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:	Northern Lights Indoor Gardens, LLC	**License Number:**	10138		
License Type:	Retail Marijuana Store				
Doing Business As:	NORTHERN LIGHTS INDOOR GARDENS, LLC				
Physical Address:	1321 Sawmill Creek Road Suite O and P				
City:	Sitka	**State:**	AK	**Zip Code:**	99835
Designated Licensee:	Micah Miller				
Email Address:	dalys@gci.net				

Section 2 – Attached Items

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

Attached Items:	DEC Permit # 121120680

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

STATE OF ALASKA DIVISION OF ENVIRONMENTAL HEALTH **INVOICE #** 14683

FROM

REMIT TO:
Dept. of Environmental Conservation
Financial Services
410 Willoughby Ave. #303
Juneau AK 99801-1795

CALENDAR YEAR 16

TYPE CODE FM-1 MJ

PERMIT #: 121120680

TO

APPLICANT NAME: Northern Lights Indoor Gardens LLC

DBA: Northern Lights Indoor Gardens

ADDRESS: 1371 Sawmill Creek Road, SUITE O

CITY: SITKA

STATE: AK **ZIP:** 99835

PHONE: 907 747-5858

APPLICANT: IMPORTANT

1. **Make Check Payable To: State Of Alaska**
2. **Reference invoice number and permit number on your check.**
3. **Submit part (yellow) copy of this form with your payment.**

EHO Contact Name: Greg Johnstone

EHO ID#: 138

EHO Phone: 907 747-8614

CHECK APPLICABLE DISCOUNT

PERMIT

☐ DISCOUNT 50% - 501(C) 4, 10, 19
NOTE: Must provide IRS Exemption Letter

☐ DISCOUNT 50% - Ltd./ Mobile/Kiosk Serving Only Certain Beverages and Non PH Prepackaged Foods

☐ DISCOUNT 20% - ASSOCIATED Bar/Food Service

PLAN REVIEW

☐ DISCOUNT- 20% for 3 or more operations

PAID: CASH _____

CHECK 1058

Date Payment Received 6/24/16

☐ Send Permit to Operator

☒ Send permit to EHO

NOTE: Payment due within 30 days of date of issue.

Date Issued: 6/24/16

TOTAL FEES

ANNUAL FEE	100.00	
Less 50% Discount	(_____)	
SUBTOTAL		100.00
Less Espresso Discount	(_____)	
SUBTOTAL		_____
Less Assoc. Discount	(_____)	
SUBTOTAL		_____
PLAN REVIEW FEE	+ 125.00	
Less Discount (3 or more operations)	(_____)	
SUBTOTAL		125.00
CHANGE OF OWNERSHIP	+_____	
SUBTOTAL		_____
OTHER _____	+_____	
SUBTOTAL		_____
TOTAL FEES		225.00

Form 18.31.INV.01 (rev 5/09) WHITE: Applicant YELLOW: Remittance Copy PINK: Data Entry GOLD: File Copy

Division of Environmental Health

Food Safety & Sanitation Program

Permit Search Data

Permit # 121120680:
Permit Name: Northern Lights Indoor Gardens
Owner Name: Northern Lights Indoor Gardens LLC
Owner Address: 1321 SAWMILL CREEK RD SITKA, AK 99835
Status: ACTIVE
Permit Issue Date: 07/07/2016
Permit Expiration Date: 12/31/2016

(Back to Search Results)