



Document reference ID : 5054

## Licensing Application Summary

<b>Application ID:</b>	5054
<b>Applicant Name:</b>	The Notch, Llc
<b>License Type applied for:</b>	Outdoor Recreation Lodge License (ORL) (AS 04.09.280)
<b>Application Status:</b>	In Review
<b>Application Submitted On:</b>	02/27/2025 12:02 PM AKST

## Entity Information

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<b>Business Structure:</b>	Limited liability company
<b>FEIN/SSN Number:</b>	[REDACTED]
<b>Member Managed or Manager Managed:</b>	Member Managed
<b>Alaska Entity Number (CBPL):</b>	10027677
<b>Alaska Entity Formed Date:</b>	03/07/2015
<b>Home State:</b>	AK

## Entity Contact Information

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Name	Phone	Email	Relation
Charity Lehman	907-750-8095	stay@shearwatercove.com	Designated Licensee
<b>Mailing Address:</b>	PO Box 914, Seward, AK, 99664, USA		

# Designated Licensee Information

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**Authority Type:** I am authorized user by the designated licensee with binding authority

**Legal First Name:** Charity

**Legal Last Name:** Lehman

**Email Address:** stay@shearwatercove.com

**Phone Number:** 907-750-8095

## Registered Agent Information

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**Name** Jason Wilson

**Agent's Phone Number** 907-491-1181

**Agent's Email** jason@shearwatercove.com

**Address** PO Box 914, Seward, AK, 99664, USA

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

## Ownership / Principal Party Details

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Principal Parent Entity	Principal Party	Role	%Ownership
The Notch, Llc	Charity Lehman	Member	49
The Notch, Llc	Jason Wilson	Member	51

## Premises Address

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**Nearest municipality, city, and/or borough:** Kenai Peninsula Borough

<b>Lot, Block, Parcel, Landmarks and Directions:</b>	ASLS 82 66 Tract A
<b>Latitude:</b>	59.958559
<b>Longitude:</b>	-149.297870
<b>Country, State, Zip:</b>	AK, United States, 99664
<b>Does the proposed site include a valid street address?</b>	No

## Basic Business information

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<b>Business/Trade Name:</b>	Shearwater Cove
<b>What is your primary business at this location?</b>	Other

## Premises Contact Details

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<b>Contact Person Name</b>	Charity Lehman
<b>Business Phone Number</b>	907-750-8095
<b>Email Address</b>	stay@shearwatercove.com

## Local Government and Community Council Details

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<b>City/Municipality</b>	No Local Government
<b>Borough</b>	Kenai Peninsula Borough

## Property Ownership

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**Do you, the applicant, own the land, building, and/or warehouse at this proposed licensed location?**

Yes

## Property Utilization Status

An Existing Facility

### Property Ownership Deed

[Deed + Quit Claim Deed.pdf](#)

## Premises Diagram

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**Will the license or permit embrace the entire premises address?**

No

### Premises Diagram

- [Final Premises Diagram.pdf](#)

### Security Plan

- [Updated Security Plan.pdf](#)

## Seasonal Information

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**Are you conducting seasonal business?** Yes

**Please Provide your six-month operating period** 05/15 - 09/15

### Operation Period Details

We operate during the summer tourism season.

## Other Licenses Involvement

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**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?**

No

## Outdoor Recreation Lodge Statement

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**Is the applicant a licensed business that provides overnight accommodations and meals, is primarily involved in offering opportunities for persons to engage in outdoor recreation activities and has a minimum of two guest rooms? : Yes**

**Describe your outdoor recreation lodge facilities and recreation activities offered? :**

Shearwater Cove is a wilderness ecolodge offering yurt lodging, sea kayaking, and hiking in Resurrection Bay.

## Individual Certification and Financial Interest

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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

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**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)** US Post Office, 507 Madison St, Seward, AK 99664

**What was the first day you posted your application?** 01/21/2025

**If the newspaper advertisement was published did you advertise once a week for three consecutive weeks or if by radio twice week for three successive weeks?** Yes

**What was the final date your advertisement was published/broadcasted?** 12/12/2025

### Newspaper/Publishers Affidavit

[Updated Publisher's Affidavit.pdf](#)

### Upload Paper form Application

[Application Summary.pdf](#)

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

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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.

