



Alaska Alcoholic Beverage Control Board Tourism Statement

A new, transfer, or renewal application for a Beverage Dispensary – Tourism or Restaurant/Eating Place – Tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

This document must be completed and submitted to AMCO's main office before any tourism license application will be reviewed.

Section 1 – Establishment Information

Enter information for the business seeking to have its license renewed.

Doing Business As:	Excursion Restaurant	License #:	3794
License Type:	Restaurant/Eating Place - Seasonal AS 04.11.400(d)		

Section 2 – Tourism Statement

2.1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.

Excursion Restaurant LLC exclusively provides restaurant meals for Glacier Bay's Bear Track Inn LLC. Glacier Bay's Bear Track Inn LLC is a 14 room full service lodge in Gustavus Alaska catering to their guests, Glacier Bay Lodge guests and Bed & Breakfast establishments in Gustavus. Note that Excursion Restaurant LLC and Glacier Bay's Bear Track Inn are both managed by the members listed on form AB-17.

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.11.400(d)(1):

Excursion Restaurant LLC has two professional kitchens and a 60 seating capacity dining room located within Glacier Bay's Bear Track Inn. Both kitchens are fully equipped with certified Ansul systems (upgraded in 2021) and professional grade preparation area with commercial refrigerators/freezers.

2.3 Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located?

YES

NO

2.4 If "no" who operates the tourism facility?

[Empty text box for answer to 2.4]



Alaska Alcoholic Beverage Control Board Tourism Statement

2.5 Do you offer room rentals to the traveling public?

YES

NO

If "yes" answer the following questions:

How many rooms are available?

14 rooms

How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)?

The two kitchen facilities have multiple sinks for food preparation, stainless steel tables, cooking appliances, microwaves and a commercial grade Hobart sanitizer.

Do you stock or plan to stock alcoholic beverages in guest rooms?

YES

NO

If "no" is your facility located within an airport terminal?

YES

NO

2.6 If your establishment includes a dining facility, please describe that facility. If it does not please write "none".

The dining facility has seating capacity for 60 customers with 2 tops, 4 tops and 10 top tables. All service is done by wait staff table-side.

2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists), please describe them. If they are not offered, please write "none".

Glacier Bay's Bear Track Inn provides guided tours and trips via third party concessionaires including whale watching, kayaking, glacier boat trips, hiking and more.

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

12/13/2021

ABC BOARD

LIQUOR LICENSE

2022 - 2023

TEMPORARY

3794

LICENSE RENEWAL APPLICATION DUE
DECEMBER 31, 2023 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT
FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Restaurant/Eating
04.11.400(d)

05/01 - 10/20

LICENSE FEE: \$300.00

1131

CITY / BOROUGH: Gustavus
Unorganized Borough

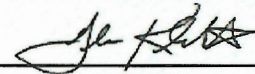
D/B/A: Excursion Restaurant
5021 Rink Creek Rd

Mail Address:
Excursion Restaurant, LLC
4007 Lower Honoapiilani Rd Unit 213
Lahaina, HI 96761

This license cannot be transferred without permission
of the Alcoholic Beverage Control Board

[] Special restriction - see reverse side

ISSUED BY ORDER OF THE
ALCOHOLIC BEVERAGE CONTROL BOARD



DIRECTOR

04-900 (REV 7/21)

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

12/13/2021

ABC BOARD

LIQUOR LICENSE

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COPY

DIRECTOR

D/B/A: Excursion Restaurant
5021 Rink Creek Rd

Mailing Address:
Excursion Restaurant, LLC
4007 Lower Honoapiilani Rd Unit 213
Lahaina, HI 96761

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

04-900 (REV 7/21)



Alaska Alcoholic Beverage Control Board

Form AB-17: 2022/2023 General Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2021 per AS 04.11.270, 3 AAC 304.160, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.
- Any complete application for renewal or any fees for renewal that have not been postmarked by 02/28/2022 will be expired per AS 04.11.540, 3 AAC 304.160(e).
- All fields of this application must be deemed complete by AMCO staff and must be accompanied by the required fees and all documents required, or the application will be returned without being processed, per AS 04.11.270, 3 AAC 304.105
- Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees in any way that an application will be deemed complete, renewed, or that it will be scheduled for the next ABC Board meeting.

