

Russ

**REPORT TO CITY CLERK
SPECIAL DESIGNATED LICENSE APPLICATION**

- Police
- City Attorney
- Bureau of Fire Prevention
- Health Dept.

DATE:06/13/02

RETURN BY:JULY 16

CATERER XX

NON-CATERER

APPLICANT: **PICKFAIR ENTERTAINMENT CORP DBA BIG RED KENO SPORTS BAR & GRILL**

APPLICANT'S ADDRESS: **955 WEST O STREET**

ADDRESS OR LOCATION OF PREMISES TO BE COVERED BY LICENSE : **955 WEST O STREET**

DATE(S) OF EVENT: **8/24; 8/31; 9/7; 10/5; 10/12; 11/2; 11/9; 11/29**

TIME(S) OF EVENT : **8 AM TO 1 AM**

TYPE OF EVENT: **FOOTBALL TAILGATE PARTY**

DETAILS ON ATTACHED APPLICATION.

RECOMMENDATION OF APPROVAL OR DENIAL

[Signature] APPROVED

CONDITIONS _____

_____ DENIED

REASON(S) FOR _____

[Signature]
Signature

6-14-02
Date

(If needed, use back for additional space)

PUBLIC HEARING BEFORE COUNCIL: 7/22/02

**SPECIAL DESIGNATED LICENSE APPLICATION
SUPPLEMENTAL FORM**

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

Name of Event: TAILGATE PARTY

Applicant and Sponsoring Organization or Person (if applicable): PICKFAIR ENTERTAINMENT CORP.

Date of Event: AUG. 24, 31
SEPT. 7
OCT. 5, 12
NOV. 2, 9, 29 Time of Event: 8 AM TO 1 AM

Has the applicant applied for and received liquor liability insurance? Yes No

Number of persons expected to attend: 190 Number of persons under 21 expected: 20
Is the event open to the public? Yes No

How will you ensure that minors will not be served or consume beverages containing alcohol:
PROPER STAFF TRAINING, TRAINED EMPLOYEES CHECKING IDENTIFICATION PRIOR TO SERVING

Will food be served? Yes No If yes, please list food to be served: BRATWURST, HOT DOGS, HAMBURGERS, POTATO CHIPS

Will non-alcoholic beverages be served: Yes No If yes, please list non-alcoholic beverages to be served: POP, ICED TEA, WATER

Please identify the beverages containing alcohol that will be served: Wine Beer
 Distilled Spirits

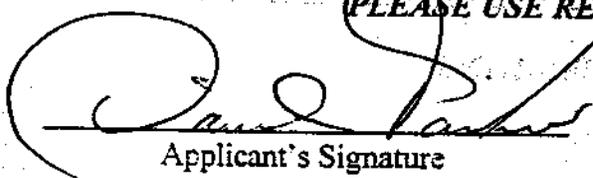
Will this be a cash or complimentary bar? Cash Complimentary

Who will serve the beverages containing alcohol? TRAINED BARTENDERS
Have the designated servers received responsible beverage service training? Yes No

Will there be a charge for admission? Yes 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 No If so, explain:

PLEASE USE REVERSE TO PROVIDE A DRAWING


Applicant's Signature

05-28-2002
Date

PLEASE TYPE OR PRINT
APPLICANT MUST COMPLETE
ALL SECTIONS OF THIS FORM

APPLICATION FOR SPECIAL DESIGNATED LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046, Lincoln NE 68509

628

A2-065305

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 (City, State, County Number, Zip Code) CK-33429
**PICKFAIR ENTERTAINMENT CORP. DBA BIG RED KENO SPORTS BAR & GRILL
 LINCOLN (2) 68528**

4. Address or location of premises to be covered by license. (City, County Number, Zip Code)
955 WEST 10th STREET, LINCOLN (2) 68528

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.
LINCOLN'S BIG RED LOTTERY SERVICES LTD. - LESSEE

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.
CHRISTOPHER ANDERSON (402) 434-7777

