

Lincoln



Nebraska's Capital City

April 18, 2002

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

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Fontenelle Oil Company, d.b.a. Holiday Stationstore #117, 2200 North 48th Street requesting that David West be approved as the manager of the liquor license.

Background information on the applicant is as follows:

David West was born in Richmond, Indiana. He attended Amphitheater High School, Tucson Arizona graduating in 1988.

David West employment history is as follows:

2000 – present	Manager, Holiday Stationstore	Lincoln, NE.
2000	Assistant Manager, Family Dollar	Grand Island, NE.
1999 - 2000	Sales, Wal-Mart	Grand Island, NE.
1998 – 1999	Owner, Ashes	Grand Island, NE.
1999	Production, GIA	Grand Island, NE.

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.

THOMAS K. CASADY, Chief of Police



Police Department
575 South 10th Street / Lincoln, Nebraska 68508 / Phone: 402-441-7204 / Fax: 402-441-8492 / Website: www.ci.lincoln.ne.us

A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) HOLIDAY STATION

Manager Owner Other

Name: DAVID WEST

US Citizen? Yes No

Has applicant ever been cited for liquor law violations? No Yes
Explain _____

Does applicant have an interest in another liquor license? No Yes
Explain _____

Is spouse qualified to hold a license? Yes No N/A

How is applicant if not an owner to be paid? Salary Hourly

How many hours will applicant be at the establishment? 50 +

Any other employment? No Yes, explain _____

Any previous experience with a liquor license? Yes No

Any criminal convictions? No Yes
Comments Bad checks 95 - After probation - charges dropped

Is applicant a property owner in Lincoln? Yes No

Is applicant involved in any civil litigation? No Yes
Comments _____

Photo Records Check References

Comments _____

Interview Date 4/18/02

STATE OF NEBRASKA

Run

*Net date 4-15-02
P.H: 4-29-02, 5:30 p.m.*



*A2-038808
39*

NEBRASKA LIQUOR CONTROL COMMISSION
Forrest D. Chapman
Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7352 (TTY)
web address: <http://www.nol.org/home/NLCC/>

Mike Johanns
Governor

April 11, 2002

FILED
CITY CLERK'S OFFICE
'02 APR 12 PM 10 38
CITY OF LINCOLN
NEBRASKA

City Clerk
County/City Bldg
555 South 10th Street
Lincoln NE 68508

RE: Manager Application Submittal

Dear Sir/Madam:

The enclosed Application for Manager is being submitted by Fontenelle Oil Co DBA Holiday Stationstore #117 located at 2200 North 48th Street, Lincoln, NE 68504-2822 (Lancaster County) which holds a Class B License #27845 the applicant's name is David L. West.

Please present these applications to your City/County Council and return to us the results of the action taken. If you have any questions or comments, please give me a call.

Sincerely,

Michelle Petersen
Licensing Division

Enclosure

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

4-17-02 @ 2 PM

Printed with soy ink on recycled paper

Application for Corporate Manager

Must Be A Nebraska Resident

Local li
no
RECEIVED

APR 11 2002

Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

COPY

Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: <http://nol.org/home/NLCC>

NEBRASKA LIQUOR CONTROL COMMISSION

LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION FONTENELLE OIL CO.		CLASS & LICENSE NUMBER Class B 27845 <i>OK</i>	
TRADE NAME OF LICENSED PREMISE Holiday Stationstore #117 <i>OK</i>			
STREET ADDRESS OF LICENSED PREMISE 2200 North 48th Street <i>OK</i>	CITY Lincoln <i>OK</i>	COUNTY Landcaster <i>OK</i>	ZIP CODE 68504-2822 <i>OK</i>
On behalf of the corporation, I designate this individual as corporate manager. Signature of Corporate President/CEO: <i>Ronald A. Erickson</i> Ronald A. Erickson, CEO			

APPLICANT INFORMATION (MUST BE 21 OR OVER)

NAME (LAST, MIDDLE, FIRST, MAIDEN) West, David, Lee	SEX F <input checked="" type="radio"/> M	SOCIAL SECURITY NUMBER	DATE OF BIRTH	PLACE OF BIRTH Richmond, Indiana
HOME STREET ADDRESS 1626 South 15th	CITY Lincoln	COUNTY Landcaster	STATE NE	ZIP CODE 68502
HOME TELEPHONE NUMBER (402) 601-3396	BUSINESS TELEPHONE NUMBER (402) 466-2881	DRIVERS LICENSE NUMBER & STATE		

