



Alaska Marijuana Control Board

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	3 - Authorization of Records Release
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OFFICE USE ONLY

Received Date:		Payment Submitted Y/N:		Transaction #:	
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Authorization of Records Release

Why is this form needed?

This authorization of records release form is required for all marijuana license applications. Each person who is required to be listed on an application under 3 AAC 306.020 for a marijuana license. Under **AS 12.62.160** each person must provide written authorization for release of conviction and arrest records, as required by **3 AAC 306.010 (d)(2) or (3)**.

The following individuals must complete this form:

- A person applying as a Sole Proprietor.
- For a partnership including a limited partnership: each general partner and each partner holding **any** interest in the partnership.
- For a limited liability company: each member holding **any** ownership interest and each manager and/or member.
- For a corporation: each owner of **any** of the corporation's stock/shares, each officer, and each director.
- For a local government: the designated official responsible for the establishment.

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

Individual Information

Enter information for the person this criminal background check will be pulled for.

Full Legal Name:	ELIZABETH MARTIN
Date of Birth:	
Email:	LIZA@AKOFARMS.COM
Phone:	9077383484
MJ License(s) number(s) or DBA's attached to your name.	4A12253 4A26162 3A19898 5B16767



Alaska Marijuana Control Board

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 a violation of 3 AAC 306 or regulations adopted by the MCB Board.

EM

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 five years immediately preceding the date of this form.

EM

I certify that I am not on probation or parole for a felony, or less than five years have elapsed from conviction

EM

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 MCB 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 Marijuana Control Board through the Alaska Alcohol & Marijuana Control Office under AS 12.62.160 and 3 AAC 306.010 (d) (2) or (3). 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.*

EM

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.

EM

ELIZABETH MARTIN

Printed name of individual

Signature of individual



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- For a corporation: each owner of **any** of the corporation's stock/shares, each officer, and each director.
- For a local government: the designated official responsible for the establishment.

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

Individual Information

Enter information for the person this criminal background check will be pulled for.

Full Legal Name:	JUSTIN BROWN
Date of Birth:	
Email:	AKOFARMSLLC@GMAIL.COM
Phone:	9077385301
MJ License(s) number(s) or DBA's attached to your name.	4A12253 4A26162 3A19898 5B16767



Alaska Marijuana Control Board

Authorization of Records Release

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Printed name of individual


Signature of individual



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Individual Information

Enter information for the person this criminal background check will be pulled for.

Full Legal Name:	MARTY MARTIN
Date of Birth:	
Email:	MARTINENT@GCI.NET
Phone:	9077384048
MJ License(s) number(s) or DBA's attached to your name.	4A12253 4A26162 3A19898 5B16767



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Authorization of Records Release

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MM

MARTY MARTIN

Printed name of individual

Signature of individual



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License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	<i>Entity papers</i>
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ENTITY DETAILS

Name(s)

Type

Legal Name

Name

AKO Farms, LLC

Entity Type: Limited Liability Company

Entity #: 10037708

Status: Good Standing

AK Formed Date: 4/15/2016

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2025

Entity Mailing Address: PO BOX 2426, SITKA, AK 99835

Entity Physical Address: 1210 BEARDSLEY WAY, SITKA, AK 99835

Registered Agent

Agent Name: Justin Brown

Registered Mailing Address: BOX 2426, SITKA, AK 99835

Registered Physical Address: 1210 BEARDSLEY WAY, SITKA, AK 99835

Officials

AK Entity #

Name

Titles

Show Former

Owned

Justin Brown

Manager, Member

50.00

Marty & Elizabeth Martin

Member

50.00



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City:	SITKA	State:	AK
		Zip Code:	99835
Designated Licensee:	ELIZABETH MARTIN		
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

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Attached Items:	<p>Proof of Possession for Retail Store AND ONSITE consumption AREA</p>
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COMMERCIAL LEASE

THIS COMMERCIAL LEASE (the "Lease") is made by and between Don't Frighten the Horses, LLC (hereinafter called the "Lessor" or "Landlord") of 1300 Halibut Pt. Road, Sitka, AK 99835, and AKO Farms (hereinafter called the "Lessee" or "Tenant") of PO BOX 2426 / 1210 BEARDSLEE WAY SITKA AK, 99835, for the property known as: 4509 Halibut Pt. Road, Sitka, AK 99835

1. Property. In consideration of the mutual covenants contained herein, the Lessor hereby leases to the Lessee, and the Lessee hereby leases from the Lessor the "Lease Space" located at the above rental address of approximately 5,000 square feet, more fully described in Appendix A ("the Premises"). The Lessee has inspected and shall accept the Premises in its current condition.

2. 2 Year Term. The Lessee is to have and hold the Premises for a term of Twelve (12) months. The term shall commence on May 1, 2025 (the "commencement date") and shall expire on April 30, 2027 (the "expiration date").

3. Rental Amount.

(a) Monthly Base Rent. The Lessee shall pay to the Lessor monthly base rent (the "monthly base rent") on or before the first day of each calendar month in an amount equal to Ten Thousand Dollars (\$10,000.00) per calendar month beginning on May 1, 2025 or on the date of available occupancy, whichever is later, for the months of May through October (six months). For November through April (off season 6 months), base rent shall be \$1500 per month for dates to which Lessee is open for business or preparing to be open. All monthly base rent shall be paid to the Lessor at the address to which notices to the Lessor are given. Rent for any partial calendar month shall be pro-rated at a daily rate of one thirtieth (1/30) of the monthly base rent, which shall be the case in the event occupancy is not available on May 1, 2025 or during the off season 6 months.

(b) Sales Tax. In addition, the Lessee shall pay to the Lessor any applicable sales tax on the monthly base rent, in accordance with City of Sitka General Code.

(c) Property Tax & Owners Insurance. The Lessor shall pay all real property taxes levied upon the demised premises by the authorized taxing authority (presently the City and Borough of Sitka) that fall due during the term of this Lease, or any extensions. Lessor shall pay Commercial Property insurance on the Property during the term of this Lease and any extensions.

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(d) Late Penalty. Any rent or other sum required under this Lease to be paid that is not paid within five (5) days of the due date shall be assessed as a late charge of One Thousand Dollars (\$1,000.00); such amount shall be considered liquidated damages and shall be due and payable as additional rent. In the event the late charge assessed above exceeds the maximum amount allowable by law, the amount assessed will be adjusted to the maximum amount allowable by law. To be paid, Lessor must have received the rent or other sum required under this Lease.

4. Utilities. The Lessee, at its costs, shall pay all costs for quantities of water, sewer, garbage, electricity, internet, cable, etc. and other utilities or services used or consumed on the Premises, or which become due and payable during the entire term of the Lease, including off season. Prior to taking possession of the Premises, the Lessee shall arrange with the City and Borough of Sitka to be the named persons responsible for all payments for utilities provided by the City and Borough of Juneau to the Premises. The Lessee shall be responsible for, shall arrange for delivery of, and shall pay for all fuel oil (diesel fuel #2), if any, required to operate the any utilities provided with the Premises. If applicable, the Lessor shall provide a full fuel tank when the Lessee takes possession. Likewise, if applicable, the Lessee shall leave a full fuel tank upon termination of the term or extended term of this Lease.

5. Maintenance and Repair. The Lessee, at its cost, shall: maintain the Premises in good condition; make all repairs of whatever kind and nature, foreseen and unforeseen, as may be necessary or appropriate to keep the Premises in good condition; and, remove from the Premises all debris and garbage, and provide all landscaping, gardening, and ice and snow removal. Lessee shall be responsible for making the premises suitable for its business and shall be solely responsible for security any necessary permits, licenses, and other approvals. The Lessee, at its cost, shall furnish all janitorial and cleaning services and supplies for the Premises.

Lessor shall make any major maintenance and repairs required to the heating and plumbing systems, electrical wiring, roof and foundation, as may be required to keep same in good, safe maintenance and repair, unless the damage is caused solely by Lessee's or Lessee's agents' negligent or non-negligent acts. Lessee shall permit Lessor and Lessors' agents to enter the leased premises at all reasonable hours for the purpose of carrying out such duties.

6. Improvements. Lessee may make improvements, alterations and repairs at Lessee's expense, with prior written authorization from Lessor, so long as work is performed by a licensed, bonded and insured contractor, and in a manner that is consistent with all local, state and federal law. Plans shall be provided to Lessor for approval prior to any work being performed. Lessee may not allow any liens to be recorded against the Property. All leasehold improvements shall remain on the Property at the time of termination of this lease.

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7. Insurance Requirements. The Lessee, at its cost, shall maintain a comprehensive general liability policy, with liability limits of not less than Two Million Dollars per occurrence, Five Million Dollars general aggregate, and no less than \$150,000.00 property damage against all liability of the Lessee and its authorized representatives arising out of and in connection with the Lessee's use or occupancy of the Premises. Such insurance policy shall name the Lessor as an additional insured with all rights of subrogation waived against Lessor. In addition, the Lessor may, from time to time, require the Lessee to increase the amount of coverage. All insurance shall insure the Lessee's performance of the indemnification provisions of this Lease.

8. Policies of Insurance. All insurance required to be provided by the Lessee under this Lease shall be issued by insurance companies authorized to do business in Alaska with a financial rating of at least an A status as rated in the most recent edition of Best's Insurance Reports and shall contain an endorsement requiring at least thirty (30) days' prior written notice of cancellation to the Lessor before the cancellation or change in coverage, scope, or amount of any policy. The Lessee shall deliver a certificate or copy of such policy, together with evidence of all premiums, to the Lessor within 30 days after commencement of this Lease. The Lessee shall also deliver to the Lessor satisfactory evidence of the renewal of such policy and the payment of all renewal premiums not less than thirty (30) days before the expiration of any policy.

9. Release and Indemnity. The Lessor shall not be liable to the Lessee for any damage to the Lessee or the Lessee's property from any cause, and the Lessee further waives all claims against the Lessor for damage to any person or property arising for any reason.

The Lessee shall defend, indemnify, and hold the Lessor harmless from all claims, demands, causes of action, damages, and any expenses incident thereto, arising out of any damage to any person or property incurring in, on, or about the Premises, or arising out of the Lessee's use of the Premises or the Lessee's breach of any term of this lease. Lessee shall further indemnify Lessor for any and all costs or damages due to civil forfeiture under the federal Controlled Substances Act.

10. Destruction.

(a) Option to Terminate. In the event the Premises is damaged or destroyed so as to render the Premises totally or partially untenantable, the Lessor may elect to terminate this Lease by giving a notice of termination to the Lessee within ninety (90) days from the date of such damage or destruction. In the event the Lessor does not elect to terminate this Lease, the Lessor shall restore the Premises. In the event the Lessor elects to terminate this Lease, this Lease shall terminate on the date the Lessee received the Lessor's notice of termination.

(b) Restoration. In the event the Premises is to be restored, the Lessor with all due diligence shall restore the Premises to substantially the same condition as immediately prior to the date of such damage or destruction, and the Lessee, at its cost, shall restore or repair its improvements, fixtures, and equipment as may be necessary and appropriate to reopen and operate the Premises. All restoration shall be in accordance

with the Lessor's plans and specifications at that time and in full compliance with all applicable laws and ordinances.

(c) Abatement of Rent. During the period of untenability, the monthly base rent shall abate in the same ratio as the portion of the Premises rendered untenable bears to the whole of the Premises, but all terms and conditions of the Lease shall remain in full force and effect.

11. Alterations and Improvements. Lessee is responsible for all costs of alteration, additions and improvements. Lessee is hereby permitted to make reasonable alterations inside the Premises.

12. Default. The occurrence of any of the following shall constitute a default by the Lessee:

a) Nonpayment. The failure to make payment of any installment of the monthly base rent, or of any other sum required under this Lease to be paid by Lessee if not paid by the due date;

b). Abandonment. The abandonment of the Premises (failure to operate the Sublet Premises) for a period of thirty (30) consecutive days shall be deemed an abandonment;

c) Receiver. The appointment of a receiver or a debtor-in-possession to take possession of the Premises or improvements or of the Lessee's interest in the leasehold estate or of the Lessee's operations on the Premises by reason of the Lessee's insolvency;

d) Bankruptcy. An assignment by the Lessee for the benefit of creditors or the filing of a voluntary or involuntary petition by or against the Lessee under any law for the purpose of adjudicating the Lessee a bankrupt; or for extending time for payment, adjustment, or satisfaction of the Lessee's liabilities; or for reorganization, dissolution, or arrangement on account of or to prevent bankruptcy or insolvency; unless the assignment or proceeding, and all consequent orders, adjudications, custodies and supervision are dismissed, vacated, or otherwise permanently stayed or terminated within thirty (30) days after the assignment, filing, or other initial event;

e) Enforcement Action or Noncompliance with State or Local Laws. Federal law enforcement action against Lessee or activities on the premises, non-compliance with Federal laws that do not directly pertain to the growth, storage, and sale of marijuana, noncompliance with any state or local statute, law, or ordinance, including but not limited to the state marijuana licensing and program rules and local zoning ordinances; and

f) Violation of Agreement. The failure to observe or perform any of the Lease Agreement's other covenants, agreements, or obligations hereunder, if any such

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default shall not be cured within thirty (30) days after notice of default has been given to the Lessee.

