

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 6, 2020

FROM: Glen Klinkhart, Interim Director RE: Rainforest Cannabis #10883

Marijuana Control Board

This is a renewal application for a Retail Marijuana Store in the City of Ketchikan, by Jason Kolanko, Lorraine Kolanko, and Gary Croy DBA Rainforest Cannabis.

Local Government Protest: No protest from either local government

LG Protest Period Ends: N/A

Objection(s) Received/Date: No

Notice of Violation(s): Yes

MJ-17a Temp Ownership Change Report: No

Staff questions for Board: None

Alcohol & Marijuana Control Office

License Number: 10883

License Status: Active-Operating

License Type: Retail Marijuana Store

Doing Business As: RAINFOREST CANNABIS

Business License Number: 1040416

Designated Licensee: JASON C KOLANKO

Email Address: jckolanko@gmail.com

Local Government: Ketchikan (City of)

Local Government 2: Community Council:

Latitude, Longitude: 55.347350, -131.660160

Physical Address: 726 Water Street

Ketchikan, AK 99901 UNITED STATES

Licensee #1

Type: Individual

Name: GARY CROY

Phone Number: 907-821-3200

Email Address: gary.croy@gmail.com

Mailing Address: PO Box 7164

Ketchikan, AK 99901 UNITED STATES

Licensee #3

Type: Individual

Name: JASON C KOLANKO

Phone Number: 907-821-1769

Email Address: jckolanko@gmail.com
Mailing Address: 33 Powerhouse Rd

Ketchikan, AK 99901 UNITED STATES

Licensee #2

Type: Individual

Name: LORRAINE C KOLANKO

Phone Number: 907-821-8811

Email Address: lckolanko@gmail.com

Mailing Address: PO Box 7164

Ketchikan, AK 99901 UNITED STATES

Note: No entity officials entered for this license.

Note: No affiliates entered for this license.

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: 9/19/19 License #/Type: 10883 Marijuana Retail Stores

Licensee: Jason Kolanko Address: 726 Water St., Ketchikan AK 99901

DBA: Rainforest Cannabis AMCO Case #: AM191487

This is a notice to you as licensee that an alleged violation has occurred. If the Marijuana Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

Upon entry into Rainforest Cannabis, I, Investigator Johnson observed two female employees behind the counter, neither of the employees had any identification visible. I introduced myself, showed my credentials and asked if they had their store identifications and handler cards. Both employees stated they had them in their bags located in the break room behind them. One employee, Angel Caruthers, located her store identification and handler card and put it on. The other employee, Mary McKinley stated it was the one day she forgot her ID and card at home. I informed her she needed to have her identification in order to continue to work. Mary left the premises to gather her identification. A later search found Mary to have a valid Marijuana Handler Card. I spoke with a manager who informed me he was unaware they had to wear a store employee identification at all times.

Violation:

- 3 AAC 306.710. Restricted access areas
- (a) A marijuana establishment shall restrict access to any part of the licensed premises where marijuana or a marijuana product is grown, processed, tested, stored, or stocked.(c) In a restricted access area, a licensee, employee, or agent of the marijuana establishment shall wear a current identification badge bearing the person's photograph.

3 AAC 306.805 provides that upon receipt of a Notice of Violation, a licensee may request to appear before the board and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice of Violation. A licensee may respond, either orally or in writing to the Notice. 3 AAC 306.810 (2)(A)(B)(C) failed, within a reasonable time after receiving a notice of violation, to correct any defect that is the subject of the notice of violation of AS 17.8 or this chapter.

IT IS RECOMMENDED THAT YOU RESPOND IN WRITING TO DOCUMENT YOUR RESPONSE FOR THE MARIJUANA CONTROL BOARD.

*Please send your response to the address below and include your marijuana license number in your response.

Alcohol & Marijuana Control Office ATTN: Enforcement 550 W. 7th Ave, Suite 1600 Anchorage, Alaska 99501 amco.enforcement@alaska.gov

Issuing Investigator: S. Johnson Received by:

SIGNATURE: SIGNATURE:

Delivered VIA: Email Date:

From: <u>Jason Kolanko</u>

To: <u>Johnson, Steven M (CED)</u>

Cc: Hoelscher, James C (CED); Davies, Jason M (CED); CED AMCO Enforcement (CED sponsored)

Subject: Re: 10883 Rainforest Cannabis Notice of Violation

Date: Wednesday, September 25, 2019 8:08:27 AM

Attachments: <u>image001.png</u>

Thank you Stephen for bringing this to my attention.

