

Lincoln



Nebraska's Capital City

June 6, 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 B & B – Q Inc. d.b.a. Cheerleaders Bar & Grill, 5560 South 48<sup>th</sup> Suite 4 requesting a class I liquor license for this location.

Dean Borgmann, president of B&B – Q Inc, has purchased Cheerleaders Bar & Grill. Dean Borgmann holder of all stock in B & B – Q, has requested that he be approved as the manager of this liquor license

Background information on the applicant is as follows:

Dean Borgmann was born in Lincoln, Nebraska. He attended Malcolm High School graduating in 1979. Mr. Borgmann was self-employed from 1979 to 2001 as the owner of Custom Pallet Makers Inc, in Lincoln, Nebraska.

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: Cheerleaders

ADDRESS 5560 So 48th PHONE 421-7992

TYPE OF INVESTIGATION:

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

TYPE OF BUSINESS BAR

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

OWNERSHIP CORPORATION PARTNERSHIP INDIVIDUAL

PURCHASE PRICE 265K PROPERTY EQUIPMENT VALUE 57K

AMOUNT FINANCED 265 SOURCE PARENTS

COLLATERAL — COSIGNER(S) —

LEASE AGREEMENT 3yr \$3500<sup>00</sup>

EST INCOME %FOOD 25 %LIQUOR 75

COMMERCIAL INDUSTRIAL RESIDENTIAL

TRAFFIC off street PARKING —

READY FOR OPERATION: YES NO, EST DATE \_\_\_\_\_

FOOD SERVICE BAR GRILL # OF EMPLOYEES FT 4 PT 26

DOES LICENSE COMPLY WITH LEGAL DISTANCES: YES  
NO \_\_\_\_\_

EST SEATING 222 EST # DAILY CUSTOMERS 100

HOURS OF OPERATION 11am - 1am 7 days Sun open noon

HUMAN RIGHTS COMMISSION CHECKED YES NO N/A

Liquor License Investigative Report / Individual

Business (DBA) Cheerleaders

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

Name: DEAN BERGMANN DOB        Sex M

SSN        Phone: Home 484-7686

Address 505 50 50TH City LINCOLN Zip 68510

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 SEE App File - All misd 1 DWI 1993

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 6/6/01

# STATE OF NEBRASKA

PH: 6-18-01



May 23, 2001

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)

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

AI-058257  
179

646-Q Inc  
dba Chevelodeu Bar & Grill  
5560 South 48th Ste 4  
Class I' 68516

Mike Johanns  
Governor

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

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

RECEIVED  
CITY OF LINCOLN  
MAY 24 11 29 AM '01

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

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

21116

**RECEIVED**  
 MAR 18 2004  
 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 holding over 25% stock 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**

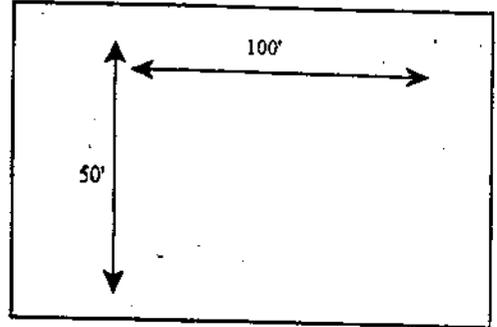
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$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 checked="" 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"/> 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 being applied for (place appropriate number in box) <div style="border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin-bottom: 5px;">3</div> 1= Individual License requires Form 1 to be attached. 2= Partnership License requires Form 2 to be attached. 3= Corporate License requires Forms 3 and Manager Application to be attached	<b>BOND INFORMATION</b> Bond Company - for Classes L V W X Y only <div style="border: 1px solid black; width: 100%; height: 30px; margin-bottom: 5px;"></div> Start Date Month/Day/Year      Bond Number <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; width: 150px; height: 25px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 25px; margin-bottom: 5px;"></div> </div>
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Trade Name (name of business) Cheerleaders Bar & Grill	Telephone Number at premise to be licensed 402-421-7992
1) Street Address of Proposed licensed premise 5560 So. 48th Street, Suite 4	2) Mailing Address for receipt of Liquor Control Commission mailings same
City                      County                      Zip Code Lincoln                  Lancaster                  68516	City                      County                      Zip Code Lincoln                  Lancaster                  68516

**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.



SEE ATTACHED

Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.