13. Remedies and Vacation/Surrender of the Premises. In the event of default the Lessor shall have the following remedies in addition to all other rights and remedies allowable at law or equity, to which the Lessor may resort cumulatively or in the alternative:

a) Relet. The Lessor shall have the right, at its election, during the period that the Lessee is in default, to enter the Premises and relet it, or any part of it, to any third party for the Lessee's account, and the Lessee shall remain liable under this Lease for all costs the Lessor incurs in reletting the Premises, including, but not limited to, brokers' commissions, demolition, remodeling, and similar costs. In the event the Lessor reenters and relets the Premises, the Lessee shall pay to the Lessor all rent due under this Lease, less the rent the Lessor receives from any such reletting.

b) Terminate. The Lessor shall have the right, at its election, during the period that Lessee is in default, to give the Lessee notice of the Lessor's intention to terminate this Lease and all of the Lessee's rights hereunder, and on the date specified in such notice, including early and/or immediate termination of the term of this Lease, and all rights granted the Lessee hereunder shall come to an end as fully as if the lease then expired by its own terms.

c) Retake. In the event of termination of this Lease, the Lessor shall have the right to repossess the Sublet Premises either with process of law or through any form of suit or proceeding, as well as the right to sue for and recover all rents and other sums accrued up to the time of such termination, and damages arising out of any breach on the part of the Lessee, including damages for rent not then accrued. The Lessor shall also have the right, without resuming possession of the Premises or terminating this Lease, to sue for and recover all rents and other sums, including damages at any time and from time to time.

Upon termination of this Lease, for default or otherwise (such as expiration of this Lease), Lessee shall vacate the Premises and surrender them to Landlord.

14. Assignment. The Lessee shall not voluntarily assign or encumber its interest in this lease or in the Premises, or sublease all or any part of the Premises, or allow any other person or entity (except the Lessee's authorized representatives) to occupy or use all or any part of the Premises, without first obtaining the Lessor's written consent. Any dissolution, merger, consolidation, or other reorganization of the Lessee, or the sale or other transfer of a controlling percentage of the capital stock of the Lessee, or the sale of at least fifty-one percent (51%) of the value of the assets of the Lessee, shall be deemed a voluntary assignment. "Controlling percentage" shall mean the ownership of and tie right to vote stock possession at least fifty-one percent (51%) of the total combined voting power of all classes of the Lessee's capital stock issued, outstanding, and entitled to vote for the election of directors. Any assignment, encumbrance, or sublease without the Lessor's written consent shall be voidable and, at the Lessor's election, shall

Em
JTB

constitute a default. No consent to any assignment, encumbrance, or sublease shall constitute a further waiver of the provisions of this Section 15.

15. Miscellaneous.

A. Severability. If any part or parts of this Lease shall be held unenforceable for any reason, the remainder of this Lease shall continue in full force and effect. If any provision of this Lease is deemed invalid or unenforceable by any court of competent jurisdiction, and if limiting such provision would make the provision valid, then such provision shall be deemed to be construed as so limited.

B. Binding Effect. The covenants and conditions contained in the Lease shall apply to and bind the parties and the heirs, legal representatives, successors and permitted assigns of the parties.

C. Governing Law. This Lease shall be governed by and construed in accordance with the laws of the State of Alaska.



D. Entire Agreement. This Lease constitutes the entire agreement between the Parties and supersedes any prior understanding or representation of any kind preceding the date of this Lease. There are no other promises, conditions, understandings or other agreements, whether oral or written, relating to the subject matter of this Lease. This Lease may be modified in writing and must be signed by both Landlord and Tenant.

E. Notice. Any notice required or otherwise given pursuant to this Lease shall be in writing and mailed certified return receipt requested, postage prepaid, or delivered by overnight delivery service, if to Lessee, at the Premises and if to Landlord, at the address for payment of Rent. Either party may change such addresses from time to time by providing notice as set forth above.

F. Waiver. The failure of either party to enforce any provisions of this Lease shall not be deemed a waiver or limitation of that party's right to subsequently enforce and compel strict compliance with every provision of this Lease. The acceptance of Rent by Landlord does not waive Landlord's right to enforce any provisions of this Lease.

G. Federal law. The parties mutually agree that federal illegality of cannabis operations on the premises is not a valid defense to any claim arising from this Lease Agreement. Thus, the parties waive the right to present any such defense related to the status of cannabis under federal law.

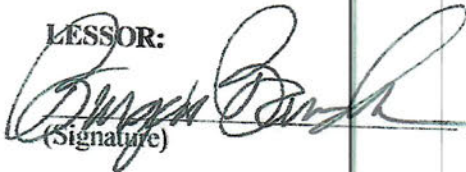
H. Personal Guarantee. For any Lessee that signs as a business entity, an individual personal guarantee shall be provided as additional security for the payment obligations under this Lease, unless expressly waived in writing by the Lessor.



MIM

I. Attorney Signature Required. This Lease shall only be effective with initials on EACH Page of the document, when signed by both Lessor and Lessee, personally guaranteed by each Lessee, and further accepted by the Attorney for Lessor.

IN WITNESS WHEREOF, the parties have caused this Lease to be executed the day and year first above written.

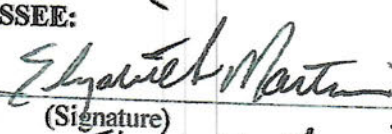
LESSOR:


(Signature)


Burgess Bauder

Member, Don't Frighten the Horses, LLC

LESSEE:


(Signature)

Elizabeth MARTIN
(Print Name)



Title
AKO Farms, Inc.

REQUIRED


Personal Guarantee:

I,  hereby personally guarantee all payment obligations under the terms of this lease agreement.

DATE: 4-29-25

I,  member of AKO Farms, Inc. hereby personally guarantee all payment obligations under the terms of this lease agreement.

DATE:

I,  member of AKO Farms, Inc. hereby personally guarantee all payment obligations under the terms of this lease agreement.

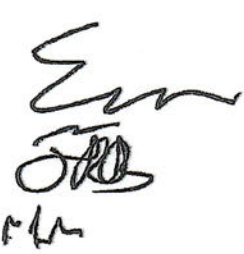
DATE: 4-29-25

REQUIRED:

Reviewed and Approved by Brita Speck, Attorney for Lessor:


Signature - Brita Speck

DATE: 5/1/25





Alaska Marijuana Control Board

Onsite Consumption Endorsement Form MJ-08a: Local Government Notice

Why is this form needed?

A local government notice is required for all onsite consumption endorsement applications with a proposed premises that is located within a local government, per 3 AAC 306.025(b)(3). After initiating an consumption endorsement application, an applicant must give notice of the application to the public by submitting a copy of the Public Notice to each local government and any community council in the area of the proposed licensed premises for which the endorsement is being applied. For an establishment located inside the boundaries of city that is within a borough, both the city and the borough must be notified. **The required notice must be completed within the 90 days immediately preceding the submittal of all application documents and fees.**

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575		
License Type:	RETAIL / ON SITE CONSUMPTION				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	AK	ZIP:	99835

Section 2 – Certification

I certify that I have met the local government notice requirement set forth under 3 AAC 306.025(b)(3) by submitting a copy of my onsite consumption endorsement application to the following local government (LG) official(s) and community council (if applicable):

Local Government(s): City and Borough of Sitka Date Submitted: 5-13-2025

Name/Title of LG Official 1: Sara Peterson Name/Title of LG Official 2: _____
Municipal Clerk

Community Council: _____ Date Submitted: _____
(Municipality of Anchorage and Matanuska-Susitna Borough only)

You must be able to certify the statement below. Read the following and then sign your initials in the box to the right:

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.

Initials

EM

ELIZABETH MARTIN

Printed name of licensee

Elizabeth Martin
Signature of licensee



Alaska Marijuana Control Board

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
		Zip Code:	99835
Designated Licensee:	ELIZABETH MARTIN		
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	
-----------------	--

OFFICE USE ONLY

Received Date:		Payment Submitted Y/N:		Transaction #:	
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Alaska Marijuana Control Board

Form MJ-00: Application Certifications

Why is this form needed?

This application certifications form is required for all marijuana establishment license applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306.

This form must be completed and submitted to AMCO's Anchorage office by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) before any license application will be considered complete.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575		
License Type:	RETAIL- ONSITE CONSUMPTION				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	AK	ZIP:	99835

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	ELIZABETH MARTIN
Title:	OWNER

Section 3 – Other Licenses

Ownership and financial interest in other licenses:

Yes No

Do you currently have or plan to have an ownership interest in, or a direct or indirect financial interest in another marijuana establishment license?



If "Yes", which license numbers (for existing licenses) and license types do you own or plan to own?

4A 12253
4A 26162
5B 16767
3A 19898



Alaska Marijuana Control Board

Form MJ-00: Application Certifications

Section 4 – Certifications

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

Initials

I certify that I have not been convicted of a felony in any state or the United States, including a suspended imposition of sentence, for which less than five years have elapsed from the time of the conviction to the date of this application.

EM

I certify that I am not currently on felony probation or felony parole.

EM

I certify that I have not been found guilty of selling alcohol without a license in violation of AS 04.11.010.

EM

I certify that I have not been found guilty of selling alcohol to an individual under 21 years of age in violation of 04.16.051 or AS 04.16.052.

EM

I certify that I have not been convicted of a misdemeanor crime involving a controlled substance, violence against a person, use of a weapon, or dishonesty within the five years preceding this application.

EM

I certify that I have not been convicted of a class A misdemeanor relating to selling, furnishing, or distributing marijuana or operating an establishment where marijuana is consumed within the two years preceding this application.

EM

I certify that my proposed premises is not within 500 feet of a school ground, recreation or youth center, a building in which religious services are regularly conducted, or a correctional facility, as set forth in 3 AAC 306.010(a).

EM

I certify that my proposed premises is not located in a liquor licensed premises.

EM

I certify that I meet the residency requirement under AS 43.23 for a permanent fund dividend in the calendar year in which I am initiating this application.

EM

I certify that all proposed licensees (as defined in 3 AAC 306.020(b)(2)) have been listed on my online marijuana establishment license application. Additionally, if applicable, all proposed licensees have been listed on my application with the Division of Corporations.

EM

I certify that I understand that providing a false statement on this form, the online application, or any other form provided by AMCO is grounds for denial of my application.

EM



Alcohol and Marijuana Control Office

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Anchorage, AK 99501

marijuana.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-00: Application Certifications

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

Initials

I certify and understand that I must operate in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.

EM

I certify and understand that I must operate in compliance with each applicable public health, fire, safety, and tax code and ordinance of this state and the local government in which my premises is located.

EM

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

Initials

Only initial next to the following statement if this form is accompanying an application for a marijuana testing facility license:

I certify that I do not have an ownership in, or a direct or indirect financial interest in a retail marijuana store, a marijuana cultivation facility, or a marijuana products manufacturing facility.

☐

Only initial next to the following statement if this form is accompanying an application for a retail marijuana store, a marijuana cultivation facility, or a marijuana products manufacturing facility license:

I certify that I do not have an ownership in, or a direct or indirect financial interest in a marijuana testing facility license.

EM

All marijuana establishment license applicants:

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.

EM

ELIZABETH MARTIN

Printed name of licensee

Elizabeth Martin

Signature of licensee



Alaska Marijuana Control Board

Form MJ-00: Application Certifications

Why is this form needed?

This application certifications form is required for all marijuana establishment license applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306.

