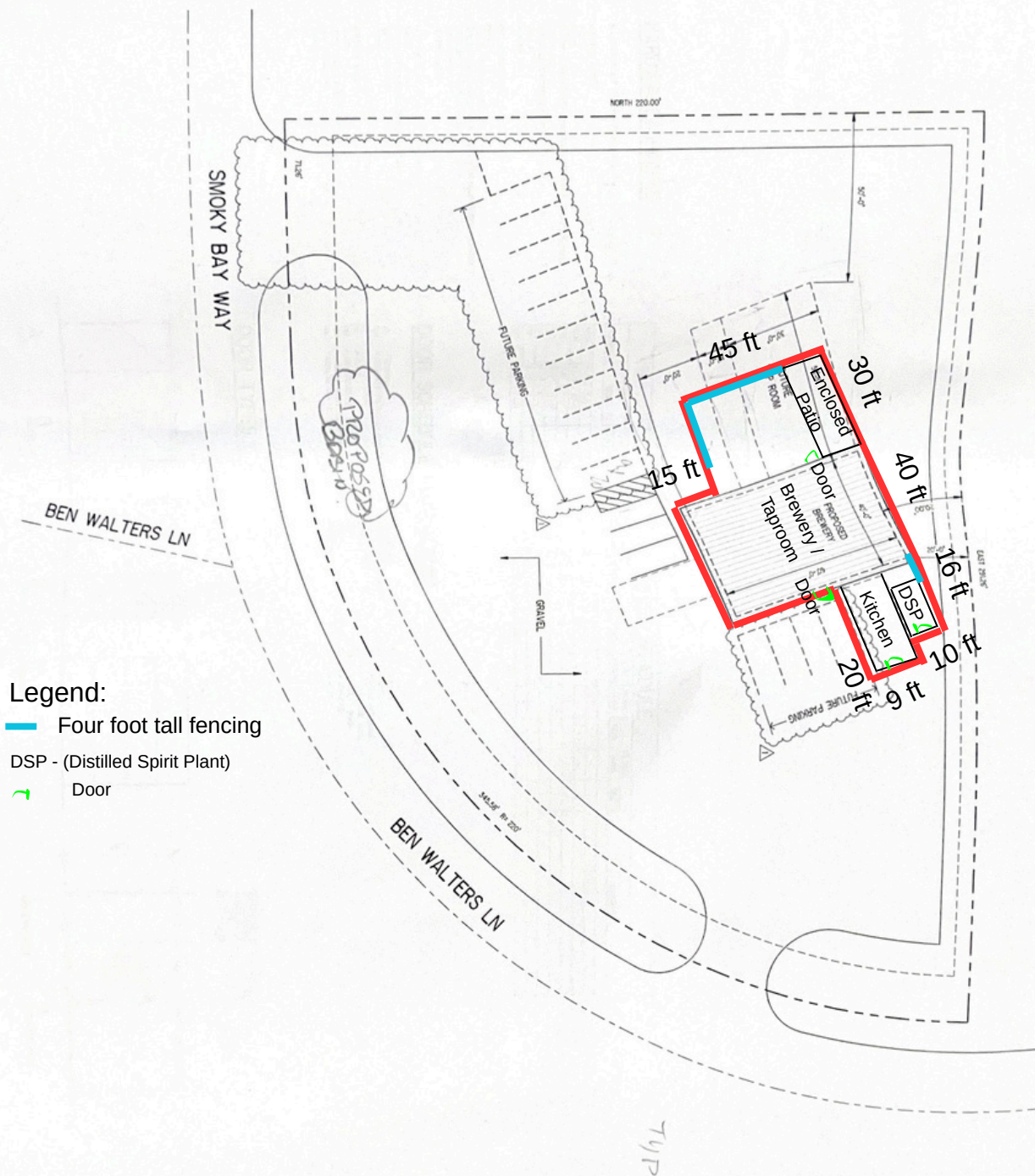
Signature of licensee

RECEIVED

SEP 19 2024

ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

DSP (Distillery Manufacturing) added as separate building next to brewery to maintain separation of public from distillation plant (not built, pending application approval).

