

City and Borough of Sitka

100 Lincoln Street • Sitka, Alaska 99835

Fire Department

Police Department

Building Official(s)

MEMORANDUM

To:

Utility Billing Clerk – Diana

Collections - Sunni

Municipal Billings – Lindsey

Sales Tax/Property Tax - Laurie

From:

Sara Peterson, Municipal Clerk

Date:

December 14, 2018

Subject:

Liquor License Renewal Application – BPO Elks Lodge #1662

The Municipal Clerk's Office has been notified by the Alcohol and Marijuana Control Office of the following liquor license renewal application submitted by:

Lic #:

363

DBA:

BPO Elks Lodge #1662

License Type:

Club

Licensee:

BPO Elks Lodge #1662

Premises Address: 412 Sawmill Creek Road

Please notify no later than **noon on Friday**, **December 21** of any reason to protest this renewal request. This request is scheduled to go before the Assembly on January 8.

Thank you.



Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE 550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

December 13, 2018

City and Borough of Sitka

Attn: Sara Peterson, Municipal Clerk

Via Email:

sara.peterson@cityofsitka.org

melissa.henshaw@cityofsitka.org

Re: Notice of 2019/2020 Liquor License Renewal Application

License Type:	Club	License Number:	363
Licensee:	BPO Elks Lodge #1662		
Doing Business As:	BPO Elks Lodge #1662		

We have received a completed renewal application for the above listed license (see attached application documents) within your jurisdiction. This is the notice required under AS 04.11.480.

A local governing body may protest the approval of an application(s) pursuant to AS 04.11.480 by furnishing the director **and** the applicant with a clear and concise written statement of reasons for the protest within 60 days of receipt of this notice, and by allowing the applicant a reasonable opportunity to defend the application before a meeting of the local governing body, as required by 3 AAC 304.145(d). If a protest is filed, the board will deny the application unless the board finds that the protest is arbitrary, capricious, and unreasonable.

To protest the application referenced above, please submit your written protest within 60 days, and show proof of service upon the applicant and proof that the applicant has had a reasonable opportunity to defend the application before a meeting of the local governing body.

Sincerely,

Erika McConnell, Director

Eucha M. Connell

amco.localgovernmentonly@alaska.gov



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

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

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

						
Doing Business As:	BPO	Elks Lodge	#1662	The second secon	License Number:	363
License Type:	Club					
Examiner:			JOHN		Transaction #:	978124
Document		Received	Completed	Notes		***************************************
AB-17: Renewal Applic	cation	11/26/18	12/7/18			•
App and License Fees		11/26/18	11/26/18			
Supplemental Docume	ent	Received	Completed	Notes		
Tourism/Rec Site State	ement					
AB-25: Supplier Cert (V	VS)					
AB-29: Waiver of Oper	ation					
AB-30: Minimum Oper	ation			,		
AB-33: Restaurant Affic	davit			***************************************		
COI / COC / 5 Star						
FP Cards & Fees / AB-0	8a	***************************************			3	
Late Fee						
Names on FP Cards:						
	I			-		Yes No
Selling alcohol in respo	nse to wr	ritten order (pac	kage stores)?			-8-6
Mailing address and co	ntact info	ormation differe	nt than in databa	se (if yes, updat	e database)?	
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?						
Officers and stockholde	ers match	CBPL and datak	pase (if "No", dete	ermine if transfe	er necessary)?	
LGB 1 Response:			LGB 2 Resp	oonse:		,
Waive	Protest	Lapsed	Wai	re Prot	est Lapsed	
aster Checklist: Renewal] (re	ev 09/20/20	018)				Page 1 of 1



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

alcohol.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-17: 2019/2020 Renewal License Application

What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing liquor license that will expire on December 31, 2018. All fields of this form must be complete and correct, or the application will be returned to you in the manner in which it was received, per AS 04.11.270 and 3 AAC 304.105. The Community Council field only should be verified/completed by licensees whose establishments are located within the Municipality of Anchorage or outside of city limits within the Matanuska-Susitna Borough.