*one story Irregular shaped building approx 66 x 111*

*no basement*

<p><b>1. READ CAREFULLY. Answer completely and accurately.</b></p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> 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.</p>	<table border="1"> <tr> <td data-bbox="966 1411 1031 1489" style="text-align: center;">✓</td> <td data-bbox="1047 1411 1494 1926"> <p>Dean Borgmann: 1) Driving Under Influence 1st, Lancaster Co., 10/1993; 2) Reckless Driving 1st, Lancaster Co., 12/1989; 3) .10 Alcohol in System, Lancaster Co., 2/1988; 4) Reckless Driving 1st, Lancaster Co., 5/1987; Reckless Driving 1st, Lancaster Co., 3/1982</p> <p>Elizabeth Borgmann: 1) Driving Under Influence 1st, Lancaster Co., 3/2000; 2) Driving Under Influence 2nd &amp; Negligent Driving, pending in Lancaster Co., ticket date 4/18/2001</p> </td> </tr> </table>	✓	<p>Dean Borgmann: 1) Driving Under Influence 1st, Lancaster Co., 10/1993; 2) Reckless Driving 1st, Lancaster Co., 12/1989; 3) .10 Alcohol in System, Lancaster Co., 2/1988; 4) Reckless Driving 1st, Lancaster Co., 5/1987; Reckless Driving 1st, Lancaster Co., 3/1982</p> <p>Elizabeth Borgmann: 1) Driving Under Influence 1st, Lancaster Co., 3/2000; 2) Driving Under Influence 2nd &amp; Negligent Driving, pending in Lancaster Co., ticket date 4/18/2001</p>
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<p>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).</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Proposal to Buy, Purchase Agreement, and Inventory of Assets attached</p>
<p>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.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Donald Borgmann - father of Dean Borgmann; Loan Agreement Attached</p>
<p>5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>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.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>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?</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>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.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>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.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>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.</p>	<p>Union Bank &amp; Trust Company, Dean L. Borgmann</p>		
<p>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.</p>	<p>N/A</p>		
<p>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.</p>	<p>Dean Borgmann: 40 hours per week</p>		
<p>13. List the training and experience of the person listed in #11 above in connection with selling and/or serving alcohol products.</p>	<p>Hospitality Management Class through LPD - completed 5/10/01</p>		
<p>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)</p>	<p>Copy of Lease Attached Lease expires 5-31-2004</p>		
<p>15. When do you intend to open for business?</p>	<p>June 1, 2001*</p>		

1. List the principal business activities for the person(s) required to be licensed on this application, and if necessary, attach

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Dean Borgmann	1965	2001	Lincoln, NE
Elizabeth Borgmann	1992	2001	Lincoln, NE
Elizabeth Borgmann	1990	1992	San Diego, CA

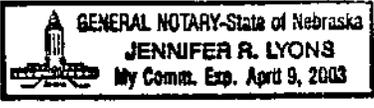
The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or 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 (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

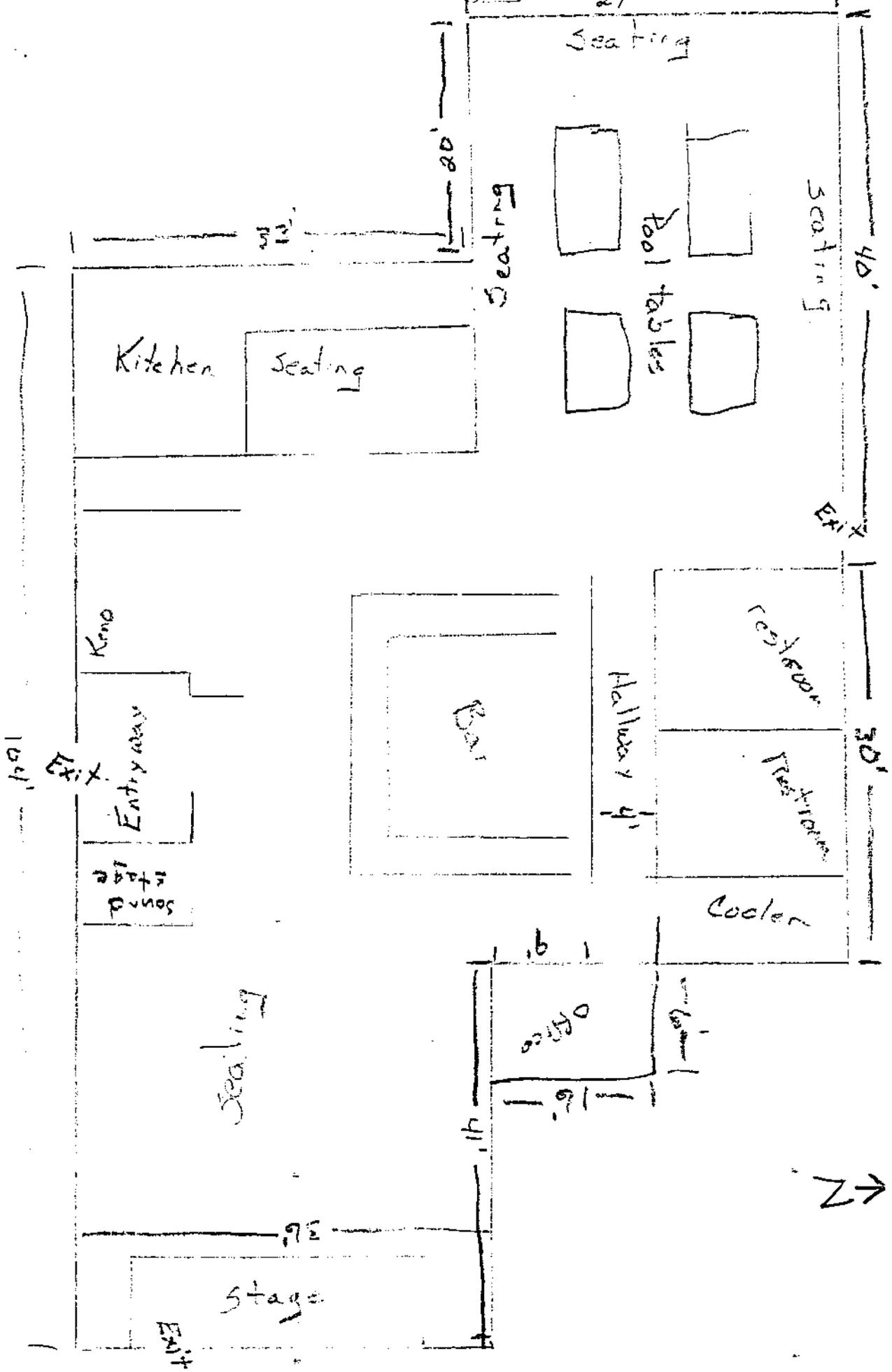
sign here [Signature] sign here \_\_\_\_\_  
 sign here [Signature] sign here \_\_\_\_\_  
 sign here [Signature] sign here \_\_\_\_\_  
 sign here \_\_\_\_\_ sign here \_\_\_\_\_

