THE STATE of ALASKA
GOVERNOR MIKE DUNLEAVY

Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West Seventh Avenue, Suite 1600
Anchorage, AK 99501
Main: 907.269.0350

October 4, 2024

State Fire Marshal
Attn: Timothy Fisher, timothy.fisher@alaska.gov
Isobelle Mahoney, isobelle.mahoney@alaska.gov
Michelle Wagner, firecode@matsugov.us

License Number:	19874
License Type:	Limited Marijuana Cultivation Facility
Physical Address:	3253 W. Coghlan Circle Suite 101 (Shop on Ground Level)

Transferor:	SNOW CAPPED GARDENS 2, LLC
Doing Business As:	SNOW CAPPED GARDENS 2, LLC
Designated Licensee:	Martin Brown SR
Phone Number:	907-232-8687
Email Address:	martyb@mtaonline.net

Transferee:	SNOW CAPPED GARDENS ,LLC
Doing Business As:	SNOW CAPPED GARDENS
Designated Licensee:	Martin Brown SR
Phone Number:	907-232-8687
Email Address:	martyb@mtaonline.net

☐ **Transfer of Ownership Application** ☒ **Transfer of Controlling Interest**

3 AAC 306.300(a)(2)(B), 3 AAC 306.400(b)(2)(B), 3 AAC 306.500(b)(2)(B), and 3 AAC 306.605(b)(2)(B) require that an applicant for a marijuana establishment license operate in compliance with each applicable public health, fire, safety, and tax code and ordinance of the state and the local government in which the applicant's proposed licensed premises are located. This letter serves to provide written notice and request for compliance status from the above referenced entities regarding the above application (application documents will be sent separately via ZendTo).). **Please complete and return this form to the AMCO office at the email below**.

REVIEWER: _____ ☐ Fire Marshal

DATE: _____ PHONE: _____ ☐ Compliant ☐ Non-compliant
COMMENTS: _____

_____

If you have any questions, please send them to the email address below.

Sincerely,

Joan Wilson, Director
marijuana.licensing@alaska.gov