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
AUGUST 24, 2002

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: 8 AM TO: 1 AM

10. Describe the Type of Activity to be carried on during the time period for which the license is requested.
FOOTBALL TAILGATE PARTY

11. Provide an estimated number of attendees at this event 190. 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.**
PER SPECIAL INVESTIGATOR FOSLER #043

13. List the number of SDL's that you have applied for at this specific location in the last six months. **-0-**

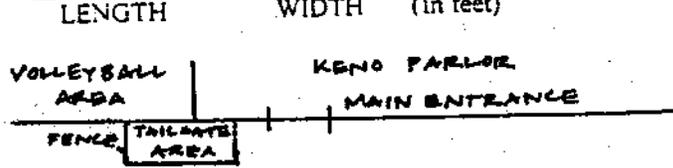
FILED
 CITY CLERK'S OFFICE
 CITY OF LINCOLN
 NEBRASKA
 JUN 6 AM 10 05

CONTINUE ON BACK

**NEBRASKA LIQUOR CONTROL COMMISSION
APPLICATION FOR SPECIAL DESIGNATED LICENSE
UNDER NEBRASKA LIQUOR CONTROL ACT**

14. Description of the premises: Inside Building Outdoor Area

Dimensions of area to be covered by license: 50 x 25. Please draw in the space provided below, the area where liquors will be sold and consumed.
LENGTH WIDTH (In feet)



If outdoor area, how will premises be separated from areas open to the general public? Fence Tent Other (if other, please explain)

15. Is the premises to be covered by the license located within the city/village limits? YES NO

16. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children? YES NO

17. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number.

LICENSED WHOLESALER

18. Will the premises to be covered by the license comply with all Nebraska sanitation laws? YES NO

19. Are there separate toilets for both men and women? YES NO

20. Other information or requests by the applicant: NA

21. Will there be any games of chance operating during the event? YES NO KENO & PICKLE SALES INSIDE KENO PARLOR

NOTICE: 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. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

22. 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 [Signature] PRESIDENT 05-29-2002
Authorized Representative/Applicant Title Date

sign here [Signature] MANAGER / SUPERVISOR 06-03-02
Supervisor Title Date

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.

In Compliance with ADA, this form is available in other formats for persons with disabilities.
A ten day advance period is requested in writing to produce the alternate format.

PLEASE TYPE OR PRINT
APPLICANT MUST COMPLETE
ALL SECTIONS OF THIS FORM

APPLICATION FOR SPECIAL DESIGNATED LICENSE
NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046, Lincoln NE 68509

629

A2-065306

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)
 Municipal Corporation Political Corporation Fine Arts Museum Fraternal Corporation Religious Corporation Charitable Corporation Retail Licensee Public Service Corporation

3. Name and Address of Corporation, Organization or Licensee obtaining license. If licensee, give license number (City, State, County Number, Zip Code) And Class (Example C/K) CR-33429
**PICKPAIR ENTERTAINMENT CORP. PDA 316 RED HEND SPORTS BAR & GRILL
 LINCOLN (2) 68528**

4. Address or location of premises to be covered by license. (City, County Number, Zip Code)
955 WEST 10th STREET, LINCOLN (2) 68528

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.
LINCOLN'S BIG RED LOTTERY SERVICES LTD. - LESSEE

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.
CHRISTOPHER ANDERSON (402) 434-7777

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
AUGUST 31, 2002

PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

Time(s) of event (example 8am to 1am, this is considered one day)
FROM: 8 AM TO: 1 AM

9. Describe the Type of Activity to be carried on during the time period for which the license is requested.
FOOTBALL TAILGATE PARTY

Provide an estimated number of attendees at this event 190. 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.

