

# Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

January 5, 2022

Kenai Peninsula Borough

VIA Email: mjenkins@kpb.us; jvanhoose@kpb.us;

maldridge@kpb.us; ncarver@kpb.us; slopez@kpb.us

jblankenship@kpb.us; cjackinsky@kpb.us

License Type:	Brewery	License Number:	6011
Licensee:	Kenai Kombucha LLC		
Doing Business As:	Kenai Kombucha		
Premises Address:	41266 Kalifornsky Beach Road		

New Application     ■	☐ Transfer of Ownership Application				
☐ Transfer of Location Application	☐ Transfer of Controlling Interest Application				

We have received a completed 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 protest within 60 days and show proof of service upon the applicant.

AS 04.11.491 – AS 04.11.509 provide that the board will deny a license application if the board finds that the license is prohibited under as a result of an election conducted under AS 04.11.507.

AS 04.11.420 provides that the board will not issue a license when a local governing body protests an application on the grounds that the applicant's proposed licensed premises are located in a place within the local government where a local zoning ordinance prohibits the alcohol establishment, unless the local government has approved a variance from the local ordinance.

Sincerely,

Glen Klinkhart, Director

amco.localgovernmentonly@alaska.gov



Alaska Alcoholic Beverage Control Board

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

## Form AB-00: New License Application

#### What is this form?

This new license application form is required for all individuals or entities seeking to apply for a new liquor license. Applicants should review **Title 04** of **Alaska Statutes** and **Chapter 304** of the **Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260 and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

### **Section 1 – Establishment and Contact Information**

Enter information for the b	usiness seeking to be licensed.						
Licensee:	Kenai Kombucha LLC			····			
License Type:	Brewery Statutory Reference: 04.11.130						
Doing Business As:	Kenai Kombucha						
Premises Address:	41266 Kalifornsky Beach	n Rd			•		
City:	Kenai	State:	AK		ZIP:	99611	
Local Governing Body:	Kenai Peninsula Boroug	h			L.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Community Council:	NA						
Mailing Address:	PO BOX 1215						
City:	KENAI	KENAI State: AK ZIP: 99611					
Designated Licensee:	DEVON GONZALEZ						
Contact Phone:	907-741-2500	Business I	Phone:	907-74	11-282	25	
Contact Email:	KENAIKOMBUCHA@GN	MAIL.CO	M	,			
Yes No Seasonal License? If "Yes", write your six-month operating period:							
	OFFICE US	SE ONLY		-			
Complete Date:	1-5-2022 License Years:			License	#:	6011	
Board Meeting Date:	1-18-2022	Transa	ection #:	10	038		
Issue Date:		BRE:		′		11211 KRS	



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u>

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

Phone: 907.269.0350

### Alaska Alcoholic Beverage Control Board

# Form AB-00: New License Application

Section 2 – Pro	emises In	formation		
Premises to be licensed is:				
an existing facility a new building	a propo	sed building	<b></b>	
The next two questions must be completed by beverage dispe				
What is the distance of the shortest pedestrian route from the outer boundaries of the nearest school grounds? Include	the public entr	ance of the building of you	ur propos	ed premises to
4.3 miles		easarement in your answ	er.	
What is the distance of the shortest pedestrian route from the public entrance of the nearest church building? Include	the public entra the unit of mea	ance of the building of you	ur propose	ed premises to
.2 miles/ 3 minutes walking		and the second s		
Section 3 – Sole Proprie				
This section must be completed by any sole proprietor who is a lf more space is needed, please attach a separate sheet with th The following information must be completed for each licensee a specificant affiliate	pplying for a lice	cense. Entities should skip		n 4.
This section must be completed by any sole proprietor who is a If more space is needed, please attach a separate sheet with th The following information must be completed for each licensee a This individual is an:  applicant  affiliate  Name:	pplying for a lice	cense. Entities should skip		n 4.
This section must be completed by any sole proprietor who is a If more space is needed, please attach a separate sheet with th The following information must be completed for each licensee a This individual is an:  Address:	pplying for a lide required infound each affiliate	cense. Entities should skip		n 4.
This section must be completed by any sole proprietor who is a If more space is needed, please attach a separate sheet with th The following information must be completed for each licensee a This individual is an:    Applicant   Appli	pplying for a lice	cense. Entities should skip		n 4.
This section must be completed by any sole proprietor who is a If more space is needed, please attach a separate sheet with the The following information must be completed for each licensee at applicant affiliate  Name:  Address:  City:	pplying for a lide required infound each affiliate	cense. Entities should skip	to Section	n 4.
This section must be completed by any sole proprietor who is a If more space is needed, please attach a separate sheet with the The following information must be completed for each licensee at affiliate  This individual is an: applicant affiliate  Name:  Address:  City:	pplying for a lide required infound each affiliate	cense. Entities should skip	to Section	n 4.
This section must be completed by any sole proprietor who is a If more space is needed, please attach a separate sheet with the The following information must be completed for each licensee at a sphicant affiliate  Name:  Address:  City:  This individual is an: applicant affiliate	pplying for a lide required infound each affiliate	cense. Entities should skip	to Section	n 4.



Alaska Alcoholic Beverage Control Board

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 alcohol.licensing@alaska.gov

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

Phone: 907.269.0350

### **Section 4 – Entity Ownership Information**

This section must be completed by any <u>entity</u>, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 5.

