



December 16, 2019

City of Homer

Kenai Peninsula Borough

Via Email: [clerk@cityofhomer-ak.gov](mailto:clerk@cityofhomer-ak.gov) ; [jblankenship@kpb.us](mailto:jblankenship@kpb.us) ; [Dhenry@kpb.us](mailto:Dhenry@kpb.us) ; [JRodgers@kpb.us](mailto:JRodgers@kpb.us) ;  
[SNess@kpb.us](mailto:SNess@kpb.us) ; [joanne@borough.kenai.ak.us](mailto:joanne@borough.kenai.ak.us) ; [tshassetz@kpb.us](mailto:tshassetz@kpb.us)

**Re: Notice of 2020/2021 Liquor License Renewal Application**

<b>License Type:</b>	Package Store	<b>License Number:</b>	4162
<b>Licensee:</b>	Safeway, Inc		
<b>Doing Business As:</b>	Oaken Keg #1832		

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,

Glen Klinkhart, Director  
[amco.localgovernmentonly@alaska.gov](mailto:amco.localgovernmentonly@alaska.gov)



Alaska Alcoholic Beverage Control Board

**Master Checklist: Renewal Liquor License Application**

Doing Business As:	Oaken Keg #1832	License Number:	4162
License Type:	Package Store		
Examiner:	<i>HANDI</i>	Transaction #:	1208118

Document	Received	Completed	Notes
AB-17: Renewal Application	12/9	<i>12/9</i>	
App and License Fees	12/9	<i>12/9</i>	

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	11/8	<i>11/8</i>	
Late Fee			

Names on FP Cards:	Vivekanand Sankaran
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	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)? <i>updated email and tel.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?	<input type="checkbox"/>	<input type="checkbox"/>
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?	<input type="checkbox"/>	<input type="checkbox"/>

LGB 1 Response:

LGB 2 Response:

Waive   
  Protest   
  Lapsed   
  Waive   
  Protest   
  Lapsed



Alaska Alcoholic Beverage Control Board

## Package Store License

# Form AB-17b: 2020/2021 Renewal License Application

Alcohol and Marijuana Control Office

550 W 7<sup>th</sup> Avenue, Suite 1600

Anchorage, AK 99501

[alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov)

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

Phone: 907.269.0350

### 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 is due to renew by December 31, 2019. 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 and submitted to AMCO's main office before any license renewal application will be reviewed. 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:	Safeway Inc.	License #:	4162
License Type:	Package Store		
Doing Business As:	Oaken Keg #1832		
Premises Address:	90 Sterling Highway		
Local Governing Body:	City of Homer (Kenai Peninsula Borough)		
Community Council:	None		

Mailing Address:	PO BOX 29096 MS 6531				
City:	PHOENIX	State:	AZ	ZIP:	85038

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:	ROBERT GORDON	Contact Phone:	208-395-3856
Contact Email:	ROBERT.GORDON@SAFEWAY.COM		

**Optional:** If you wish for AMCO staff to communicate with an 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:	NASC TAX	Contact Phone:	623-869-3573
Contact Email:	NASC.TAX@SAFEWAY.COM		





# Form AB-17b: 2020/2021 Package Store Renewal License Application

## Section 2 – Entity or Community Ownership Information

Licensees who directly hold a license as an individual or individuals should skip to Section 3. General partnerships and local governments should skip to the second half of this page. All licensees that are **corporations** or **LLCs** must complete this section. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). The CBPL Entity # below 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 visiting the following site: <https://www.commerce.alaska.gov/cbp/main/search/entities>**

Alaska CBPL Entity #:	39147F (SAFEWAY INC.)
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**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 **corporation**, the following information must be completed for each **shareholder 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. **You must list ALL of your qualifying officials, additional copies of this page or a separate sheet of paper may be submitted if necessary.**

Name of Official:	PLEASE SEE ATTACHED OFFICERS LIST			
Title(s):	Phone:	% Owned:		
Mailing Address:				
City:	State:	ZIP:		

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

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

DEC - 9 2019

SAFEWAY INC.  
ENTITY #39147F  
Officers List

Name of Official:	ALBERTSONS COMPANIES INC
Title(s):	SHAREHOLDER
Mailing Address:	5918 STONERIDGE MALL ROAD, TAX DIVISION, PLEASANTON, CA 94588-3229
Phone:	925-467-3700
% Owned	100%

Name of Official:	VIVEK SANKARAN
Title(s):	PRESIDENT
Mailing Address:	250 E PARKCENTER BLVD, BOISE, ID, 83706
Phone:	208-395-6200
% Owned	0%

Name of Official:	GARY MORTON
Title(s):	ASSISTANT SECRETARY, TREASURER, VICE PRESIDENT
Mailing Address:	250 E PARKCENTER BLVD, BOISE, ID, 83706
Phone:	208-395-6200
% Owned	0%

Name of Official:	ROBERT GORDON
Title(s):	DIRECTOR, SECRETARY
Mailing Address:	250 E PARKCENTER BLVD, BOISE, ID, 83706
Phone:	208-395-6200
% Owned	0%

AMCO  
DEC - 9 2019



# Form AB-17b: 2020/2021 Package Store Renewal License Application

## Section 3 – Sole Proprietor Ownership Information

Entities, such as corporations or LLCs, should skip this section. 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.

