

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 305 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, 3 AAC 305.045 and 3 AAC 305.060.

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:	Hard Work LLC		License #: 556		
License Type:	Beverage Dispensary License		Statutory Reference:	04.09.200	
Doing Business As:	The International Hotel and Bar				
Premises Address:	122 N. Turner St.				
City:	Fairbanks	State:	AK	ZIP:	99701
Local Governing Body/Bodies:	Fairbanks North Star Borough & City of Fairbanks				

Transfer Type:

- ☒ Regular transfer
- ☐ Transfer with security interest
- ☐ Involuntary retransfer
- ☐ Controlling interest transfer
- ☐ Location transfer

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

Section 2 – Transferee Information

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

Licensee:	The Big Eye LLC				
Doing Business As:	The International Hotel and Bar				
Premises Address:	122 N. Turner St.				
City:	Fairbanks	State:	AK	ZIP:	99701
Community Council, (If applicable):	none				

Mailing Address:	Same as above				
City:		State:		ZIP:	
Email:		Phone:			

Designated Licensee:	Dayton MacCallum		
Contact Phone:	(907) 888-5880	Business Phone:	
Contact Email:	irishpubalaska@gmail.com		

Seasonal License? Yes ☐ No ☒ If "Yes", write your six-month operating period: _____

Section 3 – Premises Information

Premises to be licensed is:

☒ an existing facility ☐ a new building ☐ a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants 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 (Must be in feet).

1056 ft

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 (Must be in feet.)

528 ft

Section 4 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor 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:					
Address:					
City:		State:		ZIP:	
Email:		Phone:			

This individual is an: ☐ applicant ☐ affiliate

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

Section 5 – 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 6.

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:	Dayton MacCallum				
Title(s):	Member /Manager	Phone:	(907) 888-5880	% Owned:	23.21
Address:	810 College Rd				
City:	Fairbanks	State:	AK	ZIP:	99701
Email:	ccc@ak.net	Phone:	907-888-5880		

Entity Official:	Randy Hahn				
Title(s):	Member /Manager	Phone:	907-347-5373	% Owned:	42.96
Address:	2186 Onyx Dr				
City:	North Pole	State:	AK	ZIP:	99705
Email:	randy@t-dservices.com	Phone:	907-347-5373		

Entity Official:	Michael Kralman				
Title(s):	Member /Manager	Phone:	907-378-8677	% Owned:	13.06
Address:	3795 Swenson Ave				
City:	Fairbanks	State:	AK	ZIP:	99709
Email:	Allsteel.info@gmail.com	Phone:	907-378-8677		

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

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). The registered agent is either an individual resident of the state or domestic corporation authorized to transact business in the state and whose business office is the same as the registered office.

CBPL Entity #:	10294754	AK Formed Date:	12-27-24	Home State:	AK
Registered Agent:	United States Corporation Agents, INC.	Agent's Phone:	(800) 773-0888		
Agent's Mailing Address:	721 Depot Dr.				
City:	Anchorage	State:	AK	ZIP:	99501
Email:	ramanagement@legalzoom.com	Phone:			

Residency of Agent: State Of Alaska Yes No

Does your registered agent satisfy the requirement of AS 04.11.430?

X

AMCO RECEIVED: 03/17/2025

Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses:

Yes

No

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):

Michael Kralman, Doug Prevost, Dayton MacCallum. Beverage Dispensary License. License Number: 3195

Section 7 – 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?

☐☒

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



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-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.

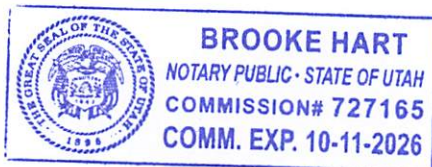
Samantha Davis

Signature of transferor

Samantha Davis

Printed name of transferor

Subscribed and sworn to before me this 21 day of August, 2025.



Brooke

Signature of Notary Public

Notary Public in and for the State of Utah.

My commission expires: 10-11-2026

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this _____ day of _____, 20____.

Signature of Notary Public

Notary Public in and for the State of _____.

My commission expires: _____



Alaska Alcoholic Beverage Control Board

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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

Dayton Mac Culhan

Printed name of transferor

Subscribed and sworn to before me this 14 day of March, 2025.

Signature of Notary Public

STATE OF ALASKA
NOTARY PUBLIC

Betsy Campbell
My Commission Ends June 17, 2027



Notary Public in and for the State of Alaska

My commission expires: 6-17-27

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this _____ day of _____, 20____.

Signature of Notary Public

Notary Public in and for the State of _____.