I certify that we provide overnight accommodations and meals, we also have at least 2 guest rooms, and they are primarily involved in offering opportunities for outdoor recreation activities.

## Signature

This application was digitally signed by : Charity Lehman on 01/21/2025 12:15 PM AKST

## Payment Info

Payment Type : CC

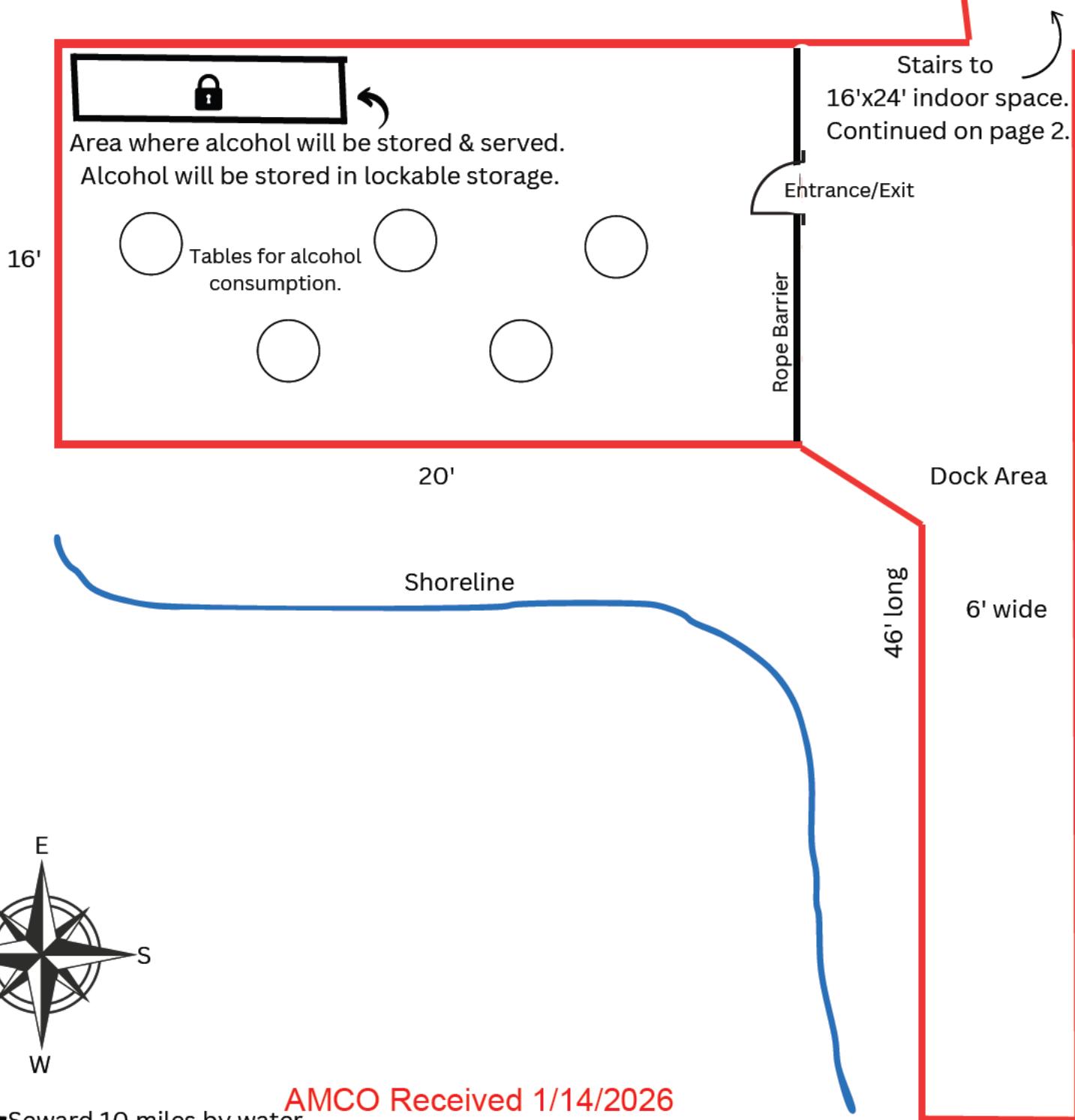
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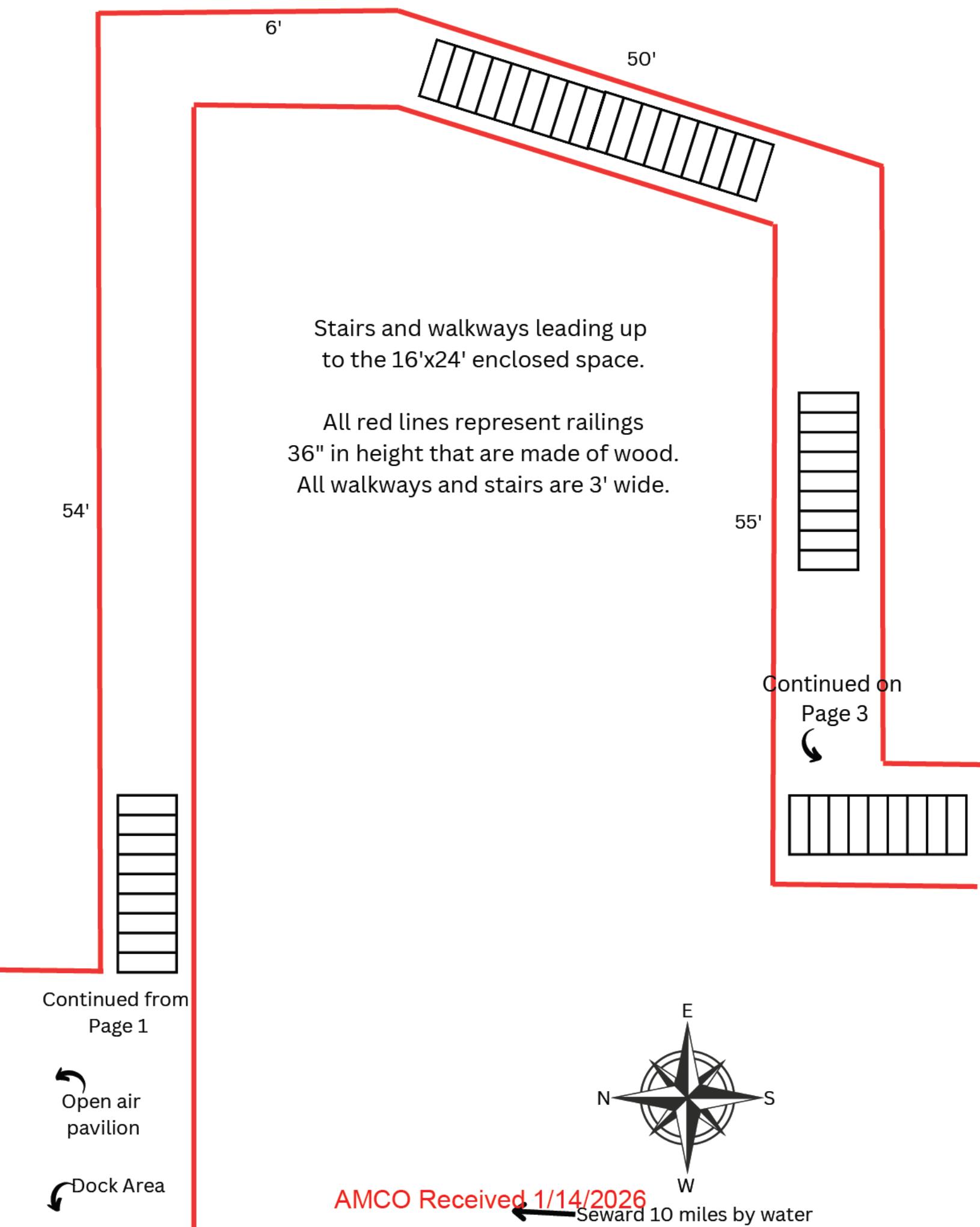
Receipt Number: 101043137

