

Approved	Denied
Public Hearing:	11/26/18
Date Action Taken:	11/26/18
Attest:	<i>Heidi Geagel</i>

**CITY OF SELDOVIA
ACTION MEMORANDUM 19-03**

Title: City Council Statement of non-objection for the renewal of the Linwood Bar Package Store Liquor License #657 and the Linwood Bar Beverage Dispensary Liquor License #656

Agenda of: November 26, 2018

Originator: Heidi Geagel, City Clerk

Date: 11/07/2018

Route to:	Department Head	Signature	Date
X	City Clerk	<i>Heidi Geagel</i>	11/20/2018
X	City Manager	<i>Caristi Cameron</i>	11/20/18
X	Finance Officer	<i>Jackie Sforza</i>	11/20/18
X			

Reviewed by City Manager: *Caristi Cameron*

Attachment(s):

- Application Notice #657
- Complete Application #657
- Application Notice #656
- Complete Application #656
- KPB Letter of Non-Objection of License Renewal Application #656

Summary Statement:

The Linwood Bar has applied for a renewal for their Package Store Liquor License #657 and their Beverage Dispensary Liquor License #656. State law requires local governing bodies to review requests pertaining to liquor licenses within their municipalities. The City may waive the right to protest or may file a protest to a request.

Administration recommendation: Approve Action Memorandum 19-03



THE STATE
of **ALASKA**
GOVERNOR BILL WALKER

**Department of Commerce, Community,
and Economic Development**
ALCOHOL & MARIJUANA CONTROL OFFICE
550 West 7th Avenue, Suite 1600
Anchorage, AK 99501
Main: 907.269.0350

October 30, 2018

City of Seldovia
Attn: City Clerk
VIA Email: info@cityofseldovia.com
Cc: joanne@borough.kenai.ak.us
jblankenship@borough.kenai.ak.us
tshassetz@kpb.us

Re: Notice of 2019/2020 Liquor License Renewal Application

License Type:	Package Store	License Number:	657
Licensee:	Seldovia Enterprises, Inc.		
Doing Business As:	Linwood Bar		

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
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:	Linwood Bar	License Number:	657
License Type:	Package Store		
Examiner:	<i>Carie</i>	Transaction #:	936838

Document	Received	Completed	Notes
AB-17: Renewal Application	10/09/2018	10/23	
App and License Fees	10/09/2018	10/9	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement			
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation			
AB-30: Minimum Operation			
AB-33: Restaurant Affidavit			
COI / COC / 5 Star			
FP Cards & Fees / AB-08a			
Late Fee			

Names on FP Cards:	
--------------------	--

	Yes	No
Selling alcohol in response to written order (package stores)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mailing address and contact information different than in database (if yes, update database)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

LGB 1 Response:

Waive
 Protest
 Lapsed

LGB 2 Response:

Waive
 Protest
 Lapsed



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

Package Store License

Form AB-17b: 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 package store 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.

Section 1 – Establishment and Contact Information

Enter information for the business seeking to have its license renewed. If any populated information is incorrect, please contact AMCO.

Licensee:	Seldovia Enterprises, Inc.	License #:	657
License Type:	Package Store	Statute:	AS 04.11.150
Doing Business As:	Linwood Bar		
Premises Address:	257 Main Street		
Local Governing Body:	City of Seldovia (Kenai Peninsula Borough)		
Community Council:	None		

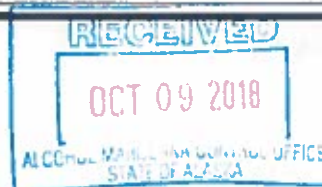
Mailing Address:	PO BOX 291		
City:	Seldovia	State:	Alaska
		ZIP:	99663

Enter information for the individual who will be designated as the primary point of contact regarding this application. This individual must be a licensee who is required to be listed in and authorized to sign this application.

Contact Licensee:	Stephanie Blanchard	Contact Phone:	(907)205-0944
Contact Email:	sisteph@gmail.com		

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:			





Alaska Alcoholic Beverage Control Board
Form AB-17b: 2019/2020 Package Store Renewal License Application

Section 2 - Entity or Community Ownership Information

This top subsection must be completed by any licensee that is a corporation or LLC. 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 using the following site: <https://www.commerce.alaska.gov/cbo/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 #:	10006975	Initials
-----------------------	----------	----------

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

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.