PLEASE ATTACH A SIGNED STATEMENT FROM YOUR LOCAL POLICE CHIEF OR COUNTY SHERIFF, WHICHEVER 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.
PER SPECIAL INVESTIGATOR FOSLER # 843

List the number of SDL's that you have applied for at this specific location in the last six months. **-0-**

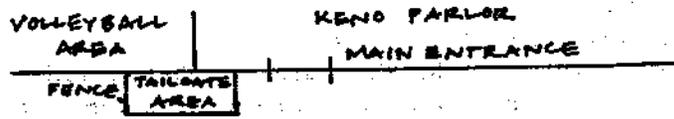
FILED
 CITY CLERK'S OFFICE
 02 JUN 6 PM 10 05
 CITY OF LINCOLN
 NEBRASKA

CONTINUE ON BACK

**NEBRASKA LIQUOR CONTROL COMMISSION
APPLICATION FOR SPECIAL DESIGNATED LICENSE
UNDER NEBRASKA LIQUOR CONTROL ACT**

14. Description of the premises: Inside Building Outdoor Area

Dimensions of area to be covered by license: 50 x 25 Please draw in the space provided below, the area where liquors will be sold and consumed.
LENGTH WIDTH (In feet)



If outdoor area, how will premises be separated from areas open to the general public? Fence Tent Other (if other, please explain)

15. Is the premises to be covered by the license located within the city/village limits? YES NO

16. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children? YES NO

17. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number.

LICENSED WHOLESALER

18. Will the premises to be covered by the license comply with all Nebraska sanitation laws? YES NO

19. Are there separate toilets for both men and women? YES NO

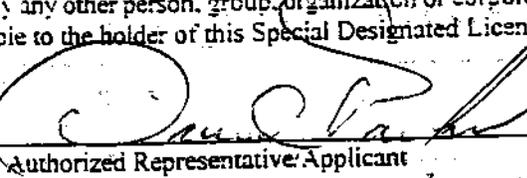
20. Other information or requests by the applicant: NA

21. Will there be any games of chance operating during the event? YES NO KENO & PICKLE SALES INSIDE KENO PARLOR

NOTICE: 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. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

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sign here



Authorized Representative/Applicant

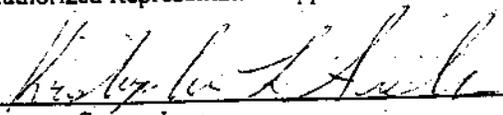
PRESIDENT

Title

05-29-2002

Date

sign here



Supervisor

MANAGER / SUPERVISOR

Title

06-03-02

Date

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APPLICATION FOR SPECIAL DESIGNATED LICENSE
NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046, Lincoln NE 68509

630
A2-065307

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
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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) CK-3342A
 PICKFAIR ENTERTAINMENT CORP. DBA BIG RED KENO SPORTS BAR & GRILL
 LINCOLN (2) 68528

4. **Address or location** of premises to be covered by license. (City, County Number, Zip Code)
 955 WEST 40" STREET, LINCOLN (2) 68528

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.
 LINCOLN'S BIG RED LOTTERY SERVICES LTD. - LESSEE

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.
 CHRISTOPHER ANDERSON (402) 434-7777

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
 SEPTEMBER 7, 2002

9. PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

Time(s) of event (example 8am to 1am, this is considered one day)
 FROM: 8 AM TO: 1 AM

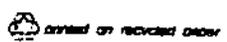
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 FOOTBALL TAILGATE PARTY
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11. PLEASE ATTACH A SIGNED STATEMENT FROM YOUR LOCAL POLICE CHIEF OR COUNTY SHERIFF, WHICHEVER APPLICABLE, THAT LOCAL LAW ENFORCEMENT HAS BEEN INFORMED IN ADVANCE OF THIS EVENT, AND IF THEY ARE AWARE OF ANY REASON THE EVENT SHOULD NOT OCCUR.
 PER SPECIAL INVESTIGATOR FOSLER #843

12. List the number of SDL's that you have applied for at this specific location in the last six months. 0

FILED
 CITY CLERK'S OFFICE
 02 JUN 6 AM 10 05
 CITY OF LINCOLN
 NEBRASKA

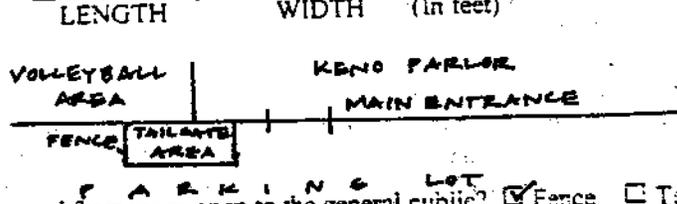
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**NEBRASKA LIQUOR CONTROL COMMISSION
APPLICATION FOR SPECIAL DESIGNATED LICENSE
UNDER NEBRASKA LIQUOR CONTROL ACT**