Payment Date: 02/27/2025 12:04 PM AKST

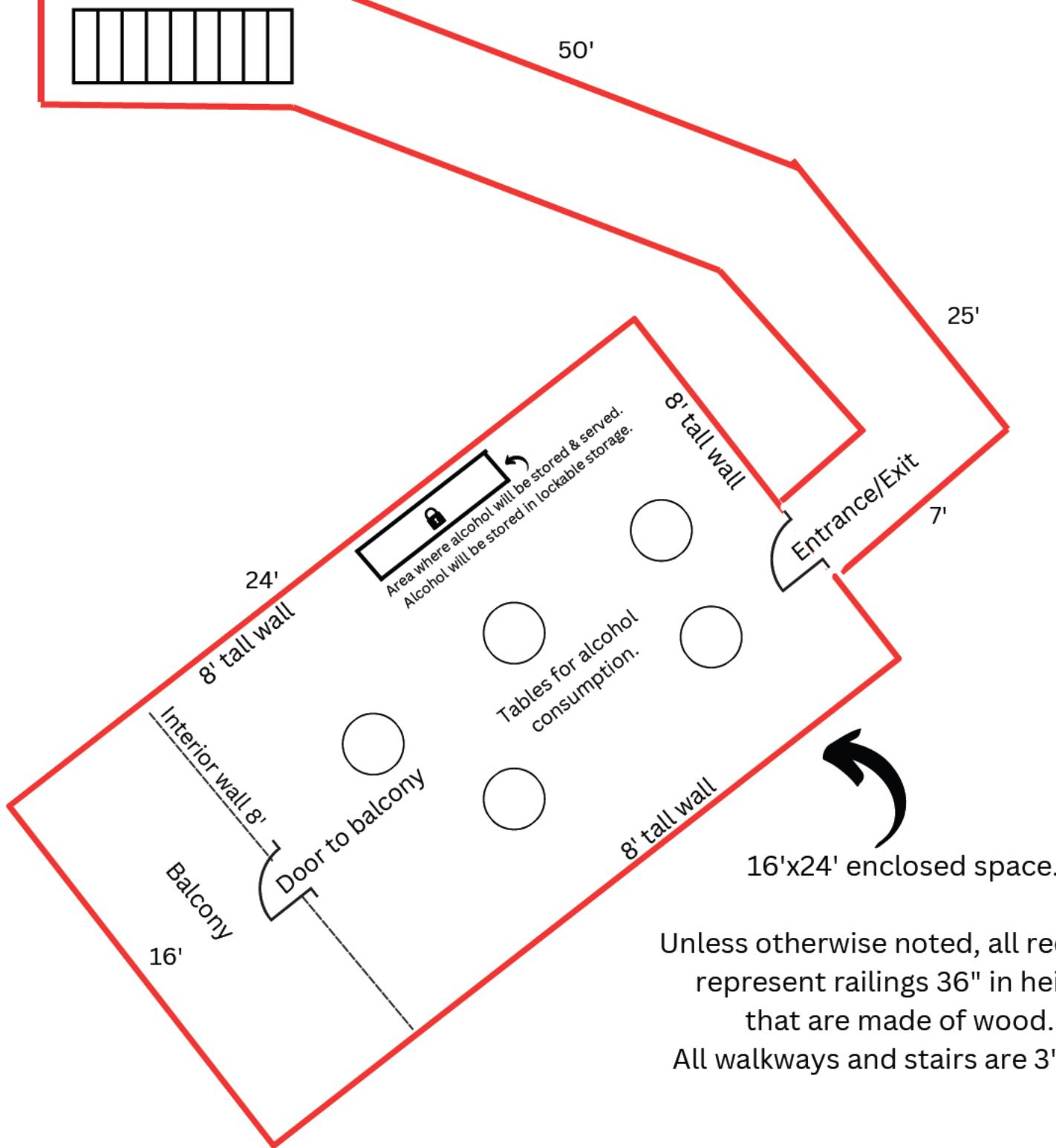
Entire premises includes a 16'x20' open-air pavilion and 6'x46' dock space (page 1) connected by stairways and walkways (page 2) to a 16'x24' enclosed indoor space (page 3).

