



THE STATE
of **ALASKA**
GOVERNOR BILL WALKER

Department of Commerce, Community,
and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West 7th Avenue, Suite 1600

Anchorage, AK 99501

Main: 907.269.0350

August 28, 2018

City of Valdez

Attn: Sheri Pierce, MMC

Via Email: spierce@ci.valdez.ak.us

License Type:	Restaurant/Eating Place	License Number:	4532
Licensee:	The Stampmill LLC		
Doing Business As:	The Stampmill		

☐ New Application

☒ Transfer of Ownership Application

☐ Transfer of Location Application

☐ Transfer of Controlling Interest Application

We have received a completed application for the above listed license (see attached application documents) within your jurisdiction. This is the notice required under AS 04.11.480.

A local governing body may protest the approval of an application(s) pursuant to AS 04.11.480 by furnishing the director **and** the applicant with a clear and concise written statement of reasons for the protest within 60 days of receipt of this notice, and by allowing the applicant a reasonable opportunity to defend the application before a meeting of the local governing body, as required by 3 AAC 304.145(d). If a protest is filed, the board will deny the application unless the board finds that the protest is arbitrary, capricious, and unreasonable. To protest the application referenced above, please submit your protest within 60 days and show proof of service upon the applicant.

AS 04.11.491 – AS 04.11.509 provide that the board will deny a license application if the board finds that the license is prohibited under as a result of an election conducted under AS 04.11.507.

AS 04.11.420 provides that the board will not issue a license when a local governing body protests an application on the grounds that the applicant's proposed licensed premises are located in a place within the local government where a local zoning ordinance prohibits the alcohol establishment, unless the local government has approved a variance from the local ordinance.

Sincerely,

Erika McConnell, Director

amco.localgovernmentonly@alaska.gov



Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

What is this form?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04 of Alaska Statutes** and **Chapter 304 of the Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

Section 1 - Transferor Information

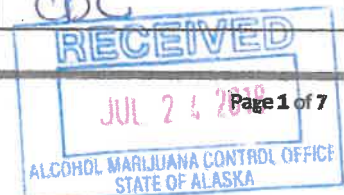
Enter information for the *current* licensee and licensed establishment.

Licensee:	Headhunters, Inc.		License #:	4532	
License Type:	Restaurant / Eating Place		Statutory Reference:	4.11.100	
Doing Business As:	Ernesto's Taqueria				
Premises Address:	328 Egan				
City:	Valdez	State:	ALASKA	ZIP:	99686
Local Governing Body:	CITY OF VALDEZ				

Transfer Type:

- ☒ Regular transfer
☐ Transfer with security interest
☐ Involuntary retransfer

OFFICE USE ONLY			
Complete Date:	8/28/18	Transaction #:	106262 106263
Board Meeting Date:	10/15/18	License Years:	18/19
Issue Date:		BRE:	CDC





Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application**Section 2 – Transferee Information**Enter information for the *new* applicant and/or location seeking to be licensed.

Licensee:	The Stampmill LLC				
Doing Business As:	The Stampmill				
Premises Address:	328 Egan Drive				
City:	Valdez	State:	AK	ZIP:	99686
Community Council:					

Mailing Address:	PO Box 2104				
City:	Valdez	State:	AK	ZIP:	99686

Designated Licensee:	Rick Simpson			
Contact Phone:	907-831-1431	Business Phone:		
Contact Email:	clamjumpers@outlook.com			

Seasonal License? ☐ Yes ☒ No ☐ If "Yes", write your six-month operating period: _____

Section 3 – Premises Information

Premises to be licensed is:

☒ an existing facility ☐ a new building ☐ a proposed building

The next two questions must be completed by beverage dispensary (including tourism) and package store applicants only:

What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the outer boundaries of the nearest school grounds? Include the unit of measurement in your answer.

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What is the distance of the shortest pedestrian route from the public entrance of the building of your proposed premises to the public entrance of the nearest church building? Include the unit of measurement in your answer.

