



Lincoln Police Department
James Peschong, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR CHRIS BEUTLER

lincoln.ne.gov

December 9, 2011

Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of The Office, 640 West Prospector #200 requesting a class C liquor license.

This location was previously known as The Viper Room / Drunken Monkey which held a class C liquor license

Roger Westerhold, owner has requested that he be approved as the manager of the liquor license.

Background information on the applicant will be omitted as Mr. Westerhold is a currently approved owner / manager for Playmakers holders of a liquor license.

The required training was completed on October 14th 2010.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.


JIM PESCHONG, Chief of Police



A nationally accredited law enforcement agency



PREMISE INFORMATION

Trade Name (doing business as)

THE OFFICE

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Street Address #1

640 West Prospector #200

Street Address #2

NOV 29 2011

City

Lincoln

County

Lancaster

NEBRASKA LIQUOR
CONTROL COMMISSION
68522

Premise Telephone number

Is this location inside the city/village corporate limits:



YES



NO

Mailing address (where you want to receive mail from the Commission)

Name

Roger Westerhold

Street Address #1

640 West Propector #200

Street Address #2

City

Lincoln

State

Nebraska

Zip Code

68522

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED
READ CAREFULLY

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, outdoor area, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building. No blue prints please. Be sure to indicate the direction north and number of floors of the building.

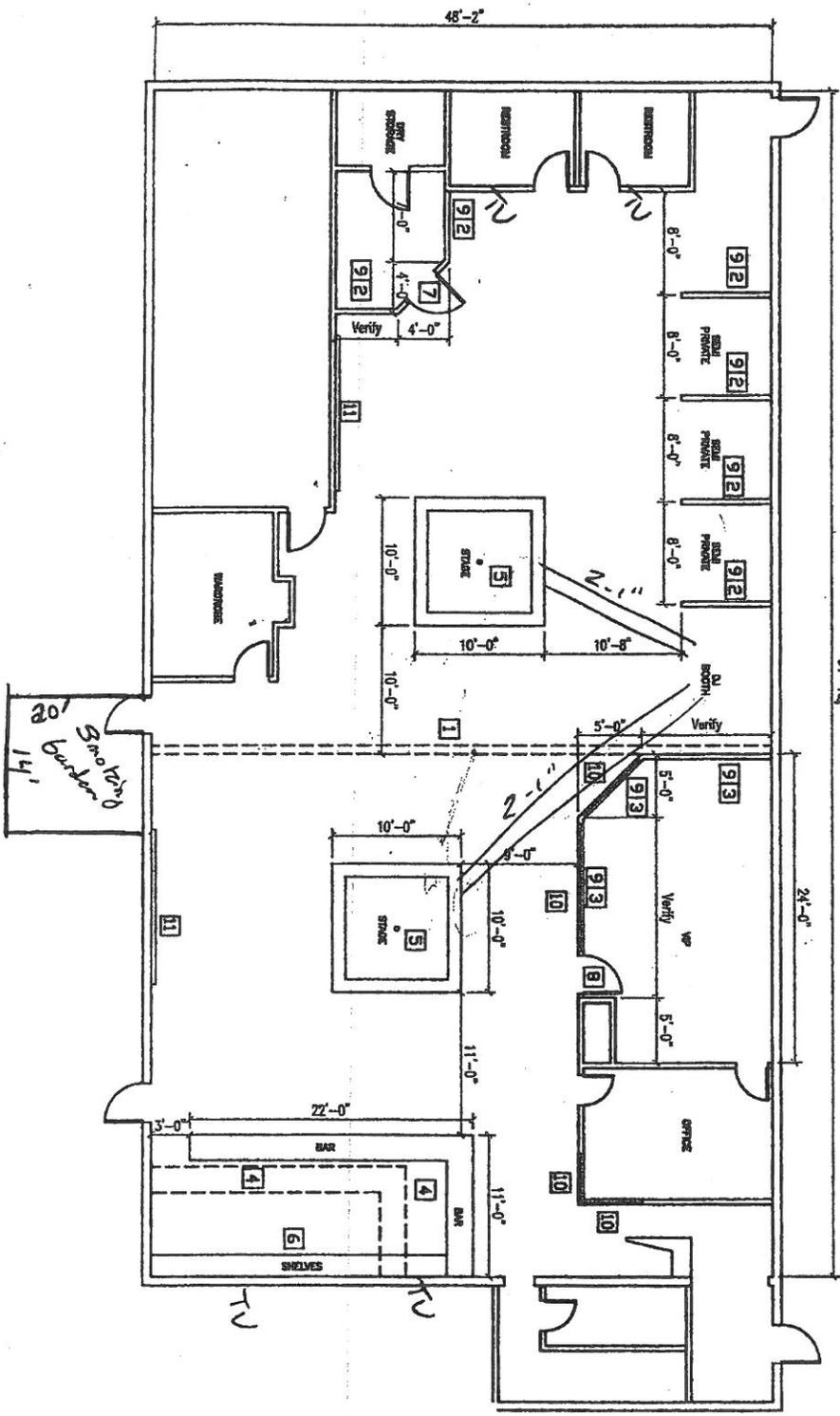
**For on-premise consumption liquor licenses minimum standards must be met by providing at least two restrooms