All red lines represent railings 36" in height that are made of wood.

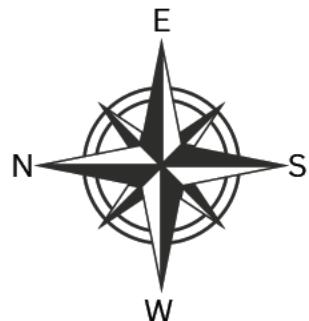


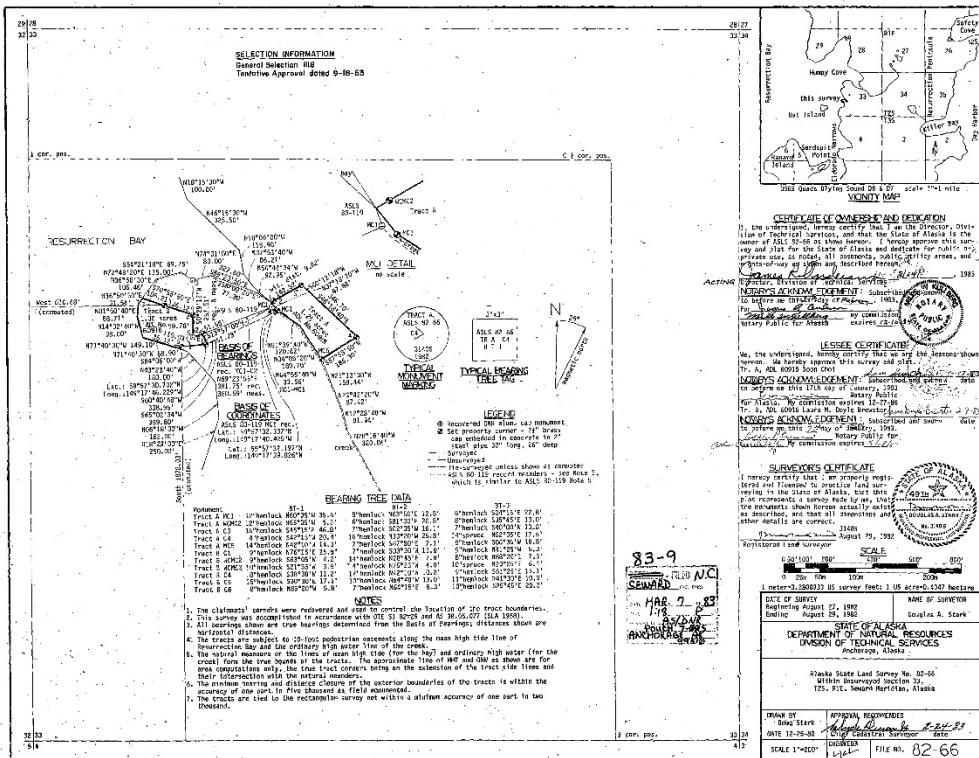


