

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

Police  
 City Attorney  
 Bureau of Fire Prevention  
 Health Dept.

DATE: 7/9/02

RETURN BY: 07/24 /02

CATERER

NON-CATERER

APPLICANT: DENIS VONTZ DBA PIONEERS GOLF COURSE

APPLICANT'S ADDRESS: 3403 W VAN DORN STREET

ADDRESS OR LOCATION OF PREMISES TO BE COVERED BY LICENSE : **ENTIRE GOLF COURSE  
THAT IS SURROUNDED BY A FENCE INCLUDING DRIVING RANGE AND PARKING LOTS**

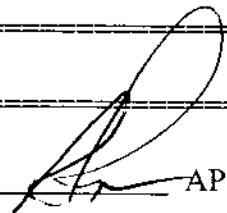
DATE(S) OF EVENT: AUGUST 17, 2002

TIME(S) OF EVENT : 7 AM TO 8 PM

TYPE OF EVENT: **GOLF/ CUSTOMER APPRECIATION SATURDAY**

**DETAILS ON ATTACHED APPLICATION.**

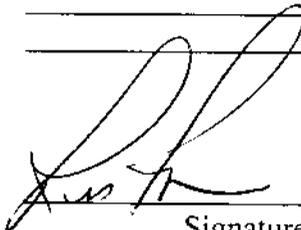
**RECOMMENDATION OF APPROVAL OR DENIAL**

 APPROVED

CONDITIONS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ DENIED

REASON(S) FOR \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

  
Signature

7-10-02  
Date

(If needed, use back for additional space)

**PUBLIC HEARING BEFORE COUNCIL: 7/29/02**

(SDLRPT.JER)

669

**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  Service Corporation  
Public Corporation

3. Name and Address of Corporation, Organization or Licensee obtaining license. If licensee, give license number and Class (Example C/K) 48772  
Pioneers Golf Course  
3403 W Van Dorn 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 Vontz 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 law ordinances, rules and regulations are adhered to. Supervisor must sign on page 2.  
Denis Vontz (W) 441-8966 (H) 328-8613

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)  
August 17th  
PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

FILED  
CITY CLERK'S OFFICE  
CITY OF LINCOLN  
NEBRASKA  
JUL 18 10 55 AM '02

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

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

11. Provide an estimated number of attendees at this event 250. 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. 3

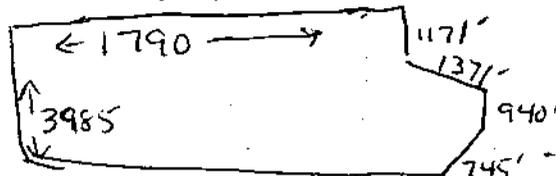
CONTINUE ON BACK

**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: \_\_\_\_\_ x \_\_\_\_\_ Please draw in the space provided below, the area where liquors will be sold and consumed.

ENTIRE GOLF Course that  
is surrounded by a fence.  
this includes driving range  
and parking Lot's



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.

FROM WHOLESALE DISTRIBUTOR

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: I would like to have these 3 applications put with the 2 applications to be heard on July 15. otherwise put all 3 on July 29th

21. Will there be any games of chance operating during the event?  YES  NO meetings or next possible meeting  
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 Dennis Vontz Manager 7/13/02  
Authorized Representative/Applicant Title Date

sign here Dennis Vontz Manager 7/13/02  
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.

### 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: CUSTOMER Appreciation SATURDAY

Applicant and Sponsoring Organization or Person (if applicable): Pioneers G.C.

Date of the Event: August 17 Time of the Event: 7:00 a.m. - 8:00 p.m.

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

Number of persons expected to attend: 250 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? Beverage Cart personnel will card any customer purchasing beer plus our green fee structure will catch anyone under 21.

Will food be served? yes no If yes, please list food to be served: Hamburgers, Hot Dogs

Will non-alcoholic beverages be served? yes no If yes, please list non-alcoholic beverages to be served: O'Douls - Cranade

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? SUNCE Bar Personnel  
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 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Police  
 City Attorney  
 Bureau of Fire Prevention  
 Health Dept.

