

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 – Transferor Information

Enter information for the current licensee and licensed establishment.

Licensee:	Naidine O Vohnson		License #:		1116	
License Type:	Beverage Dispensary To	urism -	Statutory Refe	rence:	AS 04.09.350	Aci
Doing Business As:	Tangle River Enn	Season	al			
Premises Address:	Mile 20 Denal.	Hwy				
City:	Payson	State:	AK.	ZIP:	99737	
Local Governing Body:		oroug	1~	÷		
	J	0				

Transfer Type:

😿 Reg

Regular transfer

Transfer with security interest

Involuntary retransfer

	OFFICE USE ONLY	
Complete Date:	Transaction #: 100952815	
Board Meeting Date:	License Years:	
Issue Date:	Examiner:	
	MISCOLIN (20)	
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	ALCOHOL MARLUATIA CONTROL OFFICE	



Form AB-01: Transfer License Application

Section 2 – Transferee Information

Enter information for the *new* applicant and/or location seeking to be licensed.

Licensee:	Rebecca S.	Lane	2		
Doing Business As:	Rebecca S. Tangle River Ir mile zo Denali	n			
Premises Address:	mile 20 Denali	Husy			
City:	Paxson	State:	ak	ZIP:	99737
Community Council:					
Mailing Address:	679 1.176th AP				
City:	529 W76th Are AnchorAge	State:	ak	ZiP:	99737
Designated Licensee:	Rebecci S. LA	Ne	, i i i i i i i i i i i i i i i i i i i		
Contact Phone:	907-903-1228	Business	Phone:		
Contact Email:	akbecky/ane 1000	maile	Com		
	Section 3 – Pren	nises Inf	formation		
Premises to be licensed is:					
an existing facility	a new building	a propos	ed building		
The next two questions mus	t be completed by <u>beverage dispens</u>	ary (including	; tourism) and <u>packa</u>	age store applica	nts only:
What is the distance of the outer boundaries of t	ne shortest pedestrian route from th the nearest school grounds? Include	e public entra the unit of m	ance of the building easurement in your	of your proposed answer.	d premises to
	001 77.3 miles (408,1445				Aci
	ne shortest pedestrian route from th e nearest church building? Include th				d premises to
	munity Chapel 78 miles				Ac
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Form AB-01: Transfer License Application

Section 4 – Sole	Proprietor	Ownership	Information
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This section must be completed by any <u>sole proprietor</u> 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).

This individual is an:	applicant 🔲 affiliate				
Name:	Rebecca Lan	e			
Address:	529 W 76 th 1	ave			
City:	AnchorAge	State:	ak	ZIP:	99518
This individual is an:	applicant affiliate				
Name:	Rebecca Lar	e			
Address:	529 West 76	the 1			
City:	Rebecca Lar 529 West 76 Anchorage	State:	AK	ZIP:	99518

Section 5 – Entity Ownership Information

This section must be completed by any <u>entity</u>, 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 partner with an interest of 10% or more, and for each general partner.

Phone:	% Owned:
State:	ZIP:

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Form AB-01: Transfer License Application

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

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

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

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	AK Formed Date:		Home State:	
Registered Agent:		Agent's Phone:		
Agent's Mailing Address:				
City:	State:		ZIP:	

Residency of Agent:

Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?





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Form AB-01: Transfer License Application

Section	6 -	Other	Licenses
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Ownership 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?

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):

Rebecca Lane, Package Store License - Seasonal #1117 dba Tangle River Inn

Section 7 – Authorization

Communication with AMCO staff:

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

٦	X
	- IM

If "Yes", disclose the name of the individual and the reason for this authorization:

	REGEIVED	
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	ALCOHOL MARLIAN CONTROL OFFICE	

Yes



No

Yes No



Form AB-01: Transfer License Application

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 Janet A. Boylan as Personal Representative of Naidine O. Johnson Printed name of transferor Subscribed and sworn to before me this LAW al HO WY COMMISSION EXP Signature of Notary Public Notary Public in and for the State of My commission expires:

Signature of transferor

Y

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350



Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

I certify that all proposed licensees have been listed with the Division of Corporations.