14. Description of the premises: Inside Building Outdoor Area

Dimensions of area to be covered by license: 50 x 25 Please draw in the space provided below, the area where liquors will be sold and consumed.
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If outdoor area, how will premises be separated from areas open to the general public? Fence Tent Other (if other, please explain)

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LICENSED WHOLESALER

18. Will the premises to be covered by the license comply with all Nebraska sanitation laws? YES NO

19. Are there separate toilets for both men and women? YES NO

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sign here [Signature] PRESIDENT 05-29-2002
Authorized Representative/Applicant Title Date

sign here [Signature] MANAGER / SUPERVISOR
Supervisor Title Date

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PLEASE TYPE OR PRINT
APPLICANT MUST COMPLETE
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APPLICATION FOR SPECIAL DESIGNATED LICENSE
NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046, Lincoln NE 68509

631

A2-065308

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 (City, State, County Number, Zip Code)
 PICFAIR ENTERTAINMENT CORP. DBA BIG RED KENO SPORTS BAR & GRILL
 LINCOLN (2) 68528

4. Address or location of premises to be covered by license. (City, County Number, Zip Code)
 955 WEST 10TH STREET, LINCOLN (2) 68528

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 LINCOLN'S BIG RED LOTTERY SERVICES LTD. - LESSEE

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 CHRISTOPHER ANDERSON (402) 434-7777

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
 OCTOBER 5, 2002

PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

Time(s) of event (example 8am to 1am, this is considered one day)
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Describe the Type of Activity to be carried on during the time period for which the license is requested.
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 PER SPECIAL INVESTIGATOR FOSLER # 843

List the number of SDL's that you have applied for at this specific location in the last six months. -0-

FILED
 CITY CLERK'S OFFICE
 JUN 6 PM 10 05
 CITY OF LINCOLN
 NEBRASKA

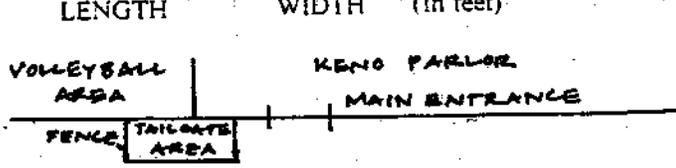
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**NEBRASKA LIQUOR CONTROL COMMISSION
APPLICATION FOR SPECIAL DESIGNATED LICENSE
UNDER NEBRASKA LIQUOR CONTROL ACT**

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sign here [Signature] PRESIDENT 05-29-2002
Authorized Representative Applicant Title Date

sign here [Signature] MANAGER / SUPERVISOR 6-7-02
Supervisor Title Date

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.

In Compliance with ADA, this form is available in other formats for persons with disabilities.
A ten day advance period is requested in writing to produce the alternate format.

PLEASE TYPE OR PRINT
APPLICANT MUST COMPLETE
ALL SECTIONS OF THIS FORM

APPLICATION FOR SPECIAL DESIGNATED LICENSE
NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046, Lincoln NE 68509

632
A2-065309

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 Licenses Service Corporation

3. **Name and Address** of Corporation, Organization or Licensee obtaining license. If licensee, give license number (City, State, County Number, Zip Code) CK-33429
**PICKPAIR ENTERTAINMENT CORP. DBA BIG RED KEND SPORTS BAR & GRILL
 LINCOLN (2) 68528**

4. **Address or location** of premises to be covered by license. (City, County Number, Zip Code)
955 WEST "O" STREET, LINCOLN (2) 68528

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.
LINCOLN'S BIG RED LOTTERY SERVICES LTD. - LESSEE

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.**
KRISTOPHER ANDERSON (402) 434-7777

8. **DATE(S) OF EVENT** (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
OCTOBER 12, 2002

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: 8 AM TO: 1 AM

10. Describe the Type of Activity to be carried on during the time period for which the license is requested.
FOOTBALL TAILGATE PARTY

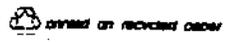
11. Provide an estimated number of attendees at this event 190. If the number of attendees is over 250 attach a separate page indicating the steps that will be taken to prevent underage persons access to alcoholic beverages.