I was traveling on the day this occurred in order to pay taxes in Seattle. Unfortunately, this meant I was not there to correct this issue when it occurred. I have honestly never seen an employee without their identification, and I would have sent them home immediately to get it before their shift had I not been traveling. I have reinforced the importance of wearing their identification with staff, and made it clear they are not allowed to work without it.

I apologize for this situation.

Thank you again,

Jason Kolanko

On Thu, Sep 19, 2019, 8:51 AM Johnson, Steven M (CED) < steven.johnson@alaska.gov wrote:

Mr. Kolanko,

Attached is a Notice of Violation for the date of 09/18/2019. Please review and if you choose to, respond.

Respectfully,



Steven M. Johnson Special Investigator

Enforcement Unit Alcohol & Marijuana Control Office

State Office Building, 9th Floor

333 Willoughby Avenue

Juneau, AK 99801 Office (907) 465-2330

Cell (907) 500-2053

steven.johnson@alaska.gov

Violation Explanations

Case AM#191487

On 9/18/19 an employee was found to be working without wearing her Identification Badge. I was out of the state to pay federal taxes on this day, so I was not available to correct the action. The employee was sent home to get proper identification before being allowed to return to work, and it was reinforced to all employees that we are not allowed to work without wearing our ID Badges.

Case AM#190207

On 1/31/19 we received a transfer from Cold Creek Extracts, and one of the packages we received was not on the manifest. Enforcement was immediately notified. After approval from enforcement, a virtual transfer was performed to get the package into our inventory.

When receiving the transfer the Bill of Sale was mistakenly used to take inventory on the items received, instead of using the manifest. This is where the mistake was made. With assistance from enforcement we were able to rectify the oversite.



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).

Section 1 - Establishment Information

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.

The information of the	incensed establishment, as identified on the license applic	ation.			
Licensee:	Jason Kolanko, Lorraine Kolanko, Gary Croy (deceased)	License	Number:	1088	3
License Type:	Retail Marijuana Store				
Doing Business As:	Rainforest Cannabis				
Premises Address:	726 Water St				
City:	Ketchikan	State:	Alaska	ZIP:	99901
nter information for the	Section 2 – Individual Infor individual licensee who is completing this form.	matior			1
Name:	Gary Croy (Deceased, 1/23/20)			1	
Title:	Partner				
	end then sign your initials in the box to the right of any app een convicted of any criminal charge in the previous two ca				Initial
	nmmitted any civil violation of AS 04, AS 17.38, or 3 AAC 30			calendar y	rears.
certify that a notice of vi	olation has not been issued to this license between July 1,	2019 and	June 30, 202	20.	
ign your initials to the fo	ollowing statement <u>only if you are unable to certify one o</u>	r more of	the above s	atement:	s: Initia
have attached a writter ne type of violation or of	explanation for why I cannot certify one or more of the affense, as required under 3 AAC 306.035(b).	above state	ements, whi	ch includ	es
[Form MJ-20] (rev 4/23/20	220)				Page 1 or



