

If this item is pulled from the consent agenda the following motion would be in order:

POSSIBLE MOTION

I MOVE TO approve liquor license renewal applications for Sitka Moose Lodge #1350 and JL Sitka, Inc. dba Westmark Sitka Hotel and forward these to the Alcoholic Beverage Control Board without objection.



City & Borough of Sitka
Municipal Clerk's Office
100 Lincoln Street, Sitka AK 99835
Telephone: 907-747-1811 Fax: 907-747-4004



Memorandum

To: Mayor McConnell and Assembly Members
From: Sara Peterson, Municipal Clerk
Date: January 19, 2016
Subject: Liquor License Renewals

This office has received notification of the following liquor license renewal applications:

License #: 748
DBA: Loyal Order of Moose #1350
License Type: Club
Licensee: Sitka Moose Lodge #1350
Premises Address: 337 Lincoln Street

License #: 1031
DBA: Westmark Sitka Hotel
License Type: Beverage Dispensary - Tourism
Licensee: JL Sitka, Inc.
Premises Address: 330 Seward Street

A memo was circulated to the various departments who may have had reason to protest and no protests were received.

Recommendation: Approve the liquor license renewal applications for the Sitka Moose Lodge #1350 and JL Sitka, Inc. dba Westmark Sitka Hotel.



THE STATE
of **ALASKA**

GOVERNOR BILL WALKER

Department of Commerce, Community,
and Economic Development

ALCOHOLIC BEVERAGE CONTROL BOARD

Sarah Daulton Oates
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
Phone: 907.269.0350
alcohol.licensing@alaska.gov

January 7, 2016

City and Borough of Sitka
Attn: Sara Peterson, Municipal Clerk
VIA Email: sara.peterson@cityofsitka.org
melissa.henshaw@cityofsitka.org

Re: Notice of 2016/2017 Liquor License Renewal Applications

Dear Ms. Ingman,

We have received a renewal application for each of the following licenses within your jurisdiction:

Lic. #	Doing Business As	License Type	Licensee	Premises Address
748	Loyal Order of Moose #1350	Club	Sitka Moose Lodge #1350	337 Lincoln Street
1031	Westmark Sitka Hotel	Beverage Dispensary- Tourism	JL Sitka, Inc.	330 Seward Street

A local governing body as defined under AS 04.21.080(b)(18) may protest the approval of an application(s) pursuant to AS 04.11.480 by providing the board **and** the applicant with a clear and concise written statement of reasons in support of a protest within 60 days of receipt of this notice. If a protest is filed, the board will not approve the application unless it finds that the protest is arbitrary, capricious, and unreasonable. Instead, in accordance with AS 04.11.510(b), the board will notify the applicant that the application is denied for reasons stated in the protest. The applicant is entitled to an informal conference with either the director or the board and, if not satisfied by the informal conference, is entitled to a formal hearing in accordance with AS 44.62.330-44.62-630. **IF THE APPLICANT REQUESTS A HEARING, THE LOCAL GOVERNING BODY MUST ASSIST IN OR UNDERTAKE THE DEFENSE OF ITS PROTEST.**

Under AS 04.11.420(a), the board may not issue a license or permit for premises in a municipality where a zoning regulation or ordinance prohibits the sale or consumption of alcoholic beverages, unless a variance of the regulation or ordinance has been approved. Under AS 04.11.420(b) municipalities must inform the board of zoning regulations or ordinances which prohibit the sale or consumption of alcoholic beverages. If a municipal zoning regulation or ordinance prohibits the sale or consumption of alcoholic beverages at the proposed premises and no variance of the regulation or ordinance has been approved, please

notify our office and provide a certified copy of the regulation or ordinance if you have not previously done so.

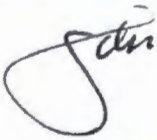
Protest under AS 04.11.480 and the prohibition of sale or consumption of alcoholic beverages as required by zoning regulation or ordinance under AS 04.11.420(a) are two separate and distinct subjects. Please bear that in mind when responding to this notice.

