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:	AKO Farms, LLC	**License Number:**	19898		
License Type:	Retail Marijuana Store				
Doing Business As:	AK O FARMSLLC.				
Physical Address:	1210 Beardslee Way				
City:	Sitka	**State:**	AK	**Zip Code:**	99835
Designated Licensee:	Justin Brown				
Email Address:	akofarmsllc@gmail.com				

Section 2 – Attached Items

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

Attached Items:	Mj 08 Local Gov. Notice / affidavit

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

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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 each local government and any community council in the area of the proposed licensed premises. For an establishment located inside the boundaries of city that is within a borough, both the city and the borough must be notified.

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:	AKO FARMS LLC	**License Number:**	19898		
License Type:	Marijuana Retail Store				
Doing Business As:	AKO FARMS LLC				
Premises Address:	1210 Beardslee Way				
City:	Sitka	**State:**	AK	**ZIP:**	99835

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 (LG) official(s) and community council (if applicable):

Local Government(s): City and Borough of Sitka Date Submitted: 10/15/19

Name/Title of LG Official 1: Planning Department Name/Title of LG Official 2: _____

Community Council: _____ Date Submitted: _____
(Municipality of Anchorage and Matanuska-Susitna Borough only)

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

Signature of licensee

Justin Brown
Printed name of licensee

NOTARY PUBLIC
AMY AINSLIE
STATE OF ALASKA
MY COMMISSION EXPIRES June 17, 2023

Notary Public in and for the State of Alaska

My commission expires: June 17, 2023

Subscribed and sworn to before me this 12th day of November, 2019.

Received 11/12/2019