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 304.465.

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.

		STATE OF ALASK NOTARY PUBLIC Sonya Irwin	ALC: 12 12 12 12 12 12 12 12 12 12 12 12 12	\frown		
52. 5	l	My Commission Expires W	/ith Office	<u></u>	, li	
Signature of transferee	- have			ture of Noter	Public	
Rebecca	lane	Notary Pub	lic in and for the	e State of	Alaska	;
Printed name			My con	nmission exp	ires: WAL	office
	Subscribe	d and sworn to before me th	nis_7_day of	Nove	mber	_, 20 <u>24</u> .
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	ALCOHOL	MARK DESCRIPTION OFFICE				

RL

Initials







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	R	RL	RL

Т

IN THE SUPERIOR COU	RT FOR THE STATE OF ALASKA PALMER
In the Matter of the Estate of:)
NAIDINE OLIVE JOHNSON	
Person who Died (Decedent) Date of Birth))) CASE NO. <u>3PA-24-00186 PR</u>
	BY PERSONAL REPRESENTATIVE esentative when there IS a will)

I accept the appointment of personal representative and agree to perform the following duties:

- (1) Complete Form P-340, Information to Heirs and Devisees.
- (2) Deal with creditors:

1 . . ¹

- (a) Complete Form P-341, Notice to Creditors.
- (b) Complete Form P-345, Notice to Creditors Allowing or Disallowing the Claim.
- (3) Handle the estate property of the person who died:
 - (a) Gather the estate property.
 - (b) Complete an inventory of estate property by completing Form P-370, Inventory of Property.
 - (c) Determine the assets and liabilities of the estate property and transfer estate property by completing P-380, Accounting and Proposed Distribution.
- (4) Pay homestead, exempt property, and family allowances to surviving spouse and/or minor children.
- (5) Pay required state and federal taxes (income, property, estate).
- (6) Pay required costs of administering the probate, including any bond.
- (7) Tell the court my address and phone number in writing.
- (8) Wrap up the final business affairs of the person who died (see <u>www.courts.alaska.gov/shc/probate/probate-after-death.htm#legal-tasks</u>).
- (9) Close the estate as soon as appropriate.

I swear or affirm that I read this document and believe all statements made are true.

4-16.24 Juit	Sonal Representative Janet Boylan Printed Name
	907-694-5387
18609 Man O'War Drive	
Address Line 1 Eagle River, Alaska 99687	Phone Number joneslawinak@yahoo.com
Address Line 2	E-mail Address
Subscribed and sworn to or affirmed (date) <u>4/10/24</u> Notary Public	before me at Pelmer, Alaska on
TIMOTHY HALL	Clerk of Court, Notary Public or other person
StateseAllaske My Commission Expires May 12, 2025	authorized to administer oaths.
My Commission Expire's May 12, 2025	My commission expires: 5/12/29

RECEIVEI

 Right to be Appointed as Personal Representative. The court finds that *[name]* Don Boylan & Javet Boylan is 19 years or older and:
 As priority for appointment as personal representative.

may be appointed as the personal representative because all persons with greater or equal priority to serve as personal representative have consented to the appointment.

9. Additional Findings.

10. Notice. Any notice required by Alaska law has been given.

PROCEDURAL ORDER

The court orders that:

- 1. The will is admitted to informal probate.
- 2. No bond is required. A bond is required in the amount of \$_____
- 3. The appointed personal representative is [name] Don Baytin & Janet Baytan and he or she assumes the responsibilities after posting a bond, if required.
- 4. The court will issue Letters Testamentary after the personal representative files Form P-335, Acceptance of Duties by Personal Representative and Letters Testamentary by Court.

