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-17d: Unaltered Operating Plan and/or Premises Diagram Affidavit

**What is this form?**

An operating plan and/or diagram affidavit is required to be submitted by the transferee for any marijuana establishment transfer license application where the transferee is not making changes to the operating plan and/or premises diagram approved by the Marijuana Control Board, in the course of the transfer application, per 3 AAC 306.045(e). By completing this form you are certifying that no changes will be made to the operating plan and/or premises diagram that have been previously submitted and approved for this license. This form replaces the information required by regulations 3 AAC 306.020(b)(8), 3 AAC 306.020(c), 3 AAC 306.315(2), 3 AAC 306.420, 3 AAC 306.520(2) and (3), and 3 AAC 306.615 if no changes are being made to your operating plan or diagram during the transfer.

## Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license transfer application.

| | | | | | |
|---|---|---|---|---|---|
| **New Licensee:** | ANCHORAGE BOWL LLC | **License Number:** | 12318 | | |
| **License Type:** | Manufacturing | | | | |
| **Doing Business As:** | ANCHORAGE BOWL LLC | | | | |
| **Premises Address:** | 4000 SPENARD RD. | | | | |
| **City:** | ANCHORAGE | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Certification

You must be able to certify at least one of the statements below. Read the following and then sign your initials in the applicable box(es) to the right: Initials

**I certify that there will be no changes to the operating plan for this license.**
**If the above statement is certified you will not be required to submit forms MJ-01 and MJ-03, MJ-04, MJ-05 or MJ-06.**

**I certify that there will be no changes to the premises diagram for this license.**
**If the above statement is certified, you will not be required to submit form MJ-02.**

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

NOTARY PUBLIC
TANIN SHILPI
STATE OF ALASKA

Signature of transferor

Printed name of transferor

Notary Public in and for the State of Alaska

My commission expires: 10-01-2022

Subscribed and sworn to before me this 27th day of December, 2021.

Received by AMCO 12/29/2021