This form must be completed and submitted to AMCO's Anchorage office by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) before any license application will be considered complete.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575		
License Type:	RETAIL- ONSITE CONSUMPTION				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	AK	ZIP:	99835

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	MARTY MARTIN
Title:	OWNER

Section 3 – Other Licenses

Ownership and financial interest in other licenses:

Yes No

Do you currently have or plan to have an ownership interest in, or a direct or indirect financial interest in another marijuana establishment license?

☒ ☐

If "Yes", which license numbers (for existing licenses) and license types do you own or plan to own?

4A 12253
4A 26162
5B 16767
3A 19898



Alaska Marijuana Control Board

Form MJ-00: Application Certifications

Section 4 – Certifications

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

Initials

I certify that I have not been convicted of a felony in any state or the United States, including a suspended imposition of sentence, for which less than five years have elapsed from the time of the conviction to the date of this application.

MM

I certify that I am not currently on felony probation or felony parole.

MM

I certify that I have not been found guilty of selling alcohol without a license in violation of AS 04.11.010.

MM

I certify that I have not been found guilty of selling alcohol to an individual under 21 years of age in violation of 04.16.051 or AS 04.16.052.

MM

I certify that I have not been convicted of a misdemeanor crime involving a controlled substance, violence against a person, use of a weapon, or dishonesty within the five years preceding this application.

MM

I certify that I have not been convicted of a class A misdemeanor relating to selling, furnishing, or distributing marijuana or operating an establishment where marijuana is consumed within the two years preceding this application.

MM

I certify that my proposed premises is not within 500 feet of a school ground, recreation or youth center, a building in which religious services are regularly conducted, or a correctional facility, as set forth in 3 AAC 306.010(a).

MM

I certify that my proposed premises is not located in a liquor licensed premises.

MM

I certify that I meet the residency requirement under AS 43.23 for a permanent fund dividend in the calendar year in which I am initiating this application.

MM

I certify that all proposed licensees (as defined in 3 AAC 306.020(b)(2)) have been listed on my online marijuana establishment license application. Additionally, if applicable, all proposed licensees have been listed on my application with the Division of Corporations.

MM

I certify that I understand that providing a false statement on this form, the online application, or any other form provided by AMCO is grounds for denial of my application.

MM



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Alaska Marijuana Control Board

Form MJ-00: Application Certifications

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

Initials

I certify and understand that I must operate in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.

MM

I certify and understand that I must operate in compliance with each applicable public health, fire, safety, and tax code and ordinance of this state and the local government in which my premises is located.

MM

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

Initials

Only initial next to the following statement if this form is accompanying an application for a marijuana testing facility license:

I certify that I do not have an ownership in, or a direct or indirect financial interest in a retail marijuana store, a marijuana cultivation facility, or a marijuana products manufacturing facility.

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I certify that I do not have an ownership in, or a direct or indirect financial interest in a marijuana testing facility license.

MM

All marijuana establishment license applicants:

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.

MM

MARTY MARTIN

Printed name of licensee

Signature of licensee



Alaska Marijuana Control Board

Form MJ-00: Application Certifications

Why is this form needed?

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Licensee:	AKO FARMS LLC	License Number:	39575		
License Type:	RETAIL- ONSITE CONSUMPTION				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	AK	ZIP:	99835

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	JUSTIN BROWN
Title:	OWNER

Section 3 – Other Licenses

Ownership and financial interest in other licenses:

Yes No

Do you currently have or plan to have an ownership interest in, or a direct or indirect financial interest in another marijuana establishment license?

☒ ☐

If "Yes", which license numbers (for existing licenses) and license types do you own or plan to own?

4A 12253
4A 26162
5B 16767
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Alaska Marijuana Control Board

Form MJ-00: Application Certifications

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I certify that I do not have an ownership in, or a direct or indirect financial interest in a retail marijuana store, a marijuana cultivation facility, or a marijuana products manufacturing facility.

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JB

JUSTIN BROWN

Printed name of licensee


Signature of licensee



Alaska Marijuana Control Board

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Cover Sheet for Marijuana Establishment Applications

What is this form?

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Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	
-----------------	--

OFFICE USE ONLY

Received Date:	Payment Submitted Y/N:	Transaction #:
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Alaska Marijuana Control Board

Form MJ-01: Marijuana Establishment Operating Plan

Why is this form needed?

An operating plan is required for all marijuana establishment license applications. Applicants should review **Title 17.38** of **Alaska Statutes** and **Chapter 306** of the **Alaska Administrative Code**. This form will be used to document how an applicant intends to meet the requirements of those statutes and regulations. If your business has a formal operating plan, you may include a copy of that operating plan with your application, but all fields of this form must still be completed per 3 AAC 306.020(c).

What must be covered in an operating plan?

Applicants must identify how the proposed premises will comply with applicable statutes and regulations regarding the following:

- Control plan for persons under the age of 21
- Security
- Business records
- Inventory tracking of all marijuana and marijuana product on the premises
- Employee qualification and training
- Health and safety standards
- Transportation and delivery of marijuana and marijuana products
- Signage and advertising

Applicants must also complete the corresponding operating plan supplemental forms (**Form MJ-03**, **Form MJ-04**, **Form MJ-05**, or **Form MJ-06**) to meet the additional operating plan requirements for each license type.

Section 1 – Establishment & Contact Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	MJ License #:	39575		
License Type:	RETAIL-ONSITE CONSUMPTION				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	Alaska	ZIP:	99835
Mailing Address:	P O BOX 2426				
City:	SITKA	State:	Alaska	ZIP:	99835
Designated Licensee:	ELIZABETH MARTIN				
Main Phone:	907-623-0417	Cell Phone:	907-738-3484		
Email:	LIZA@AKOFARMS.COM				



Form MJ-01: Marijuana Establishment Operating Plan

Section 2 – Control Plan for Persons Under the Age of 21

2.1. Describe how the marijuana establishment will prevent persons under the age of 21 from gaining access to any portion of the licensed premises and marijuana items:

There will be a sign 12' x 12' posted by the entrance stating NO ONE UNDER THE AGE OF 21 ALLOWED. The same sign will be posted inside the building. security cameras will be in place. valid issued government id will be checked by the budtender as customers enter the front door of the retail store.

Section 3 – Security

Restricted Access Areas (3 AAC 306.710):

3.1. Describe how you will prevent unescorted members of the public from entering restricted access areas:

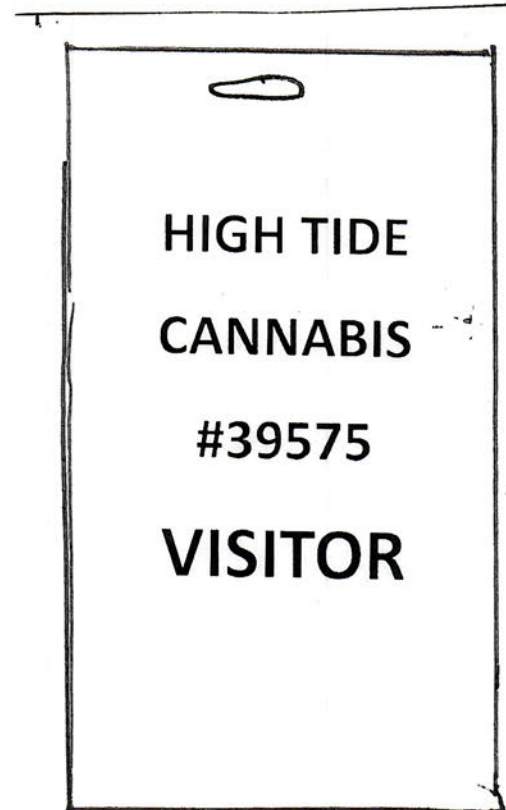
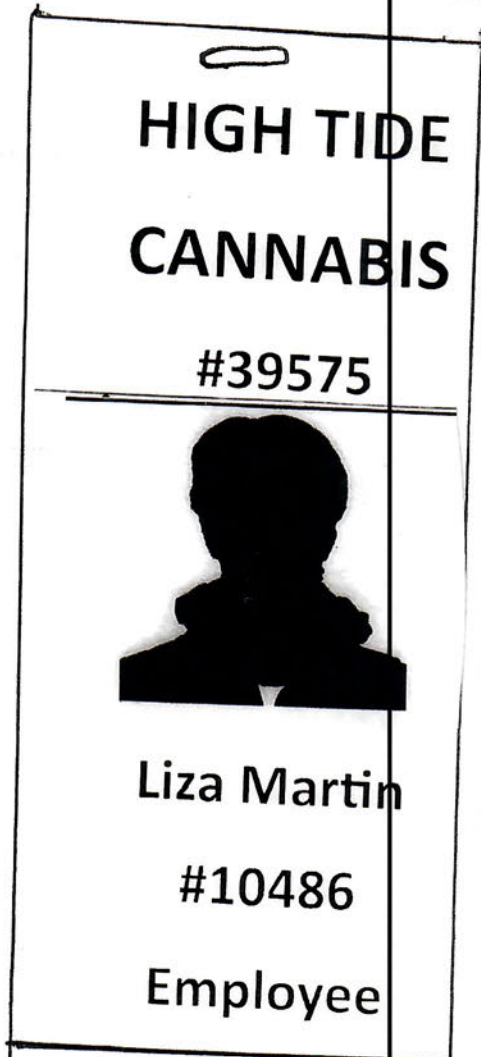
All entrances inside and out will be commercial grade security doors. All visitors will be signed in and out and given a visitor badge while on premise. All restricted areas will be marked with a sign that reads RESTRICTED ACCESS AREA VISITORS MUST BE ESCORTED. Also a sign that reads NO ONE UNDER THE AGE OF 21 ALLOWED.

3.2. Describe your recordkeeping and processes for admitting visitors into and escorting them through restricted access areas:

After visitors ids are checked, they will sign into a log book with date, arrival/departure time, and type of identification. They will be given a visitors badge to wear. They will be escorted through out the facility with an employee. There can only be 5 visitors in the building at one time. They must be escorted by an employee . On leaving they will sign out of the log book and give back there visitors badge .. All records will be stored in a locked proof cabinet in a restricted area. Surveillance video will be on at all times.

Form MJ-01: Marijuana Establishment Operating Plan

3.3. Provide samples of licensee-produced identification badges that will be displayed by each licensee, employee, or agent while on the premises, and of visitor identification badges that will be worn by all visitors while in restricted access areas:



Security Alarm Systems and Lock Standards (3 AAC 306.715):

3.4. Exterior lighting is required to facilitate surveillance. Describe how the exterior lighting will meet this requirement:

By local building codes, all exits and entrances will have lighting. There will be lighting over all windows and doors. Lights and cameras will be placed a minimum of 8 feet from the ground on the exterior of the building and will pick up to 20 feet perimeter.

**Form MJ-01: Marijuana Establishment Operating Plan**

3.5. An alarm system is required for all license types that must be activated on all exterior doors and windows when the licensed premises is closed for business. Describe the security alarm system for the proposed premises, explain how it will meet all regulatory requirements, and outline your policies and procedures regarding the actions to be taken by a licensee, employee, or agent when the alarm system alerts of an unauthorized breach:

At the end of the business day the alarm system will be activated by a keypad in the office area which will be monitored by a licensed alarm company. The alarms are set when the last employee leaves for the day. There will be a key pad for the alarm in the office. There are motion sensors on all windows and doors. We have several panic buttons in place if needed. If the alarm company receives an unauthorized breach of security, the alarm company will notify the local law enforcement, owner, and owner representative. Who will then come to the facility. MCB will be notified within 24 hours. All product will be inventoried to MCB and local authorities. A quality control review of security measures will be conducted and proper steps to correct any deficiencies in the security plan will be made.

3.6. Describe your policies and procedures for preventing diversion of marijuana or marijuana product, including by employees:

Marijuana will be stored in a water and fire proof safe in a locked office, located in a restricted area. Diversion of marijuana will also be prevented with use of continuous video monitoring, located throughout the facility. All personal items (bags, purses, phones, and coats) will be kept in the employee locker room. all employees will work under management with constant supervision.

3.7. Describe your policies and procedures for preventing loitering:

This facility sits by itself on a private open lot, any loiters will be recorded on surveillance cameras, that will have a 20 foot range of the building. There will be a 12" by 12" NO LOITERING sign along with RESTRICTED AREA NO ACCESS and NO ONE UNDER 21 ALLOWED signs, placed on all sides of the building. Anyone refuses to leave the premises will be escorted off by law enforcement.

You must be able to certify the statement below. Read the following and then sign your initials in the box to the right:

Initials

3.8. I certify that if any additional security devices are used, such as a motion detector, pressure switch, and duress, panic, or hold-up alarm, to enhance security of the licensed premises, I will have written policies and procedures describing their use.

