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:** | King Street Ventures, Inc. | **License Number:** | 13394 | | |
| **License Type:** | Retail Marijuana Store | | | | |
| **Doing Business As:** | HIGH FLOWER ON KING | | | | |
| **Physical Address:** | 9525 King Street, Suite 1 | | | | |
| **City:** | Anchorage | **State:** | AK | **Zip Code:** | 99515 |
| **Designated Licensee:** | Catherine Moncrieff | | | | |
| **Email Address:** | ak_catmon@yahoo.com | | | | |

## Section 2 – Attached Items

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

| | |
|---|---|
| **Attached Items:** | MJ-00<br>MJ-01<br>MJ-02<br>MJ-05<br>MJ-07<br>MJ-08<br>MJ-09<br>Publisher's Affidavit<br>POPPP<br>Entity Docs<br>Food Safety Permit App<br><br>(FP card and fees to be hand delivered by JDW Counsel) |

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

Received by AMCO 11/3/17