This form must be completed correctly and submitted to the Alcohol & Marijuana Control Office (AMCO)'s main office, along with all other required documents and fees, before any renewal license application will be considered complete. Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees that an application will be considered complete, or that a license will be renewed.

	processing of renewal payments ered complete, or that a license w			ites nor guar	antees that an		
Se	ection 1 – Establishmer	nt and Co	ntact Inform	nation			
Enter information for the bus	siness seeking to have its license rene	wed. If any po	pulated informatio	n is incorrect, p	olease contact AMCO.		
Licensee:	BPO Elks Lodge #1662			License #:	363		
License Type:	Club			Legal Ref.:	AS 04.11.110		
Doing Business As:	BPO Elks Lodge #1662	2					
Premises Address:	412 Sawmill Creek Blvd						
Local Governing Body:	City & Borough of Sitka						
Community Council:	None						
Mailing Address:	412 Sawmill	CREEK	RD				
City:	Sitka	State:	AK	ZIP:	99835		
Enter information for the indi	vidual who will be designated as the uired to be listed in and authorized to	primary point sign this appl	of contact regardir	ng this applicat	ion. This individual		
Contact Licensee:	JON SheNNETT		Contact Phone	90	7-747-6822		
Contact Email:	JON Shewnett 5: tka 1662 @ OUT	· look , C	om				
Optional: If you wish for AMC this application and other mat	Optional: If you wish for AMCO staff to communicate with individual who is not a licensee named on this form (eg: legal counsel) about this application and other matters pertaining to the license, please provide that person's contact information in the fields below.						
Name of Contact:			Contact Phone	::			
Contact Email:							
[Form AB-17] (rev 09/17/2018)			AMCO		Page 1 of 4		



Form AB-17: 2019/2020 Renewal License Application

Section 2 - Entity or Community Ownership Information

This top subsection must be completed by any Ecensee that is a <u>corporation or LLC</u>. Corporations and LLCs are required to be in good number, nor your business license number, You may view your entity's status or find your CBPL. This number is neither your EIN/tax (D following site into st./www.commerce.alaska.sov/cbp/main/search/entities

General partnerships and local governments should skip to the second half of this page. Licensees who directly hold a license as an individual or individuals should skip to Section 3.

Alaska CBPL Entity #:	1620	19 D				
You must ensure that you	are able to certify	the following st	stement before	signing your initials in	the house the st	44
I certify that this entity is in are also currently and accu	n good standing wi	th cool and the	all current enti	ity officials and stakeho	olders (listed below	w) 123
of the applicant is a limit ownership interest of 1 if the applicant is a part with an interest of 10x moortant Note: The informatch that which is listed when that which is listed in	poretion, the folior ation, and for each ited liability organi 10% or more, and fi tnership, including if or more, and for e nation provided in t	wing information president, vice- ization, the follow or each manager a limited partner ach general per the below fields (must be completesident, secretary information, ship, the followiner.	se attach additional co- eted for each stockhold tary, and monaging off n must be completed for ing information must b	mpleted copies of der who owns 103 floer, or each member we ee completed for each des, and percentas	this page. Wormore of with an
nat individual on this applic Name of Official:	Am u	L. Fallure to list a	Il required title	s constitutes an Incomp	olete application.	toe ascerd for
		The state of the s	110.			
Title(s):		A /	Phone:	aranto	% Owned	
	Director 4/18 S	×		an and ist	% Owned	
Mailing Address:	Directo	×	Phone:		% Owned	74845
Mailing Address: City:	DIRETO 418 S	Marill C	State:			ने कुछ के दिल्ला के किए के किए
Mailing Address: City: Name of Official:	DIRECTOR SITES	Marille C	state:	AK	ZIFL C	रेम्म्
Name of Official: Title(s):	Director	AND MILLER	State:			79,8/3-5
Mailing Address: City: Name of Official: Title(s): Mailing Address:	Director	Marille C	State:	AK	ZIFL C	79/35
Meiling Address: City: Name of Official: Title(s): Meiling Address: City:	Directory List Le Directory List Le Siller	Augusta La	State: State:	AK	Zirs. c	19835 19835
Mailing Address: City: Name of Official: Title(s): Mailing Address: City:	DIRECTOR AND SITES AND DIRECTOR AND SITES AND DIRECTOR AND	AND MILLER	State: State: Whome: State:	AK	ZiPs. c	TOPESS
Mailing Address:	Directory 418 S. Sitten Lisa L. Directory 418 S. Sitten Michael Directory	Augusta La	State: State: Phone: State: Phone:	AK	Zirs. c	79,8/35