Other: 5. 5 9124 Signature of Registra Date Printed Name I hereby certify that this is a true and correct Cert. Copy. Jones copy of the original on file in my office: 5/16/24 ATTEST: Clerk of the Trial Courts BP \$116 Date AS 13.16.115 Page 2 of 2

P-316 (5/21)(cs) STATEMENT STARTING INFORMAL PROBATE AND APPOINTING A PERSONAL REPRESENTATIVE WHEN THERE IS A WILL

	COURT FOR THE STATE OF	State of Alaska Third District at Palmer, Alaska
IN THE SUPERIOR	PALMER	MAY 09 2024
In the Matter of the Estate of:)	^b Clerk of the Trial Courts ByDeputy
NAIDINE OLIVE JOHNSON Person Who Died (Decedent) Date of Birth:) ■) CASE NO. <u>3 PA -</u>	2 4-00186 PR

FILED in the TRIAL COURTS

STATEMENT STARTING INFORMAL PROBATE AND APPOINTING A PERSONAL REPRESENTATIVE WHEN THERE IS A WILL

(Statement of Informal Probate of Will and Appointment of Personal Representative)

Based upon the request of [name] DON BOYLAN to open informal probate of [name of person who died] NAIDINE OLIVE JOHNSON's last will and appoint a personal representative, the court makes the following findings and order based on that request.

FINDINGS

- 1. **Application.** The application appears to be complete and includes the requestor's oath or affirmation that the statements are true to the best of the requestor's belief.
- 2. **Interest.** The requestor is a person with an interest in the estate because he or she is a spouse, relative, person named in the will, beneficiary, creditor, or fiduciary representing an interested person.
- 3. **Person Who Died (Decedent).** The decedent died on [date] 3/01/2024 At least five full days have passed since the death.
- **4. Filing Location.** This is the correct court to file in because the person who died:
 - Iived in this judicial district at the time of death.
 - did not live in Alaska at the time of death, but had property located in this judicial district at the time of death.
- 5. Time. The time for probate is within the required time period because:
 - less than three years have passed since the person died.
 - more than three years have passed but late probate is allowed under AS 13.16.040 because:
- **6. Will.** The person who died made a valid will on *[date]* <u>1/22/2002</u>. The court has the original will (or an authenticated copy of the will probated in another jurisdiction).

7. Current Personal Representative.

. .

- X No court has appointed a personal representative of the estate.
- A court appointed a personal representative, but later ended that appointment.
- A court appointed [name] _______ as personal representative who lives at [address] _______
- The requestor filed an authenticated copy of the will and a statement from the court where the will was first probated.

- 1	2			
				FILED in the TRIAL COURTS State of Alaska Third District at Palmer, Alaska
		IN THE SUPERIOR COUR ATP	FOR THE STATE OF ALASK	
		In the Matter of the Estate of:)	Clerk of the Trial Courts
		NAIDINE OLIVE JOHNSON Person who Died (Decedent) Date of Birth:)) _) Case No 3PA-	24-00186 PR

Leave This Portion Blank for the Court to Fill Out

LETTERS TESTAMENTARY BY COURT

(Court Opens Probate and Appoints a Personal Representative When There is a Will)

The will of the decedent was admitted to probate. The appointed personal representative is: Don Baylan & Danet Baylan

The personal representative is:

Enot supervised.

supervised. The personal representative shall not make any distribution of the estate or exercise the following powers without prior order of the court:

9/24

Cort. Copy - Jones

5/16/24

BP

Date

Signature of Registrar or Judicial Officer¹

Krehlen

Printed Name

I hereby certify that this is a true and correct copy of the original on file in my office: ATTEST:

Clerk of the Trial Courts

5/16/24 By Date Deputy

JUN 2 7 2024

Probate Rules 7 & 8; AS 13.16.015; AS 13.16.245, AS 13.16.220

¹ <u>Informal</u> appointment under AS 13.16.115 can be made by the <u>registrar</u> without hearing or notice. <u>Formal</u> appointment under AS 13.16.145 must be made by a judge after hearing and notice.



