



May 20, 2003

Mayor Seng and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of JV Inc., d.b.a. Azteca Mexican Restaurante, 500 West Gate Boulevard requesting a class I liquor license.

James Vidaurre, president has requested that Courtney Stetson be approved as the manager of the liquor license.

The Lincoln Police Department is requesting that this liquor license be denied based on the following:

1. On May 13, 2003, Ms. Stetson withdrew her request to be the manager of the requested liquor license.
2. On May 9, 2003, The Nebraska State Patrol conducted a compliance check in which alcohol was sold without a liquor license. James Vidaurre, president of the business was present during this transaction.
3. The application presented has been found to be inaccurate and incomplete.

Sincerely,

A handwritten signature in black ink, appearing to read "Thomas K. Casady".

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



# STATE OF NEBRASKA

set date 5/19/03  
P.H. 6/2/03



CITY CLERK'S OFFICE

'03 MAY 6 PM 5 24

CITY OF LINCOLN  
NEBRASKA

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)

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

Mike Johanns  
Governor

A3-647990  
147

May 5, 2003

Office of the City Clerk  
555 South 10<sup>th</sup> Street  
Suite 103  
Lincoln NE 68508

JV INC.  
dba Azteca Mexican Restaurante  
500 West Gate Blvd  
CLASS I

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

*Mary Mesman*  
Mary Mesman  
Licensing Division

**FILED**  
CITY CLERK'S OFFICE  
'03 MAY 5 PM 5 24  
CITY OF LINCOLN  
NEBRASKA

Enclosures

**Rhonda R. Flower**  
Commissioner

**Bob Logsdon**  
Chairman

**R.L. (Dick) Coyne**  
Commissioner

An Equal Opportunity/Affirmative Action Employer

**APPLICATION FOR LICENSE**

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

City # 59282  
<http://www.nol.org/home/NLCC/>  
 Phone: (402) 471-2571  
 Fax: (402) 471-2814  
 New

**RECEIVED**

APR 30 2003

NEBRASKA 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/member holding over 25% stock/interest. 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**

Class of License (Check applicable class)	Registration Fee	License Fees	Corporate Surety Bond
<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 – Indicate Inside or 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"/> DI Spirits, Wine, Beer, Off Sale only – within extraterritorial zoning jurisdiction	\$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**

**CORPORATE SURETY BOND INFORMATION**

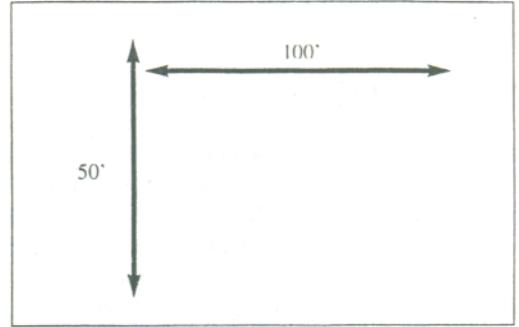
Type of application being applied for (place appropriate number in box) <div style="border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 5px;">3</div> 1= Individual License requires Form 1 to be attached. 2= Partnership License requires Form 2 to be attached. 3= Corporate License requires Form 3 and 4 and Manager Application be attached.	Bond Company – for Classes L V W X Y only <div style="border: 1px solid black; width: 100%; height: 30px; margin: 5px;"></div> Start Date Month/Day/Year <div style="border: 1px solid black; width: 100%; height: 20px; margin: 5px;"></div> Bond Number <div style="border: 1px solid black; width: 100%; height: 20px; margin: 5px;"></div>
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**SECTION A – LOCATION INFORMATION – Must be completed by all applicants**

Trade Name (name of business) <b>Azteca Mexican Restaurant</b>			Telephone Number at premise to be licensed <b>(402) 435-2229</b>		
1) Street Address of Proposed licensed premise <b>500 West Gate Blvd.</b>			2) Mailing Address for receipt of Liquor Control Commission mailings <b>SAME</b>		
Is this located inside the city limits Circle <b>YES</b> NO					
City	County	Zip Code	City	County	Zip Code
<b>Lincoln</b>	<b>Lancaster</b>	<b>68528</b>			

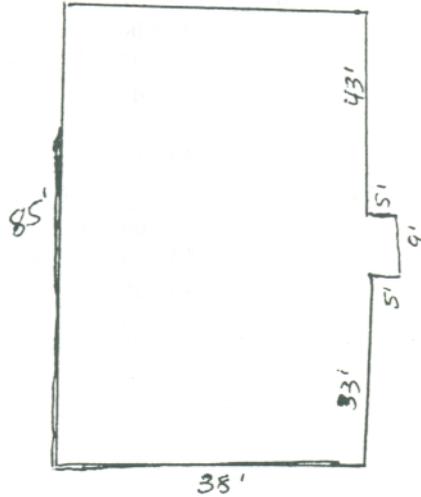
**DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED**

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.