Continued from  
Page 2

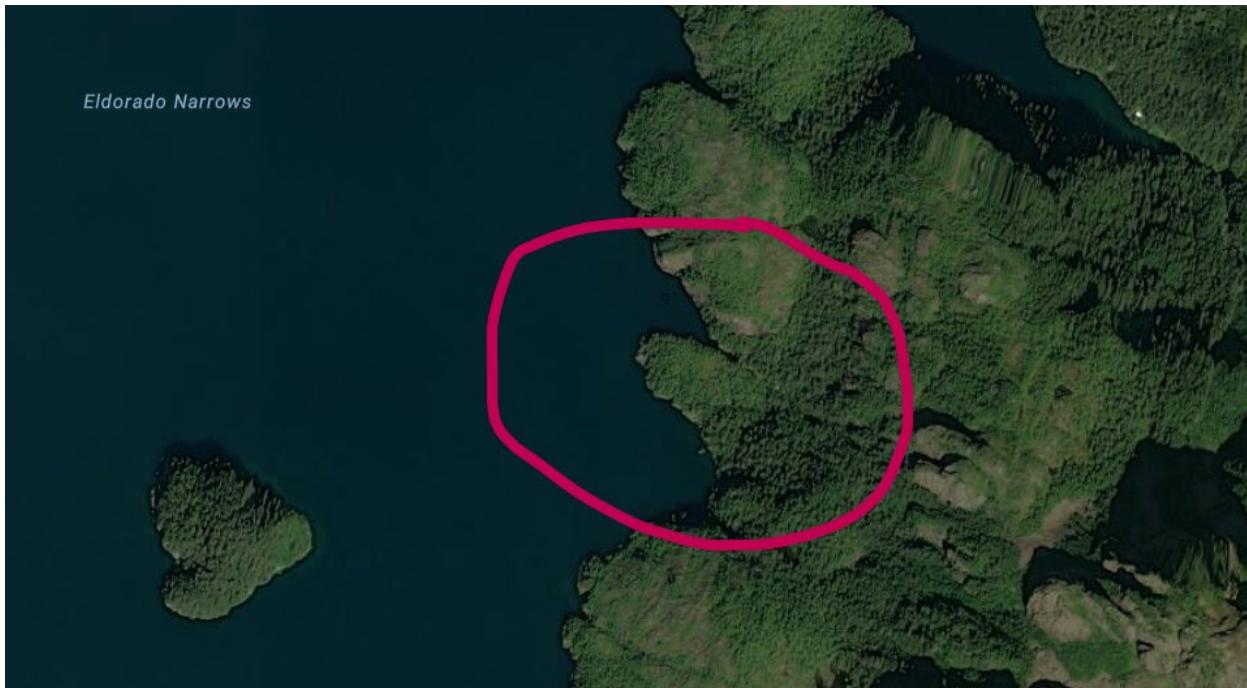


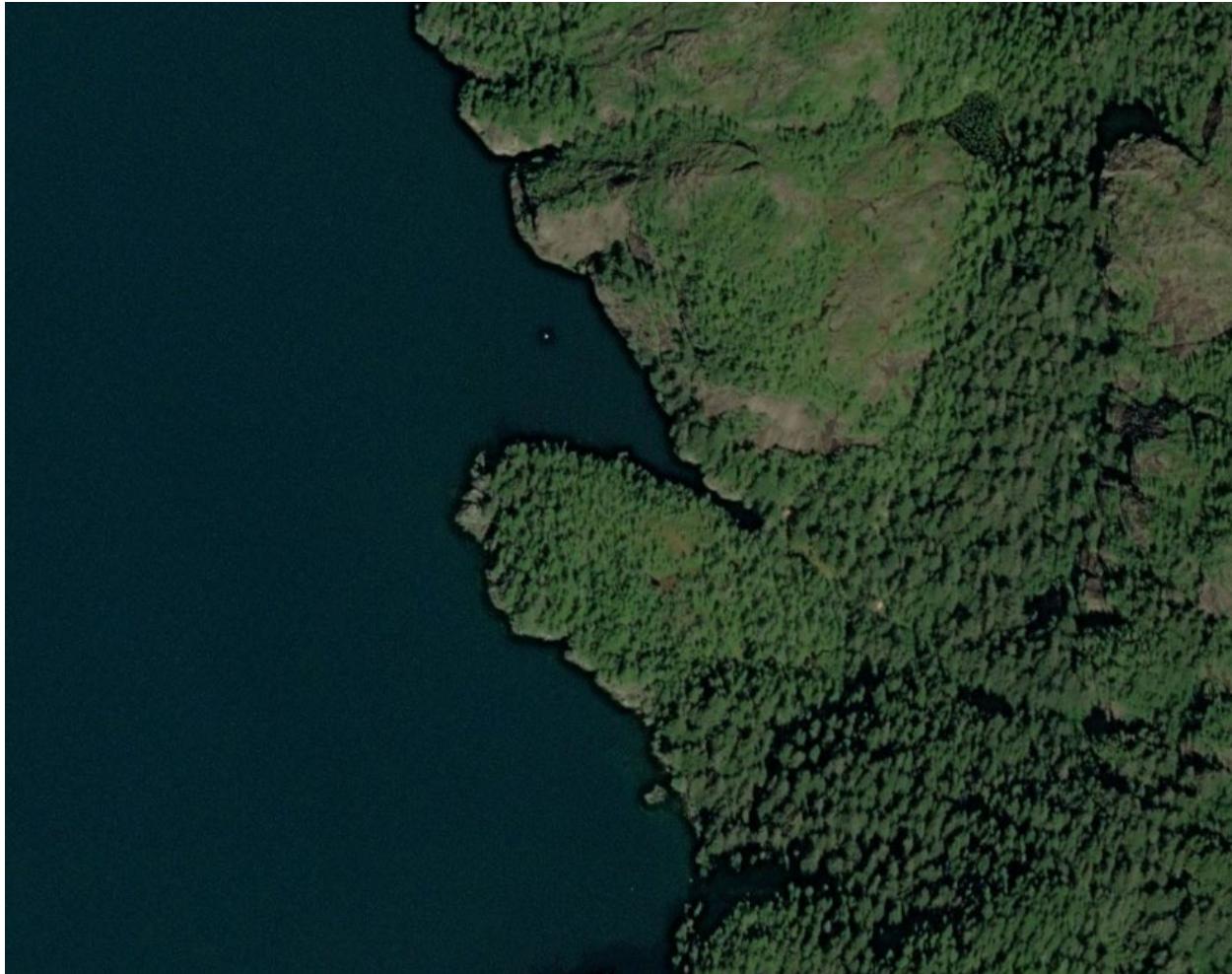
Unless otherwise noted, all red lines  
represent railings 36" in height  
that are made of wood.  
All walkways and stairs are 3' wide.