AS 04.21.010(d), if applicable, requires the municipality to provide written notice to the appropriate community council(s).

If you wish to protest the application(s) referenced above, please do so in the prescribed manner and within the prescribed time. Please show proof of service upon the applicant. For additional information regarding local governing body protests, please refer to 3 AAC 304.145.

If you have any questions or concerns or require additional information, please feel free to contact our licensing unit at alcohol.licensing@alaska.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "Sarah", with a large, stylized loop at the end.

Sarah Daulton Oates

Records & Licensing Supervisor
sarah.oates@alaska.gov

Alcoholic Beverage Control Board
550 W 7th Avenue, Suite 1800
Anchorage, AK 99501

Renewal Liquor License
2016/2017

Phone: (907) 269-0350
Email: alcohol.licensing@alaska.gov
<http://commerce.alaska.gov/web/abc/Home.aspx>

License is: ☒ Full Year OR ☐ Seasonal If seasonal, list dates of operation: _____

SECTION A - LICENSE INFORMATION			
License Number: 748		License Type: Liquor License	
Local Governing Body: Sitka Moose Lodge #1350		Statute Reference: Sec 04.11.	
Name of Licensee: Loyal Order Of Moose #1350		Doing Business As (DBA):	
Mailing Address: 337 Lincoln Street		Street Address or Location of Premises: Sitka, AK 337 Lincoln Street 99835	
Phone: 907-747-3344	Fax: NA	Email: lodge1350@mooseunits.org	

SECTION B - OWNERSHIP INFORMATION - CORPORATION (If owner is a sole proprietor, skip to SECTION C)				
Corporations, LLOs, LLPs and LPs must be registered with the Alaska Division of Corporations.				
Name of Entity (Corporation/LLO/LLP/LP): Loyal Order Of Moose #1350/Sitka Moose Lodge #1350				
Is the Entity in "Good Standing" with the Alaska Division of Corporations? Yes <input type="checkbox"/> No <input type="checkbox"/>				
If no, attach written explanation. Your entity must be in compliance with Title 10 of the Alaska Statutes to be a valid liquor licensee.				
Entity Members (Must include President, Secretary, Treasurer, Vice-President, Manager and Shareholder/Member with 10% or more of stock)				
Name	Title	%	Mailing Address	Telephone Number
Derrell Stuart	Gov.		337 Lincoln St.	
Tyrone Young	Sec. (Gov.)			907-747-3344
Joseph Reeves	Treasurer		Sitka, AK.	
Frank Barkhart	Trustee			
Clint Daniels	Admin.		99835	
NOTE: If you need additional space, please attach a separate sheet.				

SECTION C - OWNERSHIP INFORMATION - SOLE PROPRIETORSHIP (INDIVIDUAL OWNER & SPOUSE)

Individual Licensees/Affiliates (The ABC Board defines an "affiliate" as the spouse or significant other of a licensee. Each affiliate must be listed.)

Name:	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>	Name:	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>
Address:	Date of Birth:	Address:	Date of Birth:
Phone:		Phone:	
Name:	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>	Name:	Applicant <input type="checkbox"/> Affiliate <input type="checkbox"/>
Address:	Date of Birth:	Address:	Date of Birth:
Phone:		Phone:	

SECTION D - SUPPLEMENTAL QUESTIONS

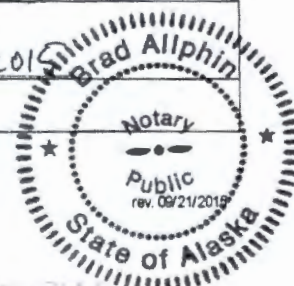
Was your business open at least 30 days for 8 hours each day in 2014?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Was your business open at least 30 days for 8 hours each day in 2015?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Has any person named in this application been convicted of a felony or Title 4 violation? If yes, attach a written explanation.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Has the licensed premises changed from the last diagram submitted? If yes, attach a new diagram with designated premises areas outlined in red.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
For Package Stores only:		
Do you intend to sell alcoholic beverages in response to a written order?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
For Restaurant / Eating Places only:		
Were your gross receipts from the sale of food at least 50% of your total gross receipts for 2014 and 2015?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

