

Submitted by: ASSEMBLY CHAIR TRAINI,
VICE CHAIR FLYNN, AND ASSEMBLY
PUBLIC SAFETY
COMMITTEE CHAIR HONEMAN

CLERK'S OFFICE

APPROVED

Prepared by: Municipal Clerk

For reading: April 19, 2011

Date: 4-19-11

**ANCHORAGE, ALASKA
AR NO. 2011-107**

**A RESOLUTION OF THE ANCHORAGE MUNICIPAL ASSEMBLY STATING ITS
PROTEST REGARDING A RENEWAL OF A RESTAURANT/EATING PLACE LIQUOR
LICENSE #4725 FOR WINGWORLD INC. dba WINGS N THINGS, LOCATED AT 701 W.
36TH AVE. UNIT A-17, AND AUTHORIZING THE MUNICIPAL CLERK TO TAKE CERTAIN
ACTION.**

WHEREAS, WingWorld Inc. has made an application with the Alcoholic Beverage Control (ABC) Board and has paid the required fee for a Renewal of a Restaurant/Eating Place Liquor License #4725, to be used for Wings N Things, located at 701 W. 36th Ave. Unit A-17, Anchorage, Alaska; and

WHEREAS, the Assembly must enter any protest to the ABC Board within 60 days following receipt of the application; and

WHEREAS, the Anchorage Municipal Clerk received a copy of this application on February 23, 2011 and has determined that the last day for the Assembly to file a protest is April 25, 2011; and

WHEREAS, the Assembly Meeting on April 19, 2011 is the last scheduled regular meeting of the Anchorage Assembly prior to the expiration of the protest period; and

WHEREAS, the Municipal Clerk reports the following status concerning this location:

1. Any ABC Board violations and/or incidents on file that would lead to an ABC Board violation are attached;
2. There are taxes owing to the Municipality of Anchorage in the amount of **\$556.35**.

WHEREAS, protest by the Assembly is in order pending Municipal Clerk confirmation that outstanding items required for this location have been completed;

NOW, THEREFORE, THE ANCHORAGE ASSEMBLY RESOLVES:


Section 1. The Anchorage Assembly hereby enters its **PROTEST** for Renewal of Restaurant/Eating Place Liquor License # 4725 until this condition is met:

- Taxes owing to the Municipality of Anchorage in the amount of **\$556.35** are paid in full.

Section 2. A copy of this Assembly Resolution may be presented to the Alcoholic Beverage Control Board as proof that the Anchorage Assembly, as the local governing body, has stated its protest in order to allow the Director of the Alcoholic Beverage Control Board to hold processing of Restaurant/Eating Place Liquor License #4725 under local protest, until receipt by the Director of confirmation from the Municipal Clerk that the conditions in Section 1 have been met, and this protest is lifted as authorized by this Assembly Resolution.

Section 3. The Anchorage Assembly hereby authorizes the Municipal Clerk, upon Municipal Clerk confirmation that all conditions in Section 1 have been met, to provide written notification to the Alcoholic Beverage Control Board that this protest by the Anchorage Assembly is lifted, without further action by the Assembly.

PASSED AND APPROVED by the Anchorage Assembly this 19th day of April, 2011.


Chair

ATTEST:


Municipal Clerk

Alcoholic Beverage Control Board
 5848 E. Tudor Road
 Anchorage, AK 99507
 907 269-0350 Fax: 907 272-9412

RENEWAL Liquor License Application



This application is for:

- Seasonal -- Two 6-month periods in each year of the biennial period beginning _____ and ending _____
 Mo/Day Mo/Day
- Full 2-year period

SECTION A. LICENSE INFORMATION. Must be completed.		FEES	
License Number: 4725	Liquor License Type: Restaurant Eating	License Fee:	\$ 1600
	Local Governing Body: (City, Borough or Unorganized) Anchorage	Filing Fee:	\$ 200.00
License Year: 2011-2012	Has the license been exercised or active at least 30 eight-hour days during each of the two preceding calendar years? [AS 04.11.330(3)]	Penalty Fee: (If applicable)	\$ 500.00
Statute Reference Sec. 04.11.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, your application will be denied unless a <i>Waiver of Operation</i> (form available) is approved by the Alcoholic Beverage Control Board.	Total Submitted:	\$ 1300

