Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
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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 Form

**Why is this form needed?**

This operating plan and/or diagram form 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:** | Hillside Roots, LLC | **License Number:** | 10837 | | |
| **License Type:** | Retail Marijuana Store | | | | |
| **Doing Business As:** | Hillside Roots | | | | |
| **Premises Address:** | 8639 Toloff St. Suite 1 | | | | |
| **City:** | Anchorage | **State:** | Alaska | **ZIP:** | 99507 |

## 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.** [Jw]

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.** [Jw]

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification. [Jw]

Jerry Workman
Printed name of transferee

Jerry Workman
Signature of transferee



AMCO RCVD 8/31/2023