



Document reference ID : 5589

Licensing Application Summary

Application ID:	5589
Applicant Name:	Zip Kombucha Llc
License Type applied for:	Winery Retail License (WRL) (AS 04.09.330)
Application Status:	In Review
Application Submitted On:	06/22/2025 03:21 PM AKDT

Entity Information

Business Structure:	Limited liability company
Alaska Entity Number (CBPL):	10071812

Entity Contact Information

Entity Address:	PO Box 111504, Anchorage, AK, 99511, USA
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Initial Application Information

Authority Type:	I am authorized user by the designated licensee with binding authority
Prefix:	Mr
Legal First Name:	Jessie
Legal Last Name:	Janes
Email Address:	info@zipkombucha.com
Phone Number:	907-227-7166

Additional Authorized Users

Legal Name	Relation with Applicant
Jennifer Swanson	Executive Management

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Zip Kombucha Llc	Jessie Janes	Member	100

Premises Address

Address:	8161 Schoon St, Anchorage, AK, 99518, USA
Does the proposed site include a valid street address?	Yes

Primary license number

Primary License Information	License Number - 6098 - Winery Manufacturer License (WML) - Anchorage
I have read AS 04.09.050. The annual production of the Manufacturer license this retail license attaches to falls under:	04.09.050(a)

Basic Business information

Business/Trade Name:	Zip Kombucha LLC
What is your primary business at this location?	Manufacturer

Premises Contact Details

Contact Person Name	Jessie Lyle Janes
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Business Phone Number	907-227-7716
Alternate Phone Number	907-519-0766
Email Address	info@zipkombucha.com

Local Government and Community Council Details

City/Municipality	Anchorage (Municipality of)
Community Council Name	Taku Campbell

Property Ownership

Do you, the applicant, own the land, building, and/or warehouse at this proposed licensed location?	No
Property Utilization Status	An Existing Facility
Are you operating under?	Lease
Add Copy of Lease\Sublease document	Lease signed.pdf

Premises Diagram

Will the license or permit embrace the entire premises address?	Yes
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Premises Diagram

- [Outdoor seating change Diagram.pdf](#)

Security Plan

- [Security Plan Zip Kombucha.pdf](#)

Other licenses involvement

Other licenses at this physical location

Financial Interest

I hereby certify that no person other than a proposed licensee listed on the liquor license application has a direct or indirect financial interest, as defined in AS 04.11.450(f) in the business for which a liquor license is being applied for.

I hereby certify that any ownership change shall be reported to the board as required under AS 04.11.040, AS 04.11.045, AS 04.11.050, and AS 04.11.055.

Public Notice Posting Attestation and Publishers Affidavit

Have you posted your application at both required locations for ten consecutive days? Yes

What was the other conspicuous location of your post? (Please Include the full address) 2300 Abbott Rd, Anchorage, AK 99507

What was the first day you posted your application? 05/19/2025

I attest that I have met the public posting notice requirement set forth under AS 04.11.310 by posting a copy of my application for the 10-day period at the location of the proposed licensed premises and at another conspicuous location in the area of the proposed premises as listed in this application.

I hereby attest 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.

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 : Jessie Janes on 05/19/2025 10:50 AM AKDT

