217

APPLICATION FOR SPECIAL DESIGNATED LICENSE
CITY OF LINCOLN CITY CLERK'S OFFICE
555 S 10TH ST
LINCOLN NE 68508
PHONE: (402) 441-7438

DO YOU NEED POSTERS? YES☒ NO☐

RETAIL LICENSE HOLDER ○

NON PROFIT APPLICANT ○

Non Profit Status (check one that best applies):
Municipal ○ Political ○ Fine Arts ○ Fraternal ○ Religious ○ Charitable ○ Public Service ○

COMPLETE ALL QUESTIONS

1. Type of alcohol to be served and/or consumed: Beer☒ Wine☒ Distilled Spirits☒

2. Liquor license number and class (i.e. C55441, CK55441)
(If you're a nonprofit organization leave blank) CK 99225

3. Licensee name (last, first,), corporate name or limited liability company (LLC) name (As it reads on your liquor license). If you are a nonprofit, name & address of the organization.

NAME:	Kurt Kontor 501 bar & grill		
ADDRESS:	8342 Ryley Lane		
CITY:	Lincoln	ZIP:	68512

4. Location where event will be held; name, address, city, county, zip code

BUILDING NAME:	501 Bar and Grill		
ADDRESS:	501 WEST A	CITY:	LINCOLN
ZIP:	68522	COUNTY & COUNTY #:	LANCASTER

a. Is this location within the city/village limits? YES☒ NO☐

b. Is this location within the 150' of church, school, hospital or home for aged/indigent or for veterans and/or wives? YES☐ NO☒

c. Is this location within 300' of any university or college campus YES☐ NO☒

5. Date(s) and Time(s) of event (no more than six (6) **consecutive** days on one application)

Date 7-18-15	Date	Date	Date	Date	Date
Hours From 8 AM	Hours From	Hours From	Hours From	Hours From	Hours From
To 2 AM 7-19-15	To	To	To	To	To

a. Alternate date: _____

b. Alternate location: _____
(**Alternate date or location must be specified in local approval)**

6. Indicate type of activity to be carried on during event:
O Dance O Reception X Fund Raiser X Beer Garden O Sampling/Tasting
Other: _____

7. Description of area to be licensed
Inside building, dimensions of area to be covered **IN FEET** 80 x 50
(not square feet or acres)

*Outdoor area dimensions of area to be covered **IN FEET** 90 x 90
***SKETCH OF OUTDOOR AREA (or attach copy of sketch) (sample sketch)**

Attached

If outdoor area, how will premises be enclosed?
____fence X snow fence ____chain link ____cattle panel ____tent
other: _____

8. How many attendees do you expect at event? 200

9. If over 150 attendees. Indicate the steps that will be taken to prevent underage persons from obtaining alcohol beverages. (Attach separate sheet if needed)
Security, door person checking ID's
Controled entrance

10. Will premises to be covered by license comply with all Nebraska sanitation laws? YES☒ NO☐
a. Are there separate toilets for both men and women? YES☒ NO☐

11. Retailer: Will you be purchasing your alcohol from a wholesaler? YES☐ NO☐
Non-Profit: Where will you be purchasing your alcohol?
Wholesaler ___X___ Retailer ___X___ Both ___X___ BYO _____
(includes wineries)

12. Will there be any games of chance operating during the event? YES☐ NO☒
If so, describe activity: _____

NOTE: Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. All other forms of gambling are prohibited by State Law: There are no exceptions for Non Profit Organizations or any events raising funds for a charity. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

13. Any other information or requests for exemptions (**must** be received by Commission 30 days prior to event, complete NLCC form 140): _____

14. Name and **telephone number/cell phone number** of immediate **supervisor.** This person will be at the location of the event when it occurs, able to answer any questions from Commission and/or law enforcement before and during the event, and who will be responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. **PLEASE PRINT LEGIBLY**

Print name of Event Supervisor: Kurt Kontor

Signature of Event Supervisor: K Kontor

Event Supervisor phone: Before 402-805-0330 During 402-805-0330

Email address: 501barandgrilllincoln@gmail.com

Consent of Authorized Representative/Applicant

15. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.

sign here K Kontor — Authorized Representative/Applicant

Owner — Title

6-18-2015 — Date

Kurt Kontor — Print Name

This individual must be listed on the application as an officer or stockholder unless a letter has been filed appointing an individual as the catering manager allowing them to sign all SDL applications.

