



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:	Westmark Inn Skagway - The Chilkoot Room	License #:	5164
License Type:	Beverage Dispensary - Tourism Duplicate Seasonal		

Section 2 – Tourism Statement

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

The hotel is open through the summer season while the cruise ships dock at the nearby pier. The on site dining facilities are adjacent to the Historic District and close to shopping and entertainment. There is free ferry and airport pickup service or free parking for those guests with vehicles.

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

During the 2 years the hotel has been closed due to COVID, we have taken the opportunity to replace the Chilkoot Dining kitchen hood and fire suppression systems as well as modify the boiler room ventilation system in the main lodge building.

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?

DEC 27 2021



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?

94

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)?

None

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".

In addition to the Bonanza Bar & Grill, the Westmark Inn Skagway includes the Chilkoot Room and the Glacial Lounge.

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".

Amenities include cable tv, in-room hair dryers and coffee makers. Free internet access is available in the lobby for hotel guests. Lodge is within walking distance of the White Pass & Yukon Route Railroad, Skagway Museum and National Park Service Visitor's Center.

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

3/03/2022

ABC BOARD

LIQUOR LICENSE

2022 - 2023

TEMPORARY

5164

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: Beverage Dispenser
Seasonal

LICENSE FEE: \$1,250.00

1100

CITY / BOROUGH: Skagway
Skagway

4/15 - 10/15

D/B/A: Westmark Inn Skagway - Tl.
3rd & Spring Street

Mail Address:
Westmark Hotels, Inc.
Attn: Michelle Pipkin 450 Third Avenue West
Seattle, WA 98119-4002

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

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XXXX

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D/B/A: Westmark Inn Skagway - The Chilkoot Room
3rd & Spring Street

Mailing Address:
Westmark Hotels, Inc.
Attn: Michelle Pipkin 450 Third Avenue West
Seattle, WA 98119-4002

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ISSUED BY ORDER OF THE
ALCOHOLIC BEVERAGE CONTROL BOARD

COPY

DIRECTOR

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):	Westmark Hotels, Inc.	License #:	5164
License Type:	Beverage Dispensary - Tourism Duplicate Seasonal		
Doing Business As:	Westmark Inn Skagway - The Chilkoot Room		
Premises Address:	3rd & Spring Street		
Local Governing Body:	Municipality of Skagway Borough		
Community Council:	None		

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

Mailing Address:					
City:		State:		ZIP:	

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:	David McGlothlin	Contact Phone:	(206) 336-5910
Contact Email:	dmcglothlin@hagroup.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:	Michelle Pipkin	Contact Phone:	(206) 336-6105
Contact Email:	mpipkin@hagroup.com		

Name of Contact:	Philippe Janicka	Contact Phone:	(907) 264-8032
Contact Email:	pjanicka@hagroup.com		

Name of Contact:		Contact Phone:	
Contact Email:			



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 #:	5724D
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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:	Holland America Line, Inc				
Title(s):	Shareholder	Phone:	(206) 281-3535	% Owned:	100
Mailing Address:	450 3rd Ave W				
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Charles E Ball				
Title(s):	Director, President	Phone:	(206) 336-5980	% Owned:	0
Mailing Address:	450 3rd Ave W				
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Daniel Howard				
Title(s):	Vice President and Secretary	Phone:	(661) 753-1550	% Owned:	0
Mailing Address:	24305 Town Center Drive				
City:	Santa Clarita	State:	CA	ZIP:	91355

AMCO

DEC 27 2021



Form AB-17: 2022/2023 License Renewal Application

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 - All Managers (of the LLC, not the DBA) regardless of percentage owned
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 - 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:	David McGlothlin				
Title(s):	Vice President	Phone:	(206) 336-5910	% Owned:	0
Mailing Address:	450 3rd Ave W				
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Natalya Leahy				
Title(s):	Vice President/Treasurer	Phone:	(206) 626-9557	% Owned:	0
Mailing Address:	450 3rd Ave W				
City:	Seattle	State:	WA	ZIP:	98119

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: 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 – 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> | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ to _____ | | |
| 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> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

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.

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
	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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.



Alaska Alcoholic Beverage Control Board

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... I certify that all current licensees... I certify that this entity is in good standing with Corporations, Business and Professional Licensing (CBPL)... 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... I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises...

