

Lincoln



Nebraska's Capital City

May 21, 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 Mettlen Inc., d.b.a. Jax, 2711 South 48th Street requesting a class C liquor license.

This location previously held a class D liquor license, as an off sale alcohol site. The new license will allow Eugene Podolak and Mary Dunn to operate an on/off sale location.

This new license will be a small neighborhood bar with an approximate seating capacity of 70 persons.

Eugene Podolak has requested that he be approved as the manager of the liquor license. Mr. Podolak has completed the required managers training course.

Background information will be omitted as Mr. Podolak was approved as the manager of the class I liquor license held at this location. Mr. Podolak and Ms. Dunn have also be approved as owners / manager of Geno's, 807 South 11th which holds a class D liquor license.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



STATE OF NEBRASKA

Set date 6/2/03
PH: 6/16/03



Russ

A3-053540

104A

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
TDD (402) 471-2571
TTS (402) 833-7352 (TTY)
web address: <http://www.nolcc.org/home/NLCC/>

RECEIVED
CITY OF LINCOLN
MAY 15 11 00 AM '03
NEBRASKA

Mike Johanns
Governor
May 14, 2003

City Clerk
County/City Bldg
555 South 10th Street
Lincoln NE 68508

MettLen Inc
dba Tax
2711 South 48th Street
68506

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

Michelle Porter
Licensing Division

Enclosures

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

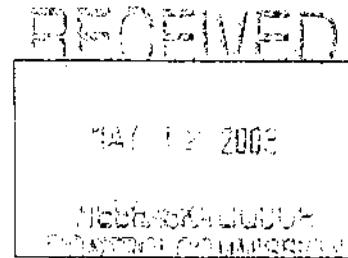
Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

APPLICATION FOR LICENSE

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

Local
of
 L# C 59417
 http://www.nol.org/home/NLCC/
 Phone: (402) 471-2571
 Fax: (402) 471-2814
NCC



INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in **Triplicate** 8. Required areas marked by a red asterisk (*)

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

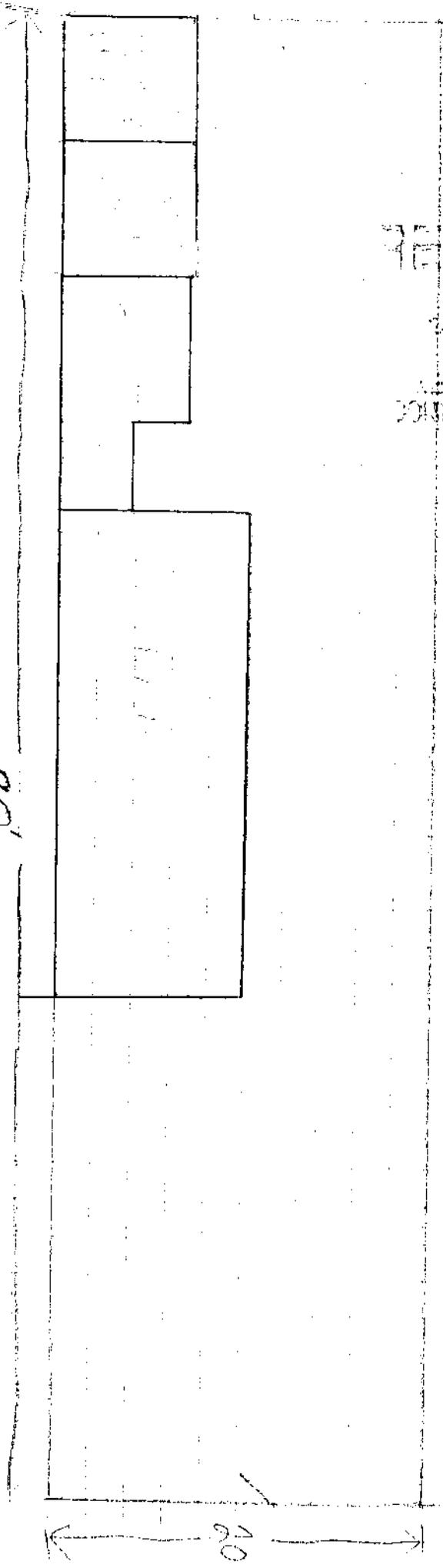
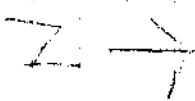
Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond *send copy
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input 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"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input checked="" 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.

