# Alcohol & Marijuana Control Office

License Number: 35633

License Status: Active-Operating

License Type: Retail Marijuana Store

Doing Business As: Coastal Cannabis Company

**Business License Number: 2176609** 

Designated Licensee: William Watson

Email Address: coastalcannabiscompanyak@gmail.com

Local Government: Valdez

Local Government 2: Community Council:

Latitude, Longitude: 61.123600, -146.266235

Physical Address: 1900 Mineral Creek Loop Rd

Valdez, AK 99686 UNITED STATES

#### Licensee #1

Type: Entity

Alaska Entity Number: 10226109

Alaska Entity Name: Cannabis 49 LLC

Phone Number: 907-831-6028

Email Address: coastalcannabiscompanyak@gm

ail.com

Mailing Address: PO Box 2078

Valdez, AK 99686 UNITED STATES

#### **Entity Official #2**

Type: Individual

Name: William Watson

Phone Number: 907-831-6028

Email Address: coastalcannabiscompanyak@gm

ail.com

Mailing Address: P.O.Box 512

Valdez, AK 99686 UNITED STATES

#### **Entity Official #1**

Type: Individual

Name: Dwain Dunning

Phone Number: 907-255-1463

Email Address: cd\_dunning@cvinternet.net

Mailing Address: P.O.Box 1876

Valdez, AK 99686 UNITED STATES

Note: No affiliates entered for this license.



Alaska Marijuana Control Board

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501

marijuana.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

### Form MJ-20: 2025-2026 Renewal Application Certifications

#### Why is this form needed?

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).

This form must be completed and submitted to AMCO's Anchorage office <u>by each licensee</u> (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:	Cannabis 49 LLC	License	Number:	35633	
License Type:	Retail Marijuana Store				
Doing Business As:	Coastal Cannabis Company				
Premises Address:	1900 Mineral Creek Loop Rd				
City:	Valdez	State:	AK	ZIP:	99686

#### Section 2 - Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Dwain Todd Dunning
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:
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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 for this license between July 1, 2024, and June 30, 2025.



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).

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## Form MJ-20: 2025-2026 Renewal Application Certifications

#### Section 5 - 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.



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.



I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.



I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.



I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.



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.



Initial this box if you are submitting an original fingerprint card and the applicable fees to AMCO for AMCO to obtain criminal justice information and a national criminal history record required by AS 17.38.200 and 3 AAC 306.035(d). If I have multiple marijuana licenses being renewed, I understand one fingerprint card and fee will suffice for all marijuana licenses being renewed.



If multiple licenses are held, list all license numbers below:

11234, 35633

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.



Printed name of licensee

Signature of licensee

Page 2 of 2



Alaska Marijuana Control Board

Enter information for the licensed establishment, as identified on the license application.

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: 2025-2026 Renewal Application Certifications

#### Why is this form needed?

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This form must be completed and submitted to AMCO's Anchorage 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

License Number: Licensee: Cannabis 49 LLC 35633 License Type: Retail Marijuana Store **Doing Business As:** Coastal Cannabis Company

Premises Address: 1900 Mineral Creek Loop Rd ZIP: 99686 State: AK City: Valdez

#### Section 2 - Individual Information

Enter information for the individual licensee who is completing this form

Name:	William Allen Watson
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 <b>not</b> been convicted of any criminal charge in the previous two calendar years.	WAW
I certify that I have <b>not</b> committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	WAN
I certify that a notice of violation has <b>not</b> been issued for this license between July 1, 2024, and June 30, 2025.	WW

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

### Section 5 – 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.



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.



I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.



I certify that the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.



I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.



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.



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If multiple licenses are held, list all license numbers below:

11234 35633

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.



[Form MJ-20] (rev 4/28/2025)

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License #\_ 33633