

March 11, 2004

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 DB Associates, d.b.a. The Steakhouse, 3441 Adams Street requesting a class C liquor license.

Duane Benkowski, President has requested that James Wulf be approved as the manager of the liquor license.

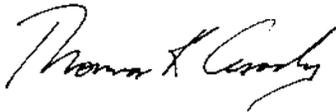
Background information on the applicant is as follows:

James Wulf was born in Lincoln, Nebraska. He attended Lincoln High School graduating in 1991.

James Wulf employment history is as follows:

1999 – Present	Manager, Boston Market	Lincoln, NE.
1990 – 1999	Cook, Old Country Buffet	Lincoln, NE.

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



A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) STEAK HOUSE

Manager Owner Other _____

Name: JAMES WULF

US Citizen? Yes No

Has applicant ever been cited for liquor law violations? No Yes
Explain _____

Does applicant have an interest in another liquor license? No Yes
Explain _____

Is spouse qualified to hold a license? Yes No N/A

How is applicant if not an owner to be paid? Salary Hourly

How many hours will applicant be at the establishment? 50+

Any other employment? No Yes, explain _____

Any previous experience with a liquor license? Yes No

Any criminal convictions? No Yes
Comments _____

Is applicant a property owner in Lincoln? Yes No

Is applicant involved in any civil litigation? No Yes
Comments _____

Photo Records Check References

Comments _____

Interview Date 3/11/04

STATE OF NEBRASKA

PH: 4-5-04



CITY CLERK'S OFFICE
'04 MAR 4 PM 3:36
CITY OF LINCOLN
NEBRASKA

NEBRASKA LIQUOR CONTROL COMMISSION
Robert B. Rupe
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 March 3, 2004

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

A4-025272
113

DB Associates Inc
dba The Steakhouse
3441 Adams
Lincoln

18

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
<http://www.nol.org/home/NLCC/>
 Phone: (402) 471-2577
 Fax: (402) 471-2814

Repl
 C# 62692
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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 on plain paper. All applications must be submitted 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 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	Collected at Local Level	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	\$150.00	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	Collected at Local Level	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	\$ 50.00	exempt
<input type="checkbox"/> X Wholesale Liquor	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$500.00	\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	\$ 5,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.
	\$45.00	\$250.00	\$ 1,000 min.

TYPE OF APPLICATION

Type of application being applied for (place appropriate number in box)

3

- 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 bc attached.

CORPORATE SURETY BOND INFORMATION

Bond Company - for Classes L V W X Y only

[Empty box for Bond Company]

Start Date Month/Day/Year

[Empty box for Start Date]

Bond Number

[Empty box for Bond Number]

SECTION A - LOCATION INFORMATION - Must be completed by all applicants

Trade Name (name of business)