If more space is needed, please attach a separate sheet with the required information.

Form AB-00: New License Application

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

Entity Official:	BRIAN GONZALEZ				
Title(s):	MEMBER	Phone:	907-741-2935	% Owned:	51
Address:	41270 KALIFORNSKY E	BEACH	RD		
City:	KENAI	State:	AK	ZIP: 996	 611
			-1	.1	
Entity Official:	DEVON GONZALEZ				
Title(s):	MEMBER	Phone:	907-741-2500	% Owned:	49
Address:	41270 KALIFORNSKY E	BEACH F	RD		J.
City:	KENAI	State:	AK	ZIP: 996	611
Fundam Official				<u> </u>	
Entity Official:					
Title(s):		Phone:		% Owned:	
Address:				L	
City:		State:		ZIP:	
F 000 1 1					
Entity Official:					
Title(s):		Phone:		% Owned:	
Address:			1		
City:		State:		ZIP:	· · · · · · · · · · · · · · · · · · ·



Alcohol and Marijuana Control Office

550 W 7<sup>th</sup> 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-00: New License Application

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

DOC Entity #:	10102544	AK Formed Date:	03-21-2019	Home State:	AK	
Registered Agent:	DEVON GOI	VZALEZ	Agent's Phone:	907-741-25	500	
Agent's Mailing Address:	PO BOX 121	5				
City:	KENAI	State:	AK	ZIP:	9961	1
Residency of Agent:					Yes	No
ls your corporation or LL					V	
	Sec	tion 5 – Other L	icenses			
Ownership and financial intere	st in other alcoholic	beverage businesses:			Yes	No
Does any representative any other alcoholic bever	age business that do	es business in or is licen	sed in Alaska?		laska whi	ich.
license number(s) and licens	se type(s):		N.	na ii iicenseu iii Ai		
		M	n			
	Sec	tion 6 – Author	ization			
ommunication with AMCO sta	ff:				Yes	No No
Does any person other the AMCO staff?	an a licensee named	in this application have a	authority to discuss th	nis license with	V	
If "Yes", disclose the name of	f the individual and t	the reason for this autho	orization:			
BRIAN GONZALEZ, H	HUSBAND,MEN	1BER 907-741-293	35			
orm AB-001 (rev 10/10/2016)						



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> 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-00: New License Application

Section 7 - Certifications	
Read each line below, and then sign your initials in the box to the right of each statement:	Initials
l certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.	Ly
I certify that all proposed licensees have been listed with the Division of Corporations.	S
I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.	by.
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.	
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	1
As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AA that this application, including all accompanying schedules and statements, is true, correct, and complete.	C 304, and
Signature of licensee Signature of Notary Public	
Printed name of licensee  Notary Public in and for the State of Washa	<u> </u>
My commission expires: <u>09/22/</u> Subscribed and sworn to before me this <u>/</u> day of <u>Octobus</u>	2022
Subscribed and sworn to before me this	_ 20 <u>2/</u> .



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> 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-00: New License Application

## Section 7 - Certifications

Read each line below, and then sign your initials in the box to the right of each statement: Initials I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application. I certify that all proposed licensees have been listed with the Division of Corporations. I certify that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued. I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465. I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application. As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete. Signature of licensee Signature of Notary Public BRIAN GONZALEZ Notary Public in and for the State of Printed name of licensee My commission expires: 05 Subscribed and sworn to before me this 29th day of \_\_\_\_\_\_ (RM Notary Public REBECCA FIELDEN

> State of Alaska My Commission Expires May 1, 2022



https://wwv

Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> 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-02: Premises Diagram

#### What is this form?

A detailed diagram of the proposed licensed premises is required for all liquor license applications, per AS 04.11.260 and 3 AAC 304.185. Your diagram must include dimensions and must show all entrances and boundaries of the premises, walls, bars, fixtures, and areas of storage, service, consumption, and manufacturing. If your proposed premises is located within a building or building complex that contains multiple businesses and/or tenants, please provide an additional page that clearly shows the location of your proposed premises within the building or building complex, along with the addresses and/or suite numbers of the other businesses and/or tenants within the building or building complex.

The second page of this form is not required. Blueprints, CAD drawings, or other clearly drawn and marked diagrams may be submitted in lieu of the second page of this form. The first page must still be completed, attached to, and submitted with any supplemental diagrams. An AMCO employee may require you to complete the second page of this form if additional documentation for your premises diagram is needed.

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

	Yes	No
I have attached blueprints, CAD drawings, or other supporting documents in addition to, or in lieu of, the second page of this form.	V	

#### **Section 1 – Establishment Information**

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

Licensee:	KENAI KOMBUCHA LLC	License	Number:	6011	
License Type:	BREWERY				
Doing Business As:	KENAI KOMBUCHA				
Premises Address:	41266 KALIFORNSKY BEACH RD				
City:	KENAI	State:	AK	ZịP:	99611

Alcohol stored = Served | Sold = Mannyfactured =

**ODWA** 

DEC 3 0 2021

Kalifornsky Beach Rd

3 6 FEET

-32,-0,--32,-0.--19'-4½"-

Driveway (Parking lot