NOV 2 6 2018



Form AB-17: 2019/2020 Renewal License Application

Section 2 – Entity or Community Ownership Information

This top subsection must be completed by any licensee that is a <u>compration</u> or <u>LLC</u>. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). This number is neither your EIN/tax ID number, nor your business license number. You may view your entity's status or find your CBPL entity number by vising the following site: https://www.commerce.alaska.gov/cbp/main/search/entities General partnerships and local governments should skip to the second half of this page. Licensees who directly hold a license as an Individual or Individuals should skip to Section 3.

	you are able to certify the	tollowing st	atement befor	e signing your initials	In the box to	the right:	Initials
I certify that this entity	is in good standing with (accurately listed with CBP	CDD1 - 1.1	t all current en	tity officials and stake	holders (listed	l below)	255
the applicant is a the stock in the cor if the applicant is a councership interest if the applicant is a with an interest of the applicant is a with an interest of	e completed by any comment is applying for renewal. I compression, the following portion, and for each prelimited liability organization of 10% or more, and for examinessing, including a life 10% or more, and for each comment of 10% or more, and for each comment of 10% or more, and for each of the light	g information scident, vice- jon, the follow ach monages mited partner general part below fields (must be comp president, secn wing information ship, the follow ther.	isleted for each stockhetury, and managing in must be completed wing information must	completed cop older who own officer. for each mem t be completed	les of this pa ns 10% or mo ther with an I for each pai	ge, are of rtner
Name of Official;	plication and with CBPL, F	-	ell required title	s consututes an incol	nplete applica	ion.	sa tor
Title(s);	Dipeton		Phone:		1 1 10		
Mailing Address:		Smill	_	903907-6	872 % OW	med:	_//
City:	Sitter	Gran (II	State:	ZIK	ZIP:	998	-1'
Name of Official:	Kally	2				1700	
fitle(s):	Diegros	Pera	Phone:		-		
Aailing Address:		mill	1	907-117-60	S) % Own	ned:	
ity:	SAM	MIII	States	AN	ZIP:	Mate	17
lame of Official:				7	14.	49900	
tie(s):	JAMES	DUNN	AVANT				
lalling Address:	President		Phone:	907-747-680	3- % Own	ed:	
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	SHK		State:	Ak	ZIP:	99839	_
AB-17] (rev 09/17/2018) se #363 DBA BPO Elks Lod				Ann	COC	14095	
- HOW DEAD ENE (Od	ge #1662			NOV 2		Page Z of	4





Form AB-17: 2019/2020 Renewal License Application

Section 2 – Entity or Community Ownership Information

This top subsection must be completed by any licensee that is a <u>corporation</u> or <u>LLC</u>. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). This number is neither your EIN/tax ID number, nor your business license number. You may view your entity's status or find your CBPL entity number by vising the following site: https://www.commerce.alaska.gov/cbp/main/search/entities

General partnerships and local governments should skip to the second half of this page. Licensees who directly hold a license as an individual or individuals should skip to Section 3.

Alaska CBPL Entity #:	16209	0	

You must ensure that you are able to certify the following statement before signing your initials in the box to the right:

Initials

I certify that this entity is in good standing with CBPL and that all current entity officials and stakeholders (listed below) are also currently and accurately listed with CBPL.