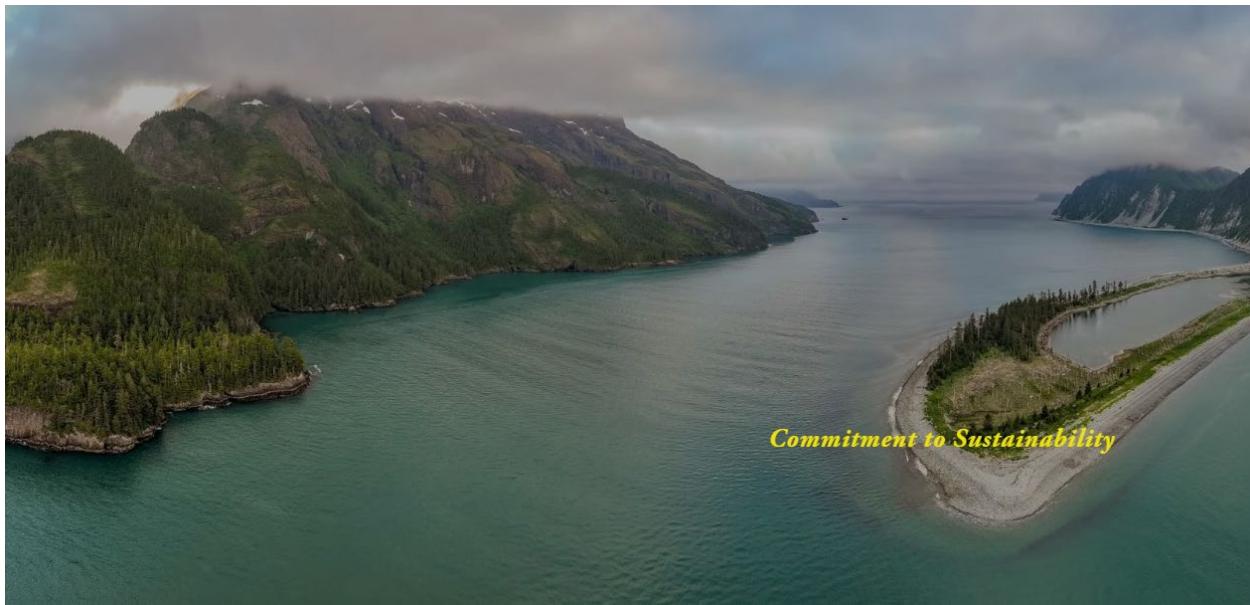




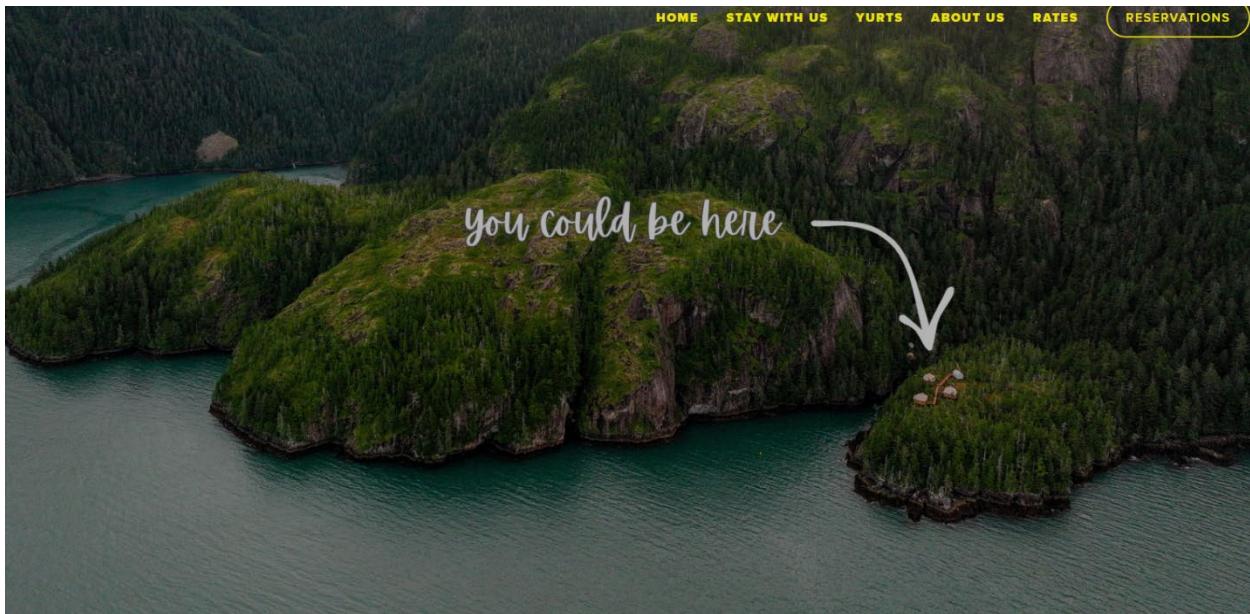
### *Eldorado Narrows*







*Commitment to Sustainability*



*You could be here*

Shearwater Cove  
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. 36" height railings made of wood and wire rope are 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 Shearwater Cove 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.
  
15. Regarding yurt accommodations: The yurt accommodations themselves are significantly separated from the areas indicated in the diagram. One cluster of yurts is 100+ feet to the left of the page 2 diagram, and the other cluster of yurts are 25+ feet beyond the enclosed space shown on page 3. The landscape out there is very rugged, hence all of the walkways and stairs, so space for storing and serving alcohol is naturally limited. The two spaces indicated on page 1 and 3 of the diagram are the only logical places where we could store and serve alcohol.