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:	House OP, LLC	**License Number:**	10509		
License Type:	Retail Marijuana Store				
Doing Business As:	HOUSE OP, LLC				
Physical Address:	2000 E Dowling Rd, Unit 12				
City:	Anchorage	**State:**	AK	**Zip Code:**	99507
Designated Licensee:	Mark Oppegaard				
Email Address:	houseopllc34@gmail.com				

Section 2 – Attached Items

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

Attached Items:	MJ-08 Revised

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 to the local government and any community council in the area of the proposed licensed premises. For purposes of this notification, the document that must be submitted is the application document produced by the online application system titled "Public Notice".

This form must be completed and 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:	House OP, LLC	**License Number:**	10509		
License Type:	Retail Marijuana Store				
Doing Business As:	House OP, LLC				
Premises Address:	2000 E Dowling Rd, Unit 12				
City:	Anchorage	**State:**	AK	**ZIP:**	99502

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 official and community council (if applicable):

Local Government: Municipality of Anchorage

Name of Official: Francis McLaughlin

Title of Official: Planning Dept / Senior Planner

Date Submitted: 8/11/2016

Community Council: Abbott Loop Community Council

Date Submitted: 6/30/2016

(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.

M.A. Oppegaard dba House Op LLC

Signature of licensee

MARK A. OPPEGAARD

Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 16th Dec 2016

Subscribed and sworn to before me this 11th day of Aug, 2016.

STATE OF ALASKA
NOTARY PUBLIC
Charlie Hidalgo
My Commission Expires: December 16, 2016

Public Notice

Application for Marijuana Establishment License

License Number: 10509

License Status: Incomplete

License Type: Retail Marijuana Store

Doing Business As: HOUSE OP, LLC

Business License Number: 1035196

Email Address: houseopllc34@gmail.com

Latitude, Longitude: 61.165720, -149.845363

Physical Address: 2000 E Dowling Rd
Unit 12
Anchorage, AK 99507
UNITED STATES

Owner #1

Licensee Type: Entity

Alaska Entity Number: 128433

Alaska Entity Name: House OP, LLC

Phone Number: 907-529-6234

Email Address: houseopllc34@gmail.com

Mailing Address: 2861 W Intl Airport Rd
Unit E304
Anchorage, AK 99502
UNITED STATES

Affiliate #1

Licensee Type: Individual

Name: Mark Oppegaard

Date of Birth: 09/05/1960

Phone Number: 907-529-6234

Email Address: houseopllc34@gmail.com

Mailing Address: 2861 W Intl Airport Rd
Unit E304
Anchorage, AK 99502
UNITED STATES

Interested persons should submit written comment or objection to their local government, the applicant, and to the Alcohol & Marijuana Control Office at 550 W 7th Ave, Suite 1600, Anchorage, AK 99501 or to marijuana.licensing@alaska.gov not later than 30 days after this notice of application.

POSTING DATE 8/3/16