

Document reference ID: 5588

Licensing Application Summary

Application ID: 5588

Applicant Name: Zip Kombucha Llc

License Type applied for: Brewery Retail License (BRL) (AS 04.09.320)

Application Status: In Review

Application Submitted On: 06/22/2025 03:12 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

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 - 6097 - Brewery Manufacturer

License (BML) - 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

Business Phone Number 907-227-7166

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, No and/or warehouse at this proposed licensed

location?

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 Yes

Premises Diagram

premises address?

Outdoor seating change Diagram.pdf

Security Plan

• Security Plan Zip Kombucha.pdf

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

Yes

ten consecutive days?

What was the other conspicuous location of your post? (Please

AK 99507

Include the full address)

2300 Abbott Rd, Anchorage,

What was the first day you posted your application?

05/16/2025

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 05/16/2025 01:08 PM AKDT

Payment Info

Payment Type: CC

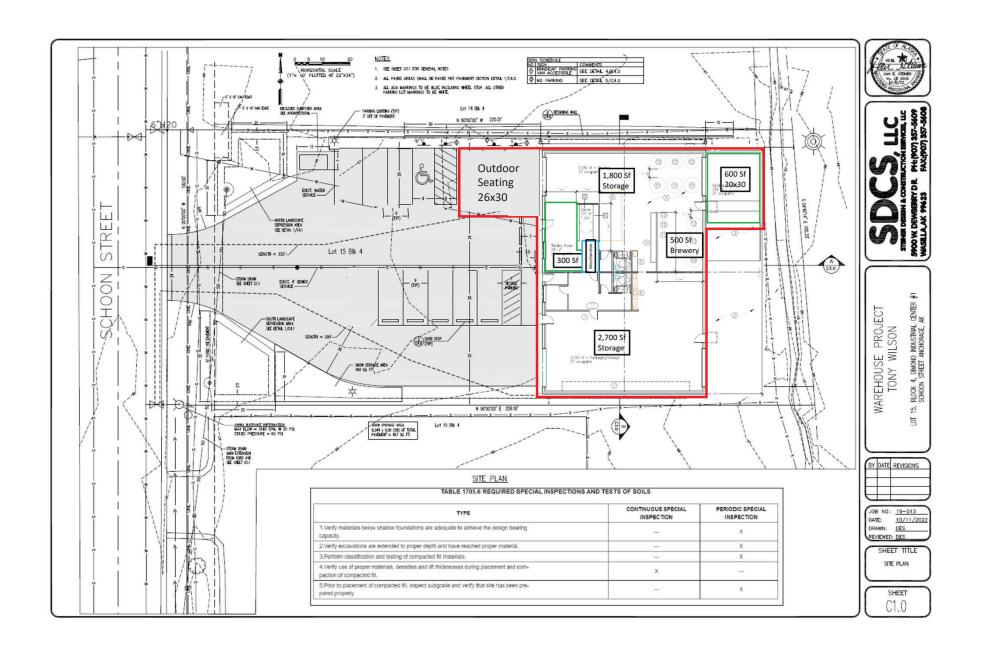
Payment Id: d3e98b0f-efcd-4608-b028-c090ca251547

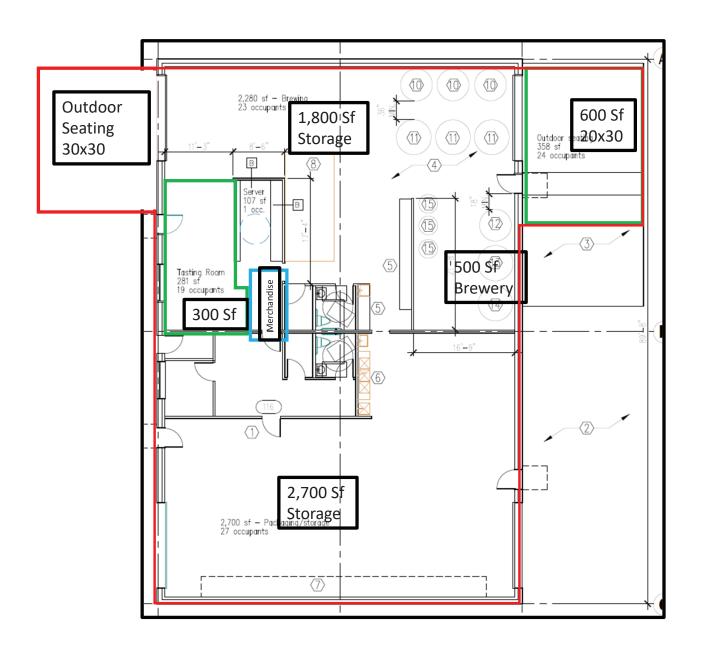
Receipt Number: 101080183

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

Documents

#	File Name	Туре	Added On
1	Lease signed.pdf	License Lease\Sublease document	05/14/2025 03:49 PM AKDT
2	Outdoor seating change Diagram.pdf	License Location Diagram Document	05/16/2025 01:06 PM AKDT
3	Security Plan Zip Kombucha.pdf	License Location Diagram Security Plan Document	05/16/2025 01:06 PM AKDT
4	Campaign 50252 signed.pdf	Publishers Affidavit	06/22/2025 03:20 PM AKDT





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.