



May 22, 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 B. Christensen Enterprises L.L.C., d.b.a. BC's, 1200 'O' Street requesting a class c liquor license.

Bruce Christensen, owner of all shares has requested that Mary Rauner be approved as the manager of the liquor license.

Background information on the application is as follows:

Bruce Christensen was born in Fremont, Nebraska. He attended the University of Nebraska graduating in 1969. Bruce Christensen served in the United States Armed Forces 1969 – 1972 and did receive an honorable discharge. He has been the owner of Business Media, in Lincoln, Nebraska since 1988.

Mary Rauner was born in Greeley, Nebraska. She is currently attending the University of Nebraska Lincoln.

Mary Rauner employment history is as follows:

1998 – 2002	Bartender, Cliff's Lounge	Lincoln, NE.
1996 – 1998	Bartender, Barry's Bar	Lincoln, NE.
1994 – 1996	Manager, Garden Café	Hastings, NE.
1990 – 1994	Dental Assistant	Sidney, 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 Business Report / Completed by Inv Fosler Date: 5-22-02

DBA: BC's

ADDRESS 1200 0 PHONE _____

TYPE OF INVESTIGATION:

PURCHASE UPGRADE EXPANSION NEW

OWNER MANAGER OTHER _____

TYPE OF BUSINESS COCKTAIL LOUNGE

CLASS: A B C D I J K CATERING OTHER _____

OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL

PURCHASE PRICE _____ PROPERTY EQUIPMENT VALUE _____

AMOUNT FINANCED N/A SOURCE _____

COLLATERAL / COSIGNER(S) /

LEASE AGREEMENT 5yr 3700 mo

EST INCOME %FOOD 0 %LIQUOR 100

COMMERCIAL INDUSTRIAL RESIDENTIAL

TRAFFIC HEAVY PARKING ON-STREET

READY FOR OPERATION: YES NO EST DATE JULY 1-2002

FOOD SERVICE N/A # OF EMPLOYEES FT 3-4 PIT 0 2-2

DOES LICENSE COMPLY WITH LEGAL DISTANCES: YES
NO _____

EST SEATING N/A ^{unknown} EST # DAILY CUSTOMERS 60

HOURS OF OPERATION M-Thur 3pm-1am Fri-Sat 12pm-1am

HUMAN RIGHTS COMMISSION CHECKED: YES NO N/A

Liquor License Investigation

Business (DBA) BC's

Manager Owner Other _____

Name: MARY PALMER

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 ? 40

Any other employment ? No Yes, explain _____

Any previous experience with a liquor license ? Yes No

Any criminal convictions ? No Yes
Comments _____

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 5/22/02

STATE OF NEBRASKA

PH: 6-17-02



May 17, 2002

City Clerk of Lincoln
City/County Bldg
555 So 10th St
Lincoln, NE 68508

Mike Johanns
Governor

FILED
CITY CLERK'S OFFICE
MAY 21 AM 10 59
CITY OF LINCOLN
NEBRASKA

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)

A2-055466
77

RE: B. Christensen Enterprises L.L.C.
dba BC's, 1200 "O" St, Lincoln
Class C Application

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Mary Messman
Licensing Division

Enclosures
Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

C# 55550

Local-jbm

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission
PO Box 95046, 301 Centennial Mall South
Lincoln, NE 68509-5046

http://www.nol.org/home/NLCC/
Phone: (402) 471-2571
Fax: (402) 471-2814

RECEIVED
MAY - 9 2002
NEBRASKA LIQUOR
CONTROL COMMISSION

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member holding over 25% stock/interest. 6. All applications must be typewritten or printed clearly. 7. Submit in Triplicate

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

Class of License (Check applicable class)	Registration Fee	License Fees	Corporate Surety Bond
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Indicate Inside or Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> DI Spirits, Wine, Beer, Off Sale only + within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input checked="" type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, on Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$ 50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.

TYPE OF APPLICATION

CORPORATE SURETY BOND INFORMATION

3

Type of application being applied for (place appropriate number in box)
1= Individual License requires Form 1 to be attached.
2= Partnership License requires Form 2 to be attached.
3= Corporate License requires Form 3 and 4 and Manager Application be attached.