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Form AB-01: Transfer License Application

Section 4 – Sole Proprietor Ownership Information

This section must be completed by any sole proprietor who is applying for a license. Entities should skip to Section 5.
If more space is needed, please attach a separate sheet with the required information.
The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	

This individual is an: ☐ applicant ☐ affiliate

Name:					
Address:					
City:		State:		ZIP:	

Section 5 – Entity Ownership Information

This section must be completed by any entity, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.
If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a corporation, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president, vice-president, secretary, and managing officer*.
- If the applicant is a limited liability organization, the following information must be completed for each *member with an ownership interest of 10% or more*, and for each *manager*.
- If the applicant is a partnership, including a limited partnership, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

Entity Official:	Rick Simpson				
Title(s):	Member, Manager	Phone:	907 831-1431	% Owned:	33.3
Address:	727 N. Waterfall Dr				
City:	Valdez	State:	AK	ZIP:	99686



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:	Jerome Wesely				
Title(s):	Member	Phone:	907-461-2059	% Owned:	33.3
Address:	PO Box 3095				
City:	Valdez	State:	AK	ZIP:	99686

Entity Official:	Prandon Kilian				
Title(s):	Member	Phone:	907-262-4631	% Owned:	33.3
Address:	PO Box 17607				
City:	Valdez	State:	AK	ZIP:	99686

Entity Official:					
Title(s):		Phone:		% Owned:	
Address:					
City:		State:		ZIP:	

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10077674	AK Formed Date:	2/6/18	Home State:	AK
Registered Agent:	Jerome Wesely	Agent's Phone:	907-461-2059		
Agent's Mailing Address:	PO Box 3095				
City:	Valdez	State:	AK	ZIP:	99686

Residency of Agent:

Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?

☒ ☐



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 6 – Other Licenses

Ownership and financial interest in other alcoholic beverage businesses:

Yes No

Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?

☐☒

If "Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed in Alaska, which license number(s) and license type(s):

Section 7 – Authorization

Communication with AMCO staff:

Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

☒☐

If "Yes", disclose the name of the individual and the reason for this authorization:

Lindsay Haase, bookkeeper - handles all paperwork and payments





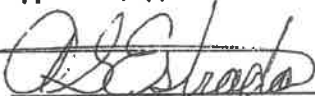
Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a controlling interest of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

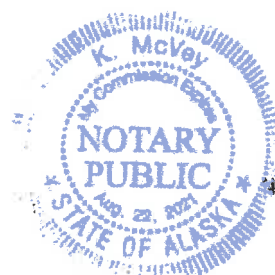


Signature of transferor

A.S. Estrada

Printed name of transferor

Subscribed and sworn to before me this 1st day of March, 2018.

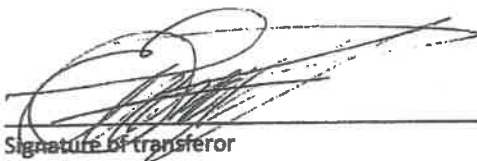




Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 8/22/21

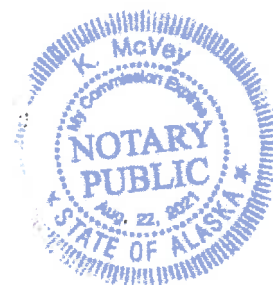


Signature of transferor

ERNESTO O. HERNANDEZ

Printed name of transferor

Subscribed and sworn to before me this 1st day of March, 2018.





Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: 8/22/21



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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:

Initials

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

RLS

I certify that all proposed licensees have been listed with the Division of Corporations.

RLS

I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

RLS

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.

RLS

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

RLS

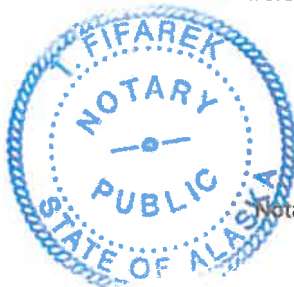
As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete.

Signature of transferee

Rick Simpson

Printed name

Subscribed and sworn to before me this 12 day of March, 2018.