DECLARATION

- ☒ I declare under penalty of perjury that I have examined this application, including the accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete.
- ☒ I hereby certify that there have been no changes in officers or stockholders that have not been reported to the Alcoholic Beverage Control Board. The undersigned certifies on behalf of the organized entity, it is understood that a misrepresentation of fact is cause for rejection of this application or revocation of any license issued.
- ☒ I further certify that I have read and am familiar with Title 4 of the Alaska statutes and its regulations, and that in accordance with AS04.11.450, no person other than the licensee(s) has any direct or indirect financial interest in the licensed business.
- ☒ I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.
- ☒ As a licensee (sole proprietor or partner), I certify that I have received Alaska alcohol server training and my certification is currently valid.
- ☒ As a corporate/LLC licensee, I certify that all agents and employees who serve, sell, or are otherwise responsible for the service, sale, or storage of alcoholic beverages have received Alaska alcohol server training and their certification is currently valid. I further certify that certain shareholders, officers, directors, or members of the entity who are not directly or indirectly responsible for the service, sale, or storage of alcoholic beverages are not Alaska alcohol server training certified and will not be required to be certified.
- ☒ As a licensee, I certify that all of my agents and employees tasked with patron identification verification have received alcohol server training and their certification is currently valid.

License Fee	\$ 1,200
Filing Fee	\$ 200.00
TOTAL	\$
Late Fee of \$500.00 - if received or postmarked after 12/31/2015	\$
Fingerprint Fee - \$49.75 per person (only for new owners/ members)	\$
GRAND TOTAL	\$ 1,400

Licensee Signature: <i>Clinton W. Daniels</i>	Printed Name & Title: Clinton W. Daniels
Notary Signature: <i>[Signature]</i>	Subscribed and sworn to before me this 07 day of December 2015
Notary Public in and for the State of: ALASKA	My commission expires: 04/16/2016



13323

Alcoholic Beverage Control Board
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501

Renewal Liquor License 2016/2017

Phone: (907) 269-0350
Email: alcohol.licensing@alaska.gov
<http://commerce.alaska.gov/web/abc/Home.aspx>

License is: ☒ Full Year OR ☐ Seasonal If seasonal, list dates of operation: _____

SECTION A - LICENSE INFORMATION		
License Number: 1031	License Type: Beverage Dispensary-Tourism AS 04.11.400(d)	Statute Reference: Sec. 04.11.400(d)
Local Governing Body: Sitka, City & Bor Other (Anch, Sit, Jno, Com, Car, WA)		Community Council (if applicable):
Name of Licensee: JL Sitka, Inc.		Doing Business As (DBA): Westmark Sitka Hotel
Mailing Address: 930 Seward Street Sitka, AK 99895		Street Address or Location of Premises: 330 Seward Street
Phone: 907-147-6241	Fax: 907-147-5186	Email:

SECTION B - OWNERSHIP INFORMATION - CORPORATION (if owner is a sole proprietor, skip to SECTION C)				
<i>Corporations, LLCs, LLPs and LPs must be registered with the Alaska Division of Corporations.</i>				
Name of Entity (Corporation/LLC/LLP/LP): JL Sitka, Inc.				
Is the Entity in "Good Standing" with the Alaska Division of Corporations? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, attach written explanation. Your entity must be in compliance with Title 10 of the Alaska Statutes to be a valid liquor licensee.				
Entity Members (Must include President, Secretary, Treasurer, Vice-President, Manager and Shareholder/Member with 10% or more of stock)				
Name	Title	%	Mailing Address	Telephone Number
John Enmi	Partner	50%		907-229-7135
Lisa Laudon	Partner	50%		907-230-4095

NOTE: If you need additional space, please attach a separate sheet.