Form AB-02: Premises Diagram

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.

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).
 - There should be <u>no red lines within the perimeter</u>
- Each area should be clearly labeled in any color other than red where alcohol is:
 - o Stored
 - o Served/Sold
 - o Manufactured
 - o Consumed
- All diagrams must include:
 - o Dimensions (AMCO does not accept diagrams drawn to scale)
 - o 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.
 - 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

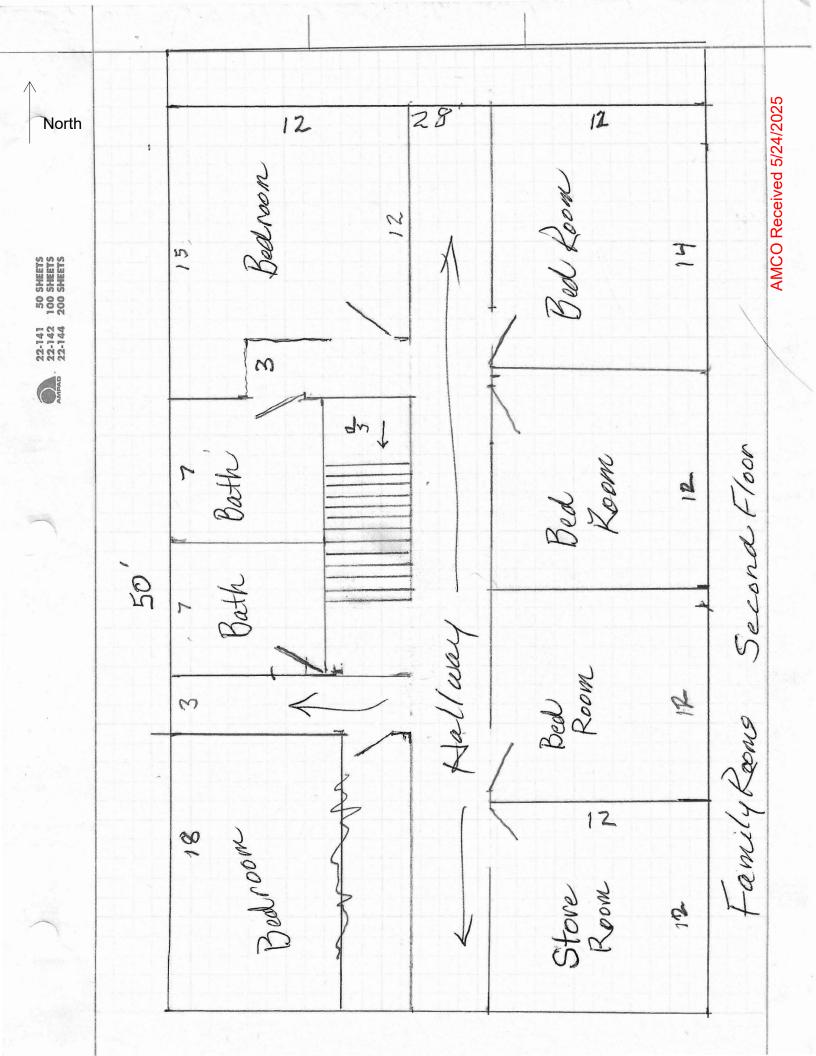
Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Rébecca Lane	License	Number:	111	6
License Type:		ourism	n /Se	asor	ral
Doing Business As:	Tangle River Inn				
Premises Address:	mile 20 Denali Hay				
City:	Payson	State:	ar	ZIP:	99737

rev 12/12/2023

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#1116 Þ[¦c@ 13'6" 28' 00 24' Diving 3 00 0,000 ,H DEL, Pas 5 10' 2 S R. Kelan 15 5 N 3 3 10 m 60 1 5 " Bor 24 G R ない ŝ 0 5 10m -IST. 28 10 #1117 26 00 Nor R. 62' 1 AMCO Received 5/16/2025





POLICIES, PROCEDURES AND STANDARDS

TANGLE RIVER INN Mile 20 Denali Highway, Delta Junction, AK 99737

Purpose:

The primary goal is to prevent the unauthorized transfer of alcohol across to minors in the vicinity.

