

Lincoln



Nebraska's Capital City

May 4, 2001

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 Mike Nguyen d.b.a. Egg Roll Palace, 1221 North 27<sup>th</sup> Street requesting a class A liquor license for this location.

Background information on the applicant is as follows:

Mike Nguyen was in Vietnam. He attended the Lincoln Southeast High School graduating in 1985.

Mike Nguyen employment history is as follows:

2000 – present	Owner, Egg Roll Palace	Lincoln, NE.
1992	Laborer, Walker Manufacturing	Seward, NE.
1989	Laborer, IBP	Omaha, NE.
1988	Laborer, Land & Sky	Lincoln, 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](http://www.ci.lincoln.ne.us)

A nationally accredited law enforcement agency



Liquor License Business Report / Completed by Inv Fosler Date: \_\_\_\_\_

DBA: Egg Roll Palace

ADDRESS 1221 N 27TH PHONE 474-9595

TYPE OF INVESTIGATION:

PURCHASE      UPGRADE      EXPANSION      NEW  
OWNER      MANAGER      OTHER \_\_\_\_\_

TYPE OF BUSINESS Rest

CLASS: A B C D I J K CATERING OTHER \_\_\_\_\_

OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL

PURCHASE PRICE \_\_\_\_\_ PROPERTY EQUIPMENT VALUE \_\_\_\_\_

AMOUNT FINANCED 215,000 SOURCE Lincoln Federal L

COLLATERAL Home COSIGNER(S) Brother

LEASE AGREEMENT \_\_\_\_\_

EST INCOME %FOOD 90 %LIQUOR 10

COMMERCIAL INDUSTRIAL RESIDENTIAL

TRAFFIC HEAVY PARKING off street

READY FOR OPERATION: YES NO, EST DATE Feb 18, 2000

FOOD SERVICE Fast Food # OF EMPLOYEES FT 3 PTO

DOES LICENSE COMPLY WITH LEGAL DISTANCES: YES  
NO

EST SEATING 100 EST # DAILY CUSTOMERS 20-70

HOURS OF OPERATION 11am - 8<sup>30</sup> M-SUN

HUMAN RIGHTS COMMISSION CHECKED YES NO N/A

Liquor License Investigative Report / Individual

Business (DBA) Egg Roll Palace

Manager  Owner Other \_\_\_\_\_

Name: MIKE NGUYEN DOB: [REDACTED] Sex M

SSN: \_\_\_\_\_ Phone: Home 483-2724

Address: [REDACTED] 56TH City LINCOLN Zip 68506

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 license? Yes No  N/A

If applicant is not an owner how will they be paid? Salary Hourly N/A

How many hours per week will applicant be at the establishment? 60+

Any other employment?  No Yes, Explain \_\_\_\_\_

Any previous experience with a liquor license? Yes  No

Any criminal convictions?  No Yes, Explain \_\_\_\_\_

Is applicant a property owner in Lincoln?  Yes No

Is applicant involved in any civil litigation?  No Yes, Explain \_\_\_\_\_

Photo  Records Check  References Provided

Comments \_\_\_\_\_

Inv Fosler 843 Date 5/3/01

# STATE OF NEBRASKA

Set date: 4/30

P.H. 5-21-01

7B



April 24, 2001

City Clerk of Lincoln  
City/County Building  
555 S 10 Street  
Lincoln, NE 68508

A #51076

Mike Johanns  
Governor

44993

16

## 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)

Mike Nguyen

dba Egg Roll Palace

1221 N. 27(03)

Class A - Beer on sale only

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

Jackie B. Matulka  
Licensing Division

Enclosures

Rhonda R. Flower  
Commissioner

R.L. (Dick) Coyne  
Chairman

Bob Logsdon  
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001  
REV. 12/99

APR 26 10 18 AM '01  
CITY OF LINCOLN  
NEBRASKA

**APPLICATION FOR LICENSE**

Nebraska Liquor Control Commission, PO Box 95046, 301 Centennial Mall So.  
Lincoln, NE 68509-5046, Phone: (402) 471-2571 Fax: (402) 471-2811

A.# 51076

RECEIVED

City Clerk of Lincoln  
City/County Building  
555 510 Street  
Lincoln, NE 68508  
RECEIVED  
AUG 11 2000  
NEBRASKA LIQUOR  
CONTROL COMMISSION

**INSTRUCTIONS:** All applications must be typewritten and submitted in triplicate to: Nebraska Liquor Control Commission, P.O. Box 95046, Lincoln NE 68509. **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. Corporate stockholders not included 3. Lease or proof of ownership. Statute 53-131.01(2).

