

Applying for a Manufacturer Direct Shipment License


Welcome Local


0
Items Awaiting Your Action →


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Unsubmitted Applications →


0
Applications In Review →


Available Actions


Apply for a new license, endorsement, permit →


Manage an existing license, endorsement, permit →


View my master information →


View my license, endorsement, permit →


View my history →

License, endorsement, permit or other Selection

* Required field

Are you the licensee or authorized user? *

--Select--

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[NEXT](#)

License, endorsement, permit or other Selection

* Required field

Are you the licensee or authorized user? *

Yes

Please select the license, endorsement or permit type from this list *

Manufacturer Direct Shipment License (MDSL) ▼

- Brewery Repackaging Endorsement (BRE)
- Brewery Retail License (BRL)
- Club Caterer's Permit (CCP)
- Club License (CL)
- Common Carrier Dispensary License (CCDL)
- Conditional Contractor's Permit (CP)
- Dedesignation Permit (DDP)
- Destination Resort License (DERL)
- Distillery Manufacturer License (DML)
- Distillery Retail License (DIRL)
- Fair License (FL)
- General Wholesale License (GWL)
- Golf Course Endorsement (GCE)
- Golf Course License (GCL)
- Hotel or Motel Endorsement (HME)
- Inventory Resale Permit (IREP)
- Large Resort Endorsement (LRE)
- Limited Wholesale Brewed Beverage and Wine License (LWBL)
- Live Music or Entertainment Permit (LMEP)
- Manufacturer Direct Shipment License (MDSL)

Master Entity Confirmation

* Required field

Do you have any undeclared changes associated to your organization such as: entity/owner name, type, address, ownership structure, officers etc? *

No

Please confirm if you do not have any change in Master Entity

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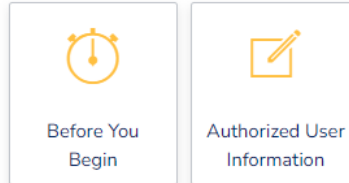
NEXT

The below tiles will assist you through the process, and inform you if anything has been missed.

Manufacturer Direct Shipment License (MDSL)

AS 04.09.370

Each tile displayed on this screen represents the application sections you are required to complete. To start, select the **Before You Begin** tile and review the provided information designed to assist you with this overall process. Next, you must select the **Initial Application Information** tile and complete the required information within this section. After the status of this section is set to complete, the remaining tiles will be made available to you and may be answered in any order, and in one or more settings. Tiles will appear with a check mark when complete.



Applicant Disclaimer

If you are a licensee or a representative of a licensee with approved access, select **Next** to begin the process.

If you are a representative of a licensee and you do not yet have the licensee's approval, please request the licensee to provide you that authority.

Check with AMCO if you have questions.

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Documentation and Information

You may need the following documents and information during the application process.

The application in process will require you to access documents and information pertinent to your license, endorsement, permit. These might include proof of ownership, residency, (TTB) federal authority, fingerprint card and CBPL info about your business license entity. We recommend you have this info before beginning the application process.

If applicable, documentation you should be prepared to provide includes:

- TTB certificate
- Background Check Documents (upon request by AMCO)
 - Form AB-08a: Authorization of Records Release.
 - Fingerprint card(s), less than one year old.
 - Background Check Fee - \$48.25.

Additional Information:

- No Information Required

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Things you should know

The following information will assist you as you go through the online application process.

Required fields are marked with an asterisk and must be completed before the system will allow you to move on to the next group of questions.

The system will automatically save your entries each time you have **completed** a group of questions and select **Next** at the bottom of each screen. If you do not complete a group of questions, your work will not be saved.

To leave your application without completing it and return to your dashboard, click on **AK - ACCIS** in the top left corner.

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Legal Information

Notice to Applicants:

License, endorsement and permit holders are responsible for ensuring compliance with the statutory provisions. In considering an original or renewal application, the Board may make any investigation, inspection or request any additional information necessary to enforce the Statute and/or regulation and to provide strict adherence to a general policy of prohibiting the tied house and related practices.

All applicants for alcoholic beverage licenses, endorsements, or permits should familiarize themselves with the statutory requirements of AS 04 and the regulatory requirements of 3AAC 305. Particular to a Manufacturer Direct Shipment License (MDSL), please review:

- AS 04.09.370 and its implementing regulations
- All statutes and regulations applicable to all license types
- All statute and regulations particular to legal obligations of licensees, endorsement holders, or permittee

You may access the statutes and regulations on AMCO's website. Any, statements made or affirmed in an application may become the basis of further examination or investigation.

Statutory reference for Manufacturer Direct Shipment License (MDSL): AS 04.09.370

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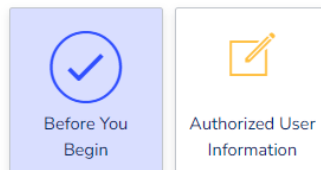
You will get a **BLUE** check mark each time a tile is complete

Manufacturer Direct Shipment License (MDSL)

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Application ID: **848**



Tell Us About You

* Required field

▲ 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/endorsement/permit. It is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

Who are you? *

--Select--

- Select--
- I am an authorized user by the designated licensee with binding authority
- I am an authorized by the licensee w/o binding authority
- I am someone else

Tell Us About You

* Required field

▲ 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/endorsement/permit. It is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

Who are you? *

I am an authorized user by the designated licensee with binding authority

ⓘ Examples of Principal = Sole Proprietor, Director, Officer, Manager, as applicable to the person/entity applying for a license, permit, or other privilege from AMCO.

Prefix

--Select--

Legal First Name *

Legal Last Name *

Email Address *

Phone Number *

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff? *

--Select--

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NEXT

Primary license number

* Required field

Instate/Alaska applicant/licensee: Your primary license is the brewery, winery, or distillery retail license that you are attaching this manufacturer direct shipment license to, as outlined in AS 04.09.370.

- Out of state applicant:** If you are an out of state applicant and you do not hold an alcoholic beverage license in Alaska, choose "Out of State License". Applicants holding an alcoholic beverage license in Alaska, must meet the qualification under AS 04.09.370 to qualify for a manufacturer direct shipment license and should not be applying as "out of state".

Please select a license number *

--Select--

--Select--

Out of State License

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NEXT

Primary license number

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Please select a license number *

Out of State License

State of License Issuance *

--Select--

License Number *

License Number

Per AS 04.09.370(e)(4) I verify that I annually produce less than 300,000 barrels in total of brewed beverages or more than 50,000 proof gallons in total of distilled spirits. *

--Select--

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NEXT

Primary license number

* Required field

Instate/Alaska applicant/licensee: Your primary license is the brewery, winery, or distillery retail license that you are attaching this manufacturer direct shipment license to, as outlined in AS 04.09.370.

- Out of state applicant:** If you are an out of state applicant and you do not hold an alcoholic beverage license in Alaska, choose "Out of State License". Applicants holding an alcoholic beverage license in Alaska, must meet the qualification under AS 04.09.370 to qualify for a manufacturer direct shipment license and should not be applying as "out of state".

Please select a license number *

Out of State License

State of License Issuance *

AZ

License Number *

3333

Per AS 04.09.370(e)(4) I verify that I annually produce less than 300,000 barrels in total of brewed beverages or more than 50,000 proof gallons in total of distilled spirits. *

--Select--

--Select--

Yes


No

Manufacturer Direct Shipment License (MDSL)


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Application ID: **848**




Before You Begin




Authorized User Information




Primary License Number




TTB Information



Premises Address



Seasonal Declaration



Financial Interest

TTB (Alcohol and Tobacco Tax and Trade Bureau)

ⓘ Providing your TTB Details is required by AS 04.09.370. * Required field

TTB ID *

TTB Certificate *

- JIRA Dummy File.pdf

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Basic Business Information

* Required field

Enter your location's business name (also known as "doing business as" or DBA) *

What is your primary business at this location? *

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Basic Business Information

* Required field

Enter your location's business name (also known as "doing business as" or DBA) *

1600 w 7th ave

What is your primary business at this location? *

Manufacturer

- Select--
- Restaurant
- Sporting Arena
- Civic Center
- Hotel
- Bar
- Grocery/Market
- Convenience Store
- Package Store / Liquor Store
- Motel
- Delivery Company
- Other
- Recreation
- Manufacturer
- Wholesaler

Enter your business's premises address

* Required field

Does the proposed site include a valid street address? *

Yes

Address Line 1 *

Address Line 1

Note: Abbreviation in addresses will be auto converted to Postal Service Standards.

Address Line 2

Address Line 2

City *

City

State *

--Select--

Zip Code *

Zip Code

Country *

--Select--

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NEXT

License Seasonal Information

* Required field

ⓘ If you planning to operate your business in a seasonal fashion, please answer the following questions.

Are you conducting seasonal business? *

--Select--

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Other Licenses Involvement

* Required field

Does any representative or owner named in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska? *

--Select--

--Select--

Yes

No

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NEXT

Check the below 2 boxes and hit "Next"

Financial Interest

I hereby certify that no person other than a proposed licensee listed on the liquor license application has a direct or indirect financial interest, as defined in AS 04.11.450(f) in the business for which a liquor license is being applied for.

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.

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Manufacturer Direct Shipment License (MDSL)

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Application ID: 848

| | | | | |
|---|--|---|--|--|
|  Before You Begin |  Authorized User Information |  Primary License Number |  TTB Information |  Premises Address |
|  Seasonal Declaration |  Financial Interest |  Finalize Application | | |

Final Session Acknowledgment

PLEASE NOTE: This final section of your application must be completed in its entirety during one session. Exiting out of this section without completing it, will require you to restart this section the next time you return to this application process.

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NEXT

Read carefully below Attestations, check each box, and then “I Agree”


Attestations

- I certify 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.
- I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.
- I understand that I may not ship product to an address with a zip code located in an area that has adopted a local option under AS 04.11.491
- I understand that I may not sell more than:
 - a. 1.5 liters of distilled spirits to a purchaser in one transaction or more than 4.5 liters of distilled spirits to a purchaser in a calendar year;
 - b. 18 liters of wine to a purchaser in one transaction or more than 108 liters of wine to a purchaser in a calendar year; or
 - c. 288 ounces of brewed beverages to a purchaser in one transaction or more than 13.5 gallons of brewed beverages to a purchaser in a calendar year.
- I understand that I must ship alcoholic beverages using a common carrier who is approved by the Alcoholic Beverage Control Board to ship alcoholic beverages to persons in the state under AS 04.09.750(b)
- I certify that my facility does not produce more than 300,000 barrels in total of brewed beverages or more than 50,000 proof gallons in total of distilled spirits, annually.
- I certify that I will comply with AS 04.09.370 and that failure to comply with the terms of a manufacturer direct shipment license is a violation.
- 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.


I AGREE

Final Checks


Based on the completion of your answers in this application, AMCO may reach out to you for additional information.



Double-checking all of your data entries



Checking for files and attachments



Running some final checks

All checks complete. Select Next to continue.

NEXT

Signature

Notice: Pursuant to AS 11.56.210 and AS 09.80.040, any electronic information, record, or other document, including an application, submitted to the Alcoholic Beverage Control Board that has an electronic signature with the required specific identifiers of the signatory has the same force and effect as a manual signature before a notary public and is considered a sworn statement for purposes Alaska law.

By typing your first and last name in the field below, you are electronically signing this application and expressing your intention that the typed name serve as your electronic signature under AS 09.08.040.

Note: Signing person must be at least 21 years of age.

On **12/18/2023**, I _____, am either a Principal (individual/sole proprietor, general partner, officer, director, or manager of the applicant) or a representative of the applicant and am legally authorized to make the foregoing attestations and to submit this application on behalf of the individual/entity applying for a license, permit, or other privilege from AMCO. I declare under penalty of perjury that the foregoing attestations and all information provided in this application are true and correct to the best of my knowledge.

NEXT

Signature

Notice: Pursuant to AS 11.56.210 and AS 09.80.040, any electronic information, record, or other document, including an application, submitted to the Alcoholic Beverage Control Board that has an electronic signature with the required specific identifiers of the signatory has the same force and effect as a manual signature before a notary public and is considered a sworn statement for purposes Alaska law.

By typing your first and last name in the field below, you are electronically signing this application and expressing your intention that the typed name serve as your electronic signature under AS 09.08.040.

Note: Signing person must be at least 21 years of age.

On **12/18/2023**, I Janyce Ibetse _____, am either a Principal (individual/sole proprietor, general partner, officer, director, or manager of the applicant) or a representative of the applicant and am legally authorized to make the foregoing attestations and to submit this application on behalf of the individual/entity applying for a license, permit, or other privilege from AMCO. I declare under penalty of perjury that the foregoing attestations and all information provided in this application are true and correct to the best of my knowledge.

NEXT

The name entered in the signature field does not match any of the principal parties. Only the principal parties are authorized to sign the application. Are you sure want to continue?

YES

CANCEL

Below is a summary of the information you have input.



Document reference ID : 848

Licensing Application Summary

You must review your application and confirm that the information displayed here is correct. Select **Review and Confirm** to continue and make the payment. If the information is not correct, select **Next** to return to the application, edit the data as needed and finalize the submission.

| | |
|----------------------------------|--|
| Application ID: | 848 |
| Applicant Name: | Jane Out Of State MdsL Llc |
| License Type applied for: | Manufacturer Direct Shipment License (MDSL) (AS 04.09.370) |
| Application Status: | Initiated |

Entity Information

| | |
|---|---------------------------|
| Business Structure: | Limited liability company |
| FEIN/SSN Number: | 987456321 |
| Member Managed or Manager Managed: | Member Managed |
| Not registered in the state of Alaska: | Yes |
| Home State: | CA |

Entity Contact Information

| | |
|------------------------|---|
| Entity Address: | 550 W 7th St, Los Angeles, CA, 90014, USA |
|------------------------|---|

Initial Application Information

| | |
|--------------------------|---|
| Authority Type: | I am an authorized user by the designated licensee with binding authority |
| Legal First Name: | Janyce |
| Legal Last Name: | Ibele |
| Email Address: | janyce.ibeale@alaska.gov |
| Phone Number: | 907-269-8416 |

TTB (Alcohol and Tobacco Tax and Trade Bureau)

| | |
|------------------------|---------------------|
| TTB ID | 3344567 |
| TTB certificate | JIRA Dummy File.pdf |

Premises Address

| | |
|---|--|
| Address: | 515 N 44th St, Phoenix, AZ, United States, 85008 |
| Does the proposed site include a valid street address? | Yes |

Primary license number

| | |
|--|----------------------|
| Primary License Information | Out of State License |
| State of License Issuance | AZ |
| License Number | 3333 |
| Per AS 04.09.370(e)(4) I verify that I annually produce less than 300,000 barrels in total of brewed beverages or more than 50,000 proof gallons in total of distilled spirits. | Yes |

Basic Business information

| | |
|--|----------------|
| Business/Trade Name: | 1600 w 7th ave |
| What is your primary business at this location? | Manufacturer |

Financial Interest

I hereby certify that no person other than a proposed licensee listed on the liquor license application has a direct or indirect financial interest, as defined in AS 04.11.450(f) in the business for which a liquor license is being applied for.

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.

Attestations

I certify 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.

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

I understand that I may not ship product to an address with a zip code located in an area that has adopted a local option under AS 04.11.491

I understand that I may not sell more than:

- 1.5 liters of distilled spirits to a purchaser in one transaction or more than 4.5 liters of distilled spirits to a purchaser in a calendar year;
- 18 liters of wine to a purchaser in one transaction or more than 108 liters of wine to a purchaser in a calendar year; or
- 288 ounces of brewed beverages to a purchaser in one transaction or more than 13.5 gallons of brewed beverages to a purchaser in a calendar year.

I understand that I must ship alcoholic beverages using a common carrier who is approved by the Alcoholic Beverage Control Board to ship alcoholic beverages to persons in the state under AS 04.09.750(b)

I certify that my facility does not produce more than 300,000 barrels in total of brewed beverages or more than 50,000 proof gallons in total of distilled spirits, annually.

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Signature

This application was digitally signed by : janyce ibele on 12/18/2023 12:27:10 PM

Documents

| # | File Name | Type | Added On |
|---|---------------------|-------------------------|---------------------|
| 1 | JIRA Dummy File.pdf | License TTB Certificate | 12/18/2023 09:11 PM |

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DOWNLOAD

NEXT

Please note:

Public Notice Posting Attestation and Publishers Affidavit

No required affidavits found. Please click next to continue.

APPLICATION SUMMARY

EDIT

NEXT

Payment Details

Electronic payment is **required** before any work item submitted will be considered complete and **received by AMCO**. After completing the information below and clicking "PAY NOW," you'll be redirected to the third-party provider to submit payment.

* Required field

Application ID : 848

| Transaction Details | Amount | Edit | Delete |
|--|------------|------|--------|
| New Manufacturer Direct Shipment License | \$700.00 | Edit | Delete |
| Description | Fee | | |
| New Application Fees | \$500.00 | | |
| New Alcohol License Fees | \$200.00 | | |

Choose Payment Type *

Agency Fee *

Total Costs

*This service is provided by the official website of Alaska Alcohol and Cannabis Control Information System. The price of this service includes funds that support the ongoing operations and enhancements of , which is provided by a third party in partnership with the State.

By selecting this checkbox, I swear that I have voluntarily executed this application.

PAY NOW

Payment Details

* Required field

Application ID: 848

Your payment has been successfully processed. NOTE: PLEASE DOWNLOAD THE RECEIPT FOR YOUR RECORDS.

Your submission is under review. Please monitor your account for any actions we may send you while we review your application.

| Transaction Details | Amount |
|--------------------------|----------|
| New Alcohol License Fees | \$200.00 |
| New Application Fees | \$500.00 |

1 - 2 of 2 items

[DOWNLOAD RECEIPT](#)

[RETURN TO DASHBOARD](#)

When complete and paid, your Dashboard will reflect:


Welcome Local


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Items Awaiting Your Action →


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Unsubmitted Applications →


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Applications In Review →


Available Actions

 Apply for a new license, endorsement, permit →

 Manage an existing license, endorsement, permit →




 View my master information →


 View my license, endorsement, permit →

 View my history →

You will receive this email acknowledging your application has been received.

ACCIS UAT Application Received

 noreply-accis@elicense365.com
To  lbele, Janyce L (CED);  jpreyas@gmail.com

 If there are problems with how this message is displayed, click here to view it in a web browser.

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.



Application Received

Your application has been received. You can monitor your application status by logging in to your AK-ACCIS account.

Additional Details

| Detail Type | Value |
|--------------------------|---|
| Application ID | 848 |
| Application Status | Received |
| Application Type | New Manufacturer Direct Shipment License |
| Applicant Name | Jane Out Of State Mdsl, Llc |
| License ID | 15249 |
| License Type | Manufacturer Direct Shipment License (MDSL) |
| Current Location Address | 515 N 44th St , Phoenix, AZ - 85008 6511 |

[Visit AK-ACCIS](#)

Important note: If you are seeing this message again, please log in to your AK-ACCIS account to confirm whether you need to take any further action.

Learn about AK-ACCIS

Visit AMCO's [How To Use AK-ACCIS webpage](#) to find user guides and videos, or you can find answers to frequently asked questions on the [AK-ACCIS FAQs page](#).

Questions?

Get in touch with AMCO by calling 907-269-0350.

Alaska Alcohol &
Marijuana Control Office
550 W 7th Ave., Suite
1600, Anchorage, Alaska
99501

This email address is not monitored. Please do not reply directly to this email.