CITY OF LINCOLN NEBRASKA

LINCOLN POLICE DEPARTMENT
575 South 10th Street Lincoln, NE 68508
402-441-7204 fax: 402-441-8492 lincoln.ne.gov

July 27, 2015

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 Wilderness Ridge, LLC, DBA Wilderness Ridge Golf Course, 1800 Wilderness Woods Place, requesting that Christopher Murray be approved as the manager of their class CK-049883 liquor license.

Mr. Murray completed the required management training on April 9, 2015.

Christopher Murray's driver and criminal history is as follows:

HOV VIOLATION (Arlington County, VA)
Disposition: 11-20-2014, found guilty

SPEEDING 15-19 MPH ABOVE SPEED LIMIT (Arlington County, VA)
Disposition: 10-10-2012, found guilty

SPEEDING 44/25 (Alexandria City, VA)
Disposition: 6-5-2008, found guilty

RECKLESS DRIVING-SPEED 20/MORE ABOVE SPEED LIMIT (Fairfax County, VA)
Disposition: 7-20-2006, found guilty

IMPROPER PASSING (Arlington, VA)
Disposition: 6-12-2002, found guilty

IMPROPER CONTROL/DRIVING (Fairfax, VA)
Disposition: 4-4-2001, found guilty

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

**MANAGER APPLICATION**
**INSERT - FORM 3c**

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
FEB 19 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

RECEIVED
JUL 27 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

JR

**MUST BE:**

- ✓ **Citizen of the United States. Include copy of US birth certificate, naturalization paper or current US passport**
- ✓ **Nebraska resident. Include copy of voter registration in the State of Nebraska**
- ✓ **Fingerprinted. Two cards per person, fees of $38 per person, made payable to Nebraska State Patrol. If printed at NSP mail check only.**
- ✓ **21 years of age or older**

Corporation/LLC information

Name of Corporation/LLC: Wilderness Ridge Golf LLC

Premise information

Liquor License Number: 049883 (if new application leave blank) Class Type Ck - ON/OFF Sale/Catering

Premise Trade Name/DBA: Wilderness Ridge Golf Course

Premise Street Address: 1500 Wilderness Woods PL

City: Lincoln County: Lancaster Zip Code: 68512

Premise Phone Number: (402) 434-5125

Email address: cmurray@wildernessridgegolf.com

**The individual whose name is listed as a corporate officer or managing member as reported on insert form 3a or 3b or listed with the Commission. Click on this link to see authorized individuals. http://www.lcc.ne.gov/license_search/licsearch.cgi**

**SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER**
(Faxed signatures are acceptable)

1500017398

**Manager's information must be completed below PLEASE PRINT CLEARLY**

Last Name: Murray First Name: Christopher MI: L

Home Address (include PO Box if applicable): 8320 Hollynn LN #27

City: Lincoln County: Lancaster Zip Code: 68512

Home Phone Number: (571) 225-4159 Business Phone Number: (402) 434-5125

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

Date Of Birth: _ Place Of Birth: VA

Email address: cmurray@wildernessridgegolf.com

**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: Murray First Name: Nicole MI: E

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

Date Of Birth: _ Place Of Birth: NY

**APPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS**

| APPLICANT | | | SPOUSE | | |
|---|---|---|---|---|---|
| CITY & STATE | YEAR FROM | YEAR TO | CITY & STATE | YEAR FROM | YEAR TO |
| Lincoln NE | 2014 | current | Centreville VA | 2012 | current |
| Centreville VA | 2012 | 2014 | Alexandria VA | 2006 | 2012 |
| Alexandria VA | 2001 | 2012 | Chantilly VA | 2004 | 2006 |
| | | | | | |
| | | | | | |

RECEIVED
JUL 27 2015
NEBRASKA LIQUOR CONTROL COMMISSION

RECEIVED
FEB 19 2015
NEBRASKA LIQUOR CONTROL COMMISSION

4. List the alcohol related training and/or experience (when and where) of the person making application.

*NLCC Training Certificate Issued: _____ Name on Certificate: _____

| Applicant Name | Date (mm/yyyy) | Name of program (attach copy of course completion certificate) |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

RECEIVED
FEB 19 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

*For list of NLCC Certified Training Programs see www.lcc.ne.gov/traininginfo.html