EM

**Form MJ-01: Marijuana Establishment Operating Plan****Video Surveillance (3 AAC 306.720):**

You must be able to certify each statement below. Read the following and then sign your initials in the corresponding box: Initials

3.9. The video surveillance and camera recording system for the licensed premises covers each restricted access area, and both the interior and exterior of each entrance to the facility.

EM

3.10. Each video surveillance recording: is preserved for a minimum of 40 days, in a format that can be easily accessed for viewing (consistent with the Alcohol & Marijuana Control Office's approved format list); clearly and accurately displays the time and date; and is archived in a format that does not permit alteration of the recorded image.

EM

3.11. The surveillance room or area is clearly defined on the Form MJ-02: Premises Diagram that is submitted with this application.

EM

3.12. Surveillance recording equipment and video surveillance records are housed in a designated, locked, and secure area or in a lock box, cabinet, closet or other secure area where access is limited to the licensee(s), an authorized employee, and law enforcement personnel (including an agent of the Marijuana Control Board).

EM

3.13. Describe how the video cameras will be placed to produce a clear view adequate to identify any individual inside the licensed premises, or within 20 feet of each entrance to the licensed premises:

There will be exterior video cameras placed over the entrance which will provide a clear 20 foot view of the perimeter. There will be interior cameras facing the entrance and exit which will capture every individual entering and exiting the facility. Cameras will be placed in the interior facing restricted areas.

3.14. Describe the locked and secure area where video surveillance recording equipment and original copies of surveillance records will be housed and stored, and how you will ensure the area is accessible only to authorized personnel, law enforcement, or an agent of the Marijuana Control Board. If you will be using an offsite monitoring service and offsite storage of video surveillance records, your response must include how the offsite facility will meet these security requirements:

All video surveillance recording equipment will be housed in a locked safe cabinet. A surveillance camera will be placed to record the cabinet. Video surveillance tapes will be stored for 90 days, authorized personal will have the key to the locked safe cabinet which will be in the restricted office area. Any law enforcement or agent of the board will have access to the key from the authorized personal. We use LJ Alarm Company in Juneau, Alaska. If the alarm goes off the alarm company calls the Sitka Police Dept and the building representative. The alarm is set when closing the building up for the day.



Form MJ-01: Marijuana Establishment Operating Plan

Section 4 – Business Records

Review the requirements under 3 AAC 306.755. All licensed marijuana establishments must maintain, in a format that is readily understood by a reasonably prudent business person, certain business records.

4.1. I certify that the following business records will be maintained and kept on the licensed premises:

Initials

- a. all books and records necessary to fully account for each business transaction conducted under my license for the current year and three preceding calendar years (records for the last six months must be maintained on the licensed premises; older records may be archived on or off-premises); EM
- b. a current employee list setting out the full name and marijuana handler permit number of each licensee, employee, and agent who works at the marijuana establishment; EM
- c. the business contact information for vendors that maintain video surveillance systems and security alarm systems for the licensed premises; EM
- d. records related to advertising and marketing; EM
- e. a current diagram of the licensed premises, including each restricted access area; EM
- f. a log recording the name, and date and time of entry of each visitor permitted into a restricted access area; EM
- g. all records normally retained for tax purposes; EM
- h. accurate and comprehensive inventory tracking records that account for all marijuana inventory activity from seed or immature plant stage until the retail marijuana or retail marijuana product is sold to a consumer, to another marijuana establishment, or destroyed; EM
- i. transportation records for marijuana and marijuana product, as required by 3 AAC 306.750(f); and EM
- j. registration and inspection reports of scales registered under the Weights and Measures Act, as required by 3 AAC 306.745. EM

4.2. A marijuana establishment is required to exercise due diligence in preserving and maintaining all required records. Describe how you will prevent records and data, including electronically maintained records, from being lost or destroyed:

Records including inventory, testing results, quality control and quality assurance, accurate and comprehensive inventory tracking data, bookkeeping for each business transaction, employee list, business and vendor contacts, advertising marketing, diagrams of licensed premises, waste management and visitors logs. Current records will be stored for 6 months in a locked cabinet on premise for authorized personnel to view. The records and data will then be electronically recorded and stored in a water/fire proof safe up to 4 years.

**Form MJ-01: Marijuana Establishment Operating Plan****Section 5 – Inventory Tracking of All Marijuana and Marijuana Product**

Review the requirements under 3 AAC 306.740. All licensed marijuana establishments must use a marijuana inventory tracking system capable of sharing information with Metrc to ensure all marijuana cultivated and sold in the state, and each marijuana product processed and sold in the state, is identified and tracked from the time the marijuana is propagated from seed or cutting, through transfer to another licensed marijuana establishment, or use in manufacturing a marijuana product, to a completed sale of marijuana or marijuana product, or disposal of the harvest batch of marijuana or production lot of marijuana product.

You must be able to certify each statement below. Read the following and then sign your initials in the corresponding box: Initials

5.1. My marijuana establishment will be using Metrc, and if any other tracking software is used, it will be capable of sharing information with Metrc.

EM

5.2. All marijuana delivered to a marijuana establishment will be weighed on a scale registered in compliance with 3 AAC 306.745.

EM

5.3. My marijuana establishment will use registered scales in compliance with AS 45.75.080 (Weights and Measures Act), as required by 3 AAC 306.745.

EM

Section 6 – Employee Qualification and Training

Review the requirements under 3 AAC 306.700. All licensees, and every employee or agent of the marijuana establishment who sells, cultivates, manufactures, tests, or transports marijuana or a marijuana product, or who checks the identification of a consumer or visitor, must obtain a marijuana handler permit from the board before being licensed or beginning employment at a marijuana establishment.

You must be able to certify each statement below. Read the following and then sign your initials in the corresponding box: Initials

6.1. All licensees, and each employee or agent of the marijuana establishment who sells, cultivates, manufactures, tests, or transports marijuana or marijuana product, or who checks the identification of a consumer or visitor, shall obtain a marijuana handler permit from the board before being licensed or beginning employment at the marijuana establishment.

EM

6.2. Each licensee, employee, or agent who is required to have a marijuana handler permit shall keep that person's marijuana handler permit card in that person's immediate possession (or a valid copy on file on the licensed premises) when on the licensed premises.

EM

6.3. Each licensee, employee, or agent who is required to have a marijuana handler permit shall ensure that that person's marijuana handler permit card is valid and has not expired.

EM

6.4. Describe any in-house training that will be provided to employees and agents (apart from a marijuana handler course):

Apart from the States Marijuana course, all employees are trained to handle product produced by AKO FARMS LLC. Each employee has training on any equipment we may use. Employee Product Training will be an on going process, along with updates on State requirements.

**Form MJ-01: Marijuana Establishment Operating Plan****Section 7 – Health and Safety Standards**

Review the requirements under 3 AAC 306.735.

You must be able to certify each statement below. Read the following and then sign your initials in the corresponding box: Initials

- 7.1. I understand that a marijuana establishment is subject to inspection by the local fire department, building inspector, or code enforcement officer to confirm that health or safety concerns are not present. EM
- 7.2. I have policies regarding health and safety standards (including: ensuring a person with an illness or infection does not come into contact with marijuana or marijuana product; good hygienic practices; cleaning and maintenance of equipment and the premises; pest deterrence; chemical storage; sanitation principles; and proper handling of marijuana and marijuana product) and will take all reasonable measures and precautions to ensure that they are met or exceeded. EM
- 7.3. I have policies to ensure that any marijuana or marijuana product that has been stored beyond its usable life, or was stored improperly, is not salvaged and returned to the marketplace. EM
- 7.4. I have policies to ensure that in the event information about the age or storage conditions of marijuana or marijuana product is unreliable, the marijuana or marijuana product will be handled in accordance with 3 AAC 306.735(d). EM

Answer "Yes" or "No" to each of the following questions:

Yes No

7.5. Adequate and readily accessible toilet facilities that are maintained and in good repair and sanitary condition are clearly indicated on my Form MJ-02: Premises Diagram. ☒ ☐

7.6. Convenient handwashing facilities with running water at a suitable temperature are clearly indicated on my Form MJ-02: Premises Diagram. ☒ ☐

7.7. If you answered "No" to either 7.5 or 7.6 above, describe how toilet and/or handwashing facilities are made accessible, as required by 3 AAC 306.735(b)(2):

N/A

Section 8 – Transportation and Delivery of Marijuana and Marijuana Products

Review the requirements under 3 AAC 306.750.

8.1. Describe how marijuana or marijuana product will be prepared, packaged, and secured for shipment. Include a description of the type of locked, safe, and secure storage compartments to be used in vehicles transporting marijuana or marijuana product:

Any marijuana sold will be packaged in opaque, resealable, child-resistant packaging. Each package will be identified by a tracking label generated for tracking by the retailer's own inventory tracking system. The label will be placed on the shipping container. A transport manifest will remain with the marijuana at all times while being transported. A copy of the manifest will be given to the licensed marijuana establishment. Packages will be within a sealed, tamper-evident shipping container. We have read and understood the requirements set out in AAC 306.750



Form MJ-01: Marijuana Establishment Operating Plan

You must be able to certify each statement below. Read the following and then sign your initials in the corresponding box: Initials

- 8.2. The marijuana establishment from which a shipment of marijuana or marijuana product originates will ensure that any individual transporting marijuana shall have a marijuana handler permit required under 3 AAC 306.700. EM
- 8.3. The marijuana establishment that originates the transport of any marijuana or marijuana product will use the marijuana inventory tracking system to record the type, amount, and weight of marijuana or marijuana product being transported, the name of the transporter, the time of departure and expected delivery, and the make, model, and license plate number of the transporting vehicle. EM
- 8.4. The marijuana establishment that originates the transport of any marijuana or marijuana product will ensure that a complete printed transport manifest on a form prescribed by the board must be kept with the marijuana or marijuana product at all times during transport. EM
- 8.5. During transport, any marijuana or marijuana product will be in a sealed package or container in a locked, safe, and secure storage compartment in the vehicle transporting the marijuana or marijuana product, and the sealed package will not be opened during transport. EM
- 8.6. Any vehicle transporting marijuana or marijuana product will travel directly from the shipping marijuana establishment to the receiving marijuana establishment, and will not make any unnecessary stops in between except to deliver or pick up marijuana or marijuana product at any other licensed marijuana establishment. EM
- 8.7. When the marijuana establishment receives marijuana or marijuana product from another licensed marijuana establishment, the recipient of the shipment will use the marijuana inventory tracking system to report the type, amount, and weight of marijuana or marijuana product received. EM
- 8.8. The marijuana establishment will refuse to accept any shipment of marijuana or marijuana product that is not accompanied by the transport manifest. EM

Section 9 – Signage and Advertising

Review the requirements under 3 AAC 306.770.

9.1. Describe any signs that you intend to post on your establishment, including quantity, dimensions, graphics, and location on your establishment (photos or drawings may be attached):

There will be one sign no bigger than 4,800 inches. on the front of the building reading HIGH TIDE CANNABIS. There will be a 12x12 NO ONE UNDER 21 ALLOWED put on the front of the building. along with ALL VISITORS MUST BE ESCORTED

Form MJ-01: Marijuana Establishment Operating Plan

9.2. Describe any advertising you intend to distribute for your establishment. Include medium types and business logos (photos or drawings may be attached):



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.

EM

ELIZABETH MARTIN

Printed name of licensee

Elizabeth Martin
Signature of licensee



Alaska Marijuana Control Board

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	MjOZ w/ Retail and onsite Consumption
-----------------	---------------------------------------

OFFICE USE ONLY

Received Date:		Payment Submitted Y/N:		Transaction #:	
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Alaska Marijuana Control Board Form MJ-02: Premises Diagram

Why is this form needed?

A detailed diagram of the proposed licensed premises is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(8). **All areas designated as the licensed premises of a single license must be contiguous. All diagrams must have the licensed premises area labeled, and outlined or shaded as appropriate.**

What must be submitted with this form?