Subscribed in my presence and sworn to before me this 11 day of May, 2001.

(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 [Signature]  
 Notary Public Signature



# 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/>

RECEIVED

MAY 18 2001

NEBRASKA LIQUOR CONTROL COMMISSION

NAME OF LICENSED CORPORATION B & B - Q Inc.		CLASS & LICENSE NUMBER	
TRADE NAME OF LICENSED PREMISE Cheerleaders Bar & Grill			
STREET ADDRESS OF LICENSED PREMISE 5560 So. 48th Street, Suite 4	CITY Lincoln	COUNTY Lancaster	ZIP CODE 68516

On behalf of the corporation, I designate this individual as corporate manager.

**Signature of Corporate President/CEO:**

NAME (LAST, FIRST, MIDDLE, MAIDEN) Borgmann, Dean Lee	SEX F <input type="checkbox"/> M <input checked="" type="checkbox"/>	SOCIAL SECURITY NUMBER [REDACTED]	DATE OF BIRTH [REDACTED]	PLACE OF BIRTH Lincoln, NE
HOME STREET ADDRESS 505 South 50th Street	CITY Lincoln	COUNTY Lancaster	STATE NE	ZIP CODE 68510
HOME TELEPHONE NUMBER (402) 484-7686	BUSINESS TELEPHONE NUMBER (402) 421-7992	DRIVERS LICENSE NUMBER & STATE G02161768 NE		

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) Borgmann, Elizabeth Lyn (Ronaldson)	SOCIAL SECURITY NUMBER [REDACTED]	DRIVERS LICENSE NUMBER & STATE H12300921 NE
DATE OF BIRTH: [REDACTED]	PLACE OF BIRTH: Baton Rouge, LA	

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  
Dean Borgmann: 1) Driving Under Influence 1st, Lancaster Co., 10/1993; 2) Reckless Driving 1st, Lancaster Co., 12/1989; 3) .10 Alcohol in System, Lancaster Co., 2/1988; 4) Reckless Driving 1st, Lancaster Co., 5/1987; Reckless Driving 1st, Lancaster Co., 3/1982  
Elizabeth Borgmann: 1) Driving Under Influence 1st, Lancaster Co., 3/2000; 2) Driving Under Influence 2nd & Negligent Driving, pending in Lancaster Co., ticket date 4/18/2001

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** (if check, make out to the NE State Patrol), with this application?

YES  NO

APPLICANT: CITY & STATE		YEAR		SPOUSE: CITY & STATE		YEAR	
FROM	TO	FROM	TO	FROM	TO	FROM	TO
Dean Borgmann		1965	Present	Elizabeth Borgmann		1992	Present
Lincoln, NE				Lincoln, NE			
				San Diego, CA		1980	1992

FROM	YEAR TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
1993	2001	Custom Pallet Makers, Inc.	owner	470-2633
1979	1993	Pallet Makers, Inc.	owner	470-2633

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, however, fingerprint cards are still required to be filed.

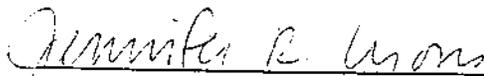
The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

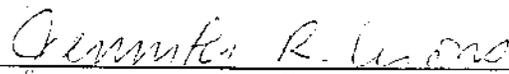
  
Signature of Applicant

Subscribed in my presence and sworn to before me this 11 day of May, 2001

  
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this 11 day of May, 2001

  
Notary Signature & Seal

  
Notary Signature & Seal