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.**
PER SPECIAL INVESTIGATOR FOSLER #843

13. List the number of SDL's that you have applied for at this specific location in the last six months. -0-

FILED
 CITY CLERK'S OFFICE
 02 JUN 6 AM 10 05
 CITY OF LINCOLN
 NEBRASKA

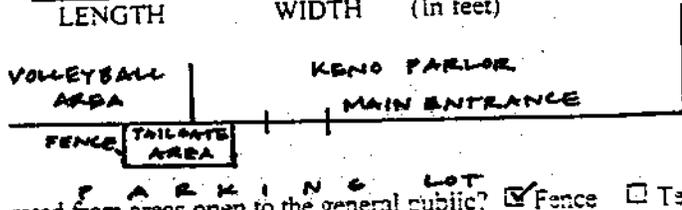
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**NEBRASKA LIQUOR CONTROL COMMISSION
APPLICATION FOR SPECIAL DESIGNATED LICENSE
UNDER NEBRASKA LIQUOR CONTROL ACT**

14. Description of the premises: Inside Building Outdoor Area

Dimensions of area to be covered by license: 50 x 25. Please draw in the space provided below, the area where liquors will be sold and consumed.



If outdoor area, how will premises be separated from areas open to the general public? Fence Tent Other (if other, please explain)

15. Is the premises to be covered by the license located within the city/village limits? YES NO

16. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children? YES NO

17. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number.

LICENSOR WHOLESALE

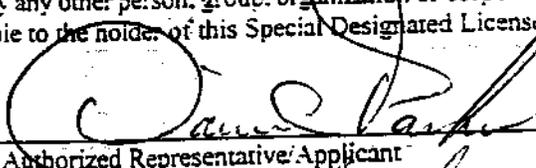
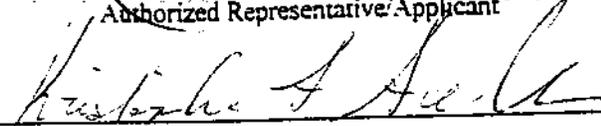
18. Will the premises to be covered by the license comply with all Nebraska sanitation laws? YES NO

19. Are there separate toilets for both men and women? YES NO

20. Other information or requests by the applicant: NA

21. Will there be any games of chance operating during the event? YES NO KENO & PICKLE SALES INSIDE KENO PARLOR
NOTICE: 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. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

22. 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		<u>PRESIDENT</u>	<u>05-29-2002</u>
	Authorized Representative/Applicant	Title	Date
sign here		<u>MANAGER / SUPERVISOR</u>	<u>6-3-02</u>
	Supervisor	Title	Date

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.

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APPLICANT MUST COMPLETE
ALL SECTIONS OF THIS FORM

APPLICATION FOR SPECIAL DESIGNATED LICENSE
NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046, Lincoln NE 68509

633
A2-065310

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 Soirits
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) CK-33429

*PICKPAIR ENTERTAINMENT CORP. DBA BIG RED HEND SPORTS BAR & GRILL
LINCOLN (2) 68528*

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

955 WEST 10th STREET, LINCOLN (2) 68528

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.

LINCOLN'S BIG RED LOTTERY SERVICES LTD. - LESSEE

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.