Establishment Contact Information

Licensee (Owner):	Excursion Restaurant LLC	License #:	3794
License Type:	Restaurant/Eating Place - Seasonal AS 04.11.400(d)		
Doing Business As:	Excursion Restaurant		
Premises Address:	5021 Rink Creek Rd		
Local Governing Body:	Gustavus		
Community Council:			

If your mailing address has changed, write the NEW address below:

Mailing Address:	4007 Lower Honoapiilani Rd Unit 213				
City:	Lahaina	State:	HI	ZIP:	96761

Section 1 – Licensee Contact Information

Contact Licensee: The individual listed below must be listed in Section 2 or 3 as an Official/Owner/Shareholder of your entity and must be listed on CBPL with the same name and title.

This person will be the designated point of contact regarding this license, unless the Optional contact is completed.

Contact Licensee:	Jane Sheahan	Contact Phone:	314-691-5071
Contact Email:	glacierbeartrac@gmail.com		

Optional: If you wish for AMCO staff to communicate with anyone other than the Contact Licensee about your license, list them below:

Name of Contact:	David Olney	Contact Phone:	316-209-8012
Contact Email:	david.olney@hyatt.com		

Name of Contact:		Contact Phone:	
Contact Email:			

Name of Contact:		Contact Phone:	
Contact Email:			

#3794



Form AB-17: 2022/2023 License Renewal Application

Section 2 – Entity or Community Ownership Information

Sole Proprietors should skip this Section.

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #.
<https://www.commerce.alaska.gov/cbp/main/search/entities>

Alaska CBPL Entity #: 60390D

READ BEFORE PROCEEDING: Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.

- Corporations of any type including non-profit must list ONLY the following:
 - All shareholders who own 10% or more stock in the corporation
 - Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of any type must list ONLY the following:
 - All Members with an ownership interest of 10% or more
 - All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
 - Each Partner with an interest of 10% or more
 - All General Partners regardless of percentage owned

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. **If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.**

Name of Official:	Jane Sheahan			
Title(s):	Member	Phone:	314-691-5071	% Owned: 51
Mailing Address:	2509 N 53rd St			
City:	Phoenix	State:	AZ	ZIP: 85008

Name of Official:	David Olney			
Title(s):	Member	Phone:	316-209-8012	% Owned: 49
Mailing Address:	4007 Lower Honoapiilani Rd Unit 213			
City:	Lahaina	State:	HI	ZIP: 96761

Name of Official:				
Title(s):		Phone:		% Owned:
Mailing Address:				
City:		State:		ZIP:



Form AB-17: 2022/2023 License Renewal Application

Section 3 – Sole Proprietor Ownership Information

Corporations, LLC's and Partnerships of ALL kinds should skip this section.

READ BEFORE PROCEEDING: Any new or changes to the ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI approved cardstock, AB-08a's, payment of \$48.25 for each new owner or officer and a date stamped copy of the CBPL change per AS 04.11.045, or a Notice of Violation will be issued to your establishment and your application will be returned.

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, phone number, and mailing address for each owner or partner whose information we require. **If more space is needed, attach additional copies of this page. Additional owners not listed on this page will be rejected.**

This individual is an:	<input checked="" type="checkbox"/> Applicant	<input type="checkbox"/> Affiliate
Name:		
Contact Phone:		
Mailing Address:		
City:	State:	ZIP:
Email:		

This individual is an:	<input type="checkbox"/> Applicant	<input type="checkbox"/> Affiliate
Name:		
Contact Phone:		
Mailing Address:		
City:	State:	ZIP:
Email:		

Section 4 – License Operation

Check ONE BOX for EACH CALENDAR YEAR that best describes how this liquor license was operated:

- | | | |
|--|-------------------------------------|-------------------------------------|
| | 2020 | 2021 |
| 1. The license was regularly operated continuously throughout each year. (Year-round) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The license was only operated during a specific season each year. (Seasonal)
<i>If your operation dates have changed, list them below:</i>
May 1 _____ to October 20 _____ | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.
<i>A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. 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 calendar years. <i>A complete 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.</i>
<u>If you have not met the minimum number of hours of operation in 2020 and/or 2021, you are not required to pay the fees, however a complete AB-29 is required with Section 2 marked "OTHER" and COVID is listed as the reason.</u> | <input type="checkbox"/> | <input type="checkbox"/> |

Section 5 – Violations and Convictions

Have ANY Notices of Violation been issued for this license OR has ANY person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2020 or 2021? Yes No

If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)

If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.