NEBRASKA LIQUOR  
CONTROL COMMISSION

Web address: <http://www.nol.org/home/NLCC>

**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 checked="" type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$30.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	30.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside Corporate Limits	30.00	Collected at Local Level	exempt
<input type="checkbox"/> E Beer, Off Sale Only - Outside Corporate Limits	30.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corp. Limits	30.00	Collected at Local Level	exempt
<input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corp. Limits	30.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corp. Limits	30.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer, On and Off Sale - Inside Corp. Limits	30.00	Collected at Local Level	exempt
Do you wish sampling restriction (Lottery)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	30.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	30.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	30.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	30.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer (See Statute §53-124) Wine & Distilled Spirits	30.00	Varies \$100 to \$1000	*10,000 minimum
<input type="checkbox"/> X Wholesale Liquor	30.00	\$500.00	*5,000 minimum
<input type="checkbox"/> W Wholesale Beer	30.00	\$250.00	*5,000 minimum
<input type="checkbox"/> Y Farm Winery	30.00	\$250.00	*1,000 minimum
<input type="checkbox"/> L Craft Brewery (Brew Pub)	30.00	\$250.00	*1,000 minimum

**TYPE OF APPLICATION**

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 Forms 3 & Manager Application to be Attached

**CORPORATE SURETY BOND INFORMATION**

Bond Company - for Classes L V W X Y Only

[Empty box for Bond Company]

\*If tax per month exceeds the minimum amount as listed above you must file a bond increasing the amount to your estimated tax liability.

Start Date Month/Day/Year

[Empty box for Start Date]

Bond Number

[Empty box for Bond Number]

**PREMISE INFORMATION - Must be complete by all applicants**

Trade Name

EGG ROLL PALACE

Telephone Number

402-474-9595

1) Street Address of Proposed Licensed Premise

1221 no. 27 STREET

2) Mailing Address for Official Deliverance of Mail from the Commission

[Empty box for Mailing Address]

City

LINCOLN

County

LANCASTER

Zip Code

68503

Replacing License Number (if applicable)

Are the proposed licensed premises inside the

City Limits of the Town or City? Y

Y=Yes N=No

Do you own the building and real estate for which a license is sought? **If owned, submit a copy of deed or sales contract demonstrating ownership.** Y=Yes N=No Y

If you lease the building or real estate, when does the lease expire?

**SUBMIT A SIGNED COPY OF YOUR LEASE EXTENDING THROUGH LICENSE YEAR**

Month/Day/Year

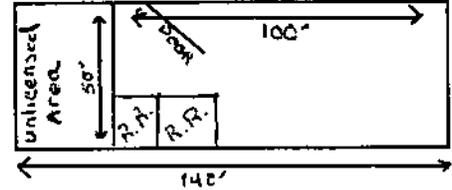
Are you filing a temporary agency agreement, whereby current licensee allows you to operate on their license? \_\_\_\_\_