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SECTION C – OWNERSHIP INFORMATION – SOLE PROPRIETORSHIP (INDIVIDUAL OWNER & SPOUSE)

Individual Licensees/Affiliates (The ABC Board defines an "affiliate" as the spouse or significant other of a licensee. Each affiliate must be listed.)

Name:	Applicant <input type="checkbox"/>	Name:	Applicant <input type="checkbox"/>
Address:	Affiliate <input type="checkbox"/>	Address:	Affiliate <input type="checkbox"/>
Phone:	Date of Birth:	Phone:	Date of Birth:
Name:	Applicant <input type="checkbox"/>	Name:	Applicant <input type="checkbox"/>
Address:	Affiliate <input type="checkbox"/>	Address:	Affiliate <input type="checkbox"/>
Phone:	Date of Birth:	Phone:	Date of Birth:

SECTION D – SUPPLEMENTAL QUESTIONS

Was your business open at least 30 days for 8 hours each day in 2014?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was your business open at least 30 days for 8 hours each day in 2015?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Has any person named in this application been convicted of a felony or Title 4 violation? If yes, attach a written explanation.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has the licensed premises changed from the last diagram submitted? If yes, attach a new diagram with designated premises areas outlined in red.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Have you attached the required tourism statement, using the provided guidelines?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

DECLARATION

- I declare under penalty of perjury that I have examined this application, including the accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete.
- I hereby certify that there have been no changes in officers or stockholders that have not been reported to the Alcoholic Beverage Control Board. The undersigned certifies on behalf of the organized entity, it is understood that a misrepresentation of fact is cause for rejection of this application or revocation of any license issued.
- I further certify that I have read and am familiar with Title 4 of the Alaska statutes and its regulations, and that in accordance with AS 04.11.450, no person other than the licensee(s) has any direct or indirect financial interest in the licensed business.
- I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.
- As a licensee (sole proprietor or partner), I certify that I have received Alaska alcohol server training and my certification is currently valid.
- As a corporate/LLC licensee, I certify that all agents and employees who serve, sell, or are otherwise responsible for the service, sale, or storage of alcoholic beverages have received Alaska alcohol server training and their certification is currently valid. I further certify that certain shareholders, officers, directors, or members of the entity who are not directly or indirectly responsible for the service, sale, or storage of alcoholic beverages are not Alaska alcohol server training certified and will not be required to be certified.
- As a licensee, I certify that all of my agents and employees tasked with patron identification verification have received alcohol server training and their certification is currently valid.

License Fee	\$ 2500.00
Filing Fee	\$ 200.00
TOTAL	\$ 2700.00
Late Fee of \$500.00 – if received or postmarked after 12/31/2015	\$
Fingerprint Fee – \$49.75 per person (only for new owners/members)	\$
GRAND TOTAL	\$

Licensed Signature	Printed Name & Title:
<i>[Signature]</i>	Lisa J. Laudon Owner
Notary Signature	Subscribed and sworn to before me this
<i>[Signature]</i>	16 th day of December, 2015.
Notary Public in and for the State of:	My commission expires:
Alaska	with office

Renewal Application

STATE OF ALASKA

OFFICIAL SEAL

Christina N. Thibodeaux

NOTARY PUBLIC

My Commission Expires With Office



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rev. 09/21/2015



November 23, 2015

Renewal for Tourism License

Westmark Sitka Hotel
JL Sitka 1031

We provide hotel rooms and meals for tourist.

We have a full service restaurant and lounge, providing breakfast, lunch, and dinner for our hotel guest.

We only have one hotel room that has a kitchen.

Although we help guest find tours, fishing charters, and other attractions, we do not provide any.

We have not done any major construction the last two years.

Sincerely,


Sharon Bryant

Controller

907-747-0965

Westmark Sitka

330 Seward Street, Sitka, Alaska 99835-7523
Phone (907) 747-6241 Fax (907) 747-5486

DEC 4 '15 AM 11:22

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