DATE: 7/9/02

RETURN BY: 07/24 /02

CATERER

NON-CATERER XX

APPLICANT: DENIS VONTZ DBA PIONEERS GOLF COURSE

APPLICANT'S ADDRESS: 3403 W VAN DORN STREET

ADDRESS OR LOCATION OF PREMISES TO BE COVERED BY LICENSE : ENTIRE GOLF COURSE  
THAT IS SURROUNDED BY A FENCE INCLUDING DRIVING RANGE AND PARKING LOTS

DATE(S) OF EVENT: AUGUST 29, 2002

TIME(S) OF EVENT : 8 AM TO 9 PM

TYPE OF EVENT: GOLF LEAGUE'S PLAY WITH PRIZES

DETAILS ON ATTACHED APPLICATION.

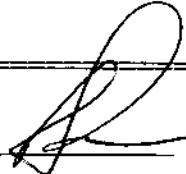
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**RECOMMENDATION OF APPROVAL OR DENIAL**

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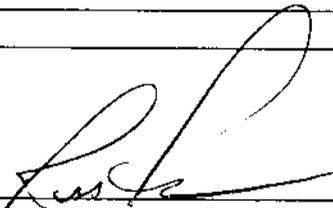
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 APPROVED

CONDITIONS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ DENIED

REASON(S) FOR \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

  
Signature

7-10-02  
Date

(If needed, use back for additional space)

**PUBLIC HEARING BEFORE COUNCIL: 7/29/02**

(SDLRPT.JER)

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

670

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)  
 (City, State, County Number, Zip Code) 48772  
CLASS A  
 Pioneers Golf Course  
 3403 W. Van Dorn  
 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 Vontz 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 Vontz (W) 441-8966 (H) 328-8613

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)  
 August 29<sup>th</sup>

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: 8:00 am TO: 9:00 p.m.

10. Describe the Type of Activity to be carried on during the time period for which the license is requested.  
 Golf League's Play Day with prizes

11. Provide an estimated number of attendees at this event 240. 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. 3

FILED  
 CITY CLERK'S OFFICE  
 02 JUL 5 47 AM '95  
 CITY OF LINCOLN  
 NEBRASKA

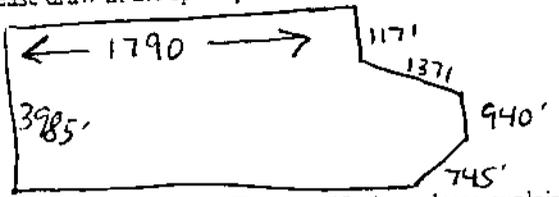
CONTINUE ON BACK

**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: \_\_\_\_\_ x \_\_\_\_\_ Please draw in the space provided below, the area where liquors will be sold and consumed.

ENTIRE Golf Course Bounded by a fence. This includes driving range and parking lot's.



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.

From Wholesale Distributor

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:

THAT ALL 3 S.D.L.'s may be heard by council on July 15 or July 29 <sup>1st CHOICE</sup> or <sup>2nd CHOICE</sup> ~~here~~

21. Will there be any games of chance operating during the event?  YES  NO  
**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 Dennis Vortz Authorized Representative Applicant Manager Title 7/3/02 Date

sign here Dennis Vortz Supervisor Manager Title 7/3/02 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.  
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### Special Designated License Application Supplemental Form

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

Name of the Event: League Appreciation Day

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

Date of the Event: August 29<sup>th</sup> Time of the Event: 8:00 a.m. - 9:00 p.m.

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

Number of persons expected to attend: 240 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? All League Players this day are over 21. However we will card anyone who is playing purchasing beer and they must have proper identification

Will food be served?  yes  no If yes, please list food to be served: \_\_\_\_\_

Will non-alcoholic beverages be served?  yes  no If yes, please list non-alcoholic beverages to be served: O'Doul's - Gatorade - Pop

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? SNACK BAR PERSONNEL  
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 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REPORT TO CITY CLERK  
SPECIAL DESIGNATED LICENSE APPLICATION

Police  
 City Attorney  
 Bureau of Fire Prevention  
 Health Dept.