The Steak House

Telephone Number at premise to be licensed

(402) 466-2472

1) Street Address of Proposed licensed premise

3441 ADAMS STREET

2) Mailing Address for receipt of

Liquor Control Commission mailings

3441 ADAMS STREET

Is this located inside the city limits

Circle **YES**/NO

City County Zip Code

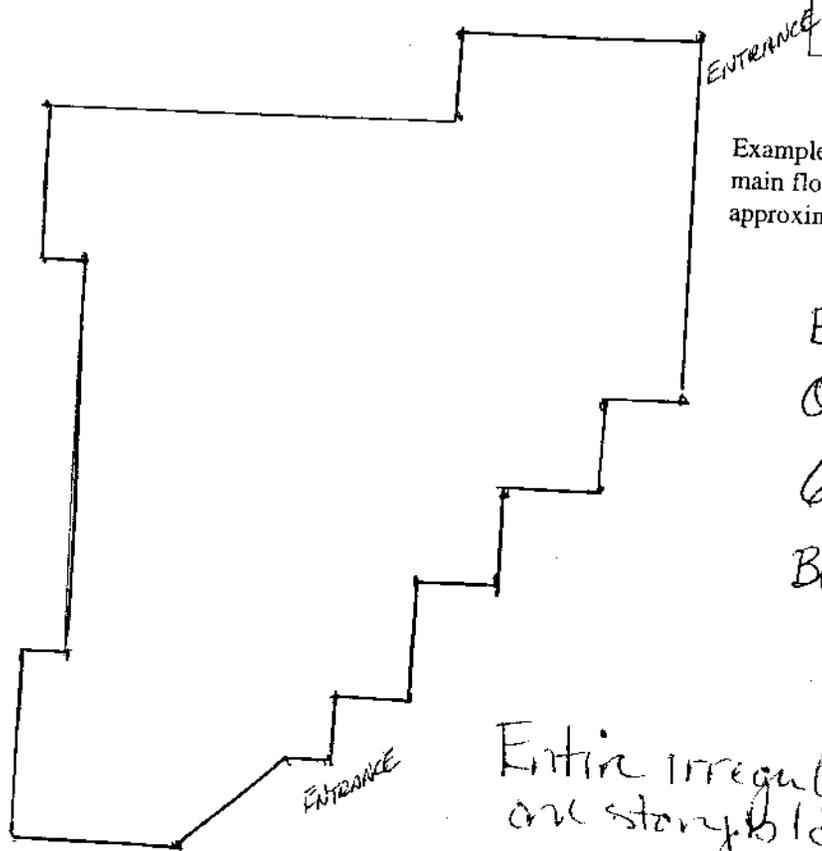
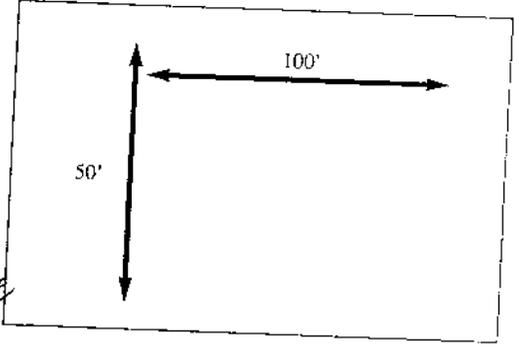
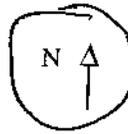
LINCOLN LANCASTER 68504

City County Zip Code

LINCOLN LANCASTER 68504

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 building 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.



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

Entire building.
 One story.
 6097 SQUARE FEET APPROX
 Building measures about
 86 (North-South) feet
 by 103 (East-West) feet
 Entire irregular-shaped
 one story bldg approx 86' x 103'

SECTION B OTHER INFORMATION REQUIRED

1. READ CAREFULLY. Answer completely and accurately.	Yes	No	Explanation/Comments
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 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.	X		① ABOUT 6-7 YEARS AGO, BENKOWSKI PLED NO CONTEST TO DWI, BENTON COUNTY MN. SUCCESSFULLY COMPLETED PROBATION. ② ABOUT 16 YEARS AGO, BENKOWSKI HAD AN M/P, LANCASTER COUNTY, NB. HE WAS ABOUT 16 YRS OLD. ③ BENKOWSKI HAS HAD 5 OR 6 SPEEDING TICKETS, THE LAST ABOUT 4 TO 5 YEARS AGO.

	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		#9936
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		NORTH AMERICAN STATE BANK. WILLMAR, MN.
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		OH.
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.			WELLS FARGO DUANE BENKOWSKI JAMES WOLF
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.			BENKOWSKI INVESTMENTS, INC. dba FUNKY'S REST. & LOUNGE 203 E. MAIN ST. MELROSE, MN ON/OFF SALE LICENSE #3; SUNDAY #4
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.			JAMES WOLF PROBABLY 50 TO 65
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.			NONE - WILL RECEIVE TRAINING
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-hold interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed).			
15. When do you intend to open for business?			MARCH 14 OR MARCH 21

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)
DUANE BENKOWSKI	1999	CURRENT	CLEAR LAKE, MN
DUANE BENKOWSKI	1994	1999	BECKER, MN.

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NEBRASKA LIQUOR CONTROL COMMISSION

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 XD [Signature] sign here _____
 sign here _____ sign here _____
 sign here _____ sign here _____
 sign here _____ sign here _____

Subscribed in my presence and sworn to before me this 26 day of FEBRUARY, 2004.