SECTION B		OTHER INFORMATION REQUIRED *		Explanation/Comments <i>Note: Only what is visible on screen will be printed</i>
	Yes	No		
<p>1. READ CAREFULLY. Answer completely and truthfully.</p> <p>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. Include any DWIs or DULs. 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>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	<p>Eugene Podolak, DWI December 1978, convicted March 1979</p> <p>Mary Jane Dunn, Refuse Chemical Test, April 1983 convicted July 1984</p>	
<p>2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	Purchase Agreement Attached	
<p>3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>		
<p>4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	Security Federal or Union Bank	
<p>5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	Mark Ferraina, landlord, he would possible receive a percentage on sales as rent on the premises	

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2007

MISSOURI DEPARTMENT OF REVENUE



The structure approx 20x80
located in the Industrial Square
Shipping center

<p>6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	<p>Union Bank & Trust Eugene Podolak and Mary Jane Dunn</p>		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	<p>MaryGene, Inc. dba Geno's Beverages, Eugene Podolak and Mary Jane Dunn, 807 S. 11th, Lincoln, NE 68508</p>		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p>	<p>Eugene Podolak, 40-50 hours or more as necessary</p>		

<p>13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.</p>	<p>28 years selling offsale</p>
<p>14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)</p>	<p>Lease Attached</p>
<p>15. When do you intend to open for business?</p>	<p>Early Summer</p>

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)
Eugene Podolak	1980	2003	Lincoln, NE
Mary Jane Dunn	1982	2003	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 (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign here Eugene J. Podolub

Sign Here _____

Sign Here Mary Jane Du

Sign Here _____

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Sign Here _____

Sign Here _____

MAY 12 2003

Sign Here _____

Sign Here _____

NEBRASKA LIQUOR CONTROL COMMISSION

X

Subscribed in my presence and sworn to before me this 1st day of May, 2003

(SEAL)

X

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

Sign here _____

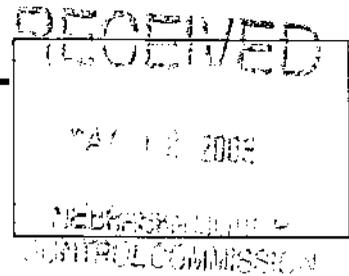
Brenda D. Black

Notary Public Signature

Verify & Print form

GENERAL NOTARY-State of Nebraska
BRENDA D. BLACK
My Comm. Exp. June 5, 2004
FORM 35-4010

Corporation/LLC Application for License - Form 3
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

Required areas marked by a red asterisk (*)

Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation		Total Number of Shares (if corporation)	
<input *<="" td="" type="text" value="Mettlen, Inc."/> <td colspan="2"><input *<="" td="" type="text" value="100"/> </td>		<input *<="" td="" type="text" value="100"/>	
Corporate Street Address		Mailing address for receipt of Liquor Control Commission Mailings	
<input *<="" td="" type="text" value="2711 S. 48th St., #101"/> <td colspan="2"><input *<="" td="" type="text" value="2711 S. 48th St., #101"/> </td>		<input *<="" td="" type="text" value="2711 S. 48th St., #101"/>	
Corporate Telephone Number	City	County	State
<input *<="" td="" type="text" value="488-9565"/> <td><input *<="" td="" type="text" value="Lincoln"/> <td><input *<="" td="" type="text" value="Lancaster"/> <td><input *<="" td="" type="text" value="NE"/> </td></td></td>	<input *<="" td="" type="text" value="Lincoln"/> <td><input *<="" td="" type="text" value="Lancaster"/> <td><input *<="" td="" type="text" value="NE"/> </td></td>	<input *<="" td="" type="text" value="Lancaster"/> <td><input *<="" td="" type="text" value="NE"/> </td>	<input *<="" td="" type="text" value="NE"/>
			Zip Code
			<input *="" -="" <input="" type="text" value="68506"/>
Name of Registered Agent		Name of Proposed Manager	
<input *<="" td="" type="text" value="Eugene Podolak"/> <td colspan="2"><input *<="" td="" type="text" value="Eugene Podolak"/> </td>		<input *<="" td="" type="text" value="Eugene Podolak"/>	

IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Name	Title	Date of Birth
<input *<="" td="" type="text" value="Eugene Podolak"/> <td><input *<="" td="" type="text" value="Vice President"/> <td><input *<="" td="" type="text" value="10/22/54"/> </td></td>	<input *<="" td="" type="text" value="Vice President"/> <td><input *<="" td="" type="text" value="10/22/54"/> </td>	<input *<="" td="" type="text" value="10/22/54"/>
Social Security Number	Home Address (1)	City
<input *<="" td="" type="text" value="507-72-5357"/> <td><input *<="" td="" type="text" value="5201 Topaz Ct."/> <td><input *<="" td="" type="text" value="Lincoln"/> </td></td>	<input *<="" td="" type="text" value="5201 Topaz Ct."/> <td><input *<="" td="" type="text" value="Lincoln"/> </td>	<input *<="" td="" type="text" value="Lincoln"/>
State	Zip Code	Home Telephone Number
<input *<="" td="" type="text" value="NE"/> <td><input *="" -="" <input="" type="text" value="68516"/></td> <td><input *<="" td="" type="text" value="423-1380"/> </td>	<input *="" -="" <input="" type="text" value="68516"/>	<input *<="" td="" type="text" value="423-1380"/>

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
Name <input type="text" value="Eugene Podolak"/>	<input type="text" value="507-72-5357"/>	<input type="text" value="10/22/54"/>	<input type="text" value="Vice President"/>
Spouse Name <input type="text" value="Mary Jane Dunn"/>	<input type="text" value="507-80-5341"/>	<input type="text" value="12/2/55"/>	<input type="text"/>
Partner Number of Shares / % <input type="text" value="50"/>	Spouse Number of Shares / % <input type="text" value="50"/>		

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Is this Corporation/L.L.C controlled by another Corporation?

Yes No

MAY 11 2003

Name of control Corporation

[Empty box for Name of control Corporation]

NEBRASKA STATE
CONTROL COMMISSION

IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LCC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.

Please indicate below your corporate tax year with the IRS

Starting date: January Ending date: December

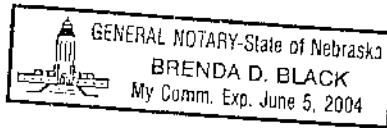
State of Nebraska)

) ss.

Lancaster County)

X Brenda D. Black
Notary Public Signature & Seal

By Esq. V. P. Roberts V. Pres
President/Member



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.

Mary Jane Dean
Secretary/Member

Verify Form and Print

RECEIVED

Application for Corporate Manager

Must Be A Nebraska Resident

Please submit in Triplicate

MAY 12 2003

NEBRASKA LIQUOR CONTROL COMMISSION

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/>

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Mettlen, Inc. *

Class & License number

Trade Name of Licensed Premise

Jax *

Street Address of Licensed Premise

2711 S. 48th St. *

City

Lincoln *

County

Lancaster *

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

Signature of Corporate President/CEO:

Eugene J. Podolak

APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

Podolak, Eugene J. *

Sex *

F M
C

Social Security Number

507-72-5357 *

Date of Birth

10/22/45 *

Place of Birth

Lincoln, Nebraska *

Home Street Address

5201 Topaz Ct. *

City

Lincoln *

County

Lancaster *

State

NE *

Zip Code

68516 *

Home Telephone Number

423-1380 *

Business Telephone Number

488-9565 *

Drivers License Number

State

G020600 47

NE

Are You Married? Yes No If Yes, You must complete the following:

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

Full Name (Last, First, Middle, Maiden)

Mary Jane Dunn

Social Security Number

507-80-5341

Drivers License Number

G02114680

State

NE

Date of Birth

12/2/55

Place of Birth

Beatrice, NE

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

Eugene Pololak Beatrice, Mo. 1978, conviction March 1979
 Mary Jane Dunn Refuse Chemical Test April 1983 conviction July 1984

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

MaryGene, Inc. OBA Gene's Beverages
 5-1-2002-4-30-2003 807 S. 11
 # 33449 Lincoln NE

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
<input checked="" type="radio"/>	<input type="radio"/>

RESIDENCES SINCE AGE 18, APPLICANT AND SPOUSE MUST COMPLETE

	Year	
	From	To
Applicant: City & State		
Eugene Podolak: Lincoln, Nebraska	72	03
Spouse: City & State		
Mary Jane Dunn: Wymore, Nebraska	74	76

	Year	
	From	To
Applicant: City & State		
Spouse: City & State		
Mary Jane Dunn: Lincoln, Nebraska	76	03

	Year	
	From	To
Applicant: City & State		
Spouse: City & State		

	Year	
	From	To
Applicant: City & State		
Spouse: City & State		

EMPLOYERS - LIST LAST TWO EMPLOYERS

	Year	
	From	To
Name of Employer		
Jax Beverages	1975	2003
Name of Supervisor		Telephone Number