KRISTOPHER ANDERSON (402) 434-7777

8. **DATE(S) OF EVENT** (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)

NOVEMBER 2, 2002

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: 8 AM TO: 1 AM

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

FOOTBALL TAILGATE PARTY

11. Provide an estimated number of attendees at this event 190. 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.**

PER SPECIAL INVESTIGATOR FOSLER #843

13. List the number of SDL's that you have applied for at this specific location in the last six months. -0-

FILED
 CITY CLERK'S OFFICE
 '02 JUN 6 AM 10 05
 CITY OF LINCOLN
 NEBRASKA

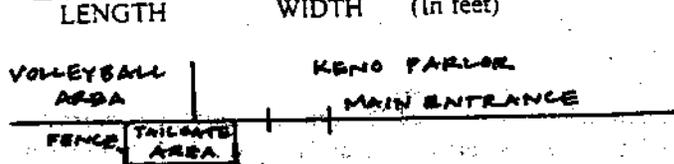
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**NEBRASKA LIQUOR CONTROL COMMISSION
APPLICATION FOR SPECIAL DESIGNATED LICENSE
UNDER NEBRASKA LIQUOR CONTROL ACT**

14. Description of the premises: Inside Building Outdoor Area

Dimensions of area to be covered by license: 50 x 25 Please draw in the space provided below, the area where liquors will be sold and consumed.
LENGTH WIDTH (In feet)



If outdoor area, how will premises be separated from areas open to the general public? Fence Tent Other (if other, please explain)

15. Is the premises to be covered by the license located within the city/village limits? YES NO

16. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children? YES NO

17. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number.

LICENSED WHOLESALER

18. Will the premises to be covered by the license comply with all Nebraska sanitation laws? YES NO

19. Are there separate toilets for both men and women? YES NO

20. Other information or requests by the applicant: NA

21. Will there be any games of chance operating during the event? YES NO KENO & PICKLE SALES INSIDE KENO PARLOR

NOTICE: 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. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

22. 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 [Signature] PRESIDENT 05-29-2002
Authorized Representative/Applicant Title Date

sign here [Signature] MANAGER / SUPERVISOR 1-3-02
Supervisor Title Date

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.

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APPLICATION FOR SPECIAL DESIGNATED LICENSE
NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046, Lincoln NE 68509

634

A2-065311

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) CK-33429
 PICKFAIR ENTERTAINMENT CORP. DBA BIG RED KENO SPORTS BAR & GRILL
 LINCOLN (2) 68528

4. Address or location of premises to be covered by license. (City, County Number, Zip Code)
 955 WEST 10" STREET, LINCOLN (2) 68528

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.
 LINCOLN'S BIG RED LOTTERY SERVICES LTD. - LESSEE

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 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.
 KRISTOPHER ANDERSON (402) 434-7777

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
 NOVEMBER 9, 2002

9. PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

10. Time(s) of event (example 8am to 1am, this is considered one day)
 FROM: 8 AM TO: 1 AM

11. Describe the Type of Activity to be carried on during the time period for which the license is requested.
 FOOTBALL TAILGATE PARTY

12. Provide an estimated number of attendees at this event 190. 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.

13. PLEASE ATTACH A SIGNED STATEMENT FROM YOUR LOCAL POLICE CHIEF OR COUNTY SHERIFF, WHICHEVER 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.
 PER SPECIAL INVESTIGATOR FOSLER # 843

14. List the number of SDL's that you have applied for at this specific location in the last six months. -0-

FILED
 CITY CLERK'S OFFICE
 02 JUN 6 AM 10 04
 CITY OF LINCOLN
 NEBRASKA

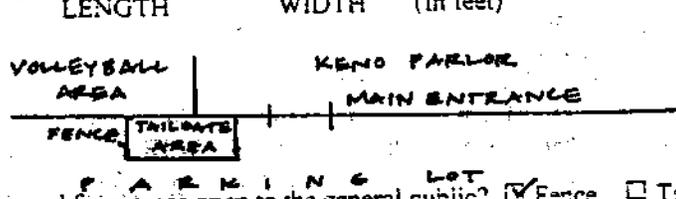
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**NEBRASKA LIQUOR CONTROL COMMISSION
APPLICATION FOR SPECIAL DESIGNATED LICENSE
UNDER NEBRASKA LIQUOR CONTROL ACT**