Name of Licensee: WingWorld Inc.	Street Address or Location of Business: 701 W 36th Ave Unit A-17	Community Council Name(s) & Mailing Address: Midtown Community Council
Doing Business As (Business Name): Wings N Things	City: Anchorage, AK 99503	
Mailing Address: SAME	Business Telephone Number: 907-277-9464	
City, State, Zip:	Fax Number: 907	
<input type="checkbox"/> Check if this is a NEW mailing address	Email Address:	

SECTION B. RENEWAL INFORMATION		
Has the licensed premises been changed from the last diagram submitted? <input type="checkbox"/> Yes If yes, submit a new diagram <input checked="" type="checkbox"/> No	Has there been any change in ownership interest since the last application submitted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	PACKAGE STORE: Does this renewal include renewal of the notice required under AS04.11.150(a) to sell alcoholic beverages in response to written orders? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION C. Individual, corporate officer, director, limited liability organization member, manager or partner background.				
Does any individual, corporate officer, director, or limited liability organization member, manager or partner named in this application have any direct or indirect interest in any other alcoholic beverage business licensed in Alaska or any other state? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
If Yes, complete the following. Attach additional sheets if necessary.				
Name	Name of Business	Type of License	Business Street Address	State
Tracy Olsen	Wings N Things	4986	No Premise	AK

Has any individual, corporate officer, director, or limited liability organization member, manager or partner named in this application been convicted of a felony, a violation of AS 04, or been convicted as a licensee or manager of licensed premises in another state of the liquor laws of that state since the last application submitted?
 Yes If yes, attach written explanation. No

Alcoholic Beverage Control Board
5848 E Tudor Rd
Anchorage, AK 99507

Renewal Liquor License

www.dps.state.ak.us/abc

PAGE 2 OF 2
(907) 269-0350
Fax: (907) 272-9412

ENTITY OWNERSHIP (Corporation/LLC/LP)

Corporations, LLCs, LLPs and LPs must be registered with the Dept. of Community and Economic Development.

Name of Entity (Corporation/LLC/LP/LP) (or N/A if an Individual ownership): Wing World Inc. Telephone Number: 907-277-9464 Fax Number:

Corporate Mailing Address: 701 W 36th Ave Unit A-17

Name, Mailing Address and Telephone Number of Registered Agent: Tracy Olson 907-277-9464 Date of Incorporation OR Certification with DCED: 6/09 State of Incorporation: AK

Is the Entity in compliance with the reporting requirements of Title 10 of the Alaska Statutes? Yes 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 at least 10%)

Name	Title	%	Home Address & Telephone #	Work Phone #	Date of Birth
<u>Tracy Olson</u>	<u>owner</u>	<u>100</u>	<u>16860 W 2nd Ave Wasilla AK 99654</u>	<u>277-8464</u>	<u>9-26-68</u>

NOTE: On a separate sheet provide additional ownership/shareholder/member/director/officer information.

INDIVIDUAL OWNERSHIP (Individual or Partnership)

Individual Licensees/Affiliates (The ABC Board defines "Affiliate" as the spouse or significant other of a licensee. List each Affiliate.)

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

Restaurant/Eating Place Statement YES NO Gross receipts from the sale of food at the licensed premises constituted at least 50 percent of the gross receipts of the business during the 2009/2010 calendar license years as required under AS 04.11.100(e).

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, and this application is not in violation of any security interest or other contracted obligations.
- 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.

Signature of Licensee(s)

[Signature] Tracy Olson owner
Signature Name & Title (Please Print)

[Signature] and sworn to before me this 8th day of February, 2011
Notary Signature

Notary Public in and for the State of Alaska Commission expires: w/office



ENTITY INFORMATION

OR

INDIVIDUAL INFO

Content ID: 010110**Type:** AR_AllOther - All Other Resolutions

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Author: moserak**Initiating Dept:** Muni_Clk**Date Prepared:** 4/8/11 11:18 AM**Assembly Meeting Date:** 4/19/11

Workflow Name	Action Date	Action	User	Security Group	Content ID
Clerk_Admin_SubWorkflow	4/8/11 11:30 AM	Exit	Amanda Moser	Public	010110
AllOtherARWorkflow	4/8/11 11:30 AM	Checkin	Amanda Moser	Public	010110