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

Alaska Marijuana Control Board

# 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:** | Kerby's Corporation | **License Number:** | 25902 | | |
| **License Type:** | Retail Marijuana Store | | | | |
| **Doing Business As:** | Tl'oh Suu by Green Degree | | | | |
| **Premises Address:** | Mile 1264.1 Alaska Highway | | | | |
| **City:** | Northway | **State:** | AK | **ZIP:** | 99764 |

## 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): N/A Date Submitted: _____

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

Community Council: Northway Village Tribal Council Date Submitted: 6-22-2020
(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

Kerby Coman
Printed name of licensee

SAMANTHA L. DOCKINS NOTARY PUBLIC STATE OF ALASKA My Commission Expires JANUARY 22, 2024

Notary Public in and for the State of Alaska

My commission expires: 1/22/2024

Subscribed and sworn to before me this 18 day of August, 2020



Received by AMCO 8.21.20