One story, irregular shaped building,  
 approx 38' x 85'  
 NO BASEMENT

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



SECTION B		OTHER INFORMATION REQUIRED	
	Yes	No	Explanation/Comments
<p>1. <b>READ CAREFULLY.</b> Answer completely and accurately.</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 or 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>			
		X	

	Yes	No	Explanation/Comments
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).		X	
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.		X	
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.		X	
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		X	
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.	X		B+J Partnership owns billiard table; misc kitchen equip, tables, chairs, plates and silverware
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?		X	
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.		X	
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.		X	
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.	West Gate Bank JAMES Uidaurre		
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.	JV INC JAMES Uidaurre For 2002		
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.	Richard John Simpsons 40 hours per week		
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	15 years experience as a bartender		
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).	Lease attached		
15. When do you intend to open for business?	Continuing operations		

Closed

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
JAMES Vidaurre	1997	Present	Lincoln NE
	1992	1997	Tacoma WA
Courtney Stetson	1979	Present	Lincoln, NE

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/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign here \_\_\_\_\_  
 sign here \_\_\_\_\_  
 sign here \_\_\_\_\_  
 sign here \_\_\_\_\_  
 sign here \_\_\_\_\_

sign here \_\_\_\_\_  
 sign here \_\_\_\_\_  
 sign here \_\_\_\_\_  
 sign here \_\_\_\_\_

\_\_\_\_\_ 4-30-2003



Subscribed in my presence and sworn to before me this 21 day of April, 2003



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 alternate format.

for James Vidaurre } sign here \_\_\_\_\_  
 Notary Public Signature  
 4-21-03

# Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

**RECEIVED**

APR 30 2013

NEBRASKA LIQUOR  
CONTROL COMMISSION

**INSTRUCTIONS:**

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
- 3) Information regarding spouses must be completed

Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation		JV, Inc.		Total Number of Shares (if corporation)		100	
Corporate Street Address (1)		500 Westgate Blvd.		Mailing address for receipt of Liquor Control Commission Mailings		SAME	
City	County	State	Zip Code	City	County	State	Zip Code
Lincoln	Lancaster	Nebraska	68528				
Name of Registered Agent		James Vidaurne		Name of Proposed Manager		Courtney Stetson	
<b>IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER</b>							
Name		James Vidaurne		Title		President	
Home Address (1)		2741 Dudley		Date of Birth			
City		Lincoln		State		Nebraska	
		State		Zip Code		Home Telephone Number	
		Ne		68503		(402) 742-5202	

# Corporation/LLC Application for License - Form 3

## PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title	Number of Shares %
NAME: Vidaurre, JAMES			President, Secretary, Treasurer	100%
Spouse Name: Vidaurre, Joy Lynn				
NAME:				
Spouse Name:				
NAME:				
Spouse Name:				
NAME:				
Spouse Name:				
NAME:				
Spouse Name:				

*AS of Monday*

(If Necessary, Continue on Separate Sheet)



# 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/>

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APR 30 2003

NEBRASKA LIQUOR  
CONTROL COMMISSION

## LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION <i>JV. IN</i>		CLASS & LICENSE NUMBER	
TRADE NAME OF LICENSED PREMISE <i>Hstecca</i>			
STREET ADDRESS OF LICENSED PREMISE <i>500 West. Gate Blvd</i>	CITY <i>Lincoln</i>	COUNTY <i>Lancaster</i>	ZIP CODE <i>68528</i>
On behalf of the corporation, I designate this individual as corporate manager.			
Signature of Corporate President/CEO:			

## APPLICANT INFORMATION (MUST BE 21 OR OVER)

NAME (LAST, FIRST, MIDDLE, MAIDEN) <i>Stetson Courtney Renee'</i>	SEX <input checked="" type="radio"/> F <input type="radio"/> M	SOCIAL SECURITY NUMBER	DATE OF BIRTH	PLACE OF BIRTH <i>Scottsbluff</i>
HOME STREET ADDRESS <i>2298 Dudley St.</i>	CITY <i>Lincoln</i>	COUNTY <i>Lancaster</i>	STATE <i>Ne</i>	ZIP CODE <i>68502</i>
HOME TELEPHONE NUMBER <i>402-1001-0615</i>	BUSINESS TELEPHONE NUMBER ( )	DRIVERS LICENSE NUMBER & STATE <i>NE</i>		

## SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) <i>Single</i>	SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER & STATE
DATE OF BIRTH:	PLACE OF BIRTH	

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

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

**RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE**

APPLICANT: CITY & STATE	YEAR FROM	YEAR TO	SPOUSE: CITY & STATE	YEAR FROM	YEAR TO
ALL: Lincoln, NE					
3298 Dudley St.	2002	current			
5018 W. Hughes St.	2001	2002			
5421 Benton St.	2000	2001			
1851 Whittier St.	1999	2000			

**EMPLOYERS - LIST LAST TWO EMPLOYERS**

YEAR FROM	YEAR TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
10/2002	10/2002	Friends forever	Charlene Tran	438-4896
4/2002	7/2002	WAL-MART	Jeff	438-4377

**PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT & SPOUSE**

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 of non participation may be attached.

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.

*Courtney Steffen*  
Signature of Applicant

*Courtney Steffen*  
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this 30th day of April, 2003

Subscribed in my presence and sworn to before me this 31st day of April, 2003

*Jeffrey F. Dean*  
Notary Signature & Seal  
GENERAL NOTARY-State of Nebraska  
JEFFREY F. DEAN  
My Comm. Exp. December 25, 2004

*Jeffrey F. Dean*  
Notary Signature & Seal  
GENERAL NOTARY-State of Nebraska  
JEFFREY F. DEAN  
My Comm. Exp. December 25, 2004