Staff: All staff are instructed to check all ID for anyone purchasing alcohol. Adults can have a drink with their dinner in the dining room, but minors are not allowed in the bar at any time. This will be emphasized in staff meetings. At least two staff members will be available at all times during open hours.

Any person who appears intoxicated or belligerent will not be served to prevent incidents.

Training: All employees will undergo mandatory training on responsible alcohol service, including identifying and prevent sales to minors. This will be reinforced at every staff meeting.

Identification and Verification:

All individuals will be required to provide a valid government-issued identification card before entering areas where alcohol is served or sold.

Staff members are empowered to refuse service or access to individuals who fail to produce valid identification or display signs of intoxication.

Boundaries: Alcohol will be served only inside the premises. Signs are put up to deter minors from entering the bar area, and to warn parents that they are not welcome.

Controlled access points: Entryways are monitored to prevent minors from entering the bar area. Doors are locked during closing hours to prevent entry. Secured Alcohol Storage:

All alcohol is kept under lock and key except when staff member trained in handling alcohol with proper permits is present.

Monitoring and enforcement:

Security will be strictly maintained and any incidents need to be reported to the manager/owner immediately. Serious incidents will be immediately reported to the state police for assistance if necessary.

This security plan aims to prevent incidents, and combines personnel training, serving protocols, and lack of access by minors. It will be upgraded and updated on an ongoing basis.



Alaska Alcoholic Beverage Control Board Form AB-37: Tourism Statement

This form needs to be included with your application for a beverage dispensary tourism license. A new, transfer, or renewal application for a beverage dispensary tourism license (AS 04.09.350) must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements currently listed under AS 04.09.350 and 3 AAC 305.325.

This form must be completed and submitted to AMCO before any tourism license application will be determined complete.

Section 1 – Establishment Information

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

Doing Business As:	Tangle River Inn	License #:	1116
License Type:	Beverage Dispensary-Tourism	/Seas	onal
		/	

Section 2 – Tourism Statement

2.1. Explain how the issuance, renewal, or transfer of the license to another person of the has/will encourage tourism.

Some where they can sit or stay and AlASKA Scenery! safty

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.09.350(c)(1):

We never 1 Keeping it	that way	problems 1.	and	plan	on
icensees licensed 12/31/23				YES	NO

2.4 If "no" who operates the tourism facility?

[Form AB-37] (rev 1/16/24)

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Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u> Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-37: Tourism Statement

2.5 Do you offer room rentals to the traveling public ?



YES

YES

If "yes" answer the following questions AND you must apply for a Hotel or Motel Endorsement under AS 04.09.430 https://www.commerce.alaska.gov/web/amco/AlcoholLicenseApplication.aspx :

How many rooms are available?

34

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)?

None (

Do you stock or plan to stock alcoholic beverages in guest rooms? If yes, you must apply for and qualify for a Hotel or Motel Endorsement under AS 04.09.430.

If "no" to the question regarding rooms, is your facility located within an airport terminal?

2.6 If your establishment includes a dining facility, please describe that facility. If it does not please write "none".

We can seat 40 people in dining area. We also have a Bar.

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".

Canal rentals, hiking, Fishing,	hunting and	Blue berry
Canae rentals, hiking, Fishing, picking also have cabino	9	0
, 0		



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u> 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:

RG RG

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.