Payment Info

Payment Type : CC

Payment Id: d3e98b0f-efcd-4608-b028-c090ca251547

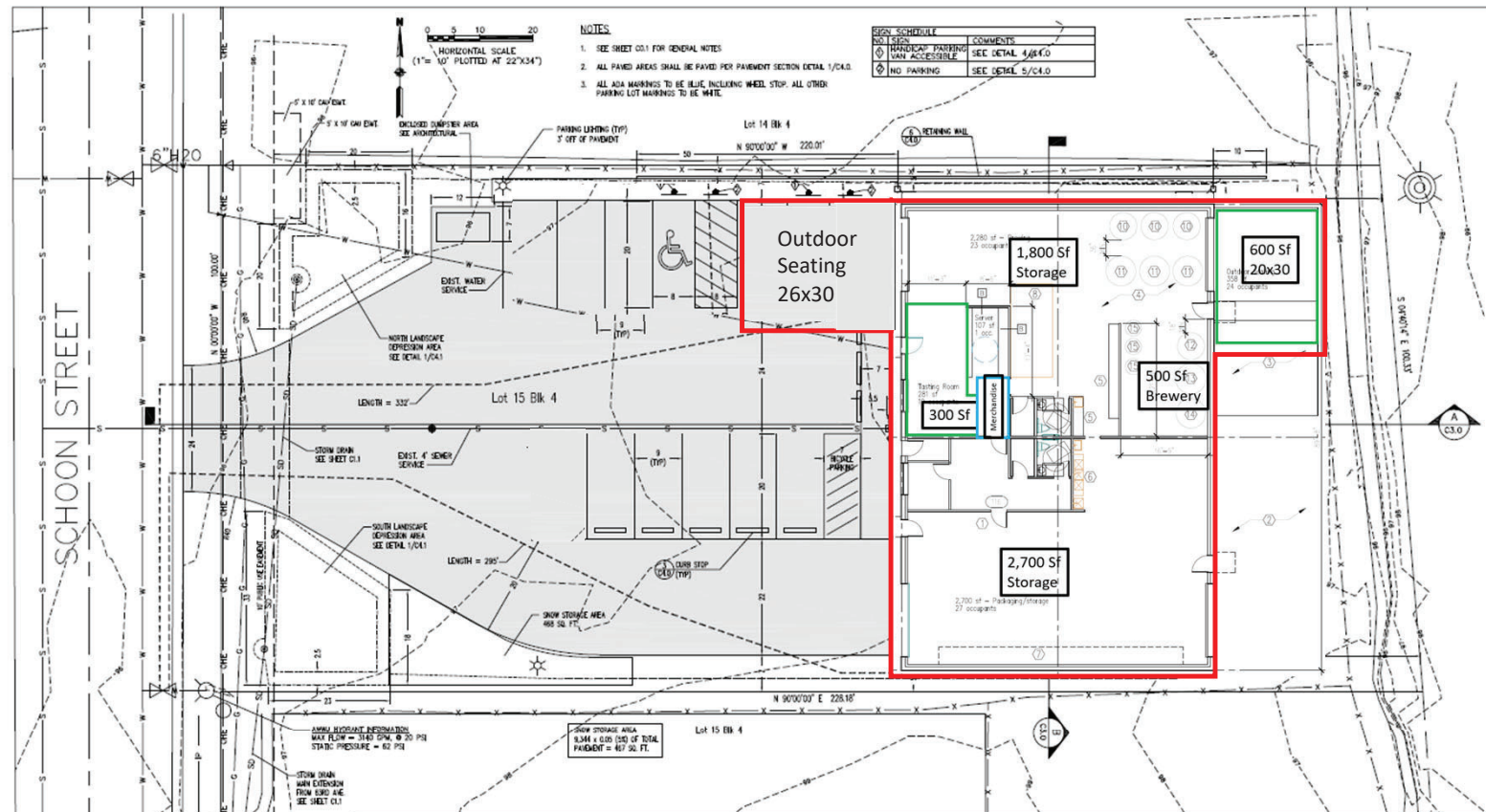
Receipt Number: 101080183

Payment Date: 06/22/2025 03:25 PM AKDT

Documents

#	File Name	Type	Added On
1	Lease signed.pdf	License Lease\Sublease document	05/14/2025 04:01 PM AKDT
2	Outdoor seating change Diagram.pdf	License Location Diagram Document	05/16/2025 01:16 PM AKDT

3	Security Plan Zip Kombucha.pdf	License Location Diagram Security Plan Document	05/16/2025 01:16 PM AKDT
4	Campaign 50253 signed.pdf	Publishers Affidavit	06/22/2025 03:23 PM AKDT