This subsection must be completed by any community or entity, including a corporation, limited liability company, partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

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

Important Note: The information provided in the below fields (including spelling of names, specific titles, and percentages held) must match that which is listed with CBPL. If one individual holds multiple titles mentioned in the bullets above, all titles must be listed for that individual on this application and with CBPL. Failure to list all required titles constitutes an incomplete application.

Name of Official:	DUSTIN	Collier	-		
Title(s):	Vice-Presiden	Phone:	907-741-6822	% Owned:	
Mailing Address:	44	will cleek RO			
City:	Sitka	State:	AL	ZIP:	79835

Name of Official:	JON ShenveTT				
Title(s):	Secretary	Phone:	907-247-6800	% Owr	ned:
Mailing Address:	410 SAW MILL C	Leck RD		1	
City:	Sitter	State:	AK	ZIP:	79835

Name of Official:			
Title(s):	Phone:	% Owned:	
Mailing Address:			
City:	State:	ZIP:	

[Form AB-17] (rev 09/17/2018) License #363 DBA BPO Elks Lodge #1662 AMCO

Page 2 of 4



Form AB-17: 2019/2020 Renewal License Application

Section 3 - Sole Proprietor Ownership Information

This section must be completed by any licensee who directly holds the license as an individual or multiple individuals and is applying for license renewal. If more space is needed, please attach a separate sheet that includes all of the required information. Entities should skip to Section 4. The following information must be completed for each licensee and each affiliate (spouse). This individual is an: applicant affiliate (spouse) Name: **Contact Phone:** Mailing Address: City: State: ZIP: Email: This individual is an: applicant affiliate (spouse) Name: **Contact Phone: Mailing Address:** City: State: ZIP: Email: Section 4 – Alcohol Server Education This section must be completed only by the holder of a beverage dispensary, club, or pub license or conditional contractor's permit. The holders of all other license types should skip to Section 5. Read the line below, and then sign your initials in the box to the right of the statement: Initials I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a patron have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, as set forth in AS 04.21.025 and 3 AAC 304.465. Section 5 - License Operation Check a single box for each calendar year that best describes how this liquor license was operated: 2017 2018 The license was regularly operated continuously throughout each year. The license was regularly operated during a specific season each year. The license was only operated to meet the minimum requirement of 240 total hours each calendar year. If this box is checked, a complete copy of Form AB-30: Proof of Minimum Operation Checklist, and all necessary documentation must be provided with this application. The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both of the calendar years. If this box is checked, a complete copy of Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated for at least the

minimum requirement, unless a complete copy of the form (including fees) has already been submitted for that year.