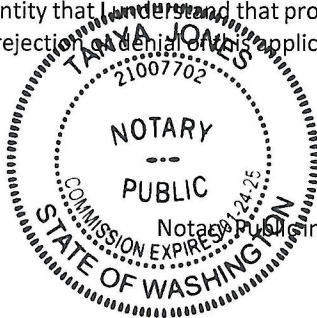
I certify on behalf of myself or of the organized entity that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection, denial of this application or revocation of any license issued.

[Signature of licensee]

Signature of licensee

David McGlothlin

Printed name of licensee



[Signature of Notary Public]

Signature of Notary Public

in and for the State of: Washington

My commission expires: 1/24/2025

Subscribed and sworn to before me this 22 day of December, 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

Table with 4 columns: License Fee (\$1,250.00), Application Fee (\$300.00), Misc. Fee (\$), Total Fees Due (\$1,550.00)

Details

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	WESTMARK HOTELS, INC.

Entity Type: Business Corporation

Entity #: 5724D

Status: Good Standing

AK Formed Date: 12/7/1962

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2024

Entity Mailing Address: ATTN: MICHELLE PIPKIN, 450 3RD AVE W, SEATTLE, WA 98119-4002

Entity Physical Address: 450 3RD AVE W, SEATTLE, WA 98119-4002

Registered Agent

Agent Name: ROBERT BLASCO

Registered Mailing Address: 9360 GLACIER HWY STE 202, JUNEAU, AK 99801

Registered Physical Address: 9360 GLACIER HWY STE 202, JUNEAU, AK 99801

Officials

Show Former

AK Entity #	Name	Titles	Owned
	Charles E Ball	President, Director	
	DANIEL HOWARD	Secretary, Vice President	
	David McGlothlin	Vice President	
	Holland America Line, Inc	Shareholder	100.00
	NATALYA LEAHY	Treasurer, Vice President	

Filed Documents

Date Filed	Type	Filing	Certificate
12/07/1962	Creation Filing		
2/02/1988	Biennial Report		
2/12/1990	Biennial Report		
1/15/1992	Biennial Report	Click to View	
1/03/1994	Biennial Report	Click to View	
12/26/1995	Biennial Report	Click to View	

Date Filed	Type	Filing	Certificate
12/19/1997	Biennial Report	Click to View	
2/01/2000	Biennial Report	Click to View	
1/17/2002	Biennial Report	Click to View	
4/14/2003	Agent Change	Click to View	
5/16/2003	Agent Change	Click to View	
2/02/2004	Biennial Report	Click to View	
2/09/2006	Biennial Report	Click to View	
2/09/2010	Biennial Report	Click to View	
2/09/2010	Biennial Report	Click to View	
12/05/2011	Agent Change	Click to View	
12/06/2011	Biennial Report	Click to View	
12/31/2013	Biennial Report	Click to View	
12/16/2015	Biennial Report	Click to View	
12/15/2017	Biennial Report	Click to View	
3/22/2018	Agent Change	Click to View	
3/29/2018	Change of Officials	Click to View	
12/13/2019	Biennial Report	Click to View	
12/23/2021	Biennial Report	Click to View	

[Close Details](#)

[Print Friendly Version](#)

License Detail

LICENSE DETAILS

License #: 264883

[Print Business License](#)

Business Name: WESTMARK INN - SKAGWAY

Status: Active

Issue Date: 07/01/1999

Expiration Date: 12/31/2022

Mailing Address: 450 3RD AVE W
ATTN: MICHELLE PIPKIN
SEATTLE, WA 98119-4002

Physical Address: THIRD AND SPRING STREET, SKAGWAY
SKAGWAY, AK 99840

Owners

WESTMARK HOTELS, INC.

Activities

Line of Business	NAICS	Professional License #
72 - Accommodation and Food Services	721110 - HOTELS (EXCEPT CASINO HOTELS) AND MOTELS	

Endorsements

End #	Issue	Renew	Expiration	Action End	Action Note	Address
1	12/23/2008		12/31/2010			3RD & SPRING ST, SKAGWAY, AK 99840

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.

[Close License Detail](#)

[Print Friendly Version](#)