Bond Company - for Classes L V W X Y only

[Empty box for Bond Company]

Start Date Month/Day/Year

Bond Number

[Empty box for Start Date]

[Empty box for Bond Number]

SECTION A - LOCATION INFORMATION - Must be completed by all applicants

Trade Name (name of business)

RC'S

Telephone Number at premise to be licensed

435-3358

1) Street Address of Proposed licensed premise

1200 "O" Street

2) Mailing Address for receipt of Liquor Control Commission mailings

1820 Sunside Drive

City County Zip Code

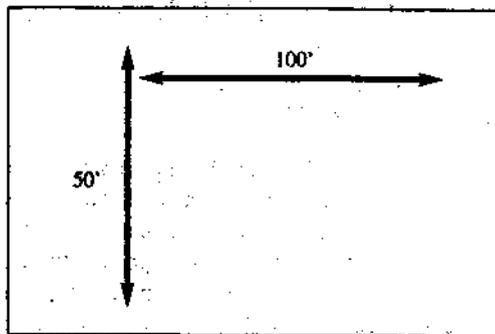
Lincoln Lancaster 68508

City County Zip Code

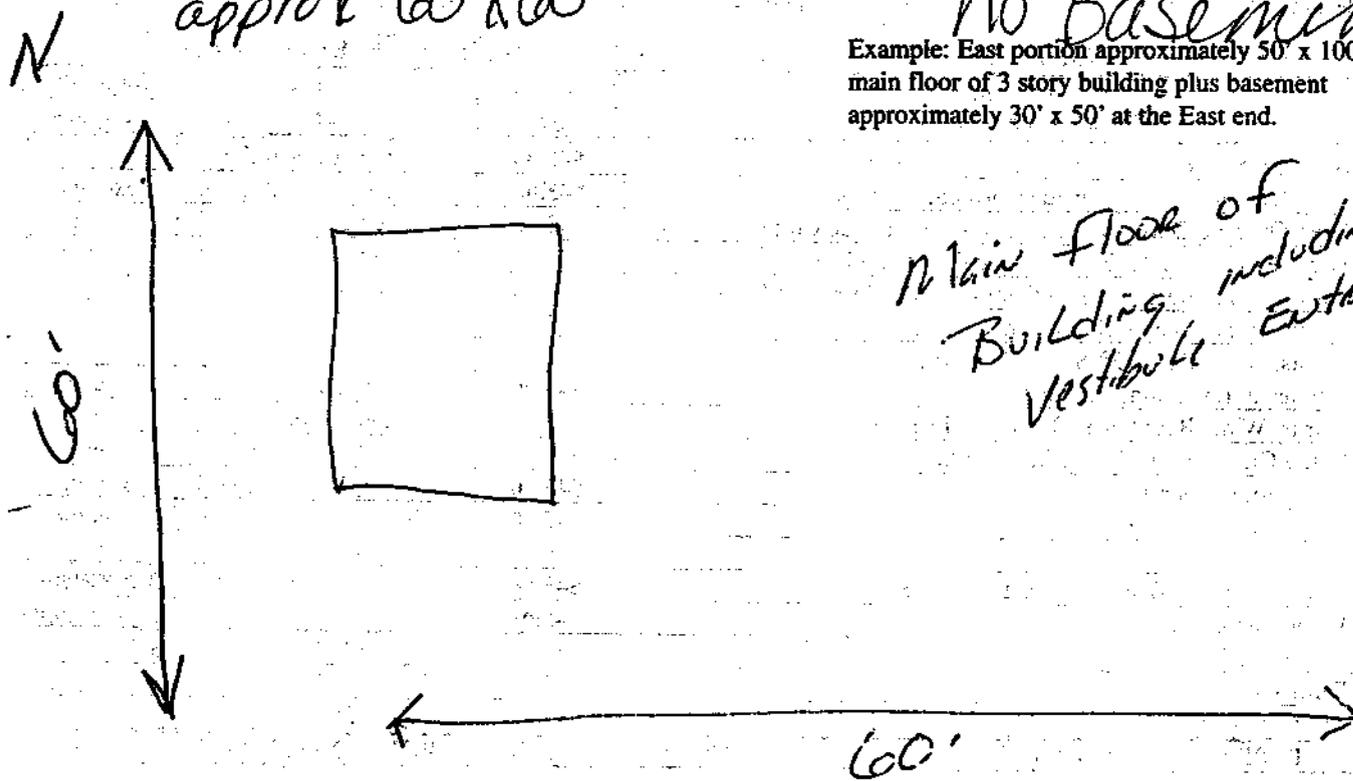
Lincoln Lancaster 68528

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, 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 in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



*one story building
approx 60 x 60*



No basement
Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.

Main floor of Building including vestibule entrance

SECTION B	OTHER INFORMATION REQUIRED		
	Yes	No	Explanation/Comments
<p>1. READ CAREFULLY. Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor or violation of a federal or state law; or 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.</p>	<p>X</p>		<p><i>Speeding 1969 Ticket non-alcohol related</i></p>

	Yes	No	Explanation/Comments
2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).		✓	
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.		✓	
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.		✓	
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		✓	
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.		✓	
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?		✓	
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.		✓	
9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.		✓	
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.			Westgate Bank Lincoln NE. Bruce Christensen
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.			NONE
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.			MARY RAUER 40 HOURS
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.			Managed Rest + Dine, Bartending, 3 yrs FT Cocktail waitress, Attending Hospitality & Liquor Training Class in July
14. If the property for which this license is sought is owned, submit a copy of the deed. or proof of ownership. if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed).			Lease Enclosed Expires
14. When do you intend to open for business?			July 1, 2002