Y=Yes N=No **If yes, attach copy**

**DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED**

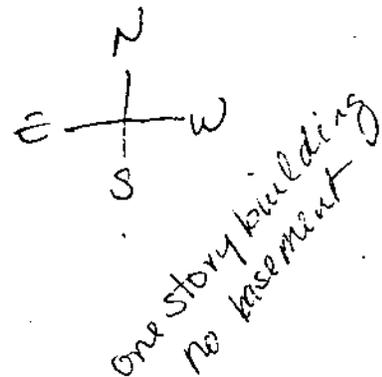
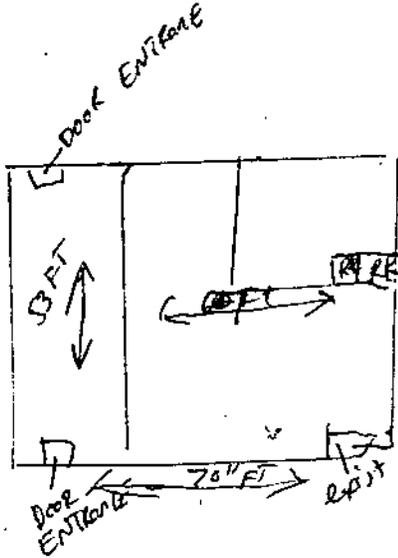
In the Space Provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas of consumption. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the entire building, as well as the licensed area. No blue prints will be accepted. Be sure to indicate the direction North and number of stories in the building.

*N 1*



**EXAMPLE:** East portion Approx. 50' x 100' of main floor of 3 story building plus basement approx. 30' x 50' at the East end.

*one story building approx 70 x 60*



**LEGAL DESCRIPTION OF PREMISES TO BE LICENSED**

*All attached*

**INFORMATION REQUIRED**

	YES	NO	Explanation/Comments
<b>1. READ CAREFULLY-ANSWER FULLY AND ACCURATELY</b> 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 charges pending at the time of this application.		X	
		X	
<b>2. Are you buying or leasing the business of a present licensee?</b>  If buying, give the name of the licensee selling to you and submit a signed copy of the sales agreement listing furniture, fixtures, and their assigned values. If leasing, include a signed copy of the lease		X	

	YES	NO	Explanation/Comments
3. If you are buying the business of a present licensee, are you assuming the present liquor bills?			N/A
4. Are you buying all the alcoholic liquor stock of the present license? If yes attach an inventory including brand names and container sizes of the stock to this application. If no please explain.			N/A
5. Are fixtures, furniture, equipment or stock encumbered? If YES, by whom? Include inventory or any property owned by other party		X	
6. Are you borrowing any money to establish or operate this business? If yes, list the person, Bank or financial institution borrowed from and the amount borrowed. Include a copy of all contracts, promissary notes or any other agreements for repayment.	X		LINCOLN FEDERAL SAVINGS
7. List the name and address of the primary bank/financial institution to be used by the business, include any account numbers. Furnish the account numbers of all checking, savings or other accounts and the names of individuals authorized to write checks, make deposits or withdrawals on such accounts. Attach copy of your "credit report", if filing as individual or partner; if corporation, the CEO/president.			US BANK [REDACTED]
8. Does the premises require remodeling or construction? If YES, give completion date.		X	
9. Will any person or persons other than named on this application (partners, corporate officers, directors) have any interest or ownership directly or indirectly in this business? If YES, explain.		X	
10. Does anyone named on this application, including corporate officers or stockholders, hold a current Nebraska Alcoholic Beverage License? If YES, list licenses and date acquired.		X	
11. Were you the owner, or partner, or an officer of a corporation, on any previous license held in Nebraska or any other state. If YES, list all previous licenses & locations held.		X	
12. If YES was your previous license canceled or revoked by the Liquor Control Commission?			N/A
13. Do you intend to manage the business yourself? If filing as a corporation, this question applies to the manager applicant. If other than a corporation how many hours do you intend to be present in the licensed establishment, supervising?	X		approx 10 hrs a day
14. Have all persons listed on this application provided proof of citizenship, birth certificate, or naturalization papers? (Not applicable to Corporate Applications)	X		
15. Is the premises within 150 feet of any church, school, hospital, home for aged or indigent persons, or for veterans, their wives or children or within 300 feet of a college or university campus? (Sec §53-177) IF YES, ineligible; unless premises had been licensed at least 2 years continuously prior to a new application.		X	
16. Identify each type of business or activity proposed to be operated in conjunction with the license being applied for (e.g. pool hall, restaurant, type of entertainment) and indicate the present or future public convenience or necessity which will be provided for if a license is granted.	FAST FOOD RESTAURANT		
17. Describe the nature of the neighborhood or community immediately surrounding the proposed licensed premises.	BUSINESS DISTRICT		
18. Are the required fingerprint card(s) and the proper fee(s) <u>included</u> with this application? The application will not be processed until the required fingerprints & fees are received by the Commission. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
19. Are you a law enforcement officer in any capacity? If yes, list your agency and duties (only eligible if NOT a manager, officer or stockholder of over 25%). Statute §53-125(15) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			