DATE: 7/9/02

RETURN BY: 07/24 /02

CATERER

NON-CATERER XX

APPLICANT: DENIS VONTZ DBA PIONEERS GOLF COURSE

APPLICANT'S ADDRESS: 3403 W VAN DORN STREET

ADDRESS OR LOCATION OF PREMISES TO BE COVERED BY LICENSE : ENTIRE GOLF COURSE  
THAT IS SURROUNDED BY A FENCE INCLUDING DRIVING RANGE AND PARKING LOTS

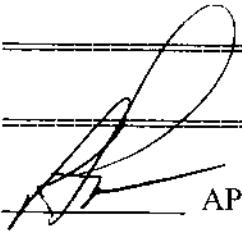
DATE(S) OF EVENT: SEPTEMBER 28, 2002

TIME(S) OF EVENT : 8 AM TO 6 PM

TYPE OF EVENT: GOLF OUTING/COLLEGE OF JOURNALISM REUNION

DETAILS ON ATTACHED APPLICATION.

RECOMMENDATION OF APPROVAL OR DENIAL

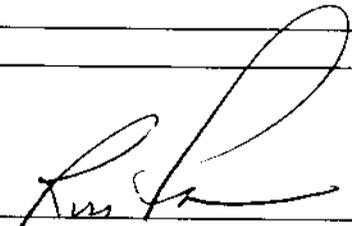


APPROVED

CONDITIONS

DENIED

REASON(S) FOR



Signature

7-10-02

Date

(If needed, use back for additional space)

PUBLIC HEARING BEFORE COUNCIL: 7/29/02

(SDLRPT.JER)

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

671

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

- 1] All Applications must be received in the Commission Office 10 working days (excluding holidays) prior to the date of the event
- 2] Complete and return **THE ORIGINAL WITH A DUPLICATE** to the Nebraska Liquor Control Commission
- 3] A license fee of \$40 (payable to Nebraska Liquor Control Commission) for each day
- 4] **LOCAL APPROVAL** must be included with this application
- 5] A Signed Statement from Local Police Chief or County Sheriff (question #12)
- 6] **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     Service Corporation     Public

3. Name and Address of Corporation, Organization or Licensee obtaining license. **If licensee, give license number And Class (Example C/K)**  
Pioneers Golf Course    48772  
3403 W. Van Doren    Lincoln NE 68522    CLASS A

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 Vontz 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 Vontz (W) 441 8966    (H) 328-8613

8. **DATE(S) OF EVENT** (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)  
September 28  
PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

FILED  
CITY CLERK'S OFFICE  
02 JUL 5 AM 10 55  
CITY OF LINCOLN  
NEBRASKA

9. Time(s) of event (example 8am to 1am, this is considered one day)  
FROM: 8:00 am TO: 6:00 pm

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

11. Provide an estimated number of attendees at this event 200. 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 THE 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. 3

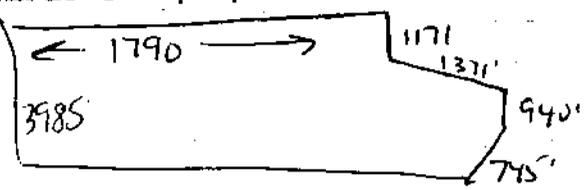
CONTINUE ON BACK

**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: \_\_\_\_\_ x \_\_\_\_\_ Please draw in the space provided below, the area where liquors will be sold and consumed.

ENTIRE GOLF COURSE THAT IS SURROUNDED BY A FENCE. THIS INCLUDES DRIVING RANGE AND BOTH PARKING LOTS



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.

From WHOLESALE Distributor

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: I would like to have these 3 applications put with the 2 applications to be heard on July 15th. Otherwise put these 3 on July 29th

21. Will there be any games of chance operating during the event?  YES  NO

**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 Demis Vontz Manager 7/3/02  
Authorized Representative/Applicant Title Date

sign here Demis Vontz manager 7/3/02  
Supervisor Title Date

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### Special Designated License Application Supplemental Form

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

Name of the Event: College of Journalism Reunion

Applicant and Sponsoring Organization or Person (if applicable): Pioneers G.C.

Date of the Event: Sept. 28 Time of the Event: 8:00<sup>a.m.</sup> - 6:00 p.m.

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

Number of persons expected to attend: 200 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? Most - Nearly all will be college alums, but we'll card anyone we need to. They will need proper identification

Will food be served?  yes  no If yes, please list food to be served: \_\_\_\_\_

Will non-alcoholic beverages be served?  yes  no If yes, please list non-alcoholic beverages to be served: O'Douls, Gatorade, Pop

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? Manager + SNACK Bar Personnel!  
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 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_