Applicants must attach multiple diagrams to this form, including (as applicable):

- **Diagram 1:**
A diagram showing only the licensed premises areas that will be ready to be **operational at the time of your preliminary inspection** and license issuance;
- **Diagram 2:**
If different than Diagram 1, a diagram outlining **all areas for which the licensee has legal right of possession** (a valid lease or deed), and clearly showing those areas' relationship to the current proposed licensed premises (*details of any planned expansion areas do not need to be included; a complete copy of Form MJ-14: Licensed Premises Diagram Change or Form MJ-31: Walk-Up or Drive-Through Exterior Window Pick-Up Diagram and Operating Plan must be submitted and approved before any planned expansion area may be added to the licensed premises*);
- **Diagram 3:**
A **site plan or as-built of the entire lot**, showing all structures on the property and clearly indicating which area(s) will be part of the licensed premises;
- **Diagram 4:**
An **aerial photo of the entire lot and surrounding lots**, showing a view of the entire property and surrounding properties, and clearly indicating which area(s) will be part of the licensed premises (*this can be obtained from sources like Google Earth*); and
- **Diagram 5:**
A diagram of the **entire building in which the licensed premises is located**, clearly distinguishing the licensed premises from unlicensed areas and/or premises of other licenses within the building. If your proposed licensed premises is located within a building or building complex that contains multiple business and/or tenants, please provide the addresses and/or suite numbers of the other businesses and/or tenants (*a separate diagram is not required for an establishment that is designating the entire building as a single licensed premises*).

This form, and all necessary diagrams that meet the requirements on Page 2 of this form, must be completed and submitted to AMCO's Anchorage office before any new or transfer license application will be considered complete.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	MJ License #:	39575
License Type:	RETAIL-ONSITE CONSUMPTION		
Doing Business As:	HIGH TIDE CANNABIS		
Premises Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	Alaska
		ZIP:	99835



Alaska Marijuana Control Board

Form MJ-02: Premises Diagram

Section 2 – Required Information

For your security, do not include locations of security cameras, motion detectors, panic buttons, and other security devices. However, AMCO will require full coverage of the walk-up or drive-through exterior window area as required by 3 AAC 306.380(b) and (g) for marijuana retail establishments. Items marked with a double asterisks (**) are only required for those retail marijuana establishments that are also applying for an onsite consumption endorsement.

The following details must be included in all diagrams:

- ☒ License number and DBA
- ☒ Legend or key
- ☒ Color coding
- ☒ Licensed Premises Area Labeled and Shaded, or Outlined as appropriate
- ☒ Dimensions
- ☒ Labels
- ☒ True north arrow

The following additional details must be included in Diagram 1:

- ☒ Surveillance room
- ☒ Restricted access areas
- ☒ Storage areas
- ☒ Entrances, exits, and windows, including walk-up or drive-through exterior window for marijuana retail establishments
- ☒ Walls, partitions, and counters
- ☒ Any other areas that must be labeled for specific license or endorsement types
- ☒ ** Serving area(s)
- ☒ ** Employee monitoring area(s)
- ☐ ** Ventilation exhaust points, if applicable

The following additional details must be included in Diagram 2:

- ☒ Areas of ingress and egress
- ☒ Entrances and exits
- ☒ Walls and partitions

The following additional details must be included in Diagrams 3 and 4:

- ☒ Areas of ingress and egress
- ☒ Cross streets and points of reference

The following additional details must be included in Diagram 5:

- ☒ Areas of ingress and egress
- ☒ Entrances and exits
- ☒ Walls and partitions
- ☒ Cross streets and points of reference

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.

Initial:

EM

Elizabeth Martin

Printed name of licensee

Elizabeth Martin

Signature of licensee

PROPERTY LINE

44'

3A-39575
AKO FARMS LLC
DBA HIGH TIDE CANNABIS

FENCE



ONSITE
CONSUMPTION

LICENSED PREMISES
SURVEILLANCE ROOM
RESTRICTED ACCESS AREA
STORAGE AREA
ENTRANCE, EXIT, WINDOW
WALLS AND PARTITIONS

GAZEBO

FENCE

FENCE

GAZEBO

ONSITE
CONSUMPTION

GRAVEL
SIDEWALK

GRAVEL

PROPERTY LINE

PROPERTY LINE

120'

EMPLOYEE
MONITORS

CONCRETE
SIDEWALK

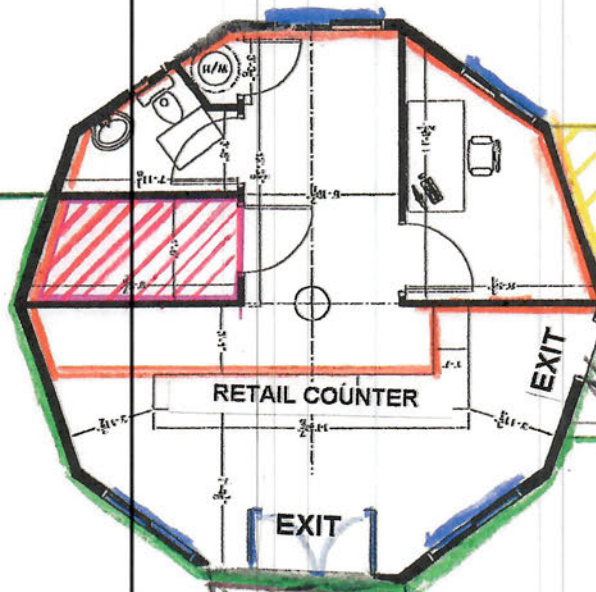
ONSITE DOOR

RETAIL COUNTER

EXIT

EXIT

ENTRY DOOR





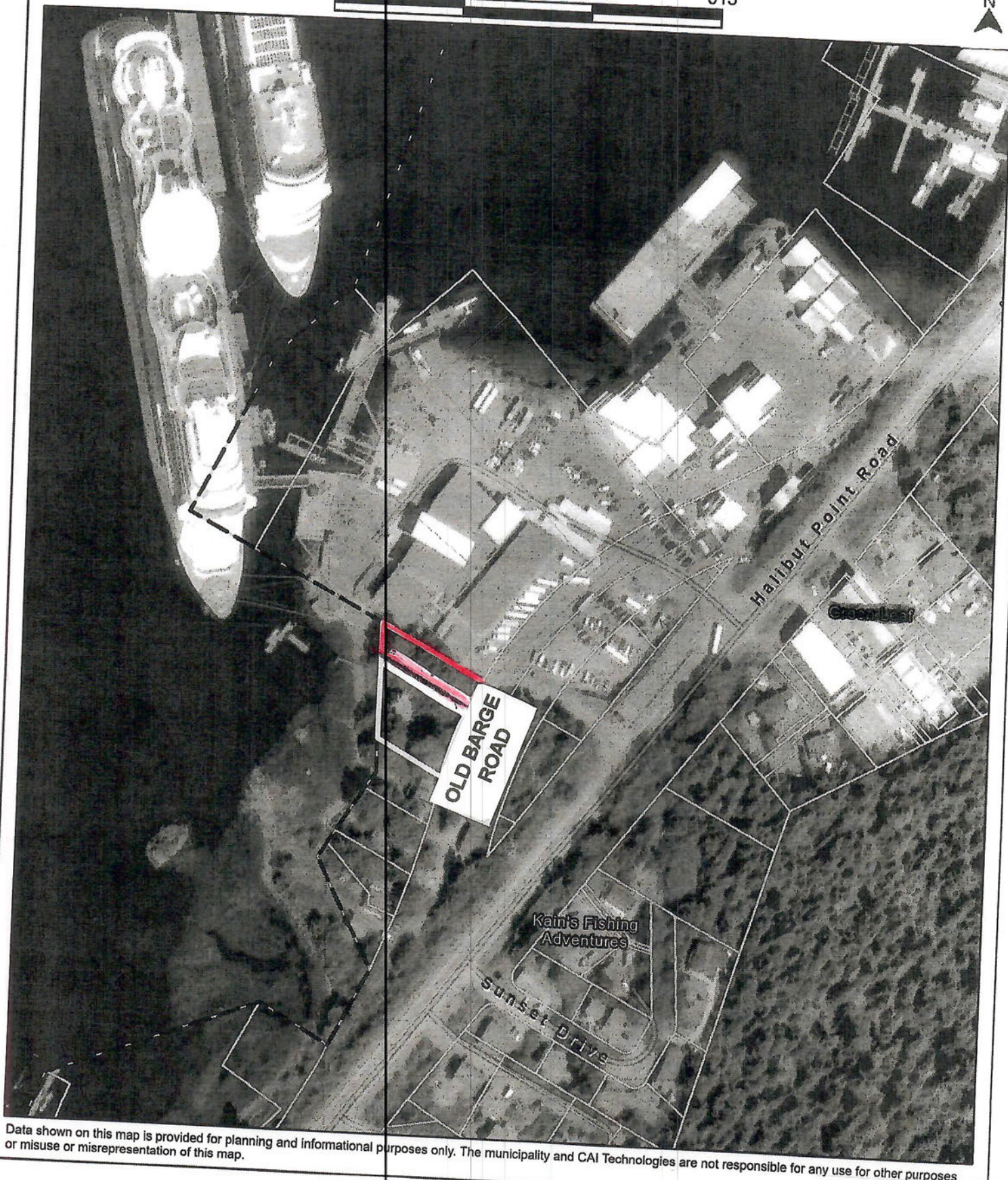
City & Borough of Sitka, AK

1 inch = 205 Feet

January 9, 2025

0 205 410 615

3A-39575
AKO FARMS LLC
DBA HIGH TIDE CANNABIS



Data shown on this map is provided for planning and informational purposes only. The municipality and CAI Technologies are not responsible for any use for other purposes or misuse or misrepresentation of this map.

3A-39575
AKO FARMS LLC
DBA HIGH TIDE CANNABIS



High Tide Cannabis
on site consumption
120'
92'

ENTRANCE

4509

OLD BARGE
ROAD

4507

4505

HALIBUT POINT ROAD

3A-39575
AKO FARMS LLC
DBA HIGH TIDE CANNABIS



OLD BARGE
ROAD

Halibut Point Road

Sunset Drive

Clothilde Banover Way

Horizon Way

Halibut Point Road



Alaska Marijuana Control Board

Cover Sheet for Marijuana Establishment Applications

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

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Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	Mj 03
-----------------	-------

OFFICE USE ONLY

Received Date:	Payment Submitted Y/N:	Transaction #:
----------------	------------------------	----------------



Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Marijuana Control Board Operating Plan Supplemental Form MJ-03: Retail Marijuana Store

Why is this form needed?

This operating plan supplemental form is required for all applicants seeking a retail marijuana store license and must accompany **Form MJ-01: Marijuana Establishment Operating Plan**, per 3 AAC 306.020(b)(11). Applicants should review **Chapter 306: Article 3** of the **Alaska Administrative Code**. This form will be used to document how an applicant intends to meet the requirements of the statutes and regulations.

If your business has a formal operating plan, you may include a copy of that operating plan with your application, but all fields of this form must still be completed per 3 AAC 306.020 and 3 AAC 306.315(2).

What additional information is required for retail stores?

Applicants must identify how the proposed establishment will comply with applicable regulations regarding the following:

- Prohibitions
- Signage and advertising
- Displays and sales
- Exit packaging and labeling
- Security
- Waste disposal
- Walk-up or drive-through exterior window pick-up service

This form must be completed and submitted to AMCO's Anchorage office before any new or transfer application for a retail marijuana store license will be considered complete.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	MJ License #:	39575
License Type:	RETAIL		
Doing Business As:	HIGH TIDE CANNABIS		

Section 2 – Overview of Operations

2.1. Provide an overview of your proposed facility's operations. Include information regarding the intake and flow of marijuana and marijuana product at your premises, and a description of what a standard customer visit to your establishment would entail:

All products brought into the store will be processed in a restricted area. Manifest will be signed, and product will be recorded into Metric. Once brought in, all products will be labeled according to the AMCO regulations. When a customer enters the store, their ID will be checked immediately. They will purchase product that has been labeled correctly. The budtender will then put the product into a bag for the customer to exit the store.

**Form MJ-03: Retail Marijuana Store Operating Plan Supplemental****Section 3 – Exterior Window Service Operating Plan**

3.1. Describe how you will comply with the requirements set forth in 3 AAC 306.380 and 3 AAC 306.715. Your response must include include policies and procedures regarding video surveillance, ID verification, display of marijuana or marijuana products, security features including alarm systems and locks, measures to prevent consumers from unlawfully accessing marijuana and funds through the exterior window and licensee control of the area outside of the exterior window.

N/A

Read each statement below, and then sign your initials in the corresponding box to the right [if applicable]:

Initials

I have included a title, lease or other documentation showing sole right of possession to the additional area(s), including the exterior window area, if the additional area(s) are not already part of my approved licensed premises.