S. Lane Decca

Printed name of licensee/affiliate

Signature of licensee/affiliate



Alaska Alcoholic Beverage Control Board <u>Restaurant Endorsement Application</u>

This endorsement application form is required to apply for a restaurant endorsement to support your underlying license or pending license application. Applicants should review and become familiar with AS 04.09.450, **Title 04** of **Alaska Statutes** and **Chapter 305** of the **Alaska Administrative Code**. This form must be completed and submitted along with all other required forms and documents before any endorsement application will be considered complete and placed in the queue for our licensing examiners review.

Section 1 – Establishment and Contact Information

Enter information for the current licensee and licensed establish.

Licensee:	Rebecca S. Can	2	License #:		1116
Doing Business As:	Tangle River du		License Type:		BDTL
Licensee Mailing Address:	529 W 26th Ave Aach, the	99518	Phone Number	:	907-903-1228
Full Premises Address:	Mile 20 Denali 6	tury			.*:
City:	Payson	State:	are	ZIP:	98737
Local Governing Body:	Unorganized Borough	Email:	akbecki	lan	e @gmail. Con

Section 2 – Endorsement Requested

Restaurant Endorsement:	AS 04.09.450. A restaurant endorsement authorizes the holder of a beverage dispensary license, fai		
	license, golf course license, sporting activity or event license, club license, outdoor recreation		
	lodge license, destination resort license, or beverage dispensary tourism license.		
	The biennial fee for a restaurant endorsement is \$200 with a \$25 application fee.		

An application for a restaurant endorsement must specify the establishment or portion of the establishment that constitutes a bona fide restaurant, that there is supervision on the premises adequate to reasonably ensure that a person under 21 years of age will not obtain alcoholic beverages. This **endorsement** application is for the request of a designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

1. Dining after standard closing hours: AS 04.16.010(c)

2. Dining by persons 16 – 20 years of age: AS 04.16.049(a)

3. Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)

4. Employment for any persons under 21 years of age: AS 04.16.049(c)

NOTE: Under AS 04.16.049(d), a Department of Labor and Workforce Development work permit is not required to employ a person 18 - 20 years of age.

Section 3 – Access to Persons Under 21 Years of Age

Review AS 04.16.049(a); AS 04.16.049(c)

Be specific in your list where within the premises persons under 21 years of age are anticipated to have access in the course of either dining or employment as designated in Section 2. (Example: Persons under 21 years of age will only be allowed in the dining area OR will only be employed and present in the kitchen).

e diving area or Bar accompanied by Parent or Guardian

101060304



Alaska Alcoholic Beverage Control Board <u>Restaurant Endorsement Application</u>

Describe the policies, practices and procedures that will be in place to ensure that persons under 21 years of age do not gain access to alcoholic beverages while dining or employed at your premises. Outline how and where alcoholic beverages are stored on premises. Acknowledge that employees who sell and serve alcoholic beverages must have a current Server Education Card.

Ba Alcohel will be stored behind the Bar. a Storage area that is secured. All Employees are over 21 yrs of age & have a current tap card. minors are my be allowed in diving area. Unles accompanied of parent or quardian.

Is an owner, manager, or assistant manager who is 21 years of age or older always present on the premises during business hours?



Section 4 – Food Service Establishment Permit

Per AS 04.21.080(b) for an establishment to qualify as a bona fide restaurant, a Food Service Permit or (for licenses within the Municipality of Anchorage) corresponding Department of Health and Human Services documentation is required.

Link to the Alaska Department of Environmental Conservation (ADEC) Food Safety Website:

http://dec.alaska.gov/eh/fss/food/

Link to the Municipality of Anchorage Food Safety Website:

http://www.muni.org/Departments/health/Admin/environment/FSS/Pages/fssfood.aspx

IF you are unable to certify the below statement, please discuss the matter with the AMCO office:

I have attached a copy of the current food service permit for this premises OR the plan review approval.



*Note: If a plan review approval is submitted, a final permit will be required before finalization of any permit or license application.

Section 5 – Hours of Operation

Review AS 04.16.010(c).

