MUNICIPALITY OF ANCHORAGE
ASSEMBLY MEMORANDUM
NO. AM 114-2008

MEETING DATE: February 26, 2008

FROM: Municipal Clerk

SUBJECT: 2007/2008 F Street Station #762-Transfer of Ownership of a Beverage Dispensary Liquor License Downtown Community Council

On January 14, 2008 the Municipal Clerk's Office received from the Alcoholic Beverage Control Board notice for the transfer of a Beverage Dispensary Liquor License for the following establishment:

Station Inc.
F Street Station
325 F Street
Anchorage, Ak 99501

Any ABC violations and/or incidents that would lead to an ABC violation are attached for the Assembly's evaluation.

There are no taxes owing.

AMC 21.50.160 requires that any use, whether principal or accessory, involving the retail, sale or dispensing of alcoholic beverage is permitted only by conditional use. There is a conditional use permit at this location.

Alaska Statute 04.11.480 provides that if the Assembly wishes to protest the issuance, renewal, relocation or transfer of a liquor license, it may protest within 60 days following receipt of the application and the protest will be honored unless the Board finds the protest to be arbitrary, capricious and unreasonable. The last day to protest is March 15, 2008. February 26, 2008 is the last scheduled regular Assembly meeting before the end of the protest period.

Approval of this memorandum will APPROVE the transfer of ownership of the beverage dispensary liquor license for the establishment named above. The Municipal Clerk is authorized to notify the ABC Board of the Assembly's action and is authorized to sign on its behalf.

Respectfully submitted,

Barbara E Gruenstein
Municipal Clerk
Transfer Liquor License

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

This application is for:
- [ ] Sectional - Two 6-month periods in each year of the biennial period beginning _____ and ending _____
- [ ] Full 2-year period

SECTION A - LICENSE INFORMATION. Must be completed for all types of applications

<table>
<thead>
<tr>
<th>License Year:</th>
<th>License #:</th>
<th>License Type:</th>
<th>Statute Reference</th>
<th>Status Reference</th>
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</thead>
<tbody>
<tr>
<td>2007 - 2008</td>
<td>762</td>
<td>Retail Dispensary</td>
<td>Sec. 04.11.090</td>
<td></td>
</tr>
</tbody>
</table>

Local Controlling Body (City, Borough or Unorganized):
Anchorage Municipality of other (ANC, ST, INQ, JCM, CAR, WA)

Name of Applicant (Corp/FOB/PL/IV/Individual/Partnership):
Station Inc.

Mailing Address: 325 F Street

City, State, Zip: Anchorage, Alaska 99501

SECTION B - TRANSFER INFORMATION.

- [ ] Regular Transfer
- [ ] Transfer with security interest: Any instrument executed under AS 04.11.670 for purposes of applying AS 04.11.350(A)(B) in a transfer, must be filed with this Application (15 ANC 104.101). Real or personal property conveyed with this transfer must be described. Provide security interest documents.

SECTION C - PREMISES TO BE LICENSED. Must be completed for relocation applications.

Name and Mailing Address of Current Licensee:
Station Inc.

Business Name (dba) BEFORE transfer:
F Street Station

Street Address or Location BEFORE transfer:
325 F Street Anchorage, Alaska 99501

Name of Business:
- The Cabin Tavern
- The Cabin Tavern

Type of License: Bev Dispensary

Business Street Address:
- 264 Malden Road
- 264 Malden Road

State:
- Anchorage, Alaska 99504
- Anchorage, Alaska 99504

Has any individual, corporate officer, director, limited liability organization member, manager or partner named in this application been convicted of a felony, a violation of AS 01.01 or been convicted as a licensee or manager of licensed premises in another state of the liquor laws of that state?

- [ ] No

Office use only
Date Approved
Director's Signature

Filing Fee: $5
Fees:
- $100.00

Fingerprint:
10/22
Submitted:
10/22

Effective Date
10/22

Business Telephone Number:
907-272-5196
Fax Number: 907-274-8739
Email Address: dms@alaskn.com
Liquor License

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

Name of Entity (Corporation/LLC/LLP/LLP) or N/A (For Individual ownership):

Station Inc.

Corporate Mailing Address: 325 F Street
City: Anchorage
State: Alaska
Zip Code: 99501

Name, Mailing Address and Telephone Number of Registered Agent:
Daniel M Zivanich 325 F Street Anchorage, Alaska 99501 907-272 5106

Date of Incorporation or Certification with ICED:
May 20, 1983
State of Incorporation: Alaska

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- Presidents, Manager and Shareholder/Member with at least 10%)

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>%</th>
<th>Home Address &amp; Telephone Number</th>
<th>Work Telephone Number</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daniel M Zivanich</td>
<td>Pres.</td>
<td>50</td>
<td>12921 Midori Dr. Anchorage, AK 99516 907-345 5570</td>
<td>907-272 5106</td>
<td>6-26-39</td>
</tr>
<tr>
<td>Edward M DeSapio</td>
<td>Sec/Tre</td>
<td>50</td>
<td>6900 Fook Ave Anchorage, AK 99504 907-337 5771</td>
<td>907-338 0862</td>
<td>12-7-39</td>
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NOTE: On a separate sheet provide information on ownership other organized entities that are shareholders of the licensee.

Individual Licensees/Affiliates (The ABC Board defines an "Affiliate" as the spouse or significant other of a licensee. Each Affiliate must be listed.)

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<tr>
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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 connected 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 is a holder of the stock, the business, or the organization and has not been reported to the Alcoholic Beverage Control Board. The undersigned certifies that the statements and representations contained in this application are true and correct, and that the statements and representations made in this application are true and correct.

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 04.11.430, 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 Licenc(e)

Signature

Name & Title (Please Print) Daniel M Zivanich

Subscribed and sworn to before me this 24th day of October, 2007

Notary Public in and for the State of Alaska My commission expires