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.

SUPPLEMENTAL FORM
REQUIRED FOR ALL OUTDOOR EVENTS

(Including those for Non Profit Organizations)

Name of Event:	Hogs for Dogs fundraiser poker run		
Applicant and Sponsoring Organization or Individual (if applicable):			
Date(s) of Event:	7-18-2015	Hours:	8AM - 2AM 7-19-2015
Alternate Date(s):		Hours:	

Is the event open to the public? X Yes ____ No

How will you ensure that minors will not be served or consume beverages containing alcohol: ____

check id's at door, security

Will food be served? X Yes ____ No If yes, please list food to be served: ____

burger, hot dogs, fries, onion chips, chicken sandwiches, Nachos

Will non-alcoholic beverages be served: X Yes ____ No
If yes, please list non-alcoholic beverages to be served: soda, N/A beer, water

Who will serve the beverages containing alcohol? ____
Must complete Server/Seller Applicant Information Sheet.

Have the designated servers received responsible beverage server training? X Yes ____ No

Will there be a charge for admission? ____ Yes X No

In the last 12 months, have you received notice of a liquor law violation that occurred during an event at which you were the special designated licensee? ____ Yes X No If so, explain: ____

Applicant's Signature

6-18-2015
Date

SITE PLAN INFORMATION
REQUIRED FOR ALL OUTDOOR EVENTS

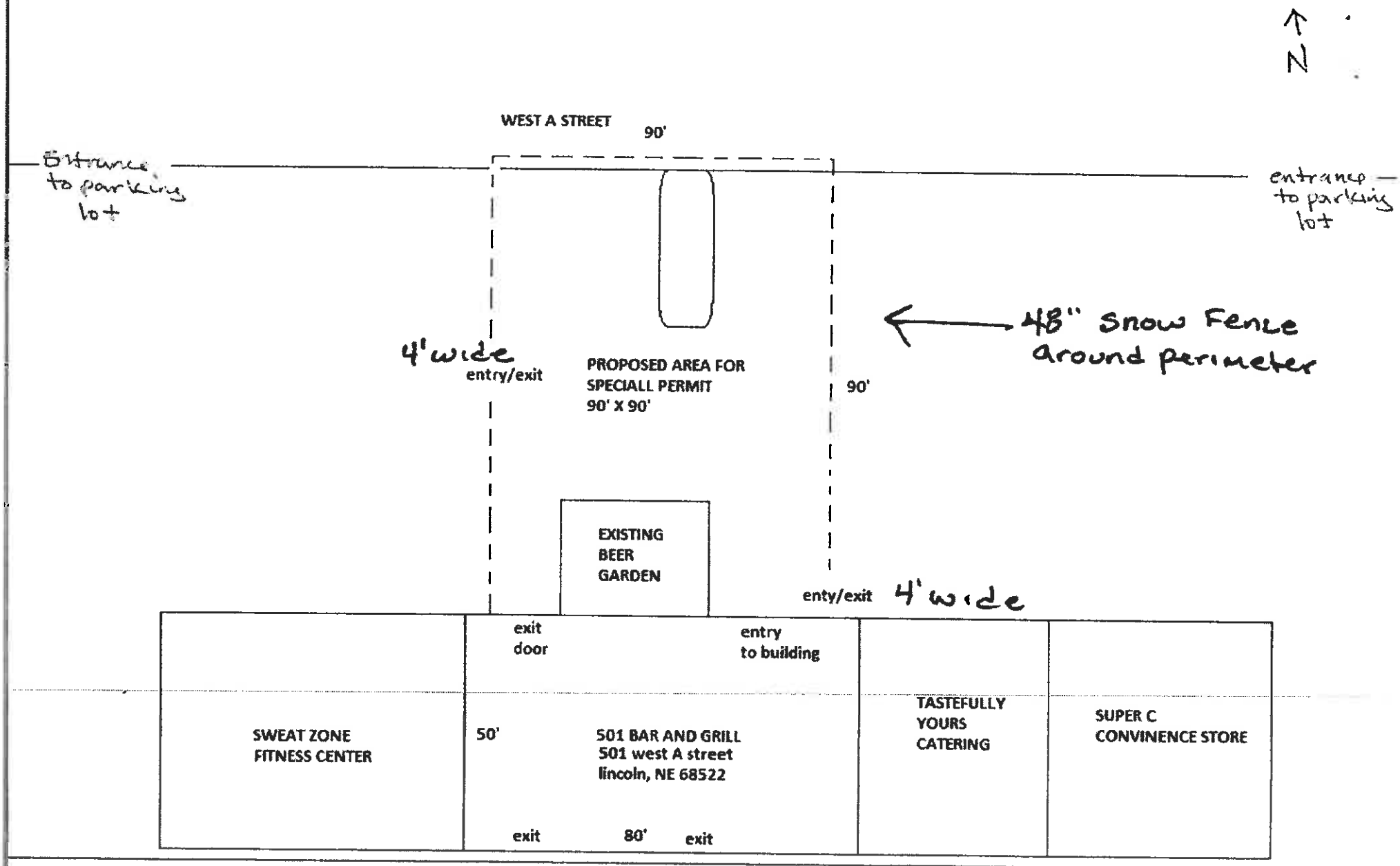
Please provide a drawing showing the following. Provide as much detail as possible to ensure your application is not returned to you for more information. Attach additional drawings, dimensions if necessary.

