



Marijuana Handler Permit Renewal Instructions

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

Alcohol and Marijuana Control Office Hours

If you are unable to visit the Anchorage office, please mail your application documents to:

AMCO

Attn: Handler Permit

550 West 7th Ave Suite 1600

Anchorage, AK 99501

Anchorage:

550 West 7th Ave, Suite 1600

Document Submission and Card Issuance Instructions

In order to receive a marijuana handler permit renewal card, please complete the following steps:

1. Complete the marijuana handler permit Standard Cover Page on myAlaska (detailed instructions are included on page 2).
2. Complete a Marijuana Control Board approval Marijuana Handler Permit Education Course. Complete list on our website. <https://www.commerce.alaska.gov/web/amco/MarijuanaHandlerPermit.aspx>
3. Obtain a Criminal History Background Check at any local Alaska State Trooper Post. <https://dps.alaska.gov/Statewide/R-I/Background/WalkIn>
4. Gather required documents listed below.
5. Bring completed application to the Anchorage office or mail to the Anchorage office.



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Checklist for Renewal Permit Applications

The following documents and items must be submitted before an application will be considered complete:

Walk in or Mail in:

- Standard Cover Page
- Marijuana Handler Permit Education Course Completion Certificate (copy)
- Permit Fee (\$50, paid by check or money order, payable to the State of Alaska) (**No cash or credit card**)
- Valid Government Issued ID (if mailing in, please provide a clear photo copy)
- A Criminal History Background Check.
- Photo (2" x 2" "passport size" in full color photo)

Renewal of Handler Permits

- Marijuana Handler Permits expire 3 years from the certification date provided by the Marijuana Handler Course Certification.
- 90 days prior to the expirations date, the renewal process will become active through myAlaska.

1. Begin by initiating a handler permit application.

Application for a Marijuana Handler Permit

If you have reviewed the application instructions, please click on the link below to launch the application.

[Initiate Handler Permit Application](#)

This will open a new window, if a new window doesn't open, disable your pop-up blocker.

2. Sign into myAlaska.

myAlaska Login

Username:

Password:

[Forgot my Username](#)

[Forgot my Password](#)

New User: [Register for a myAlaska Account](#)



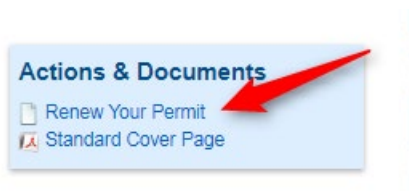
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3. Select your handler permit to renew.

Handler Permit Number	First Name	Last Name	Issue Date	Effective Date	Expiration Date	Handler Status
19148	Your	Name	07/01/2018	07/01/2018	11/01/2018	Active

4. Click on Renew Your Permit



5. Verify your contact information is correct, and update any old information. Click Submit Application.

RENEW HANDLER

Name: Your Name

Phone Number: 9072690350

Email Address: Your email address

Mailing Address

Country: UNITED STATES

Address 1: 550 West 7th Ave

Address 2: Ste. 1600

City: Anchorage

State: Alaska

Zip Code: 99515

Zip Plus:



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6. Review and submit your application

REVIEW YOUR HANDLER APPLICATION

IMPORTANT: Please use the "Review Application" button to review the PDF of your online application.

[Review Application](#)

By selecting "Submit Application" below, you are certifying that you have reviewed this document. Once you proceed, this PDF will be considered your submission. You may save or print the PDF for your records.

Please note: Supplemental documents and fees must be submitted to the AMCO office before any application can be reviewed.

[Submit Application](#) [Back to Account Home](#)

7. Click on your renewed handler permit

Handler Permit Number	First Name	Last Name	Issue Date	Effective Date	Expiration Date	Handler Status
19148	Your	Name	07/01/2018	07/01/2018	11/01/2018	Active

8. Print out your Standard Cover Page

HANDLER PERMIT 19148

Handler Permit Number: 19148
 Handler Status: Active
 Issue Date: 07/01/2018
 Effective Date: 07/01/2018
 Expiration Date: 11/01/2018
 Name: Your Name
 Date of Birth: 12/01/1990
 Phone Number: 907-269-0350
 Email Address: Your Email Address
 Mailing Address: 550 West 7th Ave.
 Ste. 1600
 Anchorage, AK 99515
 UNITED STATES

[Actions & Documents](#)
[Standard Cover Page](#)

Handler Events

	All
▶ Initial Application	Status: Incomplete
▶ Permit Renewal	Status: Incomplete