# **Notice of Violation**

(3AAC 306.805)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

Date:	License #/Type:	
Licensee:	Address:	
DBA:	AMCO Case #:	
	eged violation has occurred. If the Marijuana Control Board decic 0 - AS 44.62.630 (Administrative Procedures Act) you will receive ring.	
Note: This is not an accusation or a criminal comp	laint.	
heard regarding the Notice of Violation. licensee may respond, either orally or in	t of a Notice of Violation, a licensee may request to appear be The request must be made within ten days after receipt of the writing to the Notice. 3 AAC 306.810 (2)(A)(B)(C) failed, within any defect that is the subject of the notice of violation of AS	e Notice of Violation. A n a reasonable time after
IT IS RECOMMENDED THAT YOU RESPOND I	N WRITING TO DOCUMENT YOUR RESPONSE FOR THE MARIJUANA	CONTROL BOARD.
*Please send your response to the ad	dress below and include your marijuana license number	e <mark>r in your re</mark> sponse.
Alcohol & Marijuana Control Office		
ATTN: Enforcement		
550 W. 7 <sup>th</sup> Ave, Suite 1600 Anchorage, Alaska 99501		
amco.enforcement@alaska.gov		
Leaving Investigatory	Described by	
Issuing Investigator:	Received by:	
SIGNATURE:	SIGNATURE:	
Delivered VIA:	Date:	

Susan Burrell

The 420

10163

**Explanation of NOV** 

I was sent a NOV of 3 AAC 306.770 (d) (1) & (2) in March 2019 in regards to an advertisement in our city guide. The notice was discussed between myself and Investigator Steven M. Johnson, the result of which was that I was not the only person who had read and understood the regulation differently than the intent was meant in the regulation so I was told there would be no fine, etc.

Sincerely,

Susan Burrell

Owner

The 420

10163

## **Alcohol & Marijuana Control Office**

License Number: 10163

License Status: Active-Operating

License Type: Retail Marijuana Store

Doing Business As: THE 420

Business License Number: 1033148

Designated Licensee: SUSAN J BURRELL

Email Address: ssusiesfire@msn.com

Local Government: Petersburg Borough

**Community Council:** 

Latitude, Longitude: 56.812500, -132.955500

Physical Address: 307 N. Nordic Dr.

Petersburg, AK 99833 UNITED STATES

Licensee #1

Type: Individual

Name: SUSAN J BURRELL

SSN:

Date of Birth:

**Phone Number: 907-518-4425** 

Email Address: ssusiesfire@msn.com

Mailing Address: PO Box 485

Petersburg, AK 99833-0485

UNITED STATES

**Note:** No entity officials entered for this license.

Note: No affiliates entered for this license.



### Alaska Marijuana Control Board

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501

marijuana.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

## Form MJ-20: Renewal Application Certifications

#### What is this form?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office <u>by each licensee</u> (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

#### **Section 1 – Establishment Information**

Enter information for the licensed establishment, as identified on the license application.

Licensee:	Susan Burrell	License Number:		10163	
License Type:	Retail Marijuana				
Doing Business As:	The 420				
Premises Address:	307 N. Nordic Dr.				
City:	Petersburg	State:	AK	ZIP:	99833

#### Section 2 - Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Susan Burrell
Title:	Owner

### Section 3 – Violations & Charges

head each time below, and then sign	your initials in the box to the ligi	it of any applicable statements.

Initials

I certify that I have not been convicted of any criminal charge in the previous two calendar years.

SB

I certify that I have not committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.

JB

I certify that a notice of violation has **not** been issued for this license.

JUN 27 2019

Sign your initials to the following statement only if you are unable to certify one or more of the above statements:

Initials

I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).





### Alaska Marijuana Control Board

# Form MJ-20: Renewal Application Certifications

### **Section 4 - Certifications**

Read each line below, and then sign your initials in the box to the right of each statement:	Initials
I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued.	JB
I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.	SB
I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.	JB
I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.	SB
I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.	JB
I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.	16
I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.	JB
As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have reafamiliar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and uthat failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.	, correct,
Signature of licensee Notary Public in and for the State of Ala	ska
S Printed name of licensee  My commission expires: 4.21.	2019
Subscribed and sworn to before me this 24 Th day of JUNE 20 1	9.
AMCO	
JUN 27 2019	