

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> 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-17: 2020/2021 Renewal License Application

#### What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing liquor license that are is due to renew by December 31, 2019. All fields of this form must be complete and correct, or the application will be returned to you in the manner in which it was received, per AS 04.11.270 and 3 AAC 304.105. The Community Council field only should be verified/completed by licensees whose establishments are located within the Municipality of Anchorage or outside of city limits within the Matanuska-Susitna Borough.

This form must be completed and submitted to AMCO's main office before any license renewal application will be reviewed. Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees that an application will be considered complete, or that a license will be renewed.

#### Section 1 - Establishment and Contact Information Enter information for the business seeking to have its license renewed. If any populated information is incorrect, please contact AMCO. Licensee: North Harbor Project, Inc. License #: 4675 **License Type: Beverage Dispensary Doing Business As:** The Fat Mermaid **Premises Address:** 143 N Harbor Dr **Local Governing Body:** City of Valdez **Community Council: Mailing Address:** 99686 City: State: ZIP: Enter information for the individual who will be designated as the primary point of contact regarding this application. This individual must be a licensee who is required to be listed in and authorized to sign this application. **Contact Licensee: Contact Phone:** 907 831 027 **Contact Email:** Optional: If you wish for AMCO staff to communicate with an individual who is not a licensee named on this form (eg: legal counsel) about this application and other matters pertaining to the license, please provide that person's contact information in the fields below. Name of Contact: **Contact Phone: Contact Email:**



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# Form AB-17d: 2020/2021 Tourism Renewal License Application

## Section 2 – Entity or Community Ownership Information

Licensees who directly hold a license as an individual or individuals should skip to Section 3. General partnerships and local governments should skip to the second half of this page. All licensees that are <u>corporations</u> or <u>LLCs</u> must complete this section. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). The CBPL Entity # below is neither your EIN/tax ID number, nor your business license number. You may view your entity's status or find your CBPL entity number by vising the following site: <a href="https://www.commerce.alaska.gov/cbp/main/search/entities">https://www.commerce.alaska.gov/cbp/main/search/entities</a>

	try manual by vising the follow	wing site: <u>nttps://w</u>	ww.commerce.alaska.gov	//cbp/main/se	arch/entities
Alaska CBPL Entity #:	66998	D			
You must ensure that you ar	e able to certify the following	statement before	igning your initials in the	box to the righ	t: Initials
	good standing with CBPL and H				
<ul> <li>If the applicant is a <u>corpo</u> the stock in the corporati</li> <li>If the applicant is a <u>limite</u> ownership interest of 100</li> <li>If the applicant is a <u>partner</u></li> </ul>	ion and with CBPL. Failure to li	ion must be complete president, secrete flowing information ger. mership, the following the following information ger. must be following spelling multiple titles mentified all required titles the or a separate she	e attach additional completed for each shareholder wary, and managing officer, must be completed for each information must be congressioned in the bullets above,	eted copies of the who owns 10% of the who owns 10% of the whole who own is a contract of the whole whole who own is a contract of the whole who own is a contract of the whole whole who own is a contract of the whole whole who own is a contract of the whole whole who own is a contract of the whole who own is a contract of the whole whole whole whole whole whole whole whole whole who own is a contract of the whole	or more of th an ch partner as held) must be listed for
Title(s):	Manager /M	Methone:	907831 0274	% Owned:	T
Mailing Address:	Bux 1999	Dilyon	1910310219	70 Owned.	100
City:	Valdez	State:	AK	ZIP: 9	9686
Name of Official:					
Title(s):		Phone:		% Owned:	
Mailing Address:				// Owned.	
City:		State:		ZIP:	
Name of Official:					
Title(s):		Phone:		% Owned:	

State:

[Form AB-17d] (rev 09/17/2019) License # 3461 DBA Puddle Jumpers Saloon

Mailing Address:

City:

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**AMCO** 

ZIP:



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### **Section 3 – Sole Proprietor Ownership Information**

Entities, such as corporations or LLCs, should skip this section. This section must be completed by any licensee who directly holds the license as an <u>individual or multiple individuals</u> and is applying for license renewal. If more space is needed, please attach a separate sheet that includes all of the required information.

The following information must be completed for each licensee and each affiliate.

This individual is an: applicant affiliate Name: Contact Phone: Mailing Address: City: State: ZIP: Email: This individual is an: applicant affiliate Name: **Contact Phone: Mailing Address:** City: State: ZIP: Email: **Section 4 - Alcohol Server Education** This section must be completed only by the holder of a beverage dispensary, club, or pub license or conditional contractor's permit. The holders of all other license types should skip to Section 5. Read the line below, and then sign your initials in the box to the right of the statement: Initials I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a patron have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, as set forth in AS 04.21.025 and 3 AAC 304.465. Section 5 - License Operation Check a single box for each calendar year that best describes how this liquor license was operated: 2018 2019 The license was regularly operated continuously throughout each year. The license was regularly operated during a specific season each year. The license was only operated to meet the minimum requirement of 240 total hours each calendar year. If this box is checked, a complete copy of Form AB-30: Proof of Minimum Operation Checklist, and all necessary documentation must be provided with this application. The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both of the calendar years. If this box is checked, a complete copy of Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated for at least the minimum requirement, unless a complete copy of the form (including fees) has already been submitted for that year.

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	Sect	tion 6 – Violati	ons and Conv	victions			
Applicant violations	and convictions in cal	endar years 2018 and	2019:		Ye	:S	No
Have any notices of v	violation (NOVs) been	issued for <u>this license</u> i	n the calendar years ?	2018 or 2019?			X
		lication been convicted the calendar years 2018		e 04, of 3 AAC 304, or	a local	]	<b>X</b>
If "Yes" to either of t	he previous two ques	tions, attach a separat	e page to this applica	ation listing all NOVs	and/or convic	tions.	
		Section 7 -	Certifications				
Read each line below	v, and then sign your i	nitials in the box to th	e right of each stater	nent:		In	nitials
I certify that all curre in accordance with A licensed business.	nt licensees (as define S 04.11.450, no one o	ed in AS 04.11.260) and ther than the licensee(	l affiliates have been s) has a direct or indi	listed on this applica rect financial interes	ition, and that it in the		TE .
and I have not change	ed the business name	al floor plan or reduced or the ownership (inclu wed and on file with the	iding officers, manage	ers, general partners,	emises, , or	Ę	2
I certify on behalf of r any other form provid	myself or of the organi ded by AMCO is groun	ized entity that I under ds for rejection or deni	stand that providing a al of this application	a false statement on t or revocation of any l	this form or license issued.	\$	D
3 AAC 304, and that t provide all informatio	his application, includ on required by the Alco	. I declare under penalt ing all accompanying so pholic Beverage Contro o me by AMCO staff, w	chedules and stateme I Board or AMCO staf	ents, is true, correct, a f in support of this ag	and complete.	l agree unders	stand
Signature of licensee	ables	HANE Commission	MONIN	gnature of Notary Pu	Morga	w	<u> </u>
Printed name of licen	Ables	NOTA PUBL	Totary Public in and for		aska.	100	
	Sub	scribed and sworthlight	I Houlls	y commission expires $\frac{\sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{j=$			<u>200</u>
Seasonal License?	Yes No	If "Yes", write your	six-month operatir	ng period:	7.53.55.10		
License Fee:	\$ 2500.00	Application Fee:	\$ 300.00	TOTAL:	\$ 2800.0	0	7
Miscellaneous Fe	ees:			28.9			
GRAND TOTAL (if	different than TOT	AL):					

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