The following information must be completed for each licensee and each affiliate.

This individual is an:  applicant  affiliate

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

This individual is an:  applicant  affiliate

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:

2018    2019

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-17b: 2020/2021 Package Store Renewal License Application

## Section 6 - Written Orders

Written orders in calendar years 2020 and 2021: Yes No

Do you intend to sell alcoholic beverages and ship them to another location in response to written solicitation in calendar years 2020 and/or 2021?

## Section 7 - Violations and Convictions

Applicant violations and convictions in calendar years 2018 and 2019: Yes No

Have any notices of violation (NOVs) been issued for this license in the calendar years 2018 or 2019?

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 2018 or 2019?

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

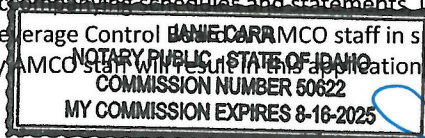
I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business.

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 (ABC) Board 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 the application being returned to me as incomplete.

[Signature]  
Signature of licensee



[Signature]  
Signature of Notary Public

Printed name of licensee \_\_\_\_\_ Notary Public in and for the State of Idaho

My commission expires: 8/16/2025

Subscribed and sworn to before me this 6 day of December, 2019.

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

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

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 Name	SAFEWAY INC.

**Entity Type:** Business Corporation

**Entity #:** 39147F

**Status:** Good Standing

**AK Formed Date:** 11/7/1986

**Duration/Expiration:** Perpetual

**Home State:** DELAWARE

**Next Biennial Report Due:** 1/2/2022

**Entity Mailing Address:** DANIELLE KNIGHT, PO BOX 20, BOISE, ID 83726-0020

**Entity Physical Address:** 11555 DUBLIN CANYON RD, PLEASANTON, CA 94588

### Registered Agent

**Agent Name:** JILL MCLEOD

**Registered Mailing Address:** 1031 W 4TH AVE STE 600, ANCHORAGE, AK 99501

**Registered Physical Address:** 1031 W 4TH AVE STE 600, ANCHORAGE, AK 99501

### Officials

Show Former



AK Entity #	Name	Titles	Owned
	ALBERTSONS COMPANIES, INC.	Shareholder	100.00
	GARY MORTON	Assistant Secretary, Treasurer, Vice President	
	LISA GRAY	Director	
	ROBERT GORDON	Director, Secretary	
	ROBERT MILLER	Director	
	VIVEK SANKARAN	President	

## Filed Documents

Date Filed	Type	Filing	Certificate
11/07/1986	Creation Filing		
2/01/1988	Biennial Report		
1/12/1990	Biennial Report		
12/13/1991	Biennial Report	<a href="#">Click to View</a>	
12/31/1993	Biennial Report	<a href="#">Click to View</a>	
12/11/1995	Biennial Report	<a href="#">Click to View</a>	
12/19/1997	Biennial Report	<a href="#">Click to View</a>	
1/25/2000	Biennial Report	<a href="#">Click to View</a>	
2/04/2002	Biennial Report	<a href="#">Click to View</a>	
2/02/2004	Biennial Report	<a href="#">Click to View</a>	
1/03/2006	Biennial Report	<a href="#">Click to View</a>	
3/03/2008	Biennial Report	<a href="#">Click to View</a>	
12/18/2009	Biennial Report	<a href="#">Click to View</a>	
12/23/2011	Biennial Report	<a href="#">Click to View</a>	
7/30/2014	Biennial Report	<a href="#">Click to View</a>	
2/17/2015	Change of Officials	<a href="#">Click to View</a>	
5/13/2015	Change of Officials	<a href="#">Click to View</a>	
5/13/2015	Agent Change	<a href="#">Click to View</a>	
10/14/2015	Certificate of Compliance		<a href="#">Click to View</a>
2/26/2016	Biennial Report	<a href="#">Click to View</a>	
10/17/2017	Certificate of Compliance		<a href="#">Click to View</a>
11/03/2017	Biennial Report	<a href="#">Click to View</a>	
11/15/2017	Agent Change	<a href="#">Click to View</a>	
6/06/2018	Change of Officials	<a href="#">Click to View</a>	

Date Filed	Type	Filing	Certificate
12/05/2018	Certificate of Compliance		<a href="#">Click to View</a>
10/03/2019	Biennial Report	<a href="#">Click to View</a>	

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