



Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

March 18, 2005

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 The Green House, LLC, d.b.a. Dish, 1100 'O' Street requesting a class I liquor license.

Travis Green, president has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Travis Green was born in Lincoln, Nebraska. He attended Western Culinary Institute, Portland, Oregon graduating in 1997.

Travis Green employment history is as follows:

2004 – Present	Chef, Dish	Lincoln, NE.
2003	Chef, Wildness Ridge	Lincoln, NE.
2001 - 2002	Chef, Rococo Theatre	Lincoln, NE.
2001	Cook, Roy's	Denver, CO.
2000 – 2001	Chef, Ski Tiplodge	Keystone, CO.

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) Dish

Manager Owner Other _____

Name: TRAVIS GREEN

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 N/A

How many hours will applicant be at the establishment? 60+

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 3/18/05

Liquor License Business Report

Completed by Inv. Fosler #843

Business Name: DISH

Address: 1100 'O' ST Phone: 475-9475

Type of Investigation: Purchase Upgrade Expansion New
Owner Manager Other: _____

Type of Business: Rest.

Liquor Class A B C D I J K Catering Other: _____

Ownership: Corporation Partnership Individual

Amount Financed: 102,000 Source: FATHER / 1ST NATIONAL BANK

Lease Agreement: 2YR @ 3200 + options

Sales: %Food: 73 %Liquor: 27

Located: Commercial Industrial Residential

Traffic Flow: Heavy Off Street Parking: Yes No

Ready for Operation: Yes No/ Est Date: _____

Food Service: Yes No Employees: F/T 4 P/T 8

Est Seating: 150 + Est Daily Customers 50

Hours of Operation: 11:30 - 1:30 5pm - 10:30 close sun.

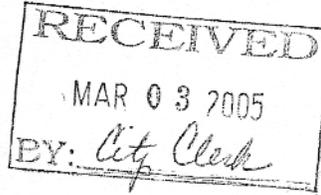
Any Additional Comments: _____

STATE OF NEBRASKA

PH: 4-18-05



Mike Johanns
Governor



March 2, 2005

NEBRASKA LIQUOR CONTROL COMMISSION
Hobert 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/>

Lincoln City Clerk
555 S. 10th Street
Lincoln, NE 68508

A5-025672
77

Re: Liquor application for **The Green House, LLC dba Dish**

Dear Local Governing Body:

1100 O Street
Class I

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

Tami Freeman
Licensing Division

Enclosures
Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Application for Corporate Manager

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 2 2005

LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION The Greenhouse LLC		CLASS & LICENSE NUMBER I		
TRADE NAME OF LICENSED PREMISE DISH				
STREET ADDRESS OF LICENSED PREMISE 1100 "D" Street		CITY Lincoln	COUNTY Lancaster	ZIP CODE 68508

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) Green, Travis Jeremy		SEX F <input checked="" type="radio"/> M	SOCIAL SECURITY NUMBER 508-13-9408	DATE OF BIRTH 02/27/74	PLACE OF BIRTH Lincoln, NE
HOME STREET ADDRESS 4445 Hillside Street		CITY Lincoln	COUNTY Lancaster	STATE NE	ZIP CODE 68506
HOME TELEPHONE NUMBER (402) 483-4697	BUSINESS TELEPHONE NUMBER (402) 475-9475		DRIVERS LICENSE NUMBER & STATE NE #		

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) Green, Shauna Kathleen Fleming		SOCIAL SECURITY NUMBER 523-49-5991	DRIVERS LICENSE NUMBER & STATE NE # H12233722
DATE OF BIRTH 01/15/1974	PLACE OF BIRTH Denver, Colorado		

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 TO		SPOUSE: CITY & STATE	
FROM	TO	FROM	TO	FROM	TO
Lincoln, Nebraska	2001	present	Lincoln, Nebraska	2001	present
Denver, Colorado	1999	2001	Denver, Colorado	1999	2001
Juneau, Alaska	1999	1999	Edinburgh, Scotland	1998	1999
Portland, Oregon	1996	1999	Lincoln, Nebraska	1992	1998

EMPLOYERS - LIST LAST TWO EMPLOYERS				
YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
01/04	present	DISH	Monica McClenahan	475-9475
02/03	01/04	Wilderness Ridge	Martin Stone	434-5101

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.