I certify the area immediately outside the walk-up or drive-through exterior window does not include any public property including public streets, public sidewalks, or public parking lots.

I certify I have read, understood and will comply with all requirements set forth in 3 AAC 306.380, 3 AAC 306.715 and 3 AAC 306.720.

Section 4 – Prohibitions

Review the requirements under 3 AAC 306.310.

4.1. Describe how you will ensure that the retail marijuana store will not sell, give, distribute, or deliver marijuana or marijuana product to a person who is under the influence of an alcoholic beverage, inhalant, or controlled substance:

Employees will receive additional training to recognize persons under the influence of alcohol or drugs. Signs will be posted on the premises reserving the right to refuse service to persons who are under the influence of alcohol or drugs. When a customer enters the store the budtender will ask for proper identification. At that time the budtender will determine if the customer has been drinking or is under the influence of drugs. If the person appears to be at all under the influence they will be asked to leave.

4.2. I certify that the retail marijuana store will not:

Initials

- a. Sell, give, distribute, deliver, or offer to sell, give, distribute, or deliver marijuana or marijuana product in a quantity exceeding the limit set out in 3 AAC 306.355; or in violation of 3 AAC 306.380.
- b. Sell, give, distribute, deliver, or offer to sell, give, distribute, or deliver marijuana or marijuana product over the internet; other than as permitted under 3 AAC 306.380.
- c. Offer or deliver to a consumer, as a marketing promotion or for any other reason, free marijuana or marijuana product, including a sample;
- d. Offer or deliver to a consumer, as a marketing promotion or for any other reason, alcoholic beverages, free or for compensation; or
- e. Allow a person to consume marijuana or a marijuana product on the licensed premises, except as allowed under 3 AAC 306.370.



Form MJ-03: Retail Marijuana Store Operating Plan Supplemental

Section 5 – Signage and Advertising

Review the requirements under 3 AAC 306.365 and 306.770. All licensed retail marijuana stores must meet minimum standards for signage and advertising.

You must be able to certify each statement below. Read the following and then sign your initials in the corresponding box: Initials

5.1. I understand and agree to post, in a conspicuous location visible to customers, the notification signs required under 3 AAC 306.365.

EM

5.2. I certify that no advertisement for marijuana or marijuana product will contain any statement or illustration that:

EM

a. Is false or misleading;

EM

b. Promotes excessive consumption;

EM

c. Represents that the use of marijuana has curative or therapeutic effects;

EM

d. Depicts a person under the age of 21 consuming marijuana; or

EM

e. Includes an object or character, including a toy, a cartoon character, or any other depiction designed to appeal to a child or other person under the age of 21, that promotes consumption of marijuana.

5.6. I certify that no advertisement for marijuana or marijuana product will be placed:

a. Within 1,000 feet of the perimeter of any child-centered facility, including a school, childcare facility, or other facility providing services to children, a playground or recreation center, a public park, a library, or a game arcade that is open to persons under the age of 21;

EM

b. On or in a publicly owned or operated property;

EM

c. Within 1,000 feet of a substance abuse or treatment facility.

EM

Section 6 – Displays and Sales

6.1. Describe how marijuana and marijuana products at the retail marijuana store will be displayed and sold:

There will be a glass counter 16 feet long with a cash register at each end. The counter will be 4 feet from the back wall .

We will have product displayed in the glass case. Any area behind the counter is a restricted area for employees only. There will be a restricted area sign . All product will be pre packaged ready for sale ...no deli style.. There will be a special magnifying jar used to display our Bud in the cases. Bud tenders can pull them from the cases and have people examine the product thru the magnifier. After purchasing product the customer will exit with product being put into an exit bag.



Form MJ-03: Retail Marijuana Store Operating Plan Supplemental

Section 7 – Exit Packaging and Labeling

Review the requirements under 3 AAC 306.345.

7.1. Describe how the retail marijuana store will ensure that marijuana and marijuana products sold on its licensed premises will meet the packaging and labeling requirements set forth in 3 AAC 306.345(a):

All product will be packaged and labeled in compliance with State regulations. All packaged products will have the required labels providing all mandated identification and product test results. All marijuana received and accepted in the METRC inventory system from a licensed cultivation facility will be properly packaged and labeled. Products received from a manufacturing facility will be required to meet the same packaging and label requirements to be in compliance with the State. All product sold in the store will be labeled with our company name/logo and license # along with laboratory testing results and consumer warning statement.

7.2. Provide a sample label that the retail marijuana store will use to meet the labeling requirements set forth in 3 AAC 306.345(b):

SOUR AL

Cultivator: AKO FARMS LLC 4A-12353

Batch#: SA622624

THC%: 22.74 CBD%: 0.11 TERP%: 1.76

Retailer: HIGH TIDE CANNABIS 3A-39575





Form MJ-03: Retail Marijuana Store Operating Plan Supplemental

Section 8 – Security

Review the requirements under 3 AAC 306.350 and 3 AAC 306.720.

8.1. Describe the retail marijuana store's procedures for ensuring a form of valid photographic identification has been produced before selling marijuana or marijuana product to a person, as required by 3 AAC 306.350(a):

We shall refuse to sell marijuana or marijuana products to a person who does not produce a form of valid photographic identification showing that a person is 21 years of age or older. Identification includes an unexpired passport, an unexpired, unaltered drivers license, instruction permit, or identification card of a state or territory of the United States, the District of Columbia, or a province or territory of Canada. People can also use an identification card issued by a federal or state agency authorized to issue a drivers license or identification card. All ID's will be checked by a bud tender when a customer enters the store. There will also be a sign on the door saying no one under 21 allowed.

You must be able to certify the statement below. Read the following and then sign your initials in the box to the right:

Initials

8.2. The video surveillance and camera recording system for the licensed premises covers each point-of-sale area.

EM

Section 9 – Waste Disposal

Review the requirements under 3 AAC 306.740.

9.1. Describe how you will store, manage, and dispose of any marijuana waste, including expired marijuana or marijuana products, in compliance with any applicable laws. Include details about the material(s) you will mix with ground marijuana waste and the processes that you will use to make the marijuana waste unusable for any purpose for which it was grown or produced:

: As a retail store, we expect to have little to no waste. If we do have small stems and leaves or expired marijuana product these will be stored in a bucket in the restricted access area. Before any waste is processed we will notify the board no later than 3 days before making the waste unusable. All marijuana will be made unusable by grinding the marijuana with an equal part of sawdust. Making it unusable.

You must be able to certify the statement below. Read the following and then sign your initials in the box to the right:

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.

EM

ELIZABETH MARTIN

Printed name of licensee

Elizabeth Martin
Signature of licensee



Alaska Marijuana Control Board

Cover Sheet for Marijuana Establishment Applications

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
		Zip Code:	99835
Designated Licensee:	ELIZABETH MARTIN		
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	<div>Mj07</div>
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Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-07: Public Notice Posting Affidavit

Why is this form needed?

A public notice posting affidavit is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(10). As soon as practical after initiating a marijuana establishment license application, an applicant must give notice of the application to the public by posting a true copy of the application for ten (10) days at the location of the proposed licensed premises and one other conspicuous location in the area of the proposed premises, per 3 AAC 306.025(b)(1).

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

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARM SLIC	License Number:	39575		
License Type:	RETAIL				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	AK	ZIP:	99835

Section 2 – Certification

I certify that I have met the public notice requirement set forth under 3 AAC 306.025(b)(1) by posting a copy of my application for the following 10-day period at the location of the proposed licensed premises and at the following conspicuous location in the area of the proposed premises:

Start Date: DEC. 23, 2024

End Date: JAN.3, 2025

Other conspicuous location: POST OFFICE , 4905 HALIBUT POINT ROAD(ONSITE)

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 of licensee

ELIZABETH MARTIN
Printed name of licensee



Signature of Notary Public

Jessie Taylor
Public in and for the State of Alaska

My commission expires: 8.16.28

Subscribed and sworn to before me this 3rd day of January, 2025



Public Notice

Application for Marijuana Establishment License and Onsite Consumption Endorsement

License Number: 39575

License Status: Initiated

License Type: Retail Marijuana Store

Endorsement Type: Onsite Consumption

Doing Business As: HIGH TIDE CANNABIS

Business License Number: 2205947

Email Address: liza@akofarms.com

Latitude, Longitude: 57.036200, -135.335200

Physical Address: 4509 HALIBUT POINT ROAD
SITKA, AK 99835
UNITED STATES

Licensee #1

Type: Entity

Alaska Entity Number: 10037708

Alaska Entity Name: AKO Farms, LLC

Phone Number: 907-623-0417

Email Address: akofarmsllc@gmail.com

Mailing Address: box 2426
1210 BEARDSLEE WAY
sitka, AK 99835
UNITED STATES

Entity Official #2

Type: Individual

Name: MARTY MARTIN

Phone Number: 907-738-4048

Email Address: MARTINENT@GCI.NET

Mailing Address: box 2752
sitka, AK 99835
UNITED STATES

Entity Official #4

Type: Individual

Name: JUSTIN BROWN

Phone Number: 907-623-0417

Email Address: AKOFARMSLLC@GMAIL.COM

Mailing Address: 103 METLAKATLA ST.
SITKA, AK 99835
UNITED STATES

Entity Official #1

Type: Individual

Name: ELIZABETH MARTIN

Phone Number: 907-738-3484

Email Address: LIZA@AKOFARMS.COM

Mailing Address: box 2752
2217 HPR
sitka, AK 99835
UNITED STATES

Entity Official #3

Type: Entity

Alaska Entity Number: 10037708

Alaska Entity Name: AKO Farms, LLC

Phone Number: 907-623-0417

Email Address: AKOFARMSLLC@GMAIL.COM

Mailing Address: box 2426
sitka, AK 99835
UNITED STATES

Note: No affiliates entered for this license.

Interested persons may object to the application by submitting a written statement of reasons for the objection to their local government, the applicant, and the Alcohol & Marijuana Control Office (AMCO) not later than 30 days after the director has determined the application to be complete and has given written notice to the local government. Once an application is determined to be complete, the objection deadline and application information will be posted on AMCO's website at

<https://www.commerce.alaska.gov/web/amco>. Objections should be sent to AMCO at marijuana.licensing@alaska.gov or to 550 W 7th Ave, Suite 1600, Anchorage, AK 99501.

POSTING DATE Dec 23, 2024 - Jan 3 - 2025



Alaska Marijuana Control Board

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	<p>Mj - 07a</p>
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Received Date:		Payment Submitted Y/N:		Transaction #:	
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Alaska Marijuana Control Board

Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

marijuana.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

Onsite Consumption Endorsement Form MJ-07a: Public Notice Posting Affidavit

Why is this form needed?

A public notice posting affidavit is required for all onsite consumption endorsement applications per 3 AAC 306.020(b)(10). After initiating an onsite consumption endorsement application, an applicant must give notice of the application to the public by posting a true copy of the Public Notice for ten (10) days at the location of the proposed licensed premises and one other conspicuous location in the area of the proposed premises, per 3 AAC 306.025(b)(1). **The required notice must be completed within the 90 days immediately preceding the submittal of all application documents and fees.**

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575
License Type:	RETAIL- ONSITE CONSUMPTION		
Doing Business As:	HIGH TIDE CANNABIS		
Premises Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
		ZIP:	99835

Section 2 – Certification

I certify that I have met the public notice requirement set forth under 3 AAC 306.025(b)(1) by posting a copy of my onsite consumption endorsement application for the following 10-day period at the location of the proposed licensed premises and at the following conspicuous location in the area of the proposed premises:

Start Date: DEC. 23, 2024

End Date: JAN. 3, 2025

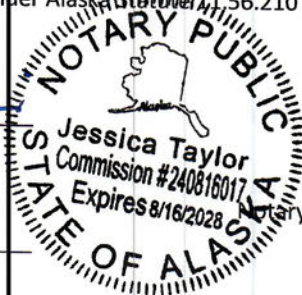
Other conspicuous location: POST OFFICE, 4905 HALIBUT POINT ROAD (ONSITE)

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.

Elizabeth Martin
Signature of licensee

ELIZABETH MARTIN

Printed name of licensee



Jessica Taylor
Signature of Notary Public
Notary Public in and for the State of Alaska

My commission expires: 8.16.28

Subscribed and sworn to before me this 3rd day of January, 2025



Alaska Marijuana Control Board

Cover Sheet for Marijuana Establishment Applications

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	<p>mj-07b</p>
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Received Date:		Payment Submitted Y/N:		Transaction #:	
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Alaska Marijuana Control Board

Onsite Consumption Endorsement Form MJ-07b: Mailed Notice Affidavit

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Why is this form needed?

