

Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

TO: Chair and Members of the Board DATE: October 8, 2020

FROM: Glen Klinkhart, Interim Director RE: JWS Enterprises, Inc. #10657

Marijuana Control Board

This is a renewal application for a Standard Marijuana Cultivation Facility in the Ketchikan Gateway Borough, by James W Strassburg DBA JWS Enterprises.

Local Government Protest: No

LG Protest Period Ends: 12/7/2020

Objection(s) Received/Date: No

Notice of Violation(s):

MJ-17a Temp Ownership Change Report: No

MJ-20a Residency Exemption Affidavit: Yes – for James Strassburg

Staff questions for Board: None

Alcohol & Marijuana Control Office

License Number: 10657

License Status: Active-Operating

License Type: Standard Marijuana Cultivation Facility

Doing Business As: JWS ENTERPRISES

Business License Number: 1031731

Designated Licensee: JAMES W STRASSBURG

Email Address: jimstrassburg@aol.com

Local Government: Ketchikan Gateway Borough

Local Government 2: Community Council:

Latitude, Longitude: 55.335895, -131.686830

Physical Address: 3000 West Tongass Narrows

Ketchikan, AK 99901 UNITED STATES

Licensee #1

Type: Individual

Name: JAMES W STRASSBURG

Phone Number: 907-247-3316

Email Address: jimstrassburg@aol.com
Mailing Address: 2417 tongass #111-214

ketchikan, AK 99901 UNITED STATES Note: No entity officials entered for this license.

Note: No affiliates entered for this license.

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





Alaska Marijuana Control Board

Form MJ-20a: Residency Exception Affidavit

What is this form?

This residency exception affidavit may be submitted with a marijuana establishment renewal application for each licensee whose residency status has changed so that the licensee is no longer considered a resident of the state as defined at 3 AAC 306.015(e)(2).

Section 1 - Establishment Information

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

Licensee:	James W. Strassburg	License	Number:	: 10657				
License Type:	Standard Marijuana Cultivation Facility							
Doing Business As:	JWS Enterprises							
Premises Address:	3000 West Tongass Narrows							
City:	Ketchikan	State:	Alaska	ZIP:	99901			

Section 2 - Individual Information

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

Name:	James W. Strassburg	
Title:	Owner	

Section 3 - Changes to Residency

Read each line below, and then sign your initials in the box to the right of all statements:

Initials

I certify that my primary residence is in Alaska.



I certify that I have good cause, as stated below, for not meeting the requirements to be a resident of the state as defined at 3 AAC 306.015(e)(2).



I did not file a PFD as I had some health issues that required travel to Washington to access certain medical providers and intended to stay in Washington for a period of time and could not apply for PFD while on the road.

I certify that the cause of not meeting the requirements to be a resident of the state as defined at 3 AAC 306.015.(e)(2) is temporary.



I anticipate being able to meet the requirements to be a resident of the state as defined at 3 AAC 306.015(e)(2) at the following time:

Anticipated return date is unknown due to the travel Covid-19 travel restrictions.

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Form MJ-20a: Residency Exception Affidavit

Section 4 – Certifications

Read the statement below, and then sign your initials in the box to the right:

Initials

I certify that I understand that providing a false statement on this form or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.



As a marijuana establishment licensee, I declare under penalty of unsworn falsification that this form is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this form and understand that failure to do so by any deadline given to me by AMCO staff may result in action upon the license by the Board.

Signature of licensee

James Strassburg

Printed name of licensee

Notary Public in and for the State of Alaska

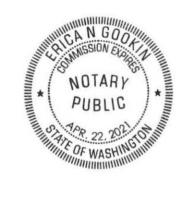
My commission expires:

14201

Subscribed and sworn to before me this

day of

207/





Alaska Marijuana Control Board

Alcohol and 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

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 by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

	Section 1 - Establishme	nt Informat	ion				
Enter information for the	licensed establishment, as identified on the licens	se application.					
Licensee:	James W Strassburg	License	Number:	10657	7		
License Type:	Standard Marijuana Cultivati	ion Facility					
Doing Business As:	JWS Enterprises						
Premises Address:	3000 West Tongass Narrows						
City:	Ketchikan	State:	Alaska	ZIP:	99901		
	Section 2 – Individual	Information	1				
Enter information for the	individual licensee who is completing this form.				N. FILLISS IN		
Name:	James Strassburg						
Title:	Owner						
Read each line below, an	Section 3 – Violations				Initial		
certify that I have not be	en convicted of any criminal charge in the previou	us two calendar ye	ars.		Tus		
certify that I have not co	mmitted any civil violation of AS 04, AS 17.38, or	3 AAC 306 in the p	revious two	calendar ye	ears. Jws		
certify that a notice of vi	plation has not been issued to this license betwee	en July 1, 2019 and	June 30, 20	20.	Sus		
Sign your initials to the fo	llowing statement <u>only if you are unable to cert</u>	ify one or more of	the above s	tatements:	Initial		
	explanation for why I cannot certify one or mor fense, as required under 3 AAC 306,035(b).	e of the above sta	tements, wh	450	s		

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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.



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.



I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.



I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.



I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.



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.



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.



As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have read and am familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.

Signature of licensee

Notary Public in and for the State of Alaskaki ashington

James Strassburg

Printed name of licensee

My commission expires: 04-11-24

Subscribed and sworn to before me this 15

5 day of Tul

, 20<u>20</u>.

RUBINA SAINJU NOTARY PUBLIC #20105448 STATE OF WASHINGTON MY COMMISSION EXPIRES 04-11-24

[Form MJ-20] (rev 4/23/2020)

License # 10657