Experience:

| Applicant Name / Job Title | Date of Employment: | Name & Location of Business: |
|---|---|---|
| Chris Murray / General Manager | 2014 - Current | 1800 Wilderness Woods PL, Lincoln NE 68512 |
| Chris Murray / F&B Director | 2014 - 2014 | 8000 Towers Crescent Plaza, Tysons Corner VA 22182 |
| Chris Murray / F&B Director | 2014 - 2014 | 12320 Pleasant Prospect, Mitchelville MD 20721 |
| Chris Murray / F&B Director | 2012 - 2014 | 20391 Lowes Island Blvd, Sterling VA 20165 |
| | | |
| | | |
| | | |
| | | |
| | | |

5. Have you enclosed the required fingerprint cards and **PROPER FEES** with this application? (Check or money order made payable to the **Nebraska State Patrol for $38.00 per person**)

☑ YES ☐ NO

RECEIVED
JUL 27 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

## MANAGER'S LAST TWO EMPLOYERS

| YEAR FROM | TO | NAME OF EMPLOYER | NAME OF SUPERVISOR | TELEPHONE NUMBER |
|---|---|---|---|---|
| 2014 | 2014 | Club Corp | Kara Carmicheal | (703) 761-4250 |
| 2014 | 2014 | Concert Golf | Allen Self | (301) 249-6100 |

1. **READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.**
   **Must be completed by both applicant and spouse, unless spouse has filed an affidavit of non-participation.**

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☐ YES ☑ NO

If yes, please explain below or attach a separate page.

| Name of Applicant | Date of Conviction (mm/yyyy) | Where Convicted ( City & State) | Description of Charge | Disposition |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

RECEIVED
JUL 27 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state?

   ☐ YES ☑ NO

   **IF YES,** list the name of the premise(s):

   _____

3. Do you, as a manager, qualify under Nebraska Liquor Control Act (§53-131.01) and do you intend to supervise, in person, the management of the business?

   ☑ YES ☐ NO

RECEIVED
FEB 19 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

## PERSONAL OATH AND CONSENT OF INVESTIGATION

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, a spousal affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent

Signature of Manager Applicant

Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska
County of Lancaster The foregoing instrument was acknowledged before me this

July 27, 2015 by Christopher Murray
date name of person acknowledged

Jill L Nelson
Notary Public signature

Affix Seal

GENERAL NOTARY - State of Nebraska
JILL L. NELSON
My Comm. Exp. March 6, 2018

In compliance with the ADA, this application is available in other formats for persons with disabilities.
A ten day advance period is required in writing to produce the alternate format.



RECEIVED
JUL 27 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

RECEIVED
FEB 19 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

Print Form

# SPOUSAL AFFIDAVIT OF NON PARTICIPATION INSERT

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
FEB 19 2015
NEBRASKA LIQUOR CONTROL COMMISSION

I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will have not have any interest, directly or indirectly in the operation or profit of the business (§53-125(13)) of the Liquor Control Act. I will not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices or represent myself as the owner or in any way participate in the day to day operations of this business in any capacity. I understand my fingerprint will not be required; however, I am obligated to sign and disclose any information on all applications needed to process this application.

Nicole Murray
Signature of spouse asking for waiver
(Spouse of individual listed below)

Nicole Murray
Printed name of spouse asking for waiver

State of Virginia

County of Prince William

December 19, 2014
date

Notary Public signature

The foregoing instrument was acknowledged before me this

by ~~Nicole Murray~~ SiWoo Jang
name of person acknowledged

Affix Seal

SIWOO JANG
NOTARY PUBLIC
REG #7562965
COMMONWEALTH OF VIRGINIA

---

I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (§53-125(13)) the Commission may cancel or revoke the liquor license.

Signature of individual involved with application
(Spouse of individual listed above)

Christopher Murray
Printed name of applying individual

State of Nebraska

County of Lancaster

July 27, 2015
date

Jill L Nelson
Notary Public signature

The foregoing instrument was acknowledged before me this

by Christopher Murray
name of person acknowledged

Affix Seal

GENERAL NOTARY - State of Nebraska
JILL L. NELSON
My Comm. Exp. March 6, 2018

In compliance with the ADA, this spousal affidavit of non participation is available in other formats for persons with disabilities.
A ten day advance period is requested in writing to produce the alternate format.

RECEIVED
JUL 27 2015
NEBRASKA LIQUOR CONTROL COMMISSION

FORM 35-4178
Revised 1/2008