SB

- 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 corporation, 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 limited liability organization, 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 partnership, 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:	Stephanie Blanchard		
Title(s):	President/secretary	Phone:	(907) 205-0144
Mailing Address:	PO Box 254		
City:	Seldovia	State:	AK
		ZIP:	99663

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

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

RECEIVED
 OCT 09 2018
 ALASKA DEPARTMENT OF REVENUE
 DIVISION OF ALCOHOLIC BEVERAGE CONTROL

RECEIVED
 OCT 23 2018
 ALCOHOLIC BEVERAGE CONTROL DIVISION
 STATE OF ALASKA



Form AB-17b: 2019/2020 Package Store 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

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

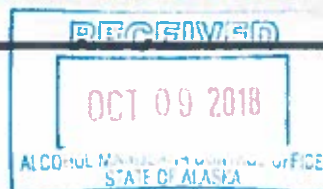
Initials

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.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
The license was regularly operated during a specific season each year.	<input type="checkbox"/>	<input type="checkbox"/>
The license was only operated to meet the minimum requirement of 240 total hours each calendar year. <i>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.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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. <i>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.</i>	<input type="checkbox"/>	<input type="checkbox"/>





Alaska Alcoholic Beverage Control Board
Form AB-17b: 2019/2020 Package Store Renewal License Application

Section 6 - Written Orders

Written orders in calendar years 2019 and 2020: Yes No
 Do you intend to sell alcoholic beverages and ship them to another location in response to written solicitation in calendar years 2019 and/or 2020?

Section 7 - Violations and Convictions

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 2017 or 2018?
 Has any person or entity named in this application been convicted of a violation of Title 04, of 3 AAC 304, or a local 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 listing all NOVs and/or convictions.

Section 8 - Certifications

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

I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business.

I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name or the ownership (including officers, managers, general partners, or stakeholders) from what is currently approved and on file with the Alcoholic Beverage Control (ABC) Board.

I certify on behalf of myself or of the organized entity 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.

As an applicant for a liquor license renewal, 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. I agree to provide all information required by the Alcoholic Beverage Control Board or AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned to me as incomplete.

Stephanie Blanchard
 Signature of licensee
Stephanie Blanchard
 Printed name of licensee

Brittaney Griffith
 Signature of Notary Public
 and for the State of Alaska

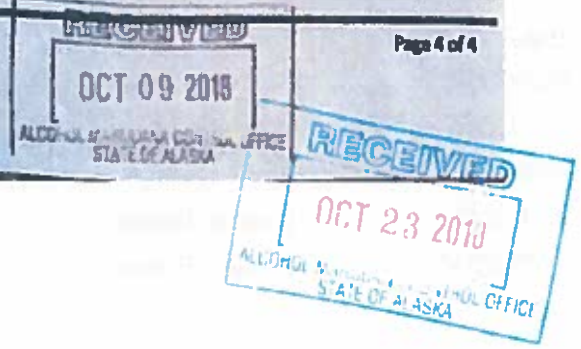


My commission expires: 05/11/2019
 day of October, 2018.

Seasonal License? Yes No
 If "Yes", write your business operating period: _____

License Fee:	\$ 1500.00	Application Fee:	\$ 300.00	TOTAL:	\$ 1800.00
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					

[Form AB-17b] (rev 09/17/2018)
 License #657 DBA Linwood Bar



Details

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	Seldovia Enterprises Inc

Entity Type: Business Corporation

Entity #: 10006975

Status: Good Standing

AK Formed Date: 8/24/2012

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2020

Entity Mailing Address: PO BOX 254, SELDOVIA, AK 99663

Entity Physical Address: 253 MAIN ST, SELDOVIA, AK 99663

Registered Agent

Agent Name: STEPHANIE BLANCHARD

Registered Mailing Address: PO BOX 254, SELDOVIA, AK 99663

Registered Physical Address: 594 NATURES GATE AVE, SELDOVIA, AK 99663

Officials

AK Entity #	Name	Titles	<input type="checkbox"/> Show Former Owned
	Stephanie Blanchard	Director, President, Shareholder, Secretary, Treasurer	100