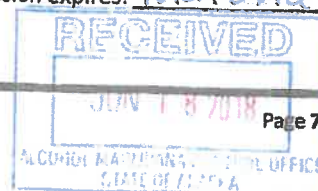


[Signature]

Signature of Notary Public

Notary Public in and for the State of Alaska

My commission expires: when office





Alaska Alcoholic Beverage Control Board

Form AB-02: Premises Diagram**What is this form?**

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

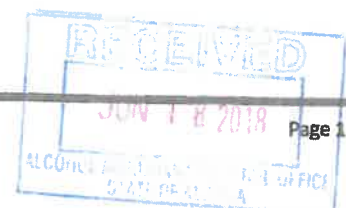
Yes No

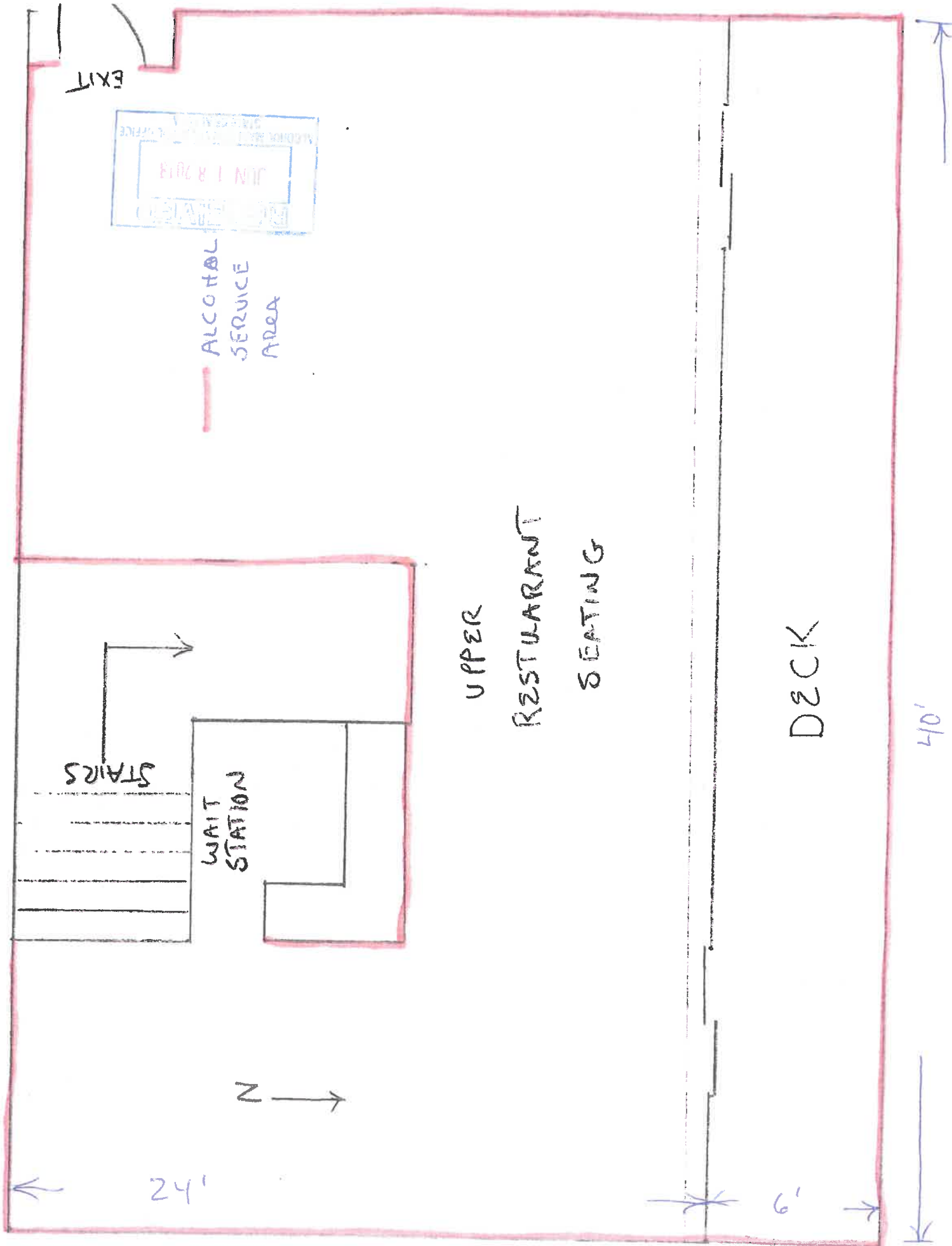
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.