SDCS, LLC
 STRAIN DESIGN & CONSTRUCTION SERVICES, LLC
 5900 W. DENVER ST. DR. #141007 357-5609
 ANCHORAGE, AK 99503

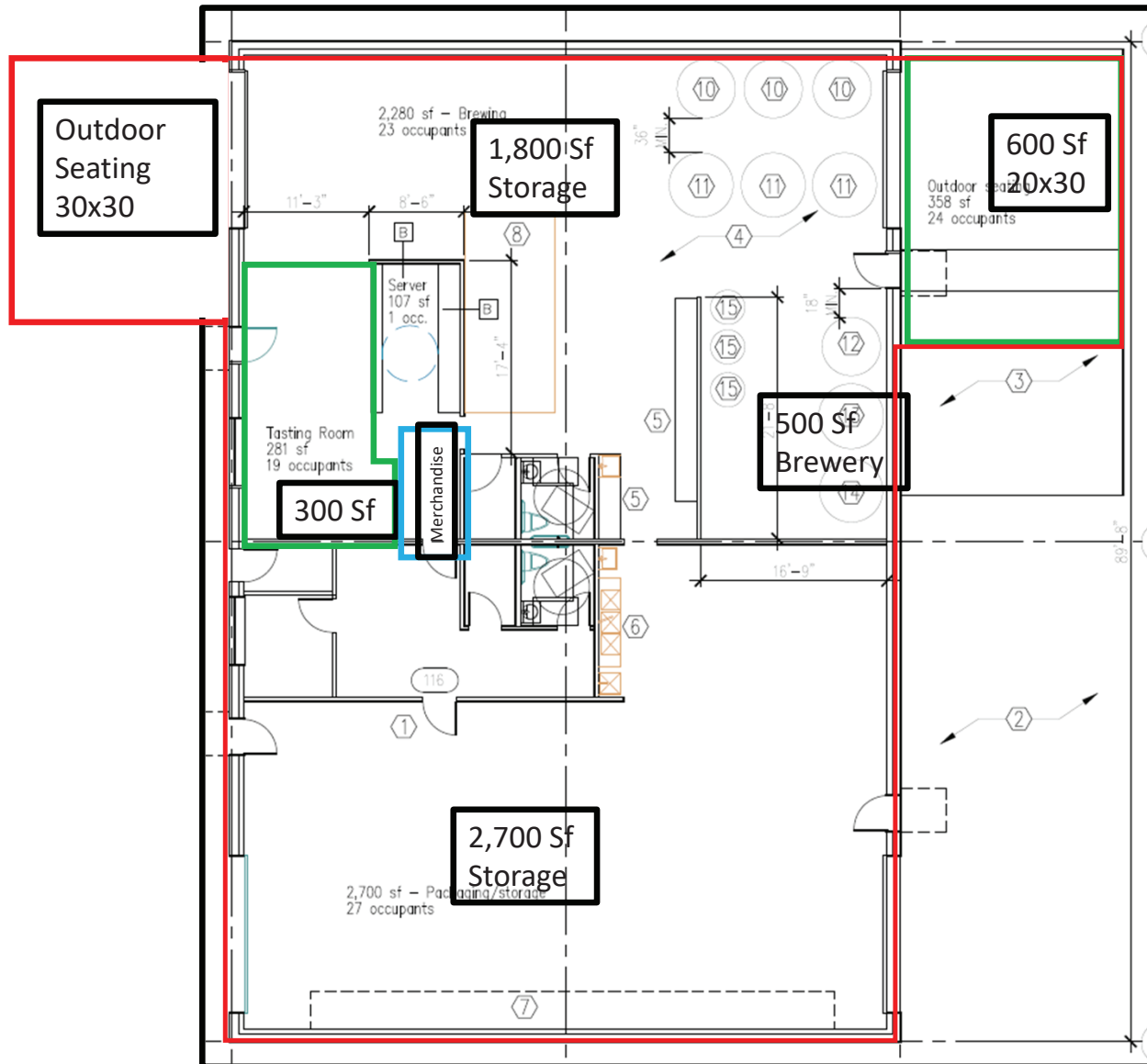
WAREHOUSE PROJECT
TONY WILSON
 LOT 15, BLOCK 4, UNIMOD INDUSTRIAL CENTER #1
 SCHOON STREET ANCHORAGE, AK

BY	DATE	REVISIONS

JOB NO.: 19-013
 DATE: 10/11/2022
 DRAWN: DES
 REVIEWED: DES

SHEET TITLE
 SITE PLAN

SHEET
 C1.0



Zip Kombucha LLC
Outdoor/Indoor Serving Security Plan

1. All minors must be accompanied by an adult (age over 21) while in the restricted area when any alcohol is being served/sold/consumed.
2. All new patrons are carded upon ordering alcohol.
3. All staff is trained in the identification of fake IDs (TAPS Certification).
4. 6 Foot Wooden fence is around the outdoor servicing area.
5. Underaged persons will be monitored closely by our professionally trained alcohol servers.
6. Proper egress from the outdoor service area will always remain unobstructed.
7. ABC mandated posters as required by law are posted inside Zip Kombucha and at the entrances of the outdoor seating area.
8. All entrances and exits will provide clear notice that NO ALCOHOL IS ALLOWED BEYOND THE OUTDOOR SEATING AREA.
9. Keeping outdoor seating area viable without any increased risk to minors exposed to alcohol WILL continue to be a part of our training for our staff.
10. All safety related operations for our current liquor service will additionally be enforced in the new service area.
11. Proper signage at points of entry indicating no minors without a parent or legal guardian will be posted.
12. All servers will closely monitor that only the guests that have been carded will have alcoholic beverages.
13. Our top priority continues in providing safety for all guests regarding the service of alcoholic beverages.
14. Servers will be present in the outdoor area to monitor consumption. CCTV Camera will also be available to ensure security and view of the area at all times.