Include variances in weekend/weekday hours, and indicate AM/PM:

Days/Hours of Operation

Weekday	From Time of Day	To Time of Day
Sunday	Sam	12 am
Monday	gam	12 pm
Tuesday	Sam	
Wednesday	8 am	12 am
Thursday	gam	12pm
Friday	8 am	12 pm
Saturday	8 am	12 am



Alaska Alcoholic Beverage Control Board <u>Restaurant Endorsement Application</u>

Section 6 - Areas Covered by Endorsement

Does the endorsement apply to your entire licensed premises as approved by the ABC Board?

Does the requested endorsement expand your currently licensed premises?

-	_
X	No
	No 📐

Yes

Yes

- If no, attach the approved diagram, no larger than 8 1/2" x 11" of the layout, and identify the portions of the premises covered by various requested endorsements. You must use a solid, contiguous colored line in any color other than red to outline the outer perimeter of the area of the premises covered by the requested endorsement(s).
- If endorsements are overlapping, provide a conspicuous means to distinguish each endorsement from the other (e.g., keyed map with varying colors for each requested endorsement.
- Your drawing MUST include:
 - Dimensions in feet **not** square feet of all exterior walls and major interior walls (we do not accept diagrams drawn to scale)
 - Include cross-streets
 - A north arrow, and any significant geographical features. Points of reference, such as a compass showing North.
 - All entrances, exits, walls, bars, and fixtures
- 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.
- Any endorsement application that includes 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 7 – Entertainment & Service

Are any forms of entertainment offered or available within the licensed business or within the proposed licensed premises?

If yes, describe the entertainment offered or available and the hours in which the entertainment may occur. *Entertainment* as described by AS 04.09.210, includes dancing, karaoke, live performances, or similar activities, but does not include recorded or broadcast performances without live participation.

Karaoke	
Food and beverage service offered or anticipated is:	Other:



Alaska Alcoholic Beverage Control Board Restaurant Endorsement Application

Section 8 – Attestations

l 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 3AAC 305.340.

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 of 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, and or endorsement. I further understand that this is a Class A misdemeanor under AS 11.56.210 to falsify an application and commit the crime of unsworn falsification.

Printed name of licensee

becca S. Jane

Signature of licensee







Tangle River Inn

Breakfast

(Served 8:00-11:30 am)

2 Egg Breakfast \$14.25 Two eggs, potatoes, and toast with your choice of ham, bacon, or sausage.

Stack of pancakes (3)	7.50
Short stack (2)	6.00
Side of 2 eggs	6.00
Side of ham, bacon, or sausage	7.00
Side of toast (2 slices)	3.00
French Toast (3)	9.75
Oatmeal Served with raisins and brown sugar)	6.75

Omelets (served with potatoes and toast)	
Plain	11.50
Cheese	13.00
Ham and cheese1	15.50

Tangle River Inn

Lunch and Dinner

Served from 11:30-7:30

Burgers

Plain hamburger with potato chips \$	314.50
add cheese\$1.50	
Deluxe hamburger with fries or macaroni salad.	16.00
includes (lettuce, pickles, onions, tomato)	
add cheese\$1.50	
Bacon burger	18.50
	18.50
	18.50
Famous Tangle Burger	20.00
(Two types of cheese, ham, bacon,	
and fries or macaroni salad.)	

Sandwiches

(Come with potato chips)

Ham and cheese	9.50
Ham and egg	9.50
BLT	14.95
Chicken sandwich	14.95
Egg and cheese sandwich	9.95
Grilled cheese	7.50
Steak sandwich (with house salad or French fries)	19.95
Fried chicken basket	14.75
Chicken strip basket	13.75
House Salad	6.95
Bowl of soup	5.75

Tangle River Inn

Beverages

Coffee or tea	\$3.00
Juice (orange, cranberry, pineapple	3.95
Ice tea	3.50
Hot chocolate	3.50
Soda (coke, 7-up, orange, Dr. Pepper).	3.50