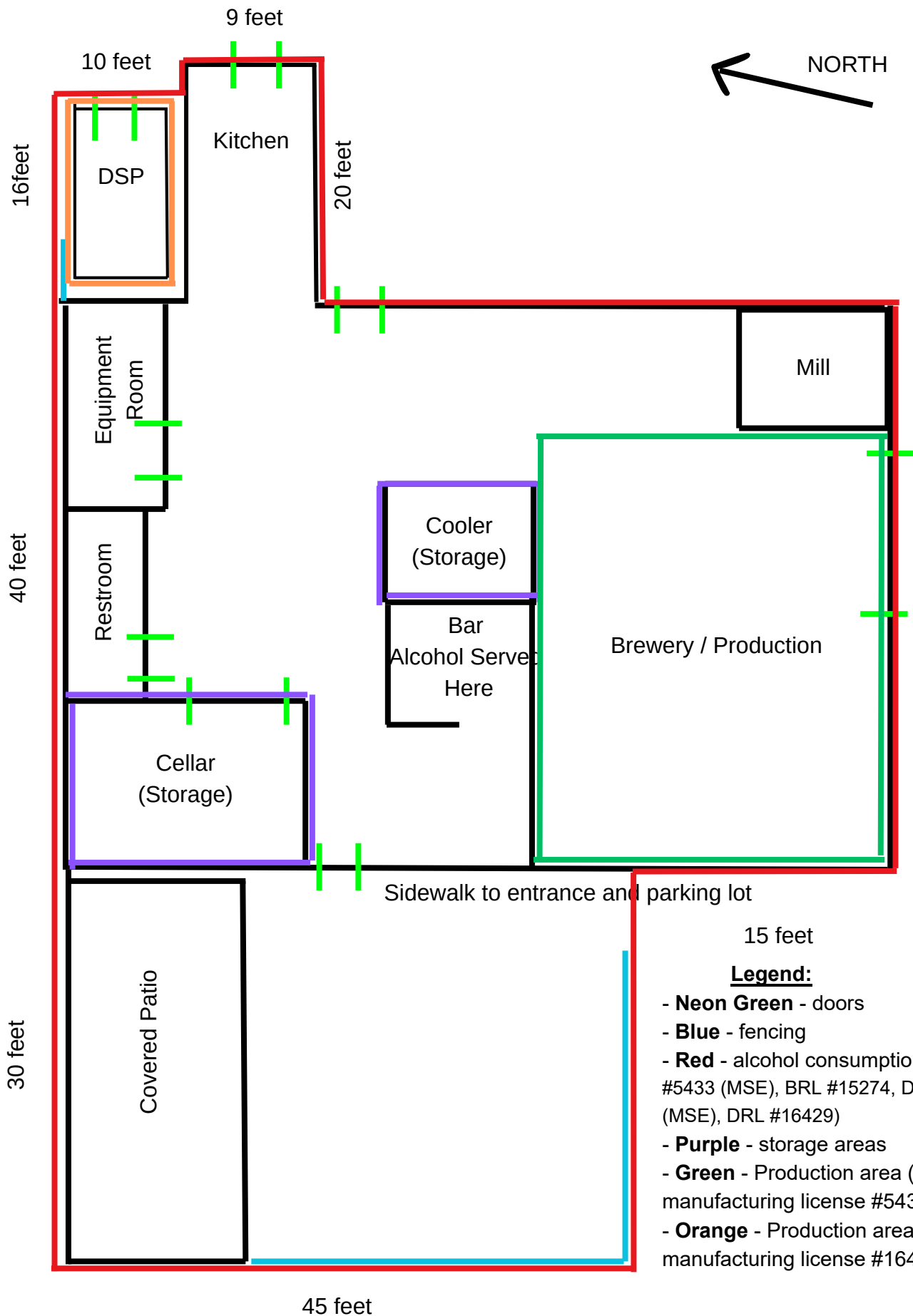


Door

AMCO Received 4/29/2024

61 NORTHARCHECTS
3400 SPENARD ROAD SUITE 12
ANCHORAGE, ALASKA 99503
PH. 907-274-4446

DATE 12-8-2000
SITE PLAN
G1



Grace Ridge Brewing

Security Plan for Outdoor Beer Garden 870 Smoky Bay Way

1. The outdoor area is 30 feet by 50 feet, surrounded by a 5 foot tall cedar wood fence abutting the main building.
2. Entrance and exit to the area is through two gates and a door to the brewery. Only the gate to the south will be unlocked during business hours. The gate to the north is for maintenance.
3. The area will be observed by personnel serving beverages inside the brewery through the window in the door at the entrance to the brewery. There will be two cameras providing surveillance of the area with a screen available to the serving personnel.
4. All serving personnel will be required to obtain a TAPS card to ensure their understanding of the laws.
5. Patrols of the area will be conducted every 15 minutes by serving personnel to monitor customers in the area and clean up.