A mailed notice affidavit is required for all onsite consumption endorsement applications with an outdoor consumption area, per 3 AAC 306.370(f)(4)(A). After initiating a marijuana onsite consumption endorsement application, an applicant must give mailed notice of the application to the property owners, residents, and occupants of properties within 250 linear feet of the boundaries of the property on which the outdoor consumption area of the onsite consumption endorsement is proposed, or the notification distance required by the local government, whichever is greater per 3 AAC 306.370(f)(4)(A). The notice to be mailed is automatically produced from the online application system. Mailing addresses of property owners, residents, and occupants of surrounding properties may be available from your local government, or may be purchased from a mailing house.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	HIGH TIDE CANNABIS	License Number:	39575
License Type:	ON SITE CONSUMPTION		
Doing Business As:	AKO FARMS LLC		
Premises Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
		ZIP:	99835

Section 2 – Certification

You must be able to certify the statements below. Read the following and then sign your initials in the boxes to the right: Initials

I certify that I have attached a copy of the notice that I mailed on 12-31-2024 (date) and a copy of the list of addresses to whom the notice was mailed.

EM

I certify that I have met the notice requirement set forth under 3 AAC 306.370(d)(4) by mailing a copy of the provided notice to each property owner, resident, and occupant of properties within 250 linear feet of the boundaries of the property on which the outdoor consumption area of the onsite consumption endorsement is proposed, or the notification distance required by the local government, whichever is greater.

EM

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.

EM

Elizabeth Martin
Signature of licensee



Jessie Taylor
Signature of Notary Public

ELIZABETH MARTIN

Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 8-16-28

Subscribed and sworn to before me this 31st day of December, 2024

Hello,

I, AKO Farms, LLC, doing business as HIGH TIDE CANNABIS, license #39575, am applying for a Marijuana Onsite Consumption Endorsement in order to establish an outdoor consumption area near your property, residence, or business.

The outdoor onsite consumption area is proposed to be located at 4509 HALIBUT POINT ROAD, SITKA, AK, 99835, UNITED STATES. The regulations for onsite consumption can be found at 3 AAC 306.370 (Alaska Administrative Code).

Interested persons may object to the application by submitting a written statement of reasons for the objection to their local government, the applicant, and the Alcohol & Marijuana Control Office (AMCO) not later than 30 days after the director has determined the application to be complete and has given written notice to the local government. Once an application is determined to be complete, the objection deadline and application information will be posted on AMCO's website at <https://www.commerce.alaska.gov/web/amco>. Objections should be sent to AMCO at marijuana.licensing@alaska.gov or to 550 W 7th Ave, Suite 1600, Anchorage, AK 99501.

Thank You,
AKO Farms, LLC

List of people who received letters announcing the
outside onsite consumption area.

Chris McGraw 1915 Dodge Circle, Sitka, Ak. 99835

Tom Jacobson 4505 HPR , Sitka, Ak. 99835

Dirk and Trish White 4507 HPR Sitka, Ak. 99835



Alaska Marijuana Control Board

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	<p>Mj 09</p>
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Received Date:		Payment Submitted Y/N:		Transaction #:	
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Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

marijuana.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Why is this form needed?

A statement of financial interest completed by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(4). A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

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

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575		
License Type:	RETAIL				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	AK	ZIP:	99835

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	ELIZABETH MARTIN				
Title:	OWNER				
SSN:	[REDACTED]		Date of Birth:	[REDACTED]	



Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Section 3 – Certifications

You must be able to certify the statements below. Read the following and then sign your initials in the boxes to the right: Initials

I certify that no person other than a proposed licensee listed on my marijuana establishment license application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which a marijuana establishment license is being applied for.

EM

I further certify that any ownership change shall be reported to the board as required under 3 AAC 306.040.

EM

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.

EM

The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

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.

EM

ELIZABETH MARTIN

Printed name of licensee

Elizabeth Martin
Signature of licensee



Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Why is this form needed?

A statement of financial interest completed by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(4). A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

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

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575		
License Type:	RETAIL				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	AK	ZIP:	

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	MARTY MARTIN				
Title:	OWNER				
SSN:		Date of Birth:			



Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

marijuana.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Section 3 – Certifications

You must be able to certify the statements below. Read the following and then sign your initials in the boxes to the right: Initials

I certify that no person other than a proposed licensee listed on my marijuana establishment license application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which a marijuana establishment license is being applied for.

MM

I further certify that any ownership change shall be reported to the board as required under 3 AAC 306.040.

MM

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.

MM

The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

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.

MM

MARTY MARTIN

Printed name of licensee

Signature of licensee



Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Why is this form needed?

A statement of financial interest completed by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(4). A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

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

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575		
License Type:	RETAIL				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	AK	ZIP:	

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	JUSTIN BROWN				
Title:	OWNER				
SSN:		Date of Birth:			



Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

marijuana.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Section 3 – Certifications

You must be able to certify the statements below. Read the following and then sign your initials in the boxes to the right: Initials

I certify that no person other than a proposed licensee listed on my marijuana establishment license application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which a marijuana establishment license is being applied for.

JB

I further certify that any ownership change shall be reported to the board as required under 3 AAC 306.040.

JB

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.

JB

The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

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.

JB

JUSTIN BROWN

Printed name of licensee

Signature of licensee



Alaska Marijuana Control Board

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550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	<p>Mj 09</p>
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Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Why is this form needed?

A statement of financial interest completed by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(4). A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

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

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575
License Type:	RETAIL		
Doing Business As:	HIGH TIDE CANNABIS		
Premises Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
		ZIP:	99835

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	ELIZABETH MARTIN
Title:	OWNER
SSN:	[REDACTED]
Date of Birth:	[REDACTED]



Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Section 3 – Certifications

You must be able to certify the statements below. Read the following and then sign your initials in the boxes to the right: Initials

I certify that no person other than a proposed licensee listed on my marijuana establishment license application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which a marijuana establishment license is being applied for.

EM

I further certify that any ownership change shall be reported to the board as required under 3 AAC 306.040.

EM

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.

EM

The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

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.

EM

ELIZABETH MARTIN

Printed name of licensee

Elizabeth Martin
Signature of licensee



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Alaska Marijuana Control Board

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

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575		
License Type:	RETAIL				
Doing Business As:	HIGH TIDE CANNABIS				
Premises Address:	4509 HALIBUT POINT ROAD				
City:	SITKA	State:	AK	ZIP:	

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	MARTY MARTIN				
Title:	OWNER				
SSN:		Date of Birth:			



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Anchorage, AK 99501

marijuana.licensing@alaska.gov

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Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Section 3 – Certifications

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MM

MARTY MARTIN

Printed name of licensee

Signature of licensee



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Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Why is this form needed?

A statement of financial interest completed by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(4). A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

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

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	License Number:	39575
License Type:	RETAIL		
Doing Business As:	HIGH TIDE CANNABIS		
Premises Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
		ZIP:	

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	JUSTIN BROWN		
Title:	OWNER		
SSN:		Date of Birth:	



Alcohol and Marijuana Control Office

550 W 7th Avenue, Suite 1600

Anchorage, AK 99501

marijuana.licensing@alaska.gov

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

Section 3 – Certifications

You must be able to certify the statements below. Read the following and then sign your initials in the boxes to the right: Initials

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JB

I further certify that any ownership change shall be reported to the board as required under 3 AAC 306.040.

JB

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.

JB

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JB

JUSTIN BROWN

Printed name of licensee

Signature of licensee



Alaska Marijuana Control Board

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store	<i>onsite consumption</i>	
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	<i>Mj 28a Endorsement list</i> <i>(on site)</i>
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Alaska Marijuana Control Board

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Form MJ-28a: Onsite Consumption Endorsement Application Checklist

What is this document?

The following checklist was created to assist applicants with gathering all documents and items required to apply for a new onsite consumption endorsement [retail marijuana stores only].

Checklist for Onsite Consumption Endorsement Application

The following documents and items must be submitted before an onsite consumption endorsement application will be reviewed for completeness:

- ☒ Form MJ-28b: Onsite Consumption Operating Plan Supplemental
- ☒ Diagram
 - If submitted in conjunction with a new license application
 - MJ-02: Premises Diagram *(You are only required to submit ONE copy of the MJ-02 for both the license application and endorsement, do not submit two copies of form MJ-02)*
 - If submitted separately from a new license application
 - MJ-14: Licensed Premises Diagram Change
- ☒ Form MJ-07a: Onsite Consumption Endorsement Public Notice Posting Affidavit
- ☒ Form MJ-08a: Onsite Consumption Endorsement Local Government Notice
- ☒ Publisher's Affidavit
- ☒ Endorsement Application Fee (\$1,000)
- ☒ Endorsement Fee (\$2,000)

For applications that are being submitted with a new retail marijuana store application:

- ☒ Online Application

For applications including an outdoor consumption area:

- ☒ Form MJ-07b: Onsite Consumption Endorsement Mailed Notice Affidavit

For applications that are increasing the size of the current licensed premises to add a consumption area:

- ☐ Proof of Possession for Consumption Area *[If consumption area is not included in the current proof of possession for the retail premises]*



Alaska Marijuana Control Board

Cover Sheet for Marijuana Establishment Applications

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC			License Number:	39575	
License Type:	Retail Marijuana Store					
Doing Business As:	HIGH TIDE CANNABIS					
Physical Address:	4509 HALIBUT POINT ROAD					
City:	SITKA			State:	AK	Zip Code: 99835
Designated Licensee:	ELIZABETH MARTIN					
Email Address:	liza@akofarms.com					

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	<p>MJ 28b</p>
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Received Date:		Payment Submitted Y/N:		Transaction #:	
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Alaska Marijuana Control Board

Operating Plan Supplemental Form MJ-28b: Onsite Consumption Marijuana Retail Endorsement

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Why is this form needed?

An operating plan supplemental form is required for all retail marijuana establishments seeking an onsite consumption endorsement. Applicants should review **Alaska Regulation 306.370**. This form will be used to document how an applicant intends to meet the requirements of the regulation.

What must be covered in this operating plan supplemental?

Applicants must identify how the proposed onsite consumption premises will comply with applicable statutes and regulations regarding the following:

- Security [in addition to what is required for a retail store].
- Ventilation [if consumption by inhalation is to be permitted].
- Monitoring overconsumption.
- Disposal or packaging of unconsumed marijuana.
- Prevention of the introduction of marijuana products not sold by the retail marijuana store or products not sold for onsite consumption.

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

Section 1 – Establishment & Contact Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO FARMS LLC	MJ License #:	39575
License Type:	RETAIL-ONSITE CONSUMPTION		
Doing Business As:	HIGH TIDE CANNABIS		
Premises Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	Alaska
		ZIP:	99835
Mailing Address:	P O BOX 2426		
City:	SITKA	State:	Alaska
		ZIP:	99835
Designated Licensee:	ELIZABTH MARTIN		
Main Phone:	907-623-0417	Cell Phone:	907-738-3484
Email:	LIZA@AKOFARMS.COM		

Which type(s) of consumption will occur at your premises (check all that apply):

Consumption by inhalation (smoking or vaping)-



Consumption by other method(s)-





Alaska Marijuana Control Board

Form MJ-28b: Onsite Consumption Endorsement Operating Plan

2.3. Describe how you will prevent access by persons under the age of 21 to your consumption area:

We will have one door in the retail for the entrance and exit into the outdoor onsite consumption area. There will be signs stating NO ONE UNDER 21 ALLOWED. There will be an employee monitoring the area at all times along with cameras placed to monitor the area.

2.4. Describe how the consumption area shall be isolated from the other areas of the retail marijuana store:

The only entrance and exit to the outside onsite consumption area will be located in the retail store.

You must be able to certify the statement below. Read the following and then sign your initials in the box to the right:

Initials

2.5. The proposed area(s) for consumption are clearly identified on Form MJ-02: Premises Diagram or MJ-14: Premises Diagram Change that is submitted with this application.

EM

Answer "Yes" or "No" to the following question:

Yes No

2.6 Will the consumption area be outdoors?

☒ ☐

If "Yes", describe the outdoor structure(s) or the expanse of open or clear ground and how it is fully enclosed by a sight-obscuring wall or fence:

The outside consumption area will be 40x50 feet. It will be surrounded by a 6 foot solid wooden fence. The area will have two gazebos placed amongst the trees. There will only be 12 people allowed in the consumption area at a time. We feel this is a good number for the management of monitoring and security.

