STATE OF NEBRASKA

Pete Ricketts
Governor

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe
Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814 or (402) 471-2374
TRS USER 800 833-7352 (TTY)
web address: http://www.lcc.ne.gov/

April 21, 2015

COPY

Alsultan Lounge
One Family LLC
3929 Lewis Avenue
Lincoln NE 68521

RE: Alsultan, Liquor License Class CCS - #108488

Licensee:

On Monday, April 13, 2015 there was a fire at 1637 P Street at the location of Alsultan Lounge and was destroyed by fire.

This is to advise that the Nebraska Liquor Control Commission (NLCC) has administratively granted request to place the above referenced liquor license in a hardship status until the expiration of their license, October 31, 2015.

This administrative approval of hardship status will be presented to the Commission for ratification at the next scheduled hearing.

If you have any questions please feel free to give me a call at 402-471-4893.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Mary Messman
Licensing Division

mm

pc: Lincoln City Clerk
Enforcement Troop Hdq
File

Janice M. Wiebusch
Commissioner

Robert Batt
Chairman

Bruce Bailey
Commissioner

An Equal Opportunity Employer

CITY OF LINCOLN NEBRASKA

BUILDING & SAFETY DEPARTMENT
555 South 10th Street Room 203 Lincoln, NE 68508
402-441-7521 bldgsafe@lincoln.ne.gov lincoln.ne.gov

April 20, 2015

Saif Ali Sayah
3929 Lewis Ave
Lincoln, Ne 68521

To Whom It May Concern:

On Monday, April 13, 2015, there was a fire at 1637 P St. This structure was the location of Alsultan Lounge and was destroyed by fire. The investigation is on-going, pending special investigations for the insurance company (s) origin and cause of the fire.

If you have any questions or concerns, please feel free to contact me at the Bureau of Fire Prevention, 555 S. 10th St., Lincoln, Ne. 68508 or phone 402 -441-6438.

Sincerely,

Richard Campos
Fire Investigator

Rc1637 p st

RECEIVED
APR 20 2015
NEBRASKA LIQUOR
CONTROL COMMISSION

DEVELOPMENT SERVICES CENTER DSC

4/20/20152:48:38 PM

STATE OF NEBRASKA
LIQUOR CONTROL COMMISSION

INQUIRE LICENSE NUMBER 108488 **RETAIL**

OWNERSHIP C I - INDIVIDUAL
CLASS CCS ALCOHOLIC LIQUOR ON/OFF SALE CIGAR SHOP P - PARTNERSHIP
(INSIDE CORPORATE LIMITS) C - CORPORATION

* * * * * * * * * * * * * **BOND INFORMATION** * * * * * * * * * * *

BOND COMPANY START DATE CANCEL DATE
BOND NUMBER
BOND AMOUNT FED BASIC PERMIT #

* * * * * * * * * * * * * **RESTRICTIONS** * * * * * * * * * * * * * * *

* * * * * * * * * * * * * **PREMISE INFORMATION** * * * * * * * * * * * * *

TRADE NAME ALSULTAN LOUNGE LICENSE NO.
ADDRESS-1 1637 P STREET ADDRESS-2 SUITE F
CITY LINCOLN COUNTY 02 LANCASTER ZIP 68508
PHONE 402 890 7876 FAX

MAIL TO:
NAME ONE FAMILY LLC
ADDRESS-1 PO BOX 82843 ADDRESS-2
CITY LINCOLN STATE NE ZIP 68501

* * * * * * * * * * * * * **LICENSE DESCRIPTION** * * * * * * * * * * * *

SINGLE STORY BLDG APPROX 40' X 30'

* * * * * * * * * * * * * **GENERAL INFORMATION** * * * * * * * * * * * * * * *

COPR. LIMITS (Y OR N)	OWN PREMISES (Y OR N)	LEASE EXP. DATE	REPLACING LIC. NO.	TOP	SUSPENDED START	SUSPENDED DAYS	LICENSE EXP DATE
Y	N	05012019					10312015

EMAIL: SAIFSAYAH@GMAIL.COM

DEPRESS: **ENTER** - PROCESS **PF11** - INQ NOTES **PF12** - HISTORY **PA1** - RETURN TO MENU

Tri - new location
Will be sending Hardship

4/20/20152:48:43 PM

STATE OF NEBRASKA
LIQUOR CONTROL COMMISSION

INQUIRE **LICENSE NUMBER** 108488 **CORPORATION**

* * * * * * * * * * * **CORPORATION INFORMATION** * * * * * * * * * * *

CORP. FTIN NO. 010192367 CORP. PHONE 402 890 7876
CORPORATE NAME ONE FAMILY LLC FAX
ADDRESS 1 3929 LEWIS AVE ADDRESS 2
CITY LINCOLN ST NE ZIP 68521
RESIDENT AGENT SAYAH, SAIF A TOTAL SHARES 100.00

CONTROLLING CORPORATION CONTROLLING CORPORATION FTIN NO.

---------- **CORPORATION OFFICERS** ---------- ---- **SPOUSE** ----

PRESIDENT	DOB	SSN	SHARES	DOB	SSN
SAYAH, SAIF A			0000055		

ADDRESS 1 3929 LEWIS AVE ADDRESS 2
CITY LINCOLN STATE NE ZIP 68521

CORP. OFF. NAME / TITLE	DOB	SSN	SHARES	DOB	SSN
SAYAH, ALI *SPOUSE MEMBER			0000045		

* (FILED AFFIDAVIT OF NONPARTICIPATION)

DEPRESS : **ENTER** - PROCESS **PA1** - RETURN TO MENU

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STATE OF NEBRASKA
LIQUOR CONTROL COMMISSION

INQUIRE **LICENSE NUMBER** 108488 **CORPORATION MANAGER**

* * * * * * * * * * * * **MANAGER(S) INFORMATION** * * * * * * * * * * * * *

NAME	SAYAH, SAIF A	SSN		DOB
ADDRESS-1	3929 LEWIS AVENUE	ADDRESS-2		
CITY	LINCOLN	STATE	NE	ZIP 68521
PHONE	402 890 7876	SPOUSE SSN		DOB

* (FILED AFFIDAVIT OF NONPARTICIPATION)

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DEPRESS : **ENTER** - PROCESS **PA1** - RETURN TO MENU

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STATE OF NEBRASKA
LIQUOR CONTROL COMMISSION

LICENSE NUMBER 108483 **LAST PAGE**
CATEGORY R

INQUIRE HISTORY

ACTION CODE	ACTION	ACTION DATE	DATE ENTERED	DOCUMENT NUMBER	FILM ROLL	FILM PAGE
0000	NEW APPLICATION	05282014	06072014	0108488	14000	13516
0102	CIGAR BAR APPL	05282014	06162014		14000	14014
0145	STATUTORY TIME	06172014	06172014		14000	14022
0110	AG. DISAPPROVE	06182014	06182014		14000	14034
0125	LOCAL APPROVE	07222014	07232014		14000	16650
0135	INV. REV. FINAL	07232014	07232014		14000	16956
0019	FURTHER REV REQ	08292014	08292014		14000	18526
0115	FIRE APPROVE	12152014	12152014		14000	26952
0012	CLASS CHG.	01302015	01302015		15000	00037
0105	AG. APPROVE	03032015	03042015		15000	03564
0050	ISSUE LICENSE	03042015	03042015		15000	03565
0051	CLK LTR LIC PKP	03042015	03052015		15000	04351

DEPRESS: **ENTER** - RETURN **PF8** - BACKWARD **PF9** - FORWARD **PA1** - RETURN TO MENU