



MEMORANDUM

TO: Chair and Members of the Board DATE: October 6, 2020
FROM: Glen Klinkhart, Interim Director RE: Alaskan Kush Company #16213
Marijuana Control Board

This is a renewal application for a Retail Marijuana Store in the City and Borough of Juneau, by Alaskan Kush Company LLC DBA Alaskan Kush Company.

Local Government Protest: No

LG Protest Period Ends: 10/31/2020

Objection(s) Received/Date: No

Notice of Violation(s): No

MJ-17a Temp Ownership Change Report: No

Staff questions for Board: Alaskan Kush Company LLC is owned 50% by Casey Wilkins and 50% by Herb Smyth. Herb Smyth does not meet Alaska residency requirements but the licensees have submitted a transfer application to remove him from the license. They would like for their renewal application to be considered complete pending review of the license transfer application.

Alcohol & Marijuana Control Office

Initiating License Application

6/10/2020 11:45:17 AM

License Number: 16213**License Status:** Active-Operating**License Type:** Retail Marijuana Store**Doing Business As:** ALASKAN KUSH COMPANY**Business License Number:** 1063457**Designated Licensee:** Casey Wilkins**Email Address:** alaskankushco@gmail.com**Local Government:** Juneau (City and Borough of)**Local Government 2:****Community Council:****Latitude, Longitude:** 58.300385, -134.404935**Physical Address:** 159 S Franklin St
Juneau, AK 99801
UNITED STATES**Licensee #1****Type:** Entity**Alaska Entity Number:** 10073707**Alaska Entity Name:** Alaskan Kush Company LLC**Phone Number:** 907-957-3877**Email Address:** alaskankushcompany@gmail.com**Mailing Address:** 159 S FRANKLIN STREET
JUNEAU, AK 99801
UNITED STATES**Entity Official #1****Type:** Individual**Name:** Casey Wilkins**Phone Number:** 907-957-3877**Email Address:** alaskankushcompany@gmail.com**Mailing Address:** 159 S FRANKLIN STREET
JUNEAU, AK 99801
UNITED STATES**Entity Official #2****Type:** Individual**Name:** Herb Smyth**Phone Number:** 907-500-7440**Email Address:** hsmythjr@gmail.com**Mailing Address:** 4448 Mountain Side Dr
Juneau, AK 99801
UNITED STATES**Note:** No affiliates entered for this license.



Alaska Marijuana Control Board

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 – Establishment Information

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

Licensee:	Alaskan Kush Company LLC	License Number:	16213		
License Type:	Retail Marijuana Store				
Doing Business As:	Alaskan Kush Company				
Premises Address:	159 S Frankin Street				
City:	Juneau	State:	Alaska	ZIP:	99801

Section 2 – Individual Information

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

Name:	Casey Wilkins
Title:	licensee

Section 3 – Violations & Charges

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

Initials

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

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.

I certify that a notice of violation has **not** been issued to this license between July 1, 2019 and June 30, 2020.

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).



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.

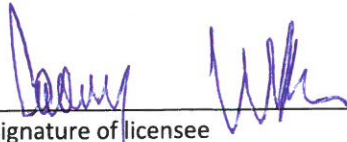
I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.

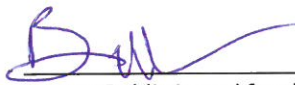
I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.

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

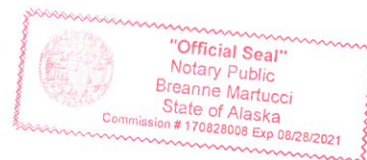

Notary Public in and for the State of Alaska

Casey Wilkins

Printed name of licensee

My commission expires: 

Subscribed and sworn to before me this 25 day of August, 2020.





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Doing Business As:	Alaskan Kush Company					
Premises Address:	159 S Frankin Street					
City:	Juneau	State:	Alaska	ZIP:	99801	

Section 2 – Individual Information

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

Name:	Herbert Smyth
Title:	licensee

Section 3 – Violations & Charges

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

Initials

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HES

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HES

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

HES

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

HES

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

HES

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.

HES

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.

HES

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.

Herbert Smyth

Signature of licensee

Ambyr Denise Davis

Notary Public for Notarize.com

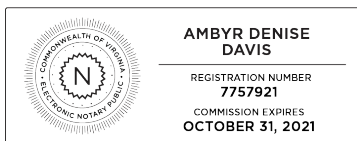
Herbert Smyth

Printed name of licensee

My commission expires: 10/31/2021

Commonwealth of Virginia County of Fairfax

Subscribed and sworn to before me this 27th day of August, 2020 by Herbert Smyth.



Notarized online using audio-video communication