If "Yes", describe the neighboring uses and state why an outdoor consumption area is compatible with the surrounding area:

We have a cruise ship dock 800 feet away along with two residents within the 250 foot limit. They have all been sent letters of intent. The stand alone outdoor wooded area is down by the waters edge and is isolated from any building. It shouldn't pose a problem for anyone

Form MJ-28b: Onsite Consumption Endorsement Operating Plan

Section 3 - Ventilation

Ventilation (3 AAC 306.370(d)(1)(B))

If you are proposing an indoor marijuana consumption area, where consumption by inhalation will occur you must be able to certify the statements below.

Read the following and then sign your initials in the box to the right:

N/A

Initials

I certify that I have attached to this form ventilation plans that:

- 3.1 Show a ventilation system for the marijuana consumption area that is separate from the remainder of the retail store
- 3.2 Signed and approved by a licensed mechanical engineer.
- 3.3 Sufficient to remove visible smoke.
- 3.4 Consistent with all applicable building codes and ordinances.

Section 4 - Overconsumption

Monitoring Overconsumption (3 AAC 306.370(d)(1)(C))

4.1. Describe the policies and procedures that will be used to monitor overconsumption of marijuana or marijuana product:

There will be an employee monitoring the outside onsite area. They will make sure only approved product and amount can be brought into the onsite area. We will also have cameras in place to monitor the area.

Section 5 - Repackaging or Disposal

Repackaging or Disposal (3 AAC 306.370(d)(1)(D))

5.1. Describe how you will dispose of or repackaging unconsumed marijuana or marijuana product in accordance with 3AAC 306.740 and 3AAC 306.345:

We will have a special container for product not used. We will mix the product with sawdust and then dispose of it properly. This will be done once a week.



Form MJ-28b: Onsite Consumption Endorsement Operating Plan

Section 6 - Prevention of Introduction

Prevention of Introduction (3 AAC 306.370(d)(1)(E))

6.1. Describe your policies and procedures to ensure marijuana from a source other than your retail marijuana store is not introduced to your consumption area:

We will have an employee monitoring what goes into the onsite area. The customer will only be allowed to bring in special product bought at our retail for the outside onsite consumption area.

6.2 Describe your policies and procedures to ensure that marijuana from your retail marijuana store that is not intended for onsite consumption is not introduced into your consumption area:

Customers will leave product that is restricted from entering the outside onsite area with an employee. We will have a special shelf in the restricted area to hold product for customers that want to enter the onsite area. Once the customer is done with the onsite area the employee will give them there purchase where they will then exit the store.

Section 7 - Dosage and Safety Information

Written Materials (3 AAC 306.370(e)(4))

You must be able to certify the statement below. Read the following and then sign your initials in the box to the right:

Initials

7.1- I certify that I have attached copies of the written materials to be provided in the consumption area(s) to patrons at no cost that contain marijuana dosage and safety information for each type of marijuana or marijuana product to be sold for consumption at the marijuana consumption area.

EM

SEE Attached



Form MJ-28b: Onsite Consumption Endorsement Operating Plan

Section 8 - Employee monitoring

Employee Monitoring (3AAC 306.370(c)(2))

Answer "Yes" or "No" to the following question:

Yes No

8.1 Will consumption by smoking or vaping be allowed?



If "Yes", describe the smoke-free area from which employees will monitor the marijuana consumption area:

The one door leading to the outside onsite area will have a covered deck with a space for an employee to monitor the area. It is far enough away from the consumption so the smoke is not a factor. There will also be two big one-way windows looking out on to the area. It will be another way to monitor the area.

Section 9 - Declaration

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

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and 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.

Initials

EM

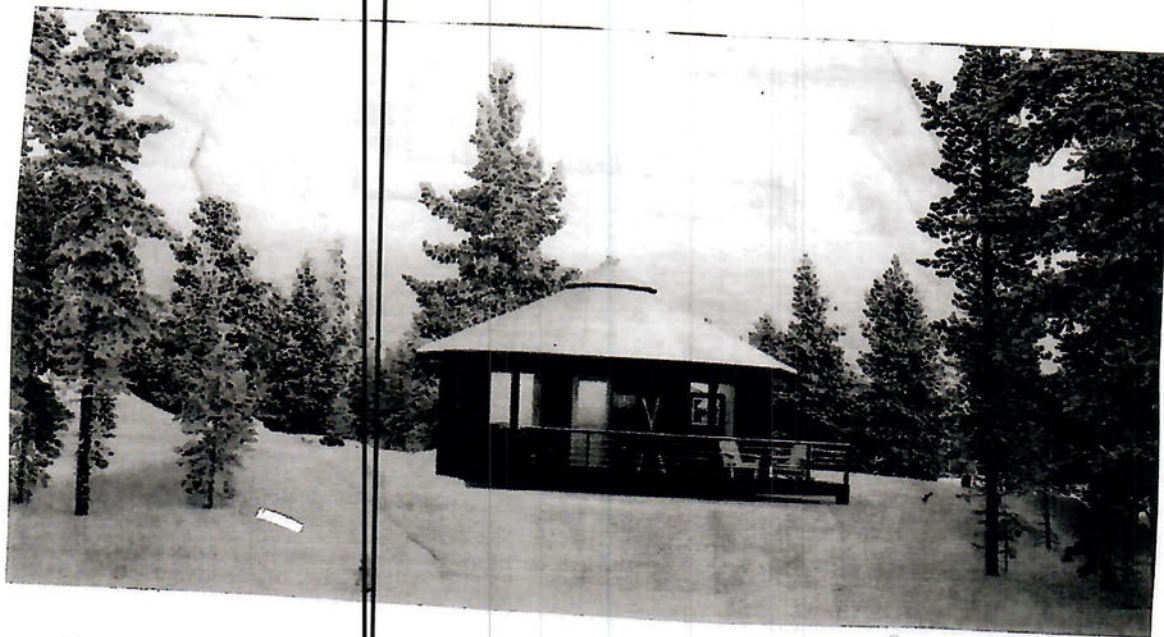
ELIZABETH MARTIN

Printed name of licensee

Elizabeth Martin
Signature of licensee

Form MJ-28b: Onsite Consumption Endorsement Operating Plan

(Additional Space as Needed):



Picture of stand alone Building
with outside onsite consumption in back
of building

4905 Halibut Point Road



Form MJ-28b: Onsite Consumption Endorsement Operating Plan

Section 1 – Freestanding

Freestanding Licensed Retail Store (3 AAC 306.370(a) and AS 18.35.301(i)(1))

Please read the definition of "Freestanding" as defined in AS 18.35.301(i)(1) below-

"freestanding" means a building that is not supported by another structure and does not share ventilation or internal air space with an adjoining structure and smoke from the building cannot travel into the adjoining structure.

You must be able to certify the statements below. Read the following and then sign your initials in the box to the right:

1.1- I certify that the location for which I am requesting this endorsement is "freestanding" as defined by AS 18.35.301(i)(1).

Initials

EM

1.2- I certify that I have attached to this operating plan a photo of each side of the exterior of my building that show it meets the definition of "freestanding."

EM

Section 2 – Security

Security (3 AAC 306.370(d)(1)(A)) and 3 AAC 306.370 (c)(1)

2.1. Describe the equipment in place (doors and locks) that will provide security for your consumption space, including access points and windows:

The onsite consumption area will be outside in a 40x50 foot lot. There will be a six foot fence surrounding and connecting on either side of the retail building. There will be a four foot wide utility gate that will be locked at all times until needed for use. There will be cameras in place to monitor the area along with an employee monitoring the area at all times. There will only be one door in the retail for entering and exiting the onsite consumption area.

2.2. Describe how you will prevent diversion of marijuana and marijuana product from your consumption area:

There will be an employee monitoring the people and product going into the onsite area. If the customer has bought extra product that cant go into the onsite area, we will have an area to hold there product for them until they are done in the onsite area. Only joints, and vape pens holding only .03grams of product will be allowed in the onsite area.

We will give testing Results of each Strain
with a warning ~~message~~ Statement.

Customer:
AKO2 1532
Sample Delivered By:
Erik Frew
Sample Number:
1A402030000C8C9000000468
Certificate of Analysis Number:
1532-00468

Received Date:
12/19/2024
Time Received:
2:40 PM
Results Date:
12/23/2024
Related to COA #:
Not Applicable

Results relate solely to the sample received for analysis. Pass/Fail criteria set per AMCO 3AAC 306.645

Item: **Watermelon Zkittlez X Rainbow Beltz**
Source Harvest: **WZRB112724**
Source Package: **1A402030000C8C9000000464**

Retail Labeling Values

Cannabinoid and terpene values for flower are reported on a "dry weight" basis.
Cannabinoid and terpene values for concentrates are reported on an "as received" basis.
THCA (x 0.877) + d9-THC = Total Potential THC
CBDA (x 0.877) + CBD = Total Potential CBD

Total Potential THC %:	25.27
Total Potential CBD %:	0.00
Total Cannabinoids %:	30.14
Total Terpenes %:	2.86

Product Safety Testing

Visual Inspection: **PASSED**
Microbial Testing: **PASSED**



3516 W. Coghlan Circle #3 Wasilla, AK 99623

MARIJUANA HAS INTOXICATING EFFECTS AND MAY BE HABIT FORMING AND ADDICTIVE. MARIJUANA IMPAIRS CONCENTRATION, COORDINATION, AND JUDGEMENT. DO NOT OPERATE A VEHICLE OR MACHINERY UNDER IT'S INFLUENCE. THERE ARE HEALTH RISK ASSOCIATED WITH CONSUMPTION OF MARIJUANA. FOR USE ONLY BY ADULTS TWENTY- ONE AND OLDER. KEEP OUT OF THE REACH CHILDREN. MARIJUANA SHOULD NOT BE USED BY WOMEN WHO ARE PREGNANT OR BREASTFEEDING.

Laboratory Director



Alaska Marijuana Control Board

Alcohol & Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Cover Sheet for Marijuana Establishment Applications

What is this form?

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Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	AKO Farms, LLC	License Number:	39575
License Type:	Retail Marijuana Store		
Doing Business As:	HIGH TIDE CANNABIS		
Physical Address:	4509 HALIBUT POINT ROAD		
City:	SITKA	State:	AK
Designated Licensee:	ELIZABETH MARTIN	Zip Code:	99835
Email Address:	liza@akofarms.com		

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	<p><i>Publisher's Affidavit</i></p>
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Received Date:		Payment Submitted Y/N:		Transaction #:	
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Affidavit of Publication

STATE OF ALASKA
FIRST JUDICIAL DISTRICT) ss.
AT SITKA, ALASKA

Sarah Smith, being first sworn, says she or he
is the publisher, managing editor or business manager of the DAILY SITKA
SENTINEL, a newspaper printed and published in Sitka, Alaska, and le-
gally qualified as a medium of official and legal publications, and that the

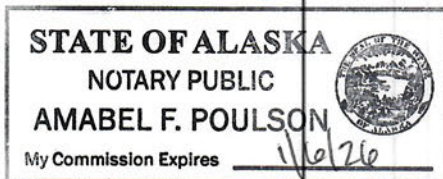
Legal notice a copy of
which is hereto annexed, was published in the Daily Sitka Sentinel on:

<u>12/30/24</u>	<u>12/6/25</u>	<u>12/13/25</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature Sarah Smith

Sworn and subscribed to
before me this 14th day of January, 20 25

Notary Public for Alaska Amabel F. Poulson



LEGAL NOTICE

AKO Farms, LLC is applying under 3 AAC 306.300 and 3 AAC 306.370 for a new Retail Marijuana Store license with an Onsite Consumption Endorsement, license #39575, doing business as HIGH TIDE CANNABIS, located at 4509 HALIBUT POINT ROAD, SITKA, AK, 99835, UNITED STATES.

Interested persons may object to the application by submitting a written statement of reasons for the objection to their local government, the applicant, and the Alcohol & Marijuana Control Office (AMCO) not later than 30 days after the director has determined the application to be complete and has given written notice to the local government. Once an application is determined to be complete, the objection deadline and application information will be posted on AMCO's website at <https://www.commerce.alaska.gov/web/amco>. Objections should be sent to AMCO at marijuana.licensing@alaska.gov or to 550 W 7th Ave, Suite 1600, Anchorage, AK 99501.

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