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) West, Jodie, Marie, Riski	SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER & STATE No Driver's License
DATE OF BIRTH:	PLACE OF BIRTH: Northwood, North Dakota	

1. **READ CAREFULLY - ANSWER FULLY AND ACCURATELY** Has anyone who is a party to this application or their spouse ever been convicted of or pled guilty to any criminal charge? Criminal charge means any charge alleging a violation of a Federal, State or local law or ordinance. List the nature of the charge, where the charge occurred and the year and month of the conviction or guilty plea. Also list any pending charges at this time. Grand Forks, North Dakota
 YES NO charges for insufficient funds - checks - wife - 8/99
 charges for insufficient funds - checks - Dave - 95 or 96

8/00 or 9/00 - Dave was pulled over for speeding. He was given a warning. Patrol asked for proof of insurance. No proof of insurance-given a fix it ticket-car blew up. Court date 3/14/01

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.
 YES NO

3. Have you or your spouse ever made a compromise settlement for violation of such laws?
 YES NO

4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?
Nebraska Liquor Control Act (§53-131.01)

YES NO

5. Have you filed fingerprint cards and proper fees with this application?

YES NO Fingerprint cards were submitted back in March 2001 when Dave was applying for Store Manager at Holiday Stationstore #114. *DK 5-3-01*

RESIDENCES SINCE AGE 18; APPLICANT AND SPOUSE MUST COMPLETE

APPLICANT: CITY & STATE	YEAR		SPOUSE: CITY & STATE	YEAR	
	FROM	TO		FROM	TO
Tucson, AZ	88	89	Grand Forks, ND	84	88
Phoenix, AZ	89	94	Phoenix, AZ	88	94
Minto, ND	94	95	Minto, ND	94	95
Grand Forks, ND	95	97	Grand Forks, ND	95	97
Grand Island, NE	97	5/01	Grand Island, NE	97	5/01
Lincoln, NE	6/01	present	Lincoln, NE	6/01	present

EMPLOYERS - LIST LAST TWO EMPLOYERS

YEAR FROM	YEAR TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
7/00	10/00	Family Dollar	Jennifer Foster	(308) 384-3100
8/99	5/00	Walmart	Terry Hokem	(308) 381-0333

PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT & SPOUSE

STATE OF NEBRASKA)
) SS
COUNTY OF)

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, an affidavit 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 and inaccurate.

David L. West
Signature of Applicant

David L. West

Subscribed in my presence and sworn to before me this 9th day of April, 2002

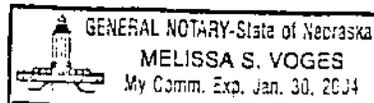
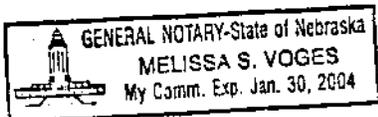
Jodie M. West
Signature of Spouse (if applicable)

Jodie M. West

Subscribed in my presence and sworn to before me this 9th day of April, 2002

Melissa S. Voges
Notary Signature & Seal

Melissa S. Voges
Notary Signature & Seal



**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

APR 11 2002

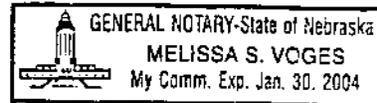
**NEBRASKA LIQUOR
CONTROL COMMISSION**

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Jodie M. West
Signature of Spouse
Jodie M. West

SUBSCRIBED in my presence and sworn to before me this 9th day of April, A.D., 2002

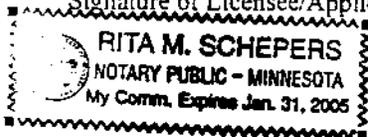
Melissa S. Voges
Signature of Notary Public



The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

FONTENELLE OIL CO.
Ronald A. Erickson
Signature of Licensee/Applicant

FONTENELLE OIL CO.
Ronald A. Erickson, Secretary
Print Name of Licensee/Applicant



SUBSCRIBED in my presence and sworn to before me this 6th day of March, A.D., 2002

Rita M. Schepers
Signature of Notary Public