STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

1852

XXXX

ISSUED 06/01/2022 **ABC BOARD**

LIQUOR LICENSE 2021 - 2022

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2022 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

TYPE OF LICENSE: Package Store-C

LICENSE FEE: \$1,500.00

1159

D/B/A: Tanana Sand Bar

249 Front St Mail Address:

City of Tanana PO Box 249

Tanana, AK 99777

CITY / BOROUGH: Tanana

Unorganized Borough

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

Joan M. Wilson

DIRECTOR

04-900 (REV 9/09)

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

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

ISSUED

06/01/2022

ABC BOARD

LIQUOR LICENSE

2021 - 2022

1852

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ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 9/09)

D/B/A:

Tanana Sand Bar 249 Front St

Mailing Address:

City of Tanana

PO Box 249

Tanana, AK 99777



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

<u>alcohol.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u>

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	T	1 10 G 10 0	Sand 7	Back	License Number:	1852		
License Type:	D	Mulae	Starce - C	mam m ==	J	100 2		
Examiner:		Package Stere - Community Kris S. Transaction #:						
	P15 5.							
Document		Received	Completed	Notes				
AB-17: Renewal Applic	ation	3-25-22	6-1-22					
App and License Fees		4-5-22	4-11-22	need	FP fee -	- revd		
Supplemental Docume	ent	Received	Completed	Notes				
Tourism/Rec Site State	ment							
AB-25: Supplier Cert (V	/S)							
AB-29: Waiver of Opera	ation			****	A F WANT OF MICHAEL WAS A STATE OF THE STATE			
AB-30: Minimum Opera	ation			***************************************	3	MINOR CONTRACTOR OF THE PARTY O		
AB-33: Restaurant Affic	davit				/			
COI / COC / 5 Star								
FP Cards & Fees / AB-0	8a	4-5-22	6-1-22	ned	AB 080 F	Pa fee		
Late Fee								
Names on FP Cards: Mary Ann Wiehl								
			7.70.					
						Yes No	0	
Selling alcohol in response to written order (package stores)?							7	
Mailing address and contact information different than in database (if yes, update database)?								
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?								
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?								
LGB 1 Response: LGB 2 Response:								
Waive Protest Lapsed Waive Protest Lapsed								



550 W 7 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: 2021/2022 License Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2020 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 02/28/2021 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

Establishment Contact Information

 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.

	Latabilaillicit 00	iitact iii	Iomation						
Licensee (Owner):	City of Tanana			License #:	1852				
License Type:	City of Tanana Package Sture.	- Com	munity						
Doing Business As:	Tanana Sandbar		<u>,</u>						
Premises Address:	249 Front Stre		,						
Local Governing Body:	City of tangu	na							
Community Council:		None							
f your mailing address ha	as changed, write the NEW address	below:							
Mailing Address:	PO BOX 249								
city: Tanana	Tanana	State:	Alaska	ZIP:	99777				
Contact Licensee: Contact Email:	Mary Ann Wie clerk @ cityofto	hl anana	Contact Phone:	907-	360-105				
	3								
	staff to communicate with anyone other t	han the Conta							
Name of Contact:	Dorothy Jordan		Contact Phone:	907-	444-687				
Contact Email:	deltalady 50	gmai	1. Com						
Name of Contact:			Contact Phone:						
Contact Email:									
	Section 2 – Written	Order In	nformation						
5	ic beverages and ship them to another en solicitation in calendar years 2021 an	d/or 2022?	AMCO	YES	NO X				
Form AB-17] (rev09/23/2020)			MAR 25 20)22	Page 1 of4				
3		d/or 2022?			X				



Alaska Alcoholic Beverage Control Board

Form AB-17: 2021/2022 License Renewal Application

Section 3 – 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 #:

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 <u>any</u> type including non-profit must list ONLY the following:
 - All shareholders who own 10% or more stock in the corporation
 - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of <u>any</u> type must list ONLY the following:
 - o All Members with an ownership interest of 10% or more
 - All Managers (of the LLC, not the DBA) regardless of percentageowned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
 - o Each Partner with an interest of 10% or more
 - o 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:			
Title(s):	Phone:	% Owned:	
Mailing Address:			
City:	State:	ZIP:	
Name of Official:			
Title(s):	Phone:	% Owned:	
Mailing Address:			
City:	State:	ZIP:	
Name of Official:			
Title(s):	Phone:	% Owned:	
Mailing Address:			
City:	State:	ZIP:	

AMCO



Alaska Alcoholic Reverage Control Board

Form AB-17: 2021/2022 License Renewal Application

Section 4 - 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 CBPI, 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 84.11.270, 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 specially worked, attack additional contex of this page. Additional owners not listed on this page will be relected.

lf more space is needed This individual isan: 😾		ional copies	The Property of the Party	ge. Additional own	ers not listed on this pa	ge will be r	ejected.	MA. Y
Name:	4,4		anai	10	Contact Phone:	901-8	de	1157
Mailing Address	PAR		49					
Cibys	RIVAL DE L'ANTE	nana		States	Alaska	ZIP:	99	777
Empili	2000 P. Sec. 1	4. Tarring (1991)	eva	ata of		Ø		
This individual Isan:	Applicant	X Affili						MANAGEMENT STATE
Name:	May	Ann	i W	iehl	Contact Phone:	901-	3de	1057
Mailing Address:	Po	box s						
Cityt	Tar	rana		States	Hasta	ZIP;	99	777
Emails	Cle	HLO.C	Huc	Ataran	ai Cama			
		SENSON DESCRIPTION OF THE PROPERTY OF THE PARTY OF THE PA	RESERVED BY	Hidense O				
Check ONEBOX for EACL The license was only of the license was only or the lic	perated during shave changed	ontinuously th a specific seas I, list them belo to t the minimum	roughout on each ye ow:	each year, (Year-roun ar, (Seasonal) ent of 240 total hours	each calendar vear:		2019 X 	2020 XX
4. The license was not up hours each year, during and corresponding fees in If you have not me	erated at all or ig one or both c nuar be submitted at the Iminimu	was net operal alendaryears. d with this opelli m number o	ed for at l A complete apieti for et l'hours o	est the minimum req Form AB-29: Walverst I oberation in 2020.	turement of 240 total	pay the fe	es, howe	Veria
		ection 6		etions and (3onvictions		******	
Have ANY Notices of Vib convicted of a violation	lation been iss of Title 04, 3A/	sued for this li AC 304 or a lo	cerise OR cal ordini	has ANY person or nce adopted under	entity in this applicati <u>o</u> n AS 04.21,010 in 2019 or	been 2020?	Yes	X
					on and/or Convictions p			
lf you are u	nsure li you h	ave received	any Not	ces of Violation, co	intact the office before a	•		
[Form AB-17] (rev09/23/2	020)				AMCO Receiv	6 2 4/7/	2022	ge 3 of4



Alaska Alcoholic Beverage Control Board

Form AB-17: 2021/2022 License Renewal Application

Section 7 - 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

Printed name of licensee

NOTARY PUBLIC

Signature of Notary Public

Notary Public in and for the State of:

My commission expires:

Subscribed and sworn to before me this 21 day of Warch

_, 20<u>72</u>

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

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:	\$	Application Fee:	Application Fee: \$ 300.00		\$	
	\$					

AMCO



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-08a: Authorization of Records Release

Why is this form needed?

This authorization of records release form is required for all liquor license applications. Each licensee and affiliate who is required to be listed on an application for a liquor license under AS 04.11.260 must provide written authorization for release of conviction and arrest records, as required by 3 AAC 304.105(a)(1).

The following individuals must complete this form:

- If the applicant is a sole proprietor, this form must be completed by the applicant and the applicant's spouse.
- If the applicant is a <u>corporation</u>, this form must be completed for each <u>stockholder who owns 10% or more</u> of the stock in the corporation, and for each <u>president</u>, <u>vice-president</u>, <u>secretary</u>, and <u>managing officer</u>.
- If the applicant is a <u>limited liability organization</u>, this form must be completed for each member with an ownership interest of 10% or more, and for each manager.
- If the applicant is a <u>partnership</u>, including a <u>limited partnership</u>, this form must be completed for each <u>partner with an interest</u>
 of 10% or more, and for each <u>general partner</u>.

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

Section 1 - Establishment Information Enter information for licensed establishment. Licensee: City of Tanana License Type: Package Store License Number: 290372 Doing Business As: Tanana Sandbar Premises Address: 249 Front Street Tanana City: State: AK ZIP: 99777

Section 2 - Individual Information Enter information for the individual licensee or affiliate. Name: Mary Ann Wiehl Title: City Manager Date of Birth:



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Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

Section 3 - Certifications and Approvals

Read each line below, and then sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have never been convicted of an act that constitutes a crime involving moral turpitude.	X
I certify that I have never been convicted of a violation of AS 04 or regulations adopted by the ABC Board.	X
I certify that I have never been convicted of a violation of the alcoholic beverage control laws of another state, as a licensee of that state.	X
I certify that I have not been convicted of a felony in this state, the United States, or another state or territory, including a suspended imposition of sentence, during the 10 years immediately preceding the date of this form.	X
Sign your initials to the following statement only if you are unable to certify one or more of the above statements: I have been convicted of one or more of the above offenses, and I have attached a written explanation that includes the type of offense and why it would be in the public interest for the ABC Board to approve me as a licensee.	
I understand that by signing this form, I am providing written authorization for release of my conviction and arrest records to the Alaska Alcoholic Beverage Control Board through the Alaska Alcohol & Marijuana Control Office under AS 04.11.295 and 3 AAC 304.105. I understand that my fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), and that I have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.	X
I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.	×
Printed name of licensee/affiliate Signature of licensee/affiliate	٠