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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	FORM MJ-00 PAGES 1-3

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

Received by AMCO 3.17.18

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	MJ-01 PAGES 1 – 11B 13 TOTAL

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

Received by AMCO 3.17.18

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:	RANDY L MCFARLAND	**License Number:**		10193	
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	MJ-02 PAGES 1 +2 DRAWINGS, 16 PAGES DIAGRAM 1-5, 6 PAGE

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

Received by AMCO 3.17.18

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	MJ - 04 PAGES 1 - 7

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

Received by AMCO 3.17.18

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	MJ-07 1 PAGE

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

Received by AMCO 3.17.18

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	MJ-08 1 PAGE 1 PAGE ACKNOWLEDMENT

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

Received by AMCO 3.17.18

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	FORM MJ-09 PAGES 1 + 2

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

Received by AMCO 3.17.18

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	Publisher's AFFIDAVIT pg 1 Copy of Ad pg 2

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

Received by AMCO 3.17.18

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	PROOF OF POSSESSION FOR PROPOSED PREMISES PAGES 1-7

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

Received by AMCO 3.17.18

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	FIRE MARSHAL PLAN REVIEW 3 PAGES

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

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	17 PAGES OF CORRECTIONS OR CLARIFICATION TO COMPLETE LICENSE APPLICATION # 10193 MJ-01 PG 4,5,6 +8 MJ-02 PREMISES DIAGRAM, DIAGRAM 1,2,3,4+5 (7 PAGES TOTAL) MJ-04 PG 2,4,5+6 (SAMPLE LABEL/PGT) PUBLISHERS AFFIDAVIT COPY OF AD

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

RECEIVED
NOV 08 2018
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

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:	RANDY L MCFARLAND	**License Number:**	10193		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	STONEY CREEK CULTIVATORS				
Physical Address:	14379 Seward Highway Unit B				
City:	Seward	**State:**	AK	**Zip Code:**	99664
Designated Licensee:					
Email Address:	randymckettle@yahoo.com				

Section 2 – Attached Items

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

Attached Items:	MJ-02 PAGE 1 CORRECTED ZIP CODE MJ-04 PAGE 6 CORRECTED WARNING LABEL

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

AMCO Received 11/9/2018