Filed Documents

Date Filed	Type	Filing	Certificate
8/24/2012	Creation Filing	Click to View	Click to View
5/31/2013	Initial Report	Click to View	
7/18/2013	Agent Change	Click to View	
2/11/2014	Biennial Report	Click to View	
12/06/2015	Biennial Report	Click to View	

Date Filed
3/18/2018

Type
Biennial Report

Filing
[Click to View](#)

Certificate

Close Details

Print Friendly Version



THE STATE
of **ALASKA**
GOVERNOR BILL WALKER

Department of Commerce, Community,
and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West 7th Avenue, Suite 1600

Anchorage, AK 99501

Main: 907.269.0350

October 22, 2018

City of Seldovia

Attn: City Clerk

VIA Email: info@cityofseldovia.com

Cc: joanne@borough.kenai.ak.us

iblankenship@borough.kenai.ak.us

tshassetz@kpb.us

Re: Notice of 2019/2020 Liquor License Renewal Application

License Type:	Beverage Dispensary	License Number:	656
Licensee:	Seldovia Enterprises, Inc.		
Doing Business As:	Linwood Bar		

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,

A handwritten signature in blue ink that reads "Erika McConnell".

Erika McConnell, Director

amco.localgovernmentonly@alaska.gov



Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	Linwood Bar	License Number:	656
License Type:	Beverage Dispensary		
Examiner:	Carrie	Transaction #:	936838

Document	Received	Completed	Notes
AB-17: Renewal Application	10/09/2018	10/12	
App and License Fees	10/09/2018	10/19	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement			
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation			
AB-30: Minimum Operation			
AB-33: Restaurant Affidavit			
COI / COC / 5 Star			
FP Cards & Fees / AB-08a			
Late Fee			

Names on FP Cards:	
--------------------	--

	Yes	No
Selling alcohol in response to written order (package stores)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mailing address and contact information different than in database (if yes, update database)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

LGB 1 Response:

LGB 2 Response:

- Waive
 Protest
 Lapsed
 Waive
 Protest
 Lapsed



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.

Section 1 – Establishment and Contact Information

Enter information for the business seeking to have its license renewed. If any populated information is incorrect, please contact AMCO.

Licensee:	Seldovia Enterprises, Inc.	License #:	656
License Type:	Beverage Dispensary	Legal Ref.:	AS 04.11.090
Doing Business As:	Linwood Bar		
Premises Address:	257 Main Street		
Local Governing Body:	City of Seldovia (Kenai Peninsula Borough)		
Community Council:	None		
Mailing Address:	PO Box 254		
City:	Seldovia	State:	AK
		ZIP:	99663

Enter information for the individual who will be designated as the primary point of contact regarding this application. This individual must be a licensee who is required to be listed in and authorized to sign this application.

Contact Licensee:	Stephanie Blanchard	Contact Phone:	(907) 205-0944
Contact Email:	sisteph@gmail.com		

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:			





Section 2 - Entity or Community Ownership Information

This too subsection must be completed by any licensee that is a corporation or LLC. 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 using the following site: https://www.commerce.alaska.gov/web/main/search/entities

Alaska CBPL Entity #: 10006975

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

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 corporation, 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 limited liability organization, 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 partnership, 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: Stephanie Blanchard
Title(s): President/secretary
Phone: 907 205 0744
% Owned: 100
Mailing Address: PO Box 254
City: Seldovia
State: AK
ZIP: 99663

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

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

RECEIVED

OCT 09 2018

RECEIVED

OCT 12 2018

ALCOHOL BEVERAGE CONTROL OFFICE STATE OF ALASKA



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:
Email:	ZIP:

This individual is an: applicant affiliate (spouse)

Name:	Contact Phone:
Mailing Address:	
City:	State:
Email:	ZIP:

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:

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	The license was regularly operated continuously throughout each year.
<input type="checkbox"/>	<input type="checkbox"/>	The license was regularly operated during a specific season each year.
<input type="checkbox"/>	<input type="checkbox"/>	The license was only operated to meet the minimum requirement of 240 total hours each calendar year.
<input type="checkbox"/>	<input type="checkbox"/>	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.
<input type="checkbox"/>	<input type="checkbox"/>	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.

