

Document reference ID: 793

Licensing Application Summary

| Application ID: | 793 |
|---------------------------|---|
| Applicant Name: | Ak Qozb, Llc |
| License Type applied for: | Beverage Dispensary Tourism License (BDTL)(AS 04.09.350) |
| Application Status: | In Review |
| Application Submitted On: | 11/28/2023 |
| Entity Information | |

| Business Structure: | Limited liability company |
|---------------------|---------------------------|
| | |

Alaska Entity Number (CBPL): 10106975

Entity Contact Information

Entity Address: P.O. Box 202845, Anchorage, AK, USA

Ownership / Principal Party Details

| Principal Parent Entity | Principal Party | Role | %Ownership |
|-------------------------|-------------------|--------|------------|
| Ak Qozb, Llc | Ak Qof, Llc | Member | 44.01 |
| Ak Qozb, Llc | Lbh Qoz 36th, Llc | Member | 45.1 |

Premises Address

Nearest municipality, city, and/or borough:

Anchorage, Muni. of

Country, State, Zip:

AK, United States,

Basic Business information

Business/Trade Name:

Aloft Anchorage Midtown

Local Government and Community Council Details

City/Municipality

Anchorage (Municipality of)

Community Council Name

Midtown

Public Notice Posting Attestation and Publishers Affidavit

Attestations

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

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 305.700.

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

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.

I certify that all proposed licensees have been listed with Division of Corporation, Business, and Professional Licensing.

I certify that I and any individual identified in the business entity ownership section of this application, has or will read AS 04 and its implementing regulations.

The proposed changes conform to all applicable public health, fire, and safety laws.

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Signature

Electronic Signature not collected; application submitted based on paper form.

Payment Info

Payment Type : CC

PaymentId: 88f714bb-f7e8-47e0-945e-1ce395481c85 **Receipt Number:**

License Renewal

Is this application being made by you for the benefit of someone else? If "YES," indicate below or attach explanation.

No

Has the applicant, applicant's spouse, partner, officer, director or stockholders, of the licensed entity become disqualified by law or by facts and conditions from holding a license or permit under the Alcohol and Cannabis Control Information System Alcoholic Beverage Code ? If "YES," indicate below or attach explanation.

No

Have there been changes since your original application that have not been reported on this or previous applications ? If "YES," indicate below or attach explanation.

No

How many hours did you operate in 2022 as set forth in AS 04.11.330?

Operated to meet the minimum 240 hrs.

How many hours did you operate in 2023 as set forth in AS 04.11.330?

Operated to meet the minimum 240 hrs.

Are you a seasonal license and has your operation times/dates/seasons changed?

No

Has any person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordanince adopted under AS 04.21.010 in 2022 or 2023.7

No

Have any Notices of Violation been issued for this license in 2022 or 2023?

No

License Number: 6015

Mailing Address:

310 W 36th Ave Anchorage , AK 99503 - 5815



License Trade Name:

Imat Ribin



Alaska Alcoholic Beverage Control Board

Form AB-37: Tourism Statement

This form needs to be included with your application for a beverage dispensary tourism license. A new, transfer, or renewal application for a beverage dispensary tourism license (AS 04.09.350) must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements currently listed under AS 04.09.350 and 3 AAC 305.325.

This form must be completed and submitted to AMCO before any tourism license application will be determined complete.

Section 1 - EstablishmentInformation

Enter information for the licensed establishment or the business seeking to be licensed.

| Doing Business As: | Aloft Midtown Anchorage | License #: | 6015 |
|--------------------|-----------------------------|------------|------|
| License Type: | Beverage Dispensary Tourism | | |

Section 2 – Tourism Statement

2.1. Explain how the issuance, renewal, or transfer of the license to another person of the has/will encourage tourism.

The central focus of the business plan for the Aloft Anchorage Midtown involves catering to out of town tourists, offering them clean, comfortable, and affordable accommodation with all the amenities any traveler would expect and prefer to see in their hotel, including a welcoming environment for the guests to eat and drink.

Aloft Anchorage Midtown will also be serving beers, wines, and spirits as possible, giving our guests an opportunity to try Alaskan-made products.

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.09.350(c)(1):

This newer renovated facility is located at 310 W. 36th Ave., Anchorage, Alaska 99503. As such it is ideal for travelers who want a comfortable overnight stay in a clean, comfortable, location conveniently located in beautiful Anchorage midtown area.

2.3 Licensees licensed 12/31/23 and earlier. Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located?



2.4 If "no" who operates the tourism facility?

NO



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

Alaska Alcoholic Beverage Control Board

Form AB-37: Tourism Statement

2.5 Do you offer room rentals to the traveling public ?

| YES | |
|-----|--|
| V | |
| | |

YES

YES

NO

NO

NO

If "yes" answer the following questions AND you must apply for a Hotel or Motel Endorsement under AS 04.09.430 https://www.commerce.alaska.gov/web/amco/AlcoholLicenseApplication.aspx :

How many rooms are available?

146

How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)?

All rooms are equipped with kitchen facilities, which is a feature of an extended stay hotel such as Aloft Anchorage Midtown, No, we do not stock alcoholic beverages in the rooms,

| Do you stock or plan to stock alcoholic beverages in guest rooms? If yes, you must apply for |
|--|
| and qualify for a Hotel or Motel Endorsement under AS 04.09.430. |

If "no" to the question regarding rooms, is your facility located within an airport terminal?

2.6 If your establishment includes a dining facility, please describe that facility. If it does not please write "none".

Yes. Aloft Anchorage Midtown offers a light food menu in a comfortable setting.

2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists), please describe them. If they are not offered, please write "none".

Yes, Aloft Anchorage Midtown does provide tourist type amenities to its guests such as a Fitness Center, Indoor heated swimming pool and whirlpool spa and an outdoor volleyball court. We also recommend tours, and have a list on our website of close by tours, trips, and rentals, for our guests.



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Form AB-37: Tourism Statement

Section 3 – Certification

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

Initials

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Printed name of licensee affiliate





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| YES | |
|-----|--|
| ~ | |

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Printed name of licensee/affiliate

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