Tamir Drees
 Signature of Applicant
 Subscribed in my presence and sworn to before me this _____ day of _____
[Signature]
 Notary Signature & Seal
 GENERAL NOTARY-State of Nebraska
 JACK G. WOLFE
 My Comm. Exp. Sept. 30, 2009

Shauna Fleming Green
 Signature of Spouse (if applicable)
 Subscribed in my presence and sworn to before me this _____ day of _____
[Signature]
 Notary Signature & Seal
 GENERAL NOTARY-State of Nebraska
 JACK G. WOLFE
 My Comm. Exp. Sept. 30, 2009

New Lic # I-67317

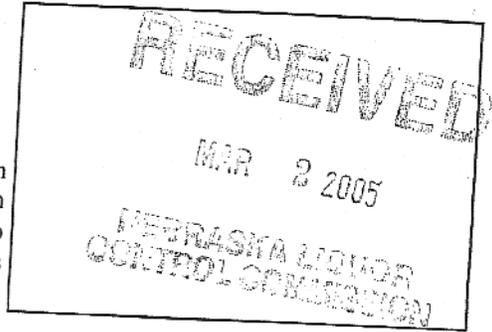
Repl- I -56355

Lease

www.nol.org/home/NLCC/

402) 471-2571

2) 471-2814



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

Table with 4 columns: Class of License (Check applicable class), Registration Fee, License Fees, and Submit Copy of Bond. Rows include A Beer, On Sale Only - Inside Corporate Limits; B Beer, On Sale Only - Outside Corporate Limits; J Wine, Beer, On Sale Only - Inside Corporate Limits; I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits; D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits; D1 Spirits, Wine, Beer, Off Sale only - within extraterritorial zoning jurisdiction; C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits; M Bottle Club (Spirits, Wine, Beer, on Sale); H Nonprofit Corporation; K Wine Only, Off Sale; O Boat; V Manufacturer of Beer, Wine & Distilled Spirits; X Wholesale Liquor; W Wholesale Beer; Y Farm Winery; L Craft Brewery (Brew Pub).

TYPE OF APPLICATION

Name Of Person Assisting With 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 Manager Application be attached.

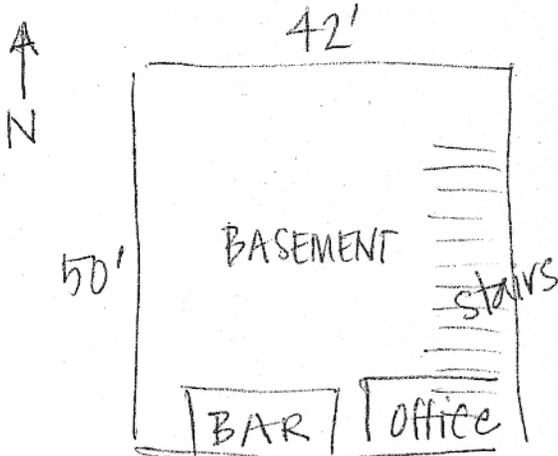
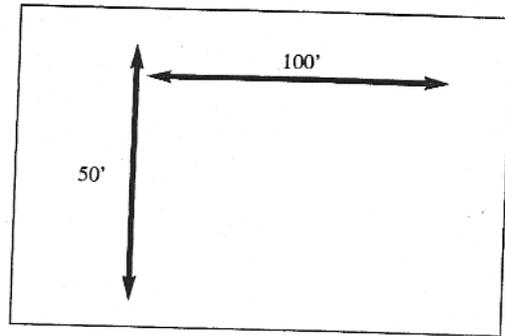
Name: Jack Wolfe Firm Name: Wolfe Shauden Kural Leves Jahl LLP