[Form AB-17] (rev 09/17/2018) License #363 DBA BPO Elks Lodge #1662 Page 3 of 4



Form AB-17: 2019/2020 Renewal License Application

Section 6 – Violations and Convic	tions					
Applicant violations and convictions in calendar years 2017 and 2018:		Yes	No			
Have any notices of violation (NOVs) been issued to this licensee in the calendar years 201	7 or 2018?		1			
Has any person or entity named in this application been convicted of a violation of Title 04	, of 3 AAC 304, or a lo	cal				
ordinance adopted under AS 04.21.010 in the calendar years 2017 or 2018?						
If "Yes" to either of the previous two questions, attach a separate page to this application	n listing all NOVs and	or conviction	ıs.			
Section 7 – Certifications						
Read each line below, and then sign your initials in the box to the right of each statemen	t:		Initials			
I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been list in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect licensed business.	ed on this application, t financial interest in t	, and that the	117			
I certify that I have not altered the functional floor plan or reduced or expanded the area of and I have not changed the business name or the ownership (including officers, managers, stakeholders) from what is currently approved and on file with the Alcoholic Beverage Control of the control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the Alcoholic Beverage Control of the currently approved and on file with the currently approved and the currently appro	general partners, or	es,	137			
I certify on behalf of myself or of the organized entity that I understand that providing a fal any other form provided by AMCO is grounds for rejection or denial of this application or re	se statement on this f evocation of any licens	orm or se issued.	15)			
As an applicant for a liquor license renewal, I declare under penalty of perjury that I have re 3 AAC 304, and that this application, including all accompanying schedules and statements, provide all information required by the Alcoholic Beverage Control Board or AMCO staff in that failure to do so by any deadline given to me by AMCO staff will result in this application	is true, correct, and c support of this applica	omplete. I agr	erstand			
1/2 Short	110R	v (1970)				
Signature of licensee Signal	ture of Notary Public	Sws				
_ 01 ~	^					
Printed name of licensee ALASKA Notary Public in and for the	e State of MLAS	JCA	·'			
Myco	mmission expires: 🤨	112/202	j			
JUDITH A. BROWN Subacribed and sworn to before me this 23 day of			107			
My Commission Expires	or do do wear		<u> </u>			
my commission expires						
Yes No Seasonal License? If "Yes", write your six-month operating period:						
License Fee: \$ 1200.00 Application Fee: \$ 300.00	TOTAL:	\$ 1500.00				
Miscellaneous Fees:						
GRAND TOTAL (if different than TOTAL):		1500 -				

[Form AB-17] (rev 09/17/2018) License #363 DBA BPO Elks Lodge #1662 AMCO

Page 4 of 4

Department of Commerce, Community, and Economic Development CORPORATIONS, BUSINESS & PROFESSIONAL LICENSING

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Corporations / Entity Details

ENTITY DETAILS

Name(s)

Type

Name

Legal

SITKA, ALASKA LODGE NO. 1662, BENEVOLENT AND PROTECTIVE ORDER OF

Name

ELKS OF THE US OF AMERICA

Entity Type: Nonprofit Corporation

Entity #: 16209D

Status: Good Standing

AK Formed Date: 10/20/1976

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 7/2/2020

Entity Mailing Address: 412 SAWMILL CREEK RD, SITKA, AK 99835-7446

Entity Physical Address: 412 SAWMILL CREEK RD, SITKA, AK 99835-7446

Registered Agent

Agent Name: Jon E Shennett

Registered Mailing Address: 412 SAWMILL CREEK ROAD, Sitka, AK 99835

Registered Physical Address: 412 SAWMILL CREEK ROAD, Sitka, AK 99835

Officials

AK Entity #

Name

Titles

AMY NELSON

Director

BRANDY PEER

Treasurer

DAVID ALEXANDER

Director

Show Former

Owned

AK Entity #	Name	Titles	Owned
	DUNNAVANT JAMES	President	
	DUSTIN COLLIER	Vice President	
	JON SHENNETT	Secretary	
	LISA LANGENFELD	Director	
	MICHAEL COLEMAN	Director	
	Rafe Allensworth	Director	

Filed Documents

Date Filed	Туре	Filing	Certificate
10/20/1976	Creation Filing		
5/27/1986	Biennial Report		
5/09/1988	Biennial Report		
1/04/1991	Biennial Report		
6/30/1992	Biennial Report	Click to View	
8/25/1994	Biennial Report		
5/24/1996	Biennial Report	Click to View	
7/13/1998	Biennial Report	Click to View	
6/28/2000	Biennial Report	Click to View	
11/15/2002	Biennial Report	Click to View	
6/02/2004	Biennial Report	Click to View	
6/08/2006	Biennial Report	Click to View	
2/24/2009	Agent Change	Click to View	
2/24/2009	Biennial Report	Click to View	
11/29/2010	Biennial Report	Click to View	
4/17/2012	Biennial Report	Click to View	
6/02/2014	Biennial Report	Click to View	
8/30/2016	Biennial Report	Click to View	
12/02/2016	Change of Officials	Click to View	
10/06/2017	Change of Officials	Click to View	
3/28/2018	Change of Officials	Click to View	
4/30/2018	Biennial Report	Click to View	

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