



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

June 15, 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 Jade Rivers, 3940 Village Drive requesting a class I liquor license.

Stanley Jou, president has requested that he be approved as the manager of the liquor license.

Background information on the Mr. Jou will be omitted as he was approved by the Council in October 1983 as an owner of Imperial Palace, holder of a class C liquor license.

Stockholder information has been included for your review.

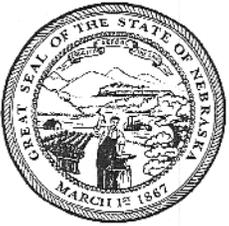
If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency





Dave Heineman
Governor

Set date: 6/27/05

PH: 7-18-05

STATE OF NEBRASKA

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/>

June 9, 2005

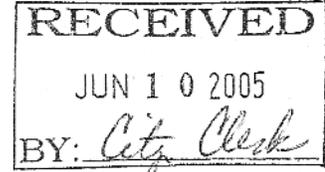
A5-063779

178

Jade Rivers LLC
dba Jade Rivers
3940 Village Dr
Class I

Lincoln City Clerk
City/County Building
555 S 10 Street
Lincoln, NE 68508

RE: License for I #68753



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 APROPERLY LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS. A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

Jackie B. Matulka

NEBRASKA LIQUOR CONTROL COMMISSION

Jackie B. Matulka

Licensing Division

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

Rhonda R. Flower
Commissioner

Enclosures

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

NEBRASKA
CITY OF LINCOLN
2005 JUN 10 PM 4 14
CITY CLERK'S OFFICE

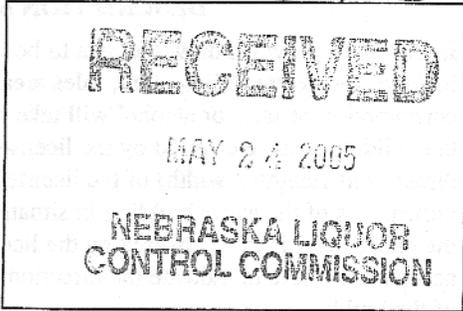
Local - jbm

L# 68573

APPLICATION FOR LICENSE

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

<http://www.nol.org/home/NLCC/>
 Phone: (402) 471-2571
 Fax: (402) 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

Class of License (Check applicable class)	Registration Fee	License Fees	Submit Copy of 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"/> D1 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	Name Of Person Assisting With Application
Type of application being applied for (place appropriate number in box) <div style="border: 1px solid black; padding: 5px; display: inline-block; margin-bottom: 10px;">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 Manager Application be attached.	Name: <div style="border: 1px solid black; padding: 5px; display: inline-block;">SIDNEY H. SWEET ATTORNEY</div> Firm Name: <div style="border: 1px solid black; padding: 5px; display: inline-block;">SAME</div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 5px; display: inline-block;">402-486-3904</div>

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

Trade Name (name of business) JADE RIVERS	Telephone Number at premise to be licensed 402-421-6888
1) Street Address of Proposed licensed premise 3940 VILLAGE DR.	2) Mailing Address for receipt of Liquor Control Commission mailings 701 N. 27th St.
Is this located inside the city limits Circle (YES) /NO	
City County Zip Code LINCOLN LANCASTER 68516	City County Zip Code LINCOLN, LANCASTER 68503

	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	RECEIVED MAY 24 2005
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	NEBRASKA LIQUOR CONTROL COMMISSION
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	X		PINNACLE 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.			PINNACLE BANK STANLEY JOU
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.			STANLEY JOU, APPLICANT IS OWNER OF "IMPERIAL PALACE" LOCATED AT 701 NORTH 45 LINCOLN, NE LICENSE # 11116
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.			STANLEY JOU
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.			20 YEARS EXPERIENCE AS OWNER/MANAGER OF IMPERIAL PALACE LIC # 11116
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).			COPY OF LEASE ATTACHED
15. When do you intend to open for business?			RESTAURANT OPERATING SINCE JANUARY 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)
STANLEY JOU	1983	2005	LINCOLN, NE
XIANG GUAN	1996	2005	LINCOLN, NE
JIAN BIN DONG	1996	2005	LINCOLN, NE

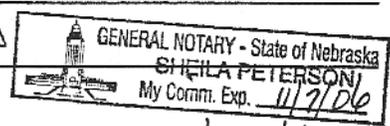
The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or 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 Stanley Jou
 X STANLEY JOU
 sign here Wang Guan
 X XIANG GUAN
 sign here Jian Bin Dong
 X JIAN BIN DONG
 sign here _____
 sign here _____

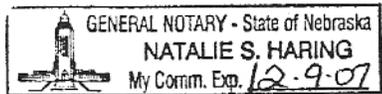
sign here Wendy Jou
 X WENDY JOU
 sign here _____
 sign here _____
 sign here _____
 sign here _____



Wendy only

X Subscribed in my presence and sworn to before me this 24th day of May, 2005
26th day of May, 2005
 NOTARY

(SEAL)



sign here Natalie Haring
 Notary Public Signature

Sheila Peterson

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.

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

MAY 24 2005

Phone: (402) 471-2571 **Fax:** (402) 471-2814 **Web address:** <http://www.nol.org/home/NLCC/>

LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION JADE RIVERS LLC		CLASS & LICENSE NUMBER	
TRADE NAME OF LICENSED PREMISE SAME i.e. "JADE RIVERS"			
STREET ADDRESS OF LICENSED PREMISE 3940 VILLAGE DR.	CITY LINCOLN	COUNTY LANCASTER	ZIP CODE 68516

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

Signature of Corporate President/CEO: **X**
STANLEY JOU, MANAGER CEO

APPLICANT INFORMATION (MUST BE 21 OR OVER)

NAME (LAST, FIRST, MIDDLE, MAIDEN) JOU, STANLEY	SEX F <input type="radio"/> M <input checked="" type="radio"/>	SOCIAL SECURITY NUMBER	DATE OF BIRTH	PLACE OF BIRTH CHINA
HOME STREET ADDRESS 2601 SO. 75TH ST.	CITY LINCOLN	COUNTY LANCASTER	STATE NE	ZIP CODE 68506
HOME TELEPHONE NUMBER (402) 770-8373	BUSINESS TELEPHONE NUMBER 402-421-6888	DRIVERS LICENSE NUMBER & STATE X		

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) JOU, WENDY	SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER & STATE X
DATE OF BIRTH:	PLACE OF BIRTH X	

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 **IMPERIAL PALACE, 27th and VINE ST LINCOLN, NE**
LICENSE # ~~11116~~

RECEIVED

MAY 24 2005

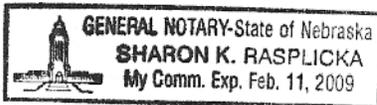
NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

NEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53-125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on application.

Xx Wendy Joo
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 23rd day of MAY, 2005.



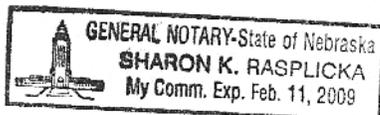
X Sharon K Rasplicka
Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Xx Stanley Joo
Signature of Licensee/Applicant

JADE RIVERS L.L.C.
Print Name of Licensee/Applicant

X SUBSCRIBED in my presence and sworn to before me this 23rd day of MAY, 2005.



X Sharon K Rasplicka
Signature of Notary Public

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. Attach copy of Articles of Incorporation JADE RIVERS L.L.C.		Total Number of Shares