Poston Received 8/18/2020 AMACO Received 8/18/2020

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 e	ach statement:	Initials
I certify that no person other than a licensee listed on my marijuana establish direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the bestablishment license has been issued.	nment license renewal application has a ousiness for which the marijuana	
I certify that I meet the residency requirement under AS 43.23 or I have subs (MJ-20a) along with this application.	mitted a residency exception affidavit	
I certify that this establishment complies with any applicable health, fire, saf other law in the state.	fety, or tax statute, ordinance, regulation, or	
I certify that the license is operated in accordance with the operating plan co Marijuana Control Board.	urrently approved by the	
I certify that I am operating in compliance with the Alaska Department of Lab requirements pertaining to employees.	or and Workforce Development's laws and	
I certify that I have not violated any restrictions pertaining to this particular licoperated in violation of a condition or restriction imposed by the Marijuana C	cense type, and that this license has not been Control Board.	
I certify that I understand that providing a false statement on this form, the o by or to AMCO is grounds for rejection or denial of this application or revocat	nline application, or any other form provided ion of any license issued.	
As an applicant for a marijuana establishment license renewal, I declare unde familiar with AS 17.38 and 3 AAC 306, and that this application, including all a and complete. I agree to provide all information required by the Marijuana Control that failure to do so by any deadline given to me by AMCO staff may result in	ccompanying schedules and statements, is true	
Janam Kolomko-surving spouse Signature of licensee Jor Gary Croy (PR) Lorraine Kolonko	Notary Public in and for the State of Ala	aska
Lorraine Kolanko Printed name of licensee	My commission expires: 5/31/23	3
subscribed and sworn to before me this 18th day of August	, 20 <u>, 20</u>	
	EMILY M. DELL Notary Public State of Alaska My Commission Expires May 31	



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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: Jason Kolanko, Lorraine Kolanko, Gary Croy (deceased) License Number: 10883 License Type: Retail Marijuana Store **Doing Business As:** Rainforest Cannabis Premises Address: 726 Water St City: Ketchikan State: ZIP: Alaska 99901 Section 2 - Individual Information Enter information for the individual licensee who is completing this form. Name: Jason Kolanko Title: Partner 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:

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).

Initials



Presentation Received 8/18/2020 AMCO Received 8/18/2020

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.	Jx
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.	gr
I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.	12
I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.	JX
I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.	AX
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.	JX
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.	92
As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have re familiar 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 that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.	correct
Janon Heurs Emily Dell	
Notary Public in and for the State of Ala	aska
Printed name of licensee My commission expires: $\frac{5}{31}$	3
Subscribed and sworn to before me this 18th day of August, 20 20.	
EMILY M. DELL Notary Public State of Alaska My Commission Expires May 31, 20	023



Alaska Marijuana Control Board

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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.

Enter information for the licensed establishment, as identified on the license application. Jason Kolanko, Lorraine Kolanko, Gary Croy (deceased) License Number: 10883 Licensee: License Type: Retail Marijuana Store Rainforest Cannabis **Doing Business As: Premises Address:** 726 Water St State: Alaska ZIP: 99901 Ketchikan City:

Section 1 - Establishment Information

Section 2 - Individual Information

Name:	Lorraine Kolanko	
Title:	Partner	

Section 3 - Violations & Charges

Read each line below, and then sign your initials in the box to the right of <u>any applicable statements</u>: 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).





Para Portino Received 8/18/2020

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 state	tement:	Initials
I certify that no person other than a licensee listed on my marijuana establishment li direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business establishment license has been issued.		ak
I certify that I meet the residency requirement under AS 43.23 or I have submitted (MJ-20a) along with this application.	a residency exception affidavit	ak
I certify that this establishment complies with any applicable health, fire, safety, or other law in the state.	tax statute, ordinance, regulation, or	JK
I certify that the license is operated in accordance with the operating plan currently Marijuana Control Board.	y approved by the	XK
I certify that I am operating in compliance with the Alaska Department of Labor and requirements pertaining to employees.	Workforce Development's laws and	ak
I certify that I have not violated any restrictions pertaining to this particular license to operated in violation of a condition or restriction imposed by the Marijuana Control		SIL
I certify that I understand that providing a false statement on this form, the online a by or to AMCO is grounds for rejection or denial of this application or revocation of		SK
As an applicant for a marijuana establishment license renewal, I declare under pena familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompand complete. I agree to provide all information required by the Marijuana Control I that failure to do so by any deadline given to me by AMCO staff may result in additional control of the control	panying schedules and statements, is true Board in support of this application and i	e, correct,
Signature of licensee)	Emily Oly Notary Public in and for the State of Al	aska
Lorraine Kolanku Printed name of licensee	My commission expires: $\frac{5/31/6}{3}$	13
Subscribed and sworn to before me this 18th day of August	_, 20 <u>20</u> .	
	EMILY M. DELL Notary Public State of Alaska	