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:	Parallel 64 llc	**License Number:**	10174		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	PARALLEL 64 LLC				
Physical Address:	2128 N Post Road				
City:	Anchorage	**State:**	AK	**Zip Code:**	99504
Designated Licensee:	Travis Jones				
Email Address:	travis@parallel64.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 #:	

RECEIVED
DEC 15 2017
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

Alcohol and 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

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 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.

This form must be completed and submitted to AMCO's main office before any new or transfer 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:	Parallel 64, LLC	**License Number:**	10174		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Parallel 64				
Premises Address:	2128 North Post Road				
City:	Anchorage	**State:**	AK	**ZIP:**	99504

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: Government Hill Community Council
Name of Official: Melinda Gant
Title of Official: President
Date Submitted: 12/14/2017
Community Council: Municipality Of Anchorage
(Municipality of Anchorage and Matanuska-Susitna Borough only)
Date Submitted: 12/8/2017

I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Travis Jones
Printed name of licensee

STATE OF ALASKA
NOTARY PUBLIC
Jacques Alleva
My Commission Expires January 18, 2018

Jacques Alleva
Notary Public in and for the State of Alaska
My commission expires: 01-18-18

Subscribed and sworn to before me this 14 day of December, 2017.

RECEIVED
DEC 15 2017
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA