

Document reference ID: 628

Licensing Application Summary

Application ID: 628

Applicant Name: Dpjt, Inc.

License Type applied for: Beverage Dispensary Tourism License (BDTL) (AS

04.09.350)

Application Status: In Review

Application Submitted On: 11/17/2023

Entity Information

Business Structure: Corporation

Alaska Entity Number (CBPL): 80462D

Entity Contact Information

Entity Address: 600 Airport Rd., Ste A, Sitka, AK, 99835, USA

Ownership / Principal Party Details

Principal Parent Entity	Principal Party	Role	%Ownership
Dpjt, Inc.	Timothy M. Holder	President,Secretary,Treasurer	100

Premises Address

Nearest municipality, city, and/or borough:

Sitka

Country, State, Zip:	Country	, State.	Zip:
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AK, United States,

Basic Business information

Business/Trade Name:

Nugget Restaurant

Local Government and Community Council Details

City/Municipality

Sitka (City and Borough of)

Public Notice Posting Attestation and Publishers Affidavit

Attestations

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

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 certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 305.700.

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

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 certify that all proposed licensees have been listed with Division of Corporation, Business, and Professional Licensing.

I certify that I and any individual identified in the business entity ownership section of this application, has or will read AS 04 and its implementing regulations.

The proposed changes conform to all applicable public health, fire, and safety laws.

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.

Signature

Electronic Signature not collected; application submitted based on paper form.

Payment Info

Payment Type: Pay By Phone

Receipt Number: 100708273

Payment Date: 11/15/2023 3:00:00 PM

License Renewal

Is this application being made by you for the benefit of someone else? If "YES," indicate below or attach explanation.

No

Has the applicant, applicant's spouse, partner, officer, director or stockholders, of the licensed entity become disqualified by law or by facts and conditions from holding a license or permit under the Alcohol and Cannabis Control Information System Alcoholic Beverage Code? If "YES," indicate below or attach explanation.

No

Have there been changes since your original application that have not been reported on this or previous applications? If "YES," indicate below or attach explanation.

No

How many hours did you operate in 2022 as set forth in AS 04.11.330?

Operated to meet the minimum 240 hrs.

How many hours did you operate in 2023 as set forth in AS 04.11.330?

Operated to meet the minimum 240 hrs.

Are you a seasonal license and has your operation times/dates/seasons changed?

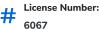
No

Has any person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordanince adopted under AS 04.21.010 in 2022 or 2023.?

No

Have any Notices of Violation been issued for this license in 2022 or 2023?

No



License Expiration Date:



Mailing Address:



600 Airport Rd STE A Sitka, AK 99835



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-37: 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 Anchorage office before any tourism license application will be

Doing Business As:	icensed establishment or the business seeking to be licensed. NUGGET ROSAGUENT License #: 6067
License Type:	Beverage Dispensery-Tourism
	Section 2 – Tourism Statement
1. Explain how issuance	of a liquor license at your establishment has/will encourage tourism.
We are	e Located in an Airport in
	e Located in an Airport in we provid fool and Drink
5/1/04, 1	we prosess to a constitution
TO TO	ounists & Locals
•	1313 W LOGO
2. Explain how the facilit	by was /will be constructed or improved as required by AS 04.11.400(d)(1):
	ty was/ will be constructed of improved as required by A3 04.11.400(u)(1):
T4 was	Built as a July Service Rostaurant + Bar
It was	by was/will be constructed or improved as required by AS 04.11.400(d)(1): Built as a full Service Rostaurant + Barr Situa Arrant
It was	Built as a full service Rostourent + Bar Situa Airport
It was	Built as a full Service Rostourent + Bar Situs Airport
It was	Built as a full Service Rostown + Bar Situa Airport
in the	SITUS AIRPIT
.3 Does the licensee or a	pplicant for this liquor license also operate the
3 Does the licensee or a tourism facility in wh	pplicant for this liquor license also operate the lich this license is located?
.3 Does the licensee or a tourism facility in wh	pplicant for this liquor license also operate the lich this license is located?
.3 Does the licensee or a	pplicant for this liquor license also operate the lich this license is located?



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Form AB-37: Tourism Statement

om rentals to the	traveling public			YES	No
following questio	ns:				
oms are available	27				
					16 X 3
				r food prepar	ation along
STOTI BITA COOKING	appliance devic	es, including a micro	waveji		
or plan to stock a	alcoholic bevera	ges in guest rooms?		YES	NO I
					ש
If "no" is your facility located within an airport terminal?			YES	NO	
nment includes a	dining facility, pl	lease describe that fa	cility. If it does not please v	vrite "none".	
use a	Hul	service	Rostaurant	Dine	(N 9
					1061
enities are availat	ole to your guest	ts through your estal	olishment (eg: guided tours	or trips, renta	al equipmen
ies that attract to	urists), please d	escribe them. If they	are not offered, please wri	te "none".	
\wedge	one				
	following question or plan to stock and are available from and cooking or plan to stock and are facility located and are available continued and are available continued are a	following questions: coms are available? If the available rooms (if any) have ation and cooking appliance device or plan to stock alcoholic beverant facility located within an airport ment includes a dining facility, plant of the cooking appliance device or plant to stock alcoholic beverant facility located within an airport facility of the cooking appliance device or plant to stock alcoholic beverant facility located within an airport facility of the cooking appliance device or plant to stock alcoholic beverant facility located within an airport facility of the cooking appliance device or plant to stock alcoholic beverant facility located within an airport facility of the cooking appliance device or plant to stock alcoholic beverant facility located within an airport facility of the cooking appliance device or plant to stock alcoholic beverant facility located within an airport facility of the cooking appliance device or plant to stock alcoholic beverant facility located within an airport facility of the cooking appliance device or plant to stock alcoholic beverant facility located within an airport facility of the cooking appliance device or plant to stock alcoholic beverant facility and the cooking appliance device or plant to stock alcoholic beverant facility and the cooking appliance device or plant to stock alcoholic beverant facility and the cooking application facility and the cooking	f the available rooms (if any) have kitchen facilities (deation and cooking appliance devices, including a micro or plan to stock alcoholic beverages in guest rooms? In facility located within an airport terminal? In ment includes a dining facility, please describe that factors are available to your guests through your establishment are available to your guests through your establishment.	following questions: poms are available? If the available rooms (if any) have kitchen facilities (defined as: a separate sink for ation and cooking appliance devices, including a microwave)? For plan to stock alcoholic beverages in guest rooms?	following questions: forms are available? f the available rooms (if any) have kitchen facilities (defined as: a separate sink for food preparation and cooking appliance devices, including a microwave)? YES YES



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Form AB-37: Tourism Statement

Section 3 - Certification

Read the statement below, and then sign your initials in the box to the right of the statement:

Initials

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