X

	Yes	No	Explanation/Comments
2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).		<input checked="" type="checkbox"/>	
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.		<input checked="" type="checkbox"/>	
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.		<input checked="" type="checkbox"/>	
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		<input checked="" type="checkbox"/>	
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.		<input checked="" type="checkbox"/>	
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?		<input checked="" type="checkbox"/>	
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. 553-177.		<input checked="" type="checkbox"/>	
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13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.			Managed Rest + DME, Bentonsick, FT Liquor FT Cocktail waitress, Attending Hospitality & Licor Training class in July
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14. When do you intend to open for business?			July 1, 2002

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Bruce A. Christensen	1988	2002	Lincoln Nebraska

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. 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/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse: if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

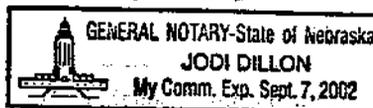
sign here _____
 sign here _____
 sign here _____
 sign here _____

RECEIVED
 MAY 10 2002
 NEBRASKA LIQUOR CONTROL COMMISSION

Subscribed in my presence and sworn to before me this

9th day of May 2002

(SEAL)



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

sign here

J. Dillon

Notary Public Signature

Corporation/LLC Application for License - Form 3
Nebraska Liquor Control Commission

Is this Corporation/LLC controlled by another Corporation? YES NO

Name of Control Corporation

IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned

Please indicate below your corporate tax year with the IRS

Starting Date: 1-1 Ending Date: 12-31

STATE OF NE

Lancaster County

)
)
)
) ss.
)

Jodi Dillon



RECEIVED

MAY - 9 2002

NEBRASKA LIQUOR
CONTROL COMMISSION

By *Bill A. Blustein*
PRESIDENT/MEMBER

SECRETARY/MEMBER

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

Corporation/LLC Application for License - Form 3
Nebraska Liquor Control Commission

RECEIVED

MAY - 9 2002

NEBRASKA LIQUOR
CONTROL COMMISSION

INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
- 3) Information regarding spouses must be completed

Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation		Total Number of Shares (if corporation)	
B Christensen Enterprises, L.L.C.		N/A	
Corporate Street Address (1)		Corporate Telephone Number	
1820 Surfside		402-477-9109	
City	County	State	Zip Code
Lincoln	Lancaster	NE	68528
Name of Registered Agent		Name of Proposed Manager	
Bruce Christensen		Mary Ragner	
IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER			
Name	Title	Date of Birth	Social Security Number
Bruce Christensen	President		
Home Address (1)		State	
1820 Surfside		NE	
City	State	Zip Code	Home Telephone Number
Lincoln	NE	68528	402-477-9109

Corporation/LLC Application for License - Form 3

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES					
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title	Number of Shares/ %	
NAME Bruce Christensen			President	100%	
Spouse Name None					
NAME					
Spouse Name					
NAME					
Spouse Name					
NAME					
Spouse Name					
NAME					
Spouse Name					
NAME					
Spouse Name					

(If Necessary, Continue on Separate Sheet)

Application for Corporate Manager

Must Be A Nebraska Resident

Please submit in Triplicate

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

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

LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION B. Christensen Enterprises, L.L.C.		CLASS & LICENSE NUMBER C	
TRADE NAME OF LICENSED PREMISE BC's			
STREET ADDRESS OF LICENSED PREMISE 1200 "O" St.	CITY Lincoln	COUNTY Lancaster	ZIP CODE 68508
On behalf of the corporation, I designate this individual as corporate manager. Signature of Corporate President/CEO: X <i>Mary A. Christensen</i>			

APPLICANT INFORMATION (MUST BE 21 OR OVER)

NAME (LAST, FIRST, MIDDLE, MAIDEN) Rauner, Mary Frances Harris	SEX <input checked="" type="radio"/> F <input type="radio"/> M	SOCIAL SECURITY NUMBER _____	DATE OF BIRTH _____	PLACE OF BIRTH Greeley, NE
HOME STREET ADDRESS 2901 A St. #112	CITY Lincoln	COUNTY Lancaster	STATE NE	ZIP CODE 68510
HOME TELEPHONE NUMBER (402) 435-3358	BUSINESS TELEPHONE NUMBER () - cel 499-5069	DRIVERS LICENSE NUMBER & STATE _____		

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE NONE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) Not Married	SOCIAL SECURITY NUMBER _____	DRIVERS LICENSE NUMBER & STATE _____
DATE OF BIRTH: _____	PLACE OF BIRTH: _____	

1. READ CAREFULLY - Answer completely and accurately.
Has anyone who is a party to this application or their spouse, ever been convicted of or plead guilty to any criminal charge? Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or 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 **Speeding Ticket - 1998 non-alcohol related**
Driving w/o licence - 1994
Approx 5 speeding tickets ✓

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