14. Description of the premises: Inside Building Outdoor Area

Dimensions of area to be covered by license: 50 x 25 Please draw in the space provided below, the area where liquors will be sold and consumed.
LENGTH WIDTH (In feet)



If outdoor area, how will premises be separated from areas open to the general public? Fence Tent Other (if other, please explain)

15. Is the premises to be covered by the license located within the city/village limits? YES NO

16. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children? YES NO

17. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number.
LICENSED WHOLESALER

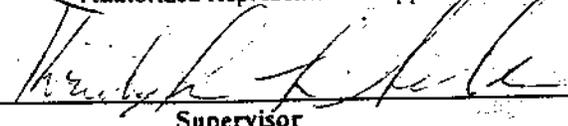
18. Will the premises to be covered by the license comply with all Nebraska sanitation laws? YES NO

19. Are there separate toilets for both men and women? YES NO

20. Other information or requests by the applicant: NA

21. Will there be any games of chance operating during the event? YES NO KENO & PICKLE SALES INSIDE KENO PARLOR
NOTICE: 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. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

22. 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		<u>PRESIDENT</u>	<u>05-29-2002</u>
	Authorized Representative/Applicant	Title	Date
sign here		<u>MANAGER / SUPERVISOR</u>	<u>6-3-02</u>
	Supervisor	Title	Date

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APPLICATION FOR SPECIAL DESIGNATED LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046, Lincoln NE 68509

635

A2-065312

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
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- 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

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

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

Name and Address of Corporation, Organization or Licensee obtaining license. If licensee, give license number and Class (Example C/K)
PICKFAIR ENTERTAINMENT CORP. DBA BIG RED HEND SPORTS BAR & GRILL
LINCOLN (2) 68528 CR-33429

Address or location of premises to be covered by license. (City, County Number, Zip Code)
955 WEST 10" STREET, LINCOLN (2) 68528

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

Name and Address of owner or lessee and name of principal occupant of the premises for which the license is requested.
LINCOLN'S BIG RED LOTTERY SERVICES LTD. - LESSEE

Please list the name and telephone number of the primary event supervisor, who will actually be present at the location of the event when 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.
CHRISTOPHER ANDERSON (402) 434-7777

DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
NOVEMBER 29, 2002

EASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

Time(s) of event (example 8am to 1am, this is considered one day)
FROM: 8 AM TO: 1 AM

Describe the Type of Activity to be carried on during the time period for which the license is requested.
FOOTBALL TAILGATE PARTY

Provide an estimated number of attendees at this event 190. 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.

PLEASE ATTACH A SIGNED STATEMENT FROM YOUR LOCAL POLICE CHIEF OR COUNTY SHERIFF, WHICHEVER 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.
PER SPECIAL INVESTIGATOR FOSLER #843

List the number of SDL's that you have applied for at this specific location in the last six months. -0-

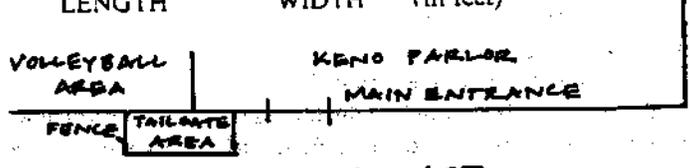
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CITY OF LINCOLN
NEBRASKA
02 JUN 6 AM 10 04

CONTINUE ON BACK

NEBRASKA LIQUOR CONTROL COMMISSION
**APPLICATION FOR SPECIAL DESIGNATED LICENSE
 UNDER NEBRASKA LIQUOR CONTROL ACT**

14. Description of the premises: Inside Building Outdoor Area

Dimensions of area to be covered by license: 50 x 25 Please draw in the space provided below, the area where liquors will be sold and consumed.
 LENGTH WIDTH (In feet)



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LICENSED WHOLESALER

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sign here [Signature] PRESIDENT 05-29-2002
 Authorized Representative/Applicant Title Date

sign here [Signature] MANAGER / SUPERVISOR 6-3-02
 Supervisor Title Date

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