RECEIVED

OCT 09 2018

ALCOHOL BEVERAGE CONTROL BOARD OFFICE
STATE OF ALASKA



Alaska Alcoholic Beverage Control Board

Form AB-17: 2019/2020 Renewal License Application

Section 6 - Violations and Convictions

Applicant violations and convictions in calendar years 2017 and 2018:

Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2017 or 2018? Yes No

Has any person or entity named in this application been convicted of a violation of Title 04, of 3 AAC 304, or a local ordinance adopted under AS 04 21.010 in the calendar years 2017 or 2018? Yes No

If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or convictions.

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 current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.430, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business. **SB**

I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name or the ownership (including officers, managers, general partners, or stakeholders) from what is currently approved and on file with the Alcoholic Beverage Control Board. **SB**

I certify on behalf of myself or of the organized entity 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. **SB**

As an applicant for a liquor license renewal, 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. I agree to provide all information required by the Alcoholic Beverage Control Board or AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned to me as incomplete.

Stephanie Blanchard
Signature of Licensee

Brittany Griffith
Signature of Notary Public

Stephanie Blanchard
Printed name of licensee



in and for the State of Alaska

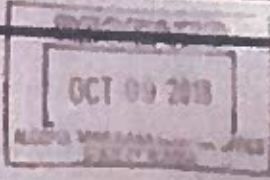
My commission expires 05/11/2019

Subscribed and sworn to on this 2 day of October, 2018

Seasonal License? Yes No
If "Yes", write your six-month operating period: _____

License Fee:	\$ 2500.00	Application Fee:	\$ 300.00	TOTAL:	\$ 2800.00
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					

Form AB-17 (rev 03/17/2018)
License 0065 DBA Licensed Bar



Page 4 of 4



Details

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	Seldovia Enterprises Inc

Entity Type: Business Corporation

Entity #: 10006975

Status: Good Standing

AK Formed Date: 8/24/2012

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2020

Entity Mailing Address: PO BOX 254, SELDOVIA, AK 99663

Entity Physical Address: 253 MAIN ST, SELDOVIA, AK 99663

Registered Agent

Agent Name: STEPHANIE BLANCHARD

Registered Mailing Address: PO BOX 254, SELDOVIA, AK 99663

Registered Physical Address: 594 NATURES GATE AVE, SELDOVIA, AK 99663

Officials

AK Entity #	Name	Titles	<input type="checkbox"/> Show Former Owned
	Stephanie Blanchard	Director, President, Shareholder, Secretary, Treasurer	100

Filed Documents

Date Filed	Type	Filing	Certificate
8/24/2012	Creation Filing	Click to View	Click to View
5/31/2013	Initial Report	Click to View	
7/18/2013	Agent Change	Click to View	
2/11/2014	Biennial Report	Click to View	
12/06/2015	Biennial Report	Click to View	

Date Filed
3/18/2018

Type
Biennial Report

Filing
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Certificate

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Office of the Borough Clerk

144 North Binkley Street, Soldotna, Alaska 99669 • (907) 714-2160 • (907) 714-2388 Fax

Johni Blankenship, MMC
Borough Clerk

10/23/2018

Ms. Heidi Geagel
City of Seldovia
Seldovia City Hall
245 Dock St.
Seldovia, AK 99663

RE: Non-Objection of License Renewal Application
Business Name : LINWOOD BAR
License Type : Beverage Dispensary
License Location : City of Seldovia
License No. : 656

Dear Ms. Geagel,

This serves to advise that the Kenai Peninsula Borough has reviewed the above referenced application and has no objection to this License Renewal application.

Should you have any questions, or need additional information, please do not hesitate to let us know.

Sincerely,

Johni Blankenship, MMC
Borough Clerk

JB/TS

Encl.

cc: sisteph@gmail.com; cityclerk@cityofseldovia.com; JRodgers@kpb.us

