THE STATE of ALASKA

GOVERNOR BILL WALKER

**Department of Commerce, Community, and Economic Development**

ALCOHOL & MARIJUANA CONTROL OFFICE
550 West 7th Avenue, Suite 1600
Anchorage, AK 99501
Main: 907.269.0350

May 23, 2017

2017ABC 1064

Department of Environmental Conservation
**Attn: Permitting** Division
VIA email: DEC.FSSPermit@alaska.gov
**State Fire Marshal**
Attn: Jillian Roberts
Lloyd Nakano
Via email: jillian.roberts@alaska.gov
lloyd.nakano@alakska.gov

| | |
|---|---|
| **License Number:** | 11556 |
| **License Type:** | Limited Marijuana Cultivation Facility |
| **Licensee:** | JACOB NYMAN |
| **Doing Business As:** | GREEN THUMB SOLUTIONS |
| **Physical Address:** | 47375 Aries Ct.<br>Soldotna, AK 99669 |
| **Designated Licensee:** | JACOB NYMAN |
| **Phone Number:** | 907-406-1414 |
| **Email Address:** | chefjake99@gmail.com |

3 AAC 306.300(a)(2)(B), 3 AAC 306.400(b)(2)(B), 3 AAC 306.500(b)(2)(B), and 3 AAC 306.605(b)(2)(B) require that an applicant for a marijuana establishment license operate in compliance with each applicable public health, fire, safety, and tax code and ordinance of the state and the local government in which the applicant's proposed licensed premises are located.

This letter serves to provide written notice and request for compliance status from the above referenced entities regarding the above application (see attached application documents for more information). **Please complete and return this form to the AMCO office at the email below**.

REVIEWER: Quinn Thum ☐ DEC ☒ Fire Marshal

Div. Fire & Life Safety
Plan Review Bureau
MAY 23 2017
Anchorage

DATE: 6-9-17 PHONE: 269-2004

☒ Compliant ☐ Non-compliant

COMMENTS: limited grow in a single family home - plan review not required.

If you have any questions, please send them to the email address below.

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REVIEWER: Noelani Thompson ☒ DEC ☐ Fire Marshal

DATE: 5/24/2017 PHONE: (907) 269-6289

☒ Compliant ☐ Non-compliant

COMMENTS: No permit is needed from DEC for this facility.

If you have any questions, please send them to the email address below.

Sincerely,

Erika McConnell, Director
marijuana.licensing@alaska.gov

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REVIEWER: _____ ☐ DEC ☐ Fire Marshal

DATE: _____ PHONE: _____

☐ Compliant ☐ Non-compliant

COMMENTS: _____

_____

_____

If you have any questions, please send them to the email address below.

Sincerely,

Erika McConnell, Director
marijuana.licensing@alaska.gov