GENERAL NOTARY - State of Nebraska
TERRY BARBER
My Comm. Exp. 7-21-07

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.

sign here [Signature]
Notary Public Signature

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 10% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
- 3) Information regarding spouses must be completed

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Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation		Total Number of Shares (if corporation)	
<i>D. B. ASSOCIATES, INC.</i>		<i>1000</i>	
Corporate Street Address (1)	Mailing address for receipt of Liquor Control Commission Mailings	Corporate Telephone Number	
<i>3441 ADAMS ST.</i>	<i>3441 ADAMS ST.</i>	<i>402-466-2472</i>	
City	County	State	Zip Code
<i>LINCOLN</i>	<i>LANCASTER</i>	<i>NE</i>	<i>68504</i>
Name of Registered Agent		Name of Proposed Manager	
<i>JAMES WULF</i>		<i>JAMES WULF</i>	
IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER			
Name	Title	Date of Birth	Social Security Number
<i>DUANE BENKOWSKI</i>	<i>PRESIDENT</i>		
Home Address (1)		State	
<i>8245 W. BEATRICE DR.</i>		<i>MINNESOTA</i>	
City	State	Zip Code	Home Telephone Number
<i>CLEAR LAKE</i>	<i>MN</i>	<i>55319</i>	<i>763-261-2820</i>

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 <u>DANE BENKOWSKI</u>			<u>DIRECTOR</u>	<u>100</u>	
Spouse Name <u>(Single)</u>			<u>PRESIDENT ETC</u>		
NAME					
Spouse Name					
NAME					
Spouse Name					
NAME					
Spouse Name					
NAME					
Spouse Name					
NAME					
Spouse Name					

(If Necessary, Continue on Separate Sheet)

Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

Is this Corporation/LLC controlled by another Corporation? YES NO

Name of Control Corporation

[Empty box for Name of Control Corporation]

IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. 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: 1-1 Ending Date: 12-31

STATE OF NEBRASKA

CANCASTER County

[Signature]
Notary Public Signature & Seal

GENERAL NOTARY - State of Nebraska
TERRY K. BARBER
My Comm. Exp. 7-21-07

By [Signature]
2-26-04
PRESIDENT/MEMBER

Acting
SECRETARY/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.

Must Be A Nebraska Resident

Please submit in Triplicate

RECEIVED

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/

MAR - 1 2004

LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION D. B. ASSOCIATES, INC.	CLASS & LICENSE PENDING - NEW APP.
---------------------------------------------------------------	----------------------------------------------

TRADE NAME OF LICENSED PREMISE
The Steak House

STREET ADDRESS OF LICENSED PREMISE 3441 ADAMS ST.	CITY LINCOLN	COUNTY LANCASTER	ZIP CODE 68504
-------------------------------------------------------------	------------------------	----------------------------	--------------------------

On behalf of the corporation, I designate this individual as corporate manager.
Signature of Corporate President/CEO: *attached*

APPLICANT INFORMATION (MUST BE 21 OR OVER)

NAME (LAST, FIRST, MIDDLE, MAIDEN) WOLF, JAMES Q.	SEX F <input type="radio"/> M <input checked="" type="radio"/>	SOCIAL SECURITY NUMBER -	DATE OF BIRTH -	PLACE OF BIRTH LINCOLN
-------------------------------------------------------------	-------------------------------------------------------------------	-----------------------------	--------------------	----------------------------------

HOME STREET ADDRESS 2319 N. 76th	CITY LINCOLN	COUNTY LANCASTER	STATE NE	ZIP CODE 68507
-------------------------------------------------------	------------------------	----------------------------	--------------------	--------------------------

HOME TELEPHONE NUMBER (402) 464-0212	BUSINESS TELEPHONE NUMBER (402) 466-2472	DRIVERS LICENSE NUMBER & STATE NEBR
------------------------------------------------	----------------------------------------------------	-----------------------------------------------

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) WOLF, SHANNAN L. (HARRIS)	SOCIAL SECURITY NUMBER -	DRIVERS LICENSE NUMBER & STATE NE -
-----------------------------------------------------------------------------	-----------------------------	-----------------------------------------------

DATE OF BIRTH:	PLACE OF BIRTH LINCOLN
----------------	----------------------------------

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 **JAMES HAS HAD 3 SPEEDING TICKETS, 12 or 13 years ago; 2 in Lincoln; 1 in Minnesota.**
Shannon has had 1 speeding ticket, in Lincoln, about a year ago.

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