20. Principal Residence Since Age 18. All individuals, partners, stockholders owning more than 25% stock, chief executive officer, and spouses must complete. If necessary, continue on separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
MIKE NGUYEN	1980	1991	5621 TIPPERARY TRAIL LINCOLN
" "	1991	1993	2957 STARR LINCOLN
" "	1993	CURRENT	██████████ ST LINCOLN

**PERSONAL OATH AND CONSENT TO INVESTIGATION**

Must be signed in the presence of a notary public. Must be signed by the applicant and spouse; if a partnership, all partners and spouses must sign and if a corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable. (Ch. 3-002.07) Nebraska Liquor Control Act/Rules & Regulations.

STATE OF NEBRASKA )  
 ) ss. MIKE NGUYEN  
 COUNTY OF LANCASTER )

The above individual(s), being first duly sworn upon oath, depose(s) and state(s) that the undersigned is/are the applicant(s) and/or spouse(s) of applicant(s) who make(s) 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. (§53-131.01) Nebraska Liquor Control Act.

The undersigned applicant(s) hereby consent(s) 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(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 to the Nebraska Liquor Control Commission. 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.

If an individual owner, I shall supervise in person, the management and operation of the business. I intend to carry on the business authorized by the license for myself and not as an agent for any other person or entity. If a corporation, the manager shall superintend in person, the management and operation of the business. If a partnership, one partner shall, in person, superintend the management and operation of the business. I as a licensee, whether individual, corporate or partnership, agree to responsibly manage and operate this business within any applicable laws, rules, regulations, or ordinances and I further agree to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

sign here Mike Nguyen sign here \_\_\_\_\_  
 sign here Ngoc Pham sign here \_\_\_\_\_  
 sign here \_\_\_\_\_ sign here \_\_\_\_\_  
 sign here \_\_\_\_\_ sign here \_\_\_\_\_

Subscribed in my presence and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

(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 alternative format.

Sign here \_\_\_\_\_  
 Notary Public Signature

RECEIVED  
NEBRASKA LIQUOR CONTROL COMMISSION  
Individual Application  
for License  
FORM 1  
MAY 26 2001

RECEIVED  
AUG 11 2000  
NEBRASKA LIQUOR CONTROL COMMISSION

NEBRASKA LIQUOR CONTROL COMMISSION

INSTRUCTIONS:

- 1) An Individual Licensee Must be a Resident of the State of Nebraska.
- 2) Each Applicant and Spouse must attach fingerprint cards (2 cards per person) and proper fees.
- 3) All applications must be typewritten and submitted in triplicate.

Name of Applicant (Last, First, Middle, Maiden). List any Previous Names or Aliases Used.

MIKE NGUYEN

Social Security Number

[REDACTED]

Date of Birth

[REDACTED]

Applicant's Home Address (1)

[REDACTED] ST

Applicant's Home Address (2)

[REDACTED]

City

LINCOLN

County

LANCASTER

Zip Code

68506

Driver's License Number

[REDACTED]

State

NE

Home Telephone Number

402 483 2724

Business Telephone Number

402 474 9595

ARE YOU MARRIED? YES IF YES, PLEASE COMPLETE.

Spouse's Name (Last, First, Middle, Maiden). List Any Previous Names or Aliases Used

NGA PHAM

Spouse's Social Security Number

[REDACTED]

Spouse's Date of Birth

[REDACTED]

Spouses's Driver's License Number

[REDACTED]

State

NE