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

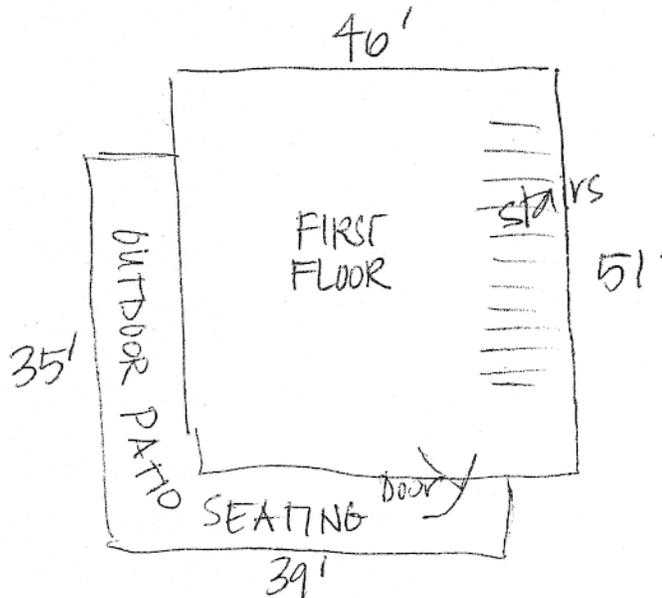
Form with fields for Trade Name (Dish), Telephone Number (402-475-9475), Street Address (1100 "O" Street), Mailing Address (1100 "O" Street), City (Lincoln), and County (Lancaster).

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.



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



TWO floors:

- First floor 40' x 51'
- Basement 42' x 50'
- Outdoor patio seating 35' x 39'

SECTION B

OTHER INFORMATION REQUIRED

	Yes	No	Explanation/Comments
<p>1. READ CAREFULLY. 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>		<p>X</p> <p>X</p>	

	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		repl. 56355
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	X		First Nat'l Bank
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	
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.			First National Bank 134 S. 13th Travis Green
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.			n/a
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.			Travis Green 50 hrs/week
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.			Travis will be taking the responsible Hospitality class on March 10th 2005
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 6/30/07
15. When do you intend to open for business?			March 2nd 2005

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)
Travis Green	2001	present	Lincoln, NE
Travis Green	1999	2001	Denver, CO
Travis Green	1996	1999	Portland, OR
Travis Green	1974	1996	Lincoln, NE
Shauna (Fleming) Green	2001	present	Lincoln, NE
Shauna Fleming	1999	2001	Denver, CO
Shauna Fleming	1992	1999	Lincoln, NE

RECEIVED

MAR 2 2005
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.

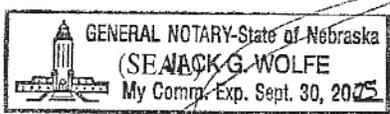
Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person 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 [Signature]
 sign here Shauna K Fleming Green
 sign here _____
 sign here _____

sign here _____
 sign here _____
 sign here _____
 sign here _____

Subscribed in my presence and sworn to before me this 13th day of March, 2005



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.

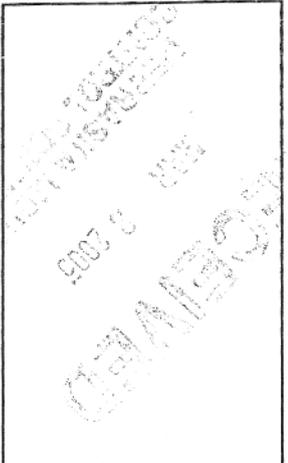
sign here [Signature]
 Notary Public Signature

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 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: The GreenHouse LLC		Total Number of Shares (if corporation) 1000	
Corporate Street Address (1) 1100 'O' Street		Mailing address for receipt of Liquor Control Commission Mailings 1100 'O' Street	
City Lincoln	County Lancaster	State NE	Zip Code 68508
Name of Registered Agent Jack Wolfe		Name of Proposed Manager Travis Green	
IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER			
Name Travis Green	Title Chief/Owner	Date of Birth 2/27/1971	Social Security Number 508-13-9408
Home Address (1) 4445 Hillside Street		State NE	
City Lincoln	State NE	Zip Code 68508	Home Telephone Number 402-483-4697

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 <i>Green, Terry, Deirny</i>	<i>508-13-9405</i>	<i>2/27/1971</i>		<i>500 / 50%</i>
Spouse Name <i>Green, Shauna, Kathleen, Fleming</i>	<i>523-49-5991</i>	<i>1/15/1971</i>		<i>500 / 50%</i>
Spouse Name				
NAME				
Spouse Name				
NAME				
Spouse Name				
NAME				
Spouse Name				
NAME				
Spouse Name				

(If Necessary, Continue on Separate Sheet)