**Section 1 – Establishment Information**

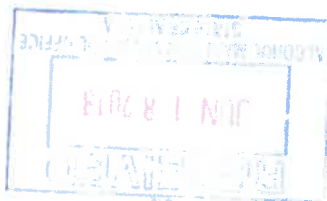
Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	The Stampmill, LLC.	License Number:	4532
License Type:	Restaurant/Eating Place		
Doing Business As:	The Stampmill		
Premises Address:	328 Egan Dr		
City:	Valdez	State:	AK
		ZIP:	99686





EXIT



ALCOHOL
SERVICE
AREA

STAIRS

WAIT
STATION

UPPER
RESTAURANT
SEATING

DECK

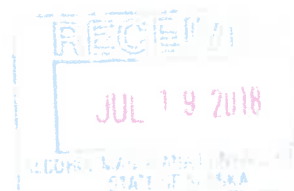
N →

24'

6'

40'

Second story dining room has access to a 6 foot by 40 foot deck. Said deck has no external egress. Waitstaff is present in dining room and monitors the serving and consumption of alcoholic beverages.



AB-03

Dishwashing Area

Employee area
20+ under

Kitchen
ENTRANCE
FOOD SERVICE
WINDOW

RECEIVED
JUL 24 2018
ALCOHOL MARSHMANA CONTROL OFFICE
STATE OF ALASKA

BEER & WINE
STATIONS

RESTROOM

WANT
STATION

SALON

EXIT

BEER/WINE
STORAGE
LOCKED

STAIRS

ALCOHOL
SERVICE
AREA

HALLWAY

SALON

RESTUARANT Dining area
SEATING 20+ under

Employee
20+ under

Hostess/Cashier
Stand

N
↓

EXIT



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application**What is this form?**

A restaurant designation permit application is required for a licensee desiring designation under 3 AAC 304.715 – 3 AAC 304.795 as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049. Designation will be granted only to a holder of a beverage dispensary, club, recreational site, golf course, or restaurant or eating place license, and only if the requirements of 3 AAC 304.305, 3 AAC 304.725, and 3 AAC 304.745, as applicable, are met. A detailed floor plan of the proposed designated and undesignated areas of the licensed business and a menu or expected menu listing the meals to be offered to patrons must accompany this form. Applicants should review AS 04.16.049 – AS 04.16.052 and 3 AAC 304.715 – 3 AAC 304.795. All fields of this form must be completed. The required \$50 permit fee may be made by credit card, check, or money order.

Section 1 – Establishment Information

Enter information for licensed establishment.

Licensee:	The Stampmill, LLC				
License Type:	Restaurant/Eating Place	License Number:	4532		
Doing Business As:	The Stampmill				
Premises Address:	328 Egan Dr				
City:	Valdez	State:	AK	ZIP:	99680
Contact Name:	Lindsay Haase	Contact Phone:	907.2557337		

Section 2 – Type of Designation Requested

This application is for the request of designation as a bona fide restaurant, hotel, or eating place for purposes of AS 04.16.010(c) or AS 04.16.049, and for the request of the following designation(s) (check all that apply):

- ☐ Dining after standard closing hours: AS 04.16.010(c)
- ☒ Dining by persons 16 – 20 years of age: AS 04.16.049(a)(2)
- ☒ Dining by persons under the age of 16 years, accompanied by a person over the age of 21: AS 04.16.049(a)(3)

- ☒ Employment for persons 16 or 17 years of age: AS 04.16.049(c)

NOTE: Under AS 04.16.049(d), this permit is not required to employ a person 18 - 20 years of age.

OFFICE USE ONLY			
Issue Date:		Transaction #:	106260
		BRE:	CDC



Alaska Alcoholic Beverage Control Board

Form AB-03: Restaurant Designation Permit Application

Section 3 – Additional Information

Enter all hours that your establishment intends to be open. Include variances in weekend/weekday hours, and indicate am/pm:

11am-11pm M-S 7 days a week

Are any forms of entertainment offered or available within the licensed business or on the proposed designated portions of the premises?

Yes

☐

No

☒

If "Yes", describe the entertainment offered or available:

Food and beverage service offered or anticipated is:

☒

table service

☐

buffet service

☐

counter service

☐

other

If "other", describe the manner of food and beverage service offered or anticipated:

Is an owner, manager, or assistant manager 21 years of age or older always present on the premises during business hours?

Yes

☒

No

☐

Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the third page of this form.

I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the third page of this form that meet the requirements of this form.

Yes

☒

No

☐