1. Number of Entry & Exit Points & Dimensions: (4' x 4')
2. Size & location of tent(s) (heights, width, depth)
3. Size of area being used (90 x 90)
4. Location & type of cooking equipment (if used)
5. Location of tables & chairs; If stage for band provided & dance area, show location & dimensions on drawing.
6. Height & type of fencing to be used.

Note: Two (2) exit points must be indicated on your drawing. These exits <u>cannot</u> lead patrons into the building. Questions relating to entry/exit points; electrical wiring; tent sizes can be directed to: Chuck Schweitzer, Fire Prevention Bureau: (402) 441-6441.

See attached drawing

ATTACH EXTRA PAGES IF NECESSARY


N
WEST A STREET
90'
Entrance to parking lot
entrance to parking lot
48" Snow Fence around perimeter
4' wide
entry/exit
PROPOSED AREA FOR SPECIALL PERMIT 90' X 90'
90'
EXISTING BEER GARDEN
enty/exit
4' wide
exit door
entry to building
SWEAT ZONE FITNESS CENTER
50'
501 BAR AND GRILL
501 west A street
lincoln, NE 68522
TASTEFULLY YOURS CATERING
SUPER C CONVINENCE STORE
exit
80'
exit

SERVER/SELLER APPLICANT INFORMATION SHEET

You must provide the **NAME** and **DATE OF BIRTH** of **ALL** Employees/Volunteers who will sell or dispense alcoholic beverages at your event.
This applies to nonprofit corporations as well.

NAME	D/O/B	LNK Permit #
Tifannie Thompson	10-25-93	0225842
Karina Rienke	8-28-78	0025597
Trevor Chandler	7-16-92	0025841
Brian Harvey	10-7-73	0016164
Kurt Kontor	1-19-63	0014468
Kris Kontor	1-18-68	0014473