



**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.

<b>Doing Business As:</b>	Mt. McKinley Princess Wilderness Lodge - The Snack Cache	<b>License #:</b>	5258
<b>License Type:</b>	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.**

Wilderness Lodge stays are a primary component of Princess' unique cruisetour experience, which combines a Gulf of Alaska cruise with a land tour segment of 3 to 10 days during the months of May through September.

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

While the hotel has been closed for the past 2 years due to COVID, we have taken the opportunity to install new carpeting in 40 guest rooms and have begun the process of replacing the roof on the main lodge.

**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?**



Alaska Alcoholic Beverage Control Board  
**Tourism Statement**

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

2.5 Do you offer room rentals to the traveling public?

YES

NO

If "yes" answer the following questions:

How many rooms are available?

460

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".

The lodge includes Base Camp Bar & Grill, 20,320 Alaskan Bar & Grill and Cub Cafe.

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".

Lodge amenities include: gift shop, lounge, espresso bar, Denali State Park Ranger Program and a Tour Desk. Available tours include fishing, river rafting, jetboat safari, and flightseeing.



STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

3/08/2022

ABC BOARD

LIQUOR LICENSE

2022 - 2023

TEMPORARY

5258

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: Outside City Limits  
Matanuska-Susitna Borough

05/01 - 10/31

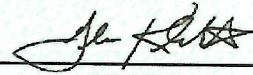
D/B/A: Mt. McKinley Princess Wildc  
133 Parks Highway (Denali St.

Mail Address:  
Alaska Hotel Properties, LLC  
Attn: Michelle Pipkin 450 Third Ave West  
Seattle, WA 98119

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

3/08/2022

ABC BOARD

LIQUOR LICENSE

2022 - 2023

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Matanuska-Susitna Borough

05/01 - 10/31

D/B/A: Mt. McKinley Princess Wilderness Lodge - The  
133 Parks Highway (Denali State Park)

Mailing Address:  
Alaska Hotel Properties, LLC  
Attn: Michelle Pipkin 450 Third Ave West  
Seattle, WA 98119

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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):	Alaska Hotel Properties, LLC	License #:	5258
License Type:	Beverage Dispensary - Tourism Duplicate Seasonal		
Doing Business As:	Mt. McKinley Princess Wilderness Lodge - The Snack Cache		
Premises Address:	133 Parks Highway (Denali State Park)		
Local Governing Body:	Matanuska-Susitna Borough		
Community Council:	Trapper Creek		

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 #:	70654F
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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:	Westmark Hotels, Inc				
Title(s):	Member, Manager	Phone:	(206) 336-6105	% Owned:	100
Mailing Address:	450 3rd Ave W				
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Charles E Ball				
Title(s):	Affiliate	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):	Affiliate	Phone:	(661) 753-1550	% Owned:	0
Mailing Address:	24305 Town Center Drive				
City:	Santa Clarita	State:	CA	ZIP:	91355







# Form AB-17: 2022/2023 License Renewal Application

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

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  - 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:	David McGlothlin				
Title(s):	Affiliate	Phone:	(206) 336-5910	% Owned:	0
Mailing Address:	450 3rd Ave W				
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Lisa K Syme				
Title(s):	Affiliate	Phone:	(206) 336-5901	% 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:	



DEC 27 2021



# 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 <b>regularly operated continuously</b> throughout each year. (Year-round)                                                                                                                                                                                                                                                                    | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 2. The license was <b>only operated during a specific season</b> each year. (Seasonal)<br><i>If your operation dates have changed, list them below:</i><br>_____ to _____                                                                                                                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.<br><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

**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

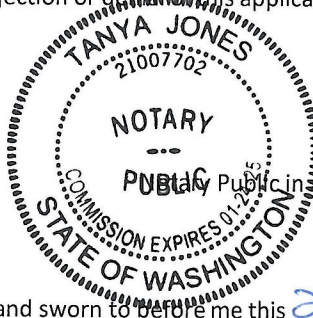
Section 6 - Certifications

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 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.

Signature of licensee: David McGlothlin
Printed name of licensee: David McGlothlin



Signature of Notary Public: Tanya Jones
and for the State of: Washington
My commission expires: 1/24/2025

Subscribed and sworn to before me this 20 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)

AMCO

DEC 27 2021



Details

# ENTITY DETAILS

## Name(s)

Type	Name
Legal Name	ALASKA HOTEL PROPERTIES, LLC

**Entity Type:** Limited Liability Company

**Entity #:** 70654F

**Status:** Good Standing

**AK Formed Date:** 8/18/2000

**Duration/Expiration:** Perpetual

**Home State:** DELAWARE

**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:** C T Corporation System

**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
	WESTMARK HOTELS, INC	Member	100.00

## Filed Documents

Date Filed	Type	Filing	Certificate
8/18/2000	Creation Filing	<a href="#">Click to View</a>	
8/18/2000	Merger	<a href="#">Click to View</a>	
8/18/2000	Creation Filing	<a href="#">Click to View</a>	
12/24/2001	Biennial Report	<a href="#">Click to View</a>	
1/02/2004	Biennial Report	<a href="#">Click to View</a>	
12/21/2005	Biennial Report	<a href="#">Click to View</a>	
12/19/2007	Biennial Report	<a href="#">Click to View</a>	
12/31/2009	Biennial Report	<a href="#">Click to View</a>	
1/09/2012	Biennial Report	<a href="#">Click to View</a>	
1/03/2014	Biennial Report	<a href="#">Click to View</a>	

Date Filed	Type	Filing	Certificate
12/16/2015	Biennial Report	<a href="#">Click to View</a>	
12/15/2017	Biennial Report	<a href="#">Click to View</a>	
12/13/2019	Biennial Report	<a href="#">Click to View</a>	
12/23/2021	Biennial Report	<a href="#">Click to View</a>	

**Close Details**

**Print Friendly Version**



License Detail

# LICENSE DETAILS

**License #:** 415480[Print Business License](#)**Business Name:** M.T MCKINLEY PRINCESS WILDERNESS LODGE**Status:** Active**Issue Date:** 11/21/2000**Expiration Date:** 12/31/2023**Mailing Address:** 450 3RD AVE W  
ATTN: MICHELLE PIPKIN  
SEATTLE, WA 98119-4002**Physical Address:** MILE 133.1 PARKS HIGHWAY  
TRAPPER CREEK, AK 99683

## Owners

ALASKA HOTEL PROPERTIES, LLC

## 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	1/6/2003		12/31/2004			MILE 133.1 PARKS HWY, TRAPPER CREEK, AK 99683

## 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](#)