

REPORT TO CITY CLERK
SPECIAL DESIGNATED LICENSE APPLICATION

City Attorney
 Police
 Bureau of Fire Prevention
 Health Dept.

DATE 5-31-01

Reg'd the 6-18-01 agenda RETURN BY 6-15-01

CATERER _____ NON-CATERER

APPLICANT: Pioneers Golf Course c/o Dennis Vortz

APPLICANT'S ADDRESS: 3403 W. Van Dorn 68522

ADDRESS OR LOCATION OF PREMISES TO BE COVERED BY LICENSE _____

Golf Course at 3403 W Van Dorn

DATE(S) OF OCCASION June 30, 2001

TIME(S) OF OCCASION 7:30 a.m to 7 pm

TYPE OF ACTIVITY golf tournament

DETAILS ON ATTACHED APPLICATION

RECOMMENDATION OF APPROVAL OR DENIAL

APPROVED

CONDITIONS Attached

DENIED

REASON(S) FOR _____

[Signature]
Signature

6-1-01
Date

(If needed, use back for additional space)

If approved the following requirements must be followed:

1. Identification to be checked on all parties wishing to consume alcohol.
2. Adequate security to be provided for the event.
3. The area requested for the permit to be separate from the public.
4. Responsible alcohol service practices to be followed.

PH: 6-18-01

ALL ISSUED LICENSES ARE MAILED TO LOCAL CLERKS WHERE THE EVENT IS HELD

- All Applications must be received in the Commission Office 10 working days (excluding holidays) prior to the date of the event
- Complete and return THE ORIGINAL WITH A DUPLICATE to the Nebraska Liquor Control Commission
- A license fee of \$40 (payable to Nebraska Liquor Control Commission) for each day
- LOCAL APPROVAL must be included with this application
- A Signed Statement from Local Police Chief or County Sheriff (question #12)
- NON PROFIT CORPORATION MUST include a letter from the IRS declaring that the corporation is exempt from payment of federal income taxes, or a copy of the corporation's federal income tax return, as filed with the IRS, or a statement (Page 3) signed by an officer of the corporation declaring that the copy of the tax return is a true and correct copy as filed with the IRS

1. Type of Beverage(s) to be served: Beer Wine Distilled Spirits

2. Status of the Applicant (check one) Public
 Municipal Corporation Political Corporation Fine Arts Museum Fraternal Corporation Religious Corporation Charitable Corporation Retail Licensee Service Corporation

3. Name and Address of Corporation, Organization or Licensee obtaining license. If licensee, give license number And Class (Example C/K) 48272
CLASS A
(Please print name and address of licensee, including City, State, County Number, Zip Code)
Pioneers GOLF Course
3403 W Van Dusen
Lincoln NE 68522

4. Address or location of premises to be covered by license, (City, County Number, Zip Code)
Same as above

5. Is this PREMISE currently licensed under the Nebraska Liquor Control Act? YES NO

6. Name and Address of owner or lessee and name of principal occupant of the premises for which the license is requested.
Denis Vantz
7514 Brummond Dr - Lincoln NE 68516

7. Please list the name and telephone number of the primary event supervisor, who will actually be present at the location of the event when it occurs, that can be contacted by law enforcement before and during the event, and who is responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. Supervisor must sign on page 2.
Denis Vantz - (W) 441-8966 (H) 328-8613

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
SATURDAY June 30th 7:30 a.m. to 7:00 p.m.
PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

9. Time(s) of event (example 8am to 1am, this is considered one day)
FROM: 7:30 a.m. TO: 7:00 p.m.

10. Describe the Type of Activity to be carried on during the time period for which the license is requested.
GOLF Tournament

11. Provide an estimated number of attendees at this event 132. If the number of attendees is over 250 attach a separate page indicating the steps that will be taken to prevent underage persons access to alcoholic beverages.

12. PLEASE ATTACH A SIGNED STATEMENT FROM YOUR LOCAL POLICE CHIEF OR COUNTY SHERIFF, WHICHEVER IS APPLICABLE, THAT LOCAL LAW ENFORCEMENT HAS BEEN INFORMED IN ADVANCE OF THIS EVENT, AND IF THEY ARE AWARE OF ANY REASON THE EVENT SHOULD NOT OCCUR.

13. List the number of SDL's that you have applied for at this specific location in the last six months. 1

CONTINUE ON BACK

Special Designated License Application Supplemental Form

CITY USE ONLY

The Special Designated License process is not intended to be used as a vehicle to expand the existing licensed premise.

Name of the Event: Pioneers 4-Man Scramble

Applicant and Sponsoring Organization or Person (if applicable): _____

Date of the Event: SAT. June 30th Time of the Event: 7:30 a.m. - 7:00 p.m.

Has the applicant applied for, and received liquor liability insurance? yes no

Number of persons expected to attend: 132 Number of persons under 21 expected: 0 Is the event open to the public? yes no

How will you ensure that minors will not be served or consume beverages containing alcohol? No one under 21 is expected but the staff @ Pioneers will be checking proper I.D.'s and will use a stamp to identify players who are legally qualified to purchase beer.

Will food be served? yes no If yes, please list food to be served: From clubhouse - general snack bar items - Hot Dog's, chips, pop etc.

Will non-alcoholic beverages be served? yes no If yes, please list non-alcoholic beverages to be served: Pop, Gatorade, All-sport

Please identify the beverages containing alcohol that will be served: wine beer distilled spirits Will this be a cash or complimentary bar? cash complimentary

Who will serve the beverages containing alcohol? Pioneers staff
Have the designated servers received responsible beverage service training? yes no

Will there be a charge for admission? yes no

In the last twelve months, have you received notice of a liquor law violation that occurred during an event at which you were the special designated licensee? yes no
If so, please explain _____

