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

Alaska Marijuana Control Board

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

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

Licensee:	BRYANT D THORP	**License Number:**	10037		
License Type:	Retail Marijuana Store				
Doing Business As:	ARCTIC HERBERY				
Physical Address:	7107 Arctic Blvd				
City:	Anchorage	**State:**	AK	**Zip Code:**	99518
Designated Owner:	Bryant Thorp				
Email Address:	bryant@gci.net				

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	MJ-08

OFFICE USE ONLY					
Received Date:		Payment Submitted Y/N:		Transaction #:	

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Form MJ-08: Local Government Notice Affidavit

What is this form?

A local government notice affidavit is required for all marijuana establishment license applications with a proposed premises that is located within a local government, per 3 AAC 306.025(b)(3). As soon as practical after initiating a new marijuana establishment license application, an applicant must give notice of the application to the public by submitting a copy of the application (produced by the board's application website) to the local government and any community council in the area of the proposed licensed premises.

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

Section 1 – Establishment Information

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

Licensee:	Bryant Thorp	**License Number:**	10037		
License Type:	Retail Marijuana Store				
Doing Business As:	Arctic Herbery				
Premises Address:	7107 Arctic Blvd				
City:	Anchorage	**State:**	ALASKA	**ZIP:**	99518

Section 2 – Certification

I certify that I have met the local government notice requirement set forth under 3 AAC 306.025(b)(3) by submitting a copy of my application to the following local government and community council (if applicable):

Local Government: Muni Clerk Date Submitted: 3/10/16

Community Council: Taku/Campbell CC. Date Submitted: 3/10/16
(Municipality of Anchorage and Matanuska-Susitna Borough only)

I declare under penalty of perjury that I have examined this form, including all accompanying schedules and statements, and to the best of my knowledge and belief find it to be true, correct, and complete.

Signature of licensee

Subscribed and sworn to before me this 10th day of March 2016.

STATE OF ALASKA
NOTARY PUBLIC
Jenie R. Sta. Maria
My Commission Expires 5-2-16

Notary Public in and for the State of Alaska.

My commission expires: 5-2-16