Length 92 feet

Width 49 feet

* BEER Garden 20ft x 14 ft

PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPARATE SHEET



91'-10"

24'-0"

The Office

CONSTRUCTION NOTES

CARPENTRY

- 1 Remove existing concrete block wall.
- 2 Add new 2x4 stud wall of 2x4's with 2x6's on top. 2x6's to extend 6" from finished floor. Prepare walls for paint.
- 3 Add new 2x4 stud wall of 2x4's with 2x6's on top. 2x6's to extend 6" from finished floor. Prepare walls for paint.
- 4 Add new base, as per owner.
- 5 Add new desks, as per owner.
- 6 Add new lockers, as per owner.
- 7 Install lock, hinges and pins, as per owner.
- 8 Install lock, hinges and pins, as per owner.
- 9 Add new 2x4 stud wall of 2x4's with 2x6's on top. 2x6's to extend 6" from finished floor. Prepare walls for paint.
- 10 Install new heavy glass windows and doors, as per owner.
- 11 Add new office furniture, as per owner.

APPLICATION FOR LIQUOR LICENSE CORPORATION INSERT - FORM 3a

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: www.lcc.ne.gov

Office Use RECEIVED NOV 29 2011 NEBRASKALIQUOR CONTROL COMMISSION

Officers, directors and stockholders holding over 25% shares of stock, including spouses, are required to adhere to the following requirements:

- 1) All officers, directors and stockholders must be listed
2) President/CEO and stockholders holding over 25% and their spouse(s) (if applicable) must submit fingerprints (2 cards per person)
3) Officers, directors and stockholders holding over 25 % shares of stock and their spouse (if applicable) must sign the signature page of the Application for License form 100 (even if a spousal affidavit has been submitted)

Attach copy of Articles of Incorporation (Articles must show barcode receipt by Secretary of States Office)

Name of Registered Agent: Roger Westerhold

Name of Corporation that will hold license as listed on the Articles

BSR, Inc

Handwritten numbers: 3, 101536, 4

Corporation Address: 640 West Prospector #200 Lincoln, Nebraska 68522

City: State: Zip Code:

Corporation Phone Number: 402-525-3186 Fax Number:

Total Number of Corporation Shares Issued: 100

Name and notarized signature of President/CEO (Information of president must be listed on following page)

Last Name: Westerhold First Name: Roger MI: E

Home Address: 2104 SW 9th #115 City: Lincoln

State: Neb Zip Code: 68522 Home Phone Number:

Handwritten signature of Roger Westerhold

Signature of President/CEO

ACKNOWLEDGEMENT

State of Nebraska County of Bay County

The foregoing instrument was acknowledged before me this

Date 11/29/11

by Roger Westerhold name of person acknowledge

Handwritten signature of Joann Rierden

Affix Seal GENERAL NOTARY - State of Nebraska JOANN RIERDEN My Comm. Exp. March 18, 2013

List names of all officers, directors and stockholders including spouses (even if a spousal affidavit has been submitted)

Last Name: Westerhold First Name: Roger MI: _____

Social Security Number: _____ Date of Birth: _____

Title: President Number of Shares 100 RECEIVED

Spouse Full Name (indicate N/A if single): N/A NOV 29 2011

Spouse Social Security Number: _____ Date of Birth: _____

NEBRASKA LIQUOR
CONTROL COMMISSION

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

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Manager's information must be completed below PLEASE PRINT CLEARLY NOV 29 2011

NEBRASKA LIQUOR CONTROL COMMISSION

Gender: MALE FEMALE

Last Name: Westerhold First Name: Roger MI: _____

Home Address (include PO Box if applicable): 2104 SW 9th #115

City: Lincoln County: Lancaster Zip Code: 68522

Home Phone Number: _____ Business Phone Number: 402-525-3186

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: PENDER, Neb

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

YES NO

Spouse's information

Spouses Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: _____

APPLICANT & SPOUSE MUST LIST RESIDENCES FOR THE LAST TEN (10) YEARS

APPLICANT

SPOUSE

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Lincoln, Neb	2000	2011			