MJ-14 attached in case is needed as reference

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:	GoodSinse LLC	**License Number:**	10279		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	GOODSINSE LLC				
Physical Address:	2604 Davis rd.				
City:	Fairbanks	**State:**	AK	**Zip Code:**	99709
Designated Licensee:	Daniel Peters				
Email Address:	goodsinse@yahoo.com				

Section 2 – Attached Items

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

Attached Items: 3	1- City of Fairbanks building permit for cultivation expansion at 2604 Davis road GoodSinse LLC 2- MJ 14 Licensed premisis diagram change 3- New premisis diagram for GoodSinse cultivation

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

Received by AMCO 05.11.18

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Alaska Marijuana Control Board

Form MJ-14: Licensed Premises Diagram Change

What is this form?

This licensed premises diagram change form is required for all marijuana establishment licensees seeking to alter the functional floor plan or reduce or expand the area of the establishment's existing licensed premises, under 3 AAC 306.100 and 3 AAC 306.705. The required $250 change fee may be made by check, cashier's check, or money order.

This form must be signed by the licensee and by the local government having jurisdiction over the location of the premises before it is submitted to AMCO staff for review.

This form must be completed and submitted to AMCO's main office prior to altering the existing floor plan. The licensed premises may not be altered unless and until the AMCO director has given written approval on this form. Please note that licensees seeking to change licensed premises diagrams for multiple licenses must submit a separate completed copy of this form for each license.

Section 1 — Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	GoodSinse, LLC	MJ License #:		10279	
License Type:	Standard Cultivation				
Doing Business As:	GoodSinse LLC				
Premises Address:	2604 Davis rd.				
City:	Fairbanks	State:	Alaska	ZIP:	99709

Section 2 — Required Information

For your security, do not include locations of security cameras, motion detectors, panic buttons, and other security devices.

The following details must be included:

- License number and DBA
- E] Legend or key
- [x] Color coding
- [x] Dimensions
- [x] Labels
- [x] True north arrow
- [x] Surveillance room
- Licensed premises boundary
- Restricted access areas
- Storage areas
- Entrances, exits, and windows
- [x] Walls, partitions, and counters
- Any other areas that must be labeled for specific license types

Received by AMCO 6.6.18

Alaska Marijuana Control Board

Form MJ-14: Licensed Premises Diagram Change

[Form MJ-141 (rev 01/11/2018)

Section 3 — Summary of Changes

Provide a summary of the changes for which you are requesting approval.

GoodSinse cultivation will utilize previously unused spaces at 2604 Davis road, adding 1 vegetative growth room, 1 flowering room, 1 bathroom, hallways, and storage. Once approved the cultivation area floor space will increase to a total of 4,344 square feet.

Section 4 — Declarations and Approvals

Read each statement below, and then sign your initials in the corresponding box to the right: Initials DP DP

If a local building permit is required, I have attached a copy of it to this form.
The proposed changes conform to all applicable public health, fire, and safety laws.

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

Signature of licensee

Daniel L. Peters
Printed name of licensee

Notary Public
HANNAH E. WEBB
State of Alaska
My Commission Expires March 27, 2022

Hannah E. Webb
Notary Public in and for the State of Alaska.
My commission expires: March 27, 2022

Subscribed and sworn to before me this day of May, 2018.

Local Government Review (to be completed by an appropriate local government official): Yes ☒ No ☐ Pending

The proposed changes shown on this form conform to all local restrictions and laws.

A local building permit is required for the proposed changes.

Signature of local government official

CB-05-18-012955
Building Permit #

5/7/18
Date

CLEMENS M. CLOOTEN
Printed name of local government official

BUILDING OFFICIAL
Title

AMCO Review: Approved ☒ Disapproved ☐

Signature of AMCO Enforcement Supervisor

James Hoelscher 6/20/18

Signature of Director

Erika McConnell 6/21/18

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10279

Printed name of AMCO Enforcement Supervisor Printed name of Director Date

AMCO Comments:

License #_____

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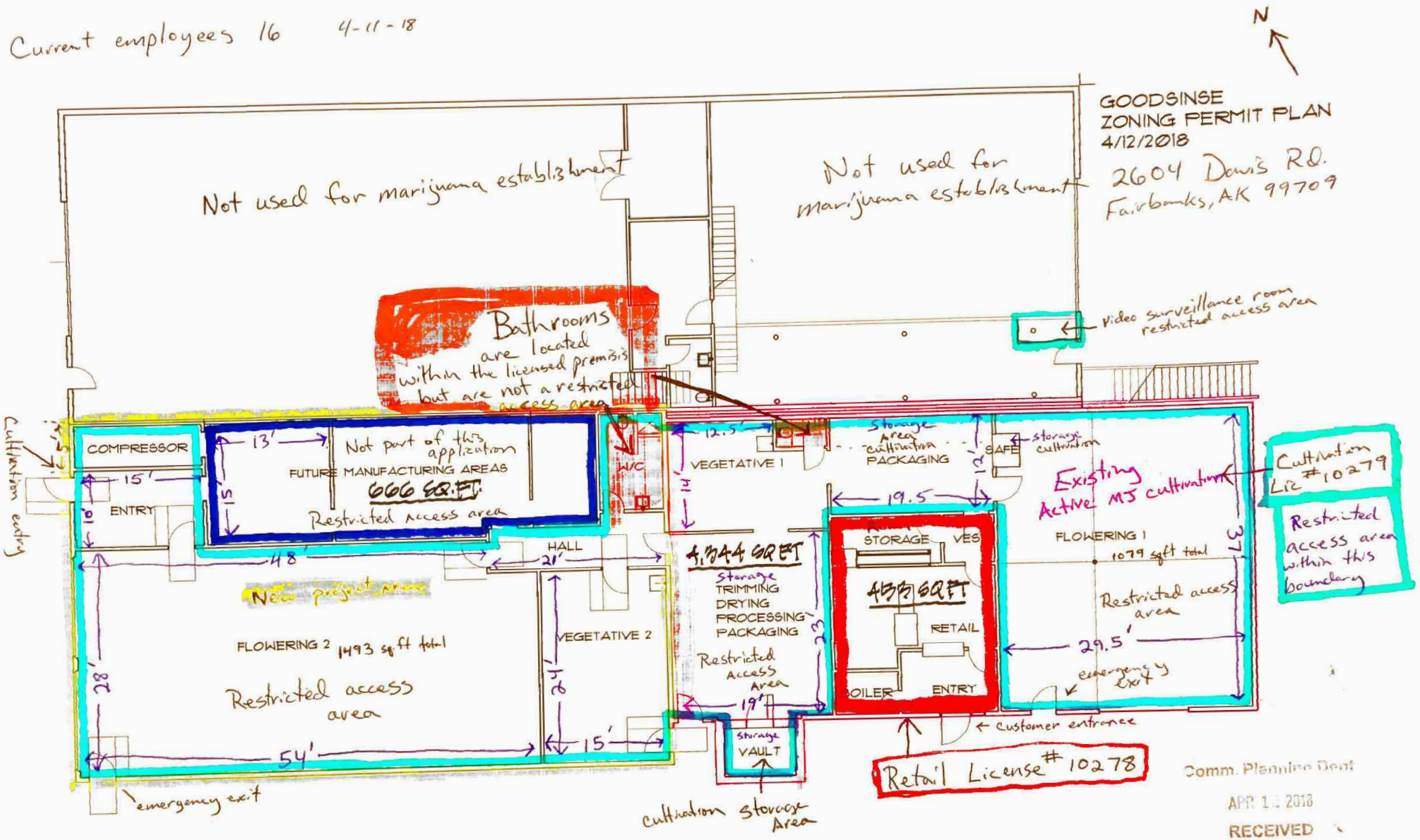
Current employees 16 4-11-18



Comm. Planning Dept
APR 1 2018
RECEIVED

Received by AMCO 6.26.18

800 Cushman Street
Fairbanks, AK 99701
Phone: (907) 459-6720
Fax: (907) 459-6719

Permit

Permit NO. **CB-05-18-012955**
Permit Type: **Commercial Building Permit**
Work Classification: **Alteration**
Project Name: **3279 GoodSinse Cannabis Cultivation**

Issue Date: 5/4/2018 **Expires: 11/05/2018**

Project Address	Parcel	Subdivision
2604 Davis Road	0127523	E.M. Jones

Legal Description

BLOCK 17 E M JONES NE 1/4 & SE 1/4

Owner Information	Owner Address	Phone	Cell Phone
Carl Tompkins	Po Box 82907,	(907) 978-3027	

Contractor(s)	Phone	Contractor Type
REBEL HOUSE CONSTRUCTION	347-9475	Contractor

Required Inspections:

For Inspections call : **1 (907) 459-6720**

Special Conditions / Details

NON-SPRINKLERED BUILDING CULTIVATION EXPANSION, 2015 IBC COMPLIANCE, & (26) DESIGN OCCUPANT LOAD.

Valuation:	**$19,604.00**
Total Sq Feet:	**4,344**

Inspection
Building Final Inspection (Commercial)
Building Framing Inspection (Metal Stud)
Building Framing Inspection (Wood)
Building Sheetrock Inspection
Fire Inspection

Fees Due	Amount
Landscape Plan Review & Inspection	$170.00
Building Permit Fee	$230.00
Fire Review & Inspection Fee	$85.00
Building Plan Check Fee	$173.00
Permit Issuance Fee	$35.00
Total:	**$693.00**

Total	Amt Paid	Amt Due
$0.00	$0.00	$0.00

Approved By: S Anderson
Approved Date: 05/04/2018
Fast Track: No

Proposed Use: CANNABIS CULTIVATION

Scope of Work: WALLS, DOORS, FINISHES; PLUMBING, ELECTRICAL; MECHANICAL AS NEEDED.

Conditions: 2015 IEBC/IBC COMPLIANCE; MECHANICAL, AS NEEDED, ELECTRICAL, PLUMBING PERMITS.

Schedule Inspections 24hrs in Advance

NOTICE

Applicant Copy

SEPARATE PERMITS ARE REQUIRED FOR BUILDING, ELECTRICAL, AND PLUMBING WORK

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS OR IF CONSTRUCTION OR WORK IS STOPPED AND NO INSPECTIONS ARE MADE FOR A PERIOD OF 365 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

I HERBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY LAW REGULATING CONSTRUCTION, SETBACKS, EASEMENTS OR THE PERFORMANCE OF CONSTRUCTION. I AGREE THAT THE WORK WILL BE DESCRIBED ABOVE PER THE APPROVED PLANS, SPECIFICATIONS AND CONDITIONS FURTHER SET FORTH BY THE BUILDING DEPARTMENT. IT IS THE DUTY OF THE APPLICANT TO INSURE THAT THE WORK IS EXPOSED AND ACCESSIBLE UNTIL APPROVED BY THE BUILDING OFFICIAL AS SPECIFIED IN THE INTERNATIONAL BUILDING CODE.

Signature of Owner, Contractor, or Authorized Agent — Date: 5-8-18

Daniel L. Peters Rebel House Const.
Print Name and Title (Owner and Contractor) — Date

Received by AMCO 05.11.18