My commission expires: _____



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-01: Transfer License Application

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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]
Signature of transferor

Michael Krutman
Printed name of transferor

Subscribed and sworn to before me this 14 day of March, 2025.

STATE OF ALASKA
NOTARY PUBLIC

Betsy Campbell
My Commission Ends June 17, 2027



[Signature]

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 6-17-27

Signature of transferor

Printed name of transferor

Subscribed and sworn to before me this _____ day of _____, 20____.

Signature of Notary Public

Notary Public in and for the State of _____

My commission expires: _____



Alaska Alcoholic Beverage Control Board

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:

Initials

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

STATE OF ALASKA
NOTARY PUBLIC

Betsy Campbell
My Commission Ends June 17, 2027



Signature of transferee
Douglas MacCallister
Printed name

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 6.17.27

Subscribed and sworn to before me this 14 day of March, 2025



Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram**What is this form?**

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. 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. 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.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

Yes

No

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.

**Section 1 – Establishment Information**

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

Licensee:	Hard Work LLC	License Number:	556		
License Type:	Beverage Dispensary License				
Doing Business As:	The International Hotel & Bar				
Premises Address:	122 North Turner Street				
City:	Fairbanks	State:	AK	ZIP:	99701

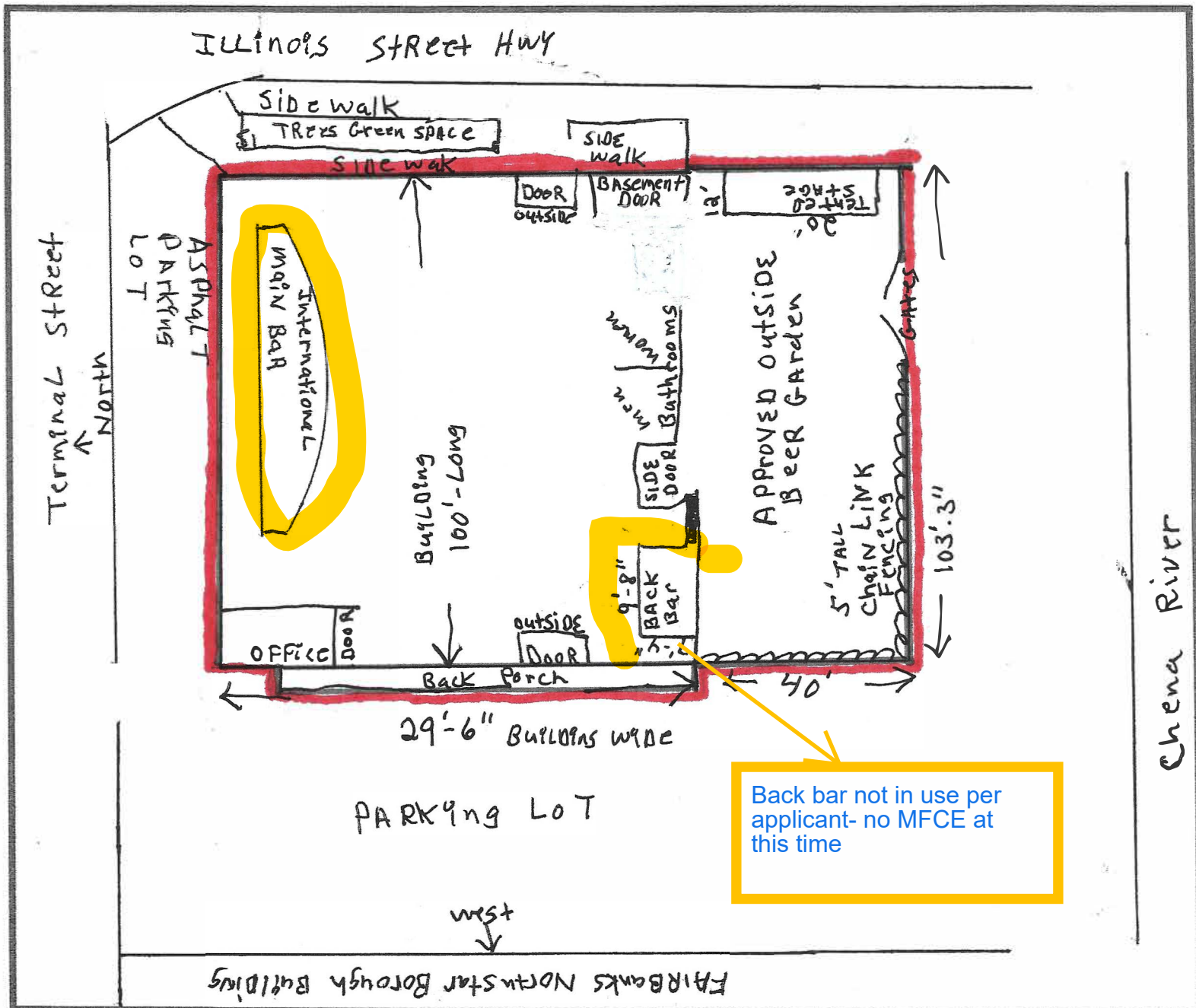


Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram

Section 2 – Detailed Premises Diagram

Clearly indicate the boundaries of the premises and the proposed licensed area within that property. Clearly indicate the interior layout of any enclosed areas on the proposed premises. Clearly identify all entrances and exits, walls, bars, and fixtures, and outline in red the perimeter of the areas designated for alcohol storage, service, consumption, and manufacturing. Include dimensions, cross-streets, and points of reference in your drawing. You may attach blueprints or other detailed drawings that meet the requirements of this form.