Form AB-17: 2022/2023 License Renewal Application

Section 6 – Certifications

As an applicant for a liquor license renewal, 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, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned and potentially expired if I do not comply with statutory or regulatory requirements.
- I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business.
- I certify that this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity officials and stakeholders are current and accurately listed, and I have provided AMCO with all required changes of Shareholders (10% or more), Managers, Corporate Officers/Board of Directors, Partners, Controlling Interest or Ownership of the business license, and have provided all required documents for any new or changes in officers.
- I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons 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, if applicable for this license type as set forth in AS 04.21.025 and 3 AAC 304.465.
- I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name from what is currently approved and on file with the Alcoholic Beverage Control Board.

I certify on behalf of myself or of the organized entity 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.

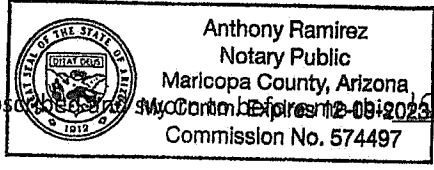
Jane C Sheahan
Signature of licensee

Jane C Sheahan

Printed name of licensee

Anthony Ramirez
Signature of Notary Public

Notary Public in and for the State of: Arizona



My commission expires: 12-9-23

Subscribed and sworn to before me on this 12-09-2023 day of November, 2021.

- Restaurant/Eating Place** applications must include a completed AB-33: Restaurant Receipts Affidavit
- Recreational Site** applications must include a completed Recreational Site Statement
- Tourism** applications must include a completed Tourism Statement
- Wholesale** applications must include a completed AB-25: Supplier Certification
- Common Carrier** applications must include a current safety inspection certificate

All renewal and supplemental forms are available online

Any application that is not complete or does not include ALL required completed forms and fees will not be processed and will be returned per AS 04.11.270, 3 AAC 304.105.

FOR OFFICE USE ONLY

License Fee:	\$ 300.00	Application Fee:	\$ 300.00	Misc. Fee:	\$
Total Fees Due:					\$ 600.00

Department of Commerce, Community, and Economic Development
**CORPORATIONS, BUSINESS & PROFESSIONAL
 LICENSING**

[State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Corporations / Entity Details](#)

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	EXCURSION RESTAURANT LLC.

Entity Type: Limited Liability Company

Entity #: 60390D

Status: Good Standing

AK Formed Date: 2/28/1997

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2023

Entity Mailing Address: PO BOX 255, GUSTAVUS, AK 99826

Entity Physical Address: 5021 RINK CREEK RD, GUSTAVUS, AK 99826

Registered Agent

Agent Name: Jane Olney Sheahan

Registered Mailing Address: PO BOX 111, GUSTAVUS, AK 99826

Registered Physical Address: LOT 2 COHO DRIVE, GUSTAVUS, AK 99826

Officials

Show Former

AK Entity #	Name	Titles	Owned
	DAVID OLNEY	Member	49.00
	JANE SHEAHAN	Member	51.00

Filed Documents

Date Filed	Type	Filing	Certificate
2/28/1997	Creation Filing		
8/07/1997	Biennial Report		
1/06/1999	Biennial Report	Click to View	
2/05/2001	Biennial Report	Click to View	
1/10/2003	Biennial Report	Click to View	
2/03/2005	Agent Change	Click to View	
2/03/2005	Biennial Report	Click to View	
12/28/2006	Biennial Report	Click to View	
11/14/2011	Biennial Report	Click to View	
6/07/2012	Biennial Report	Click to View	
1/14/2013	Biennial Report	Click to View	
8/26/2014	Change of Officials	Click to View	
12/15/2014	Biennial Report	Click to View	
12/02/2016	Biennial Report	Click to View	
12/24/2018	Biennial Report	Click to View	
1/22/2019	Agent Change	Click to View	
6/30/2021	Biennial Report	Click to View	

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[State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Business License / License #1028566](#)

LICENSE DETAILS

License #: 1028566

[Print Business License](#)

Business Name: EXCURSION RESTAURANT LLC.

Status: Active

Issue Date: 11/09/2015

Expiration Date: 12/31/2021

Mailing Address: 2509 N 53RD ST
PHOENIX, AZ 85008

Physical Address: 5021 Rink Creek Rd
6029529096
Gustavus, AK 99826-9096

Owners

EXCURSION RESTAURANT LLC.

Activities

Line of Business	NAICS	Professional License #
72 - Accommodation and Food Services	721191 - BED-AND-BREAKFAST INNS	

Endorsements

No Endorsements Found

License Lapse(s)

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.

No Lapses on record for the last 4 years.