Síde Items

French fries	\$ 6.95
Salad of the Day (macaroni or potato).	5.95
Chili	0.00
cup	4.00
Bowl	5.95
Dinner salad	5.95

Desserts

Ice cream(per scoop)	2.95
Pie	5.95
Muffins	4.00
Cinnamon Rolls	4.00
Brownie Delight	4.00

Beer and Wine Available



No

No

Yes

Yes

Alaska Alcoholic Beverage Control Board Hotel or Motel Endorsement

The new endorsement application form is required to apply for an endorsement to support your beverage dispensary license a beverage dispensary tourism license or pending license application. Applicants should review and become familiar with AS 04.09.400, 3 AAC 305.330, **Title 04** of **Alaska Statutes** and **Chapter 305** of the **Alaska Administrative Code**. This form must be completed and submitted along with all other required forms and documents before an endorsement application will be considered complete and placed in the queue for our licensing examiners review.

Section 1 – Establishment and Contact Information

Enter information for the current licensee and licensed established.

Licensee:	Rebecca S. Lane		License #:		1116
Doing Business As:	TAngle River Inn		License Type:		BDTL
Licensee Mailing Address:	529 West 76th Anch.	AR	Phone Number:	-0	103-903-1228
Full Premises Address:	mile 20 Denali Huy				
City:	Payson	State:	ak	ZIP:	99737
Local Governing Body:	Unorganized Bourough	Email:	akpecta	la	rep qmail

Section 2 – Endorsement Requested

AS 04.09.430. A hotel or motel endorsement authorizes the holder of a beverage dispensary license or a beverage dispensary tourism license that is a hotel, motel, resort, or similar business premises that caters to the traveling public as a substantial part of its business to sell or serve alcoholic beverages on the licensed premises, including in a dining room, banquet room, and other public areas approved by the board, and in guest rooms. The holder of a beverage dispensary license or a beverage dispensary tourism license that is a hotel, motel, resort, or similar business premises that caters to the traveling public as a substantial part of its business shall apply for a multiple fixed counter endorsement under AS 04.09.420 to sell or serve alcoholic beverages at a secondary location located in a building different than the licensed premises for the beverage dispensary license or a beverage dispensary tourism license if the different building

The biennial fee for a hotel or motel endorsement is \$200 + \$25 application fee.

Does the endorsement apply to your entire licensed premises as approved by the ABC Board?

Does the requested endorsement expand your currently licensed premises?

- If no, attach the approved diagram, no larger than 8 1/2" x 11" of the layout, and identify the portions of the premises covered by various requested endorsements. You must use a solid, contiguous colored line in any color other than red to outline the outer perimeter of the area of the premises covered by the requested endorsement(s).
- If endorsements are overlapping, provide a conspicuous means to distinguish each endorsement from the other (e.g., keyed map with varying colors for each requested endorsement.
- Your drawing MUST include:
 - Dimensions in feet **not** square feet of all exterior walls and major interior walls (we do not accept diagrams drawn to scale)
 - Include cross-streets
 - A north arrow, and any significant geographical features. Points of reference, such as a compass showing North.
 - All entrances, exits, walls, bars, and fixtures
- 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 a portion of the licensed premises includes an outdoor service area, you are required to submit a written security plan that includes personnel and practices that are to be used to prevent the transfer of alcohol the permitted premises and to prevent the access of alcohol by a minor during the permitted event.



Alaska Alcoholic Beverage Control Board Hotel or Motel Endorsement

Section 3 – Attestations

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 3AAC 305.340.

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 of 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, and or endorsement. I further understand that this is a Class A misdemeanor under AS 11.56.210 to falsify an application and commit the crime of unsworn falsification.

I certify that all proposed licenses have been listed with the State of Alaska Division of Corporations, Business and Professional Licensing (CBPL).

I certify that I and my individual identified in the business entity ownership section of this application, has or will read AS 04 and its implementing regulations.

hecca

Printed name of licensee

Date

413025

Rebecca S. have

Signature of licensee