North

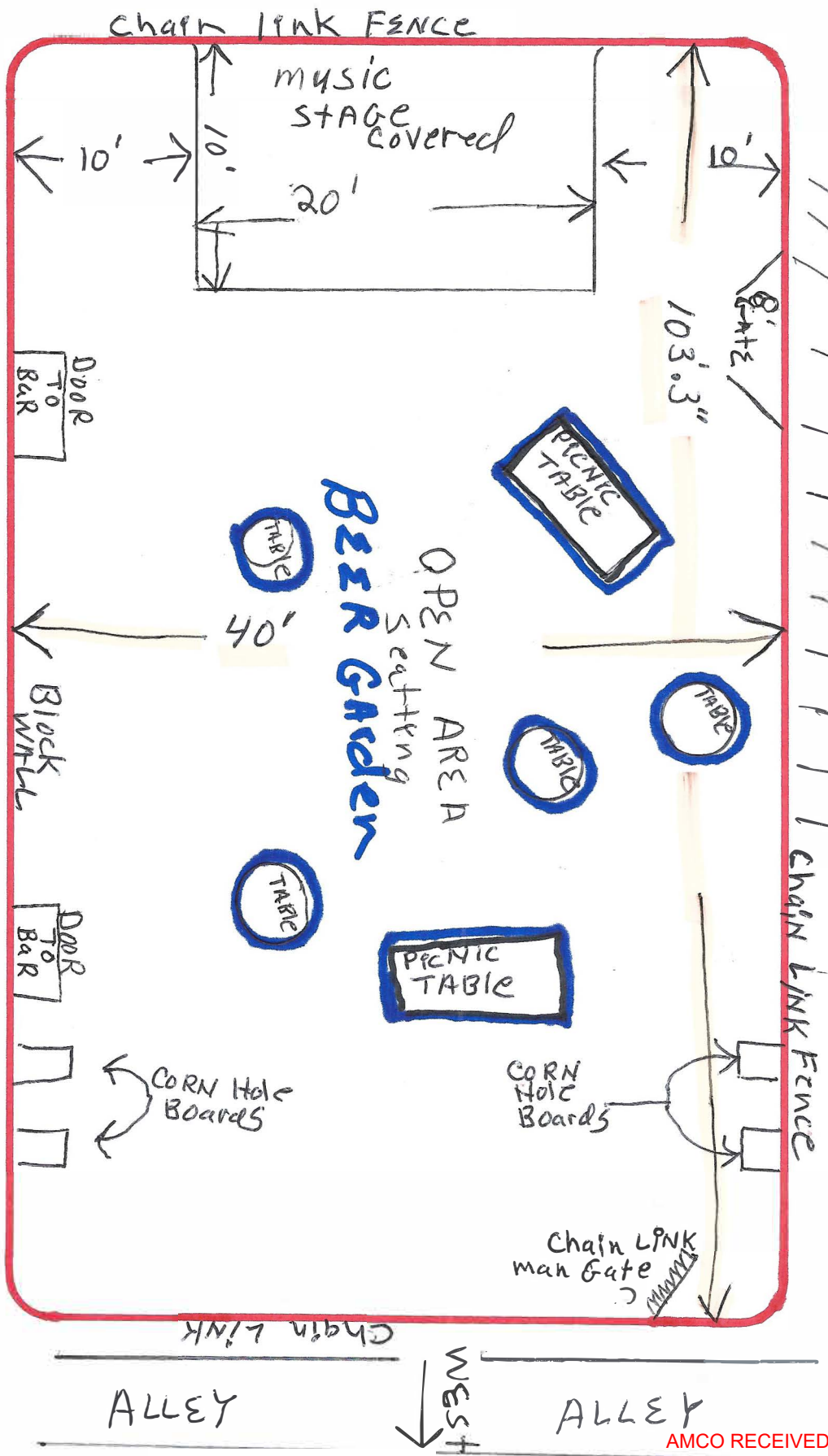
ILLINOIS HWY

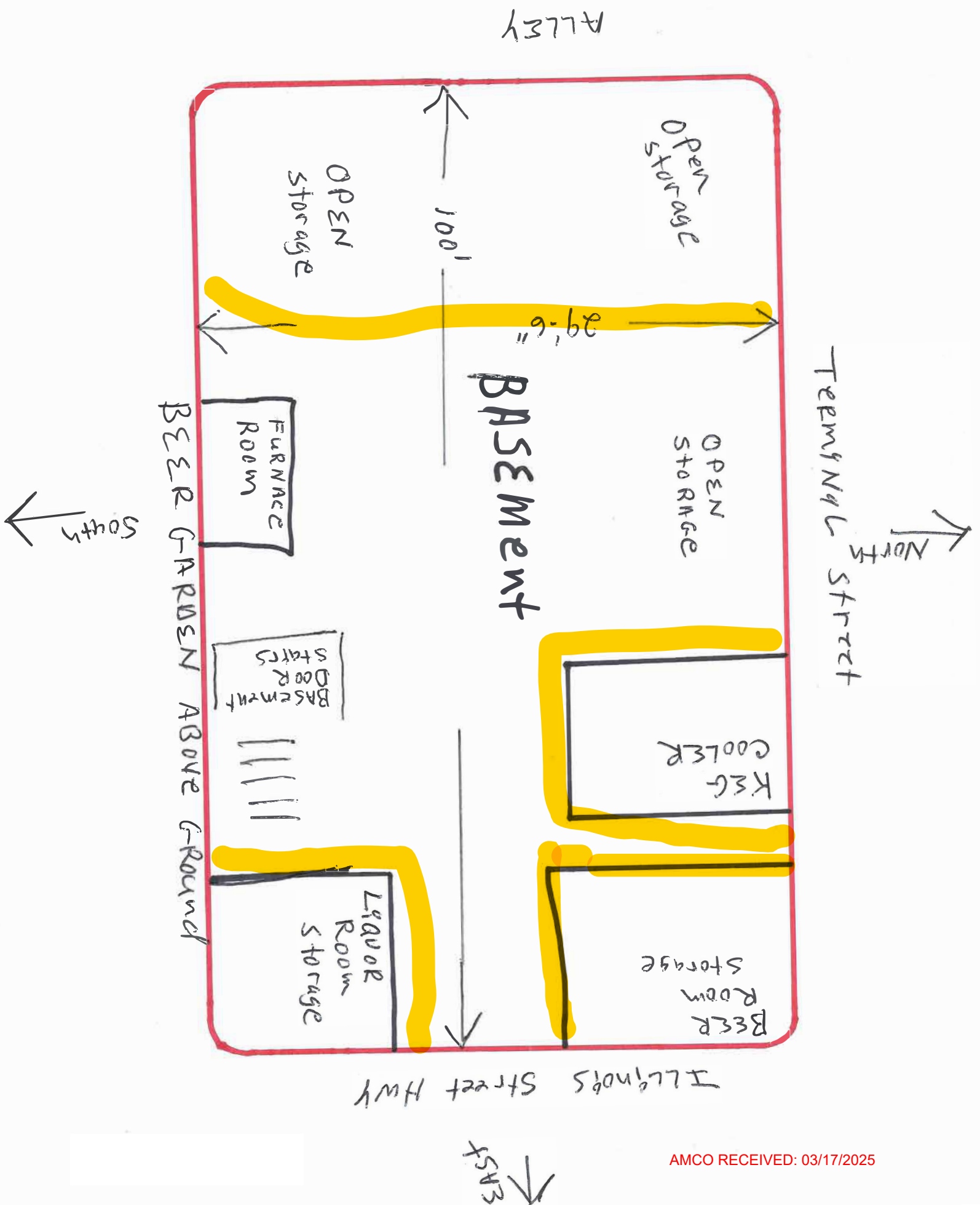
South
~~SOUTH~~

Empty Lot PARKING

International Hotel & Bar
OUTSIDE BEER GARDEN

MAIN BAR AREA





International Hotel & Bar
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.
4. 5' Chain Link fencing 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 International Hotel & Bar 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.

2nd floor, International Hotel & Bar

Second floor of International Hotel & Bar is used for a private residence, and small office only. No sale or storage of alcohol is permitted upstairs. No Public access can be gained from the licensed premises. Only 1st floor & Basement are used under licensee supervision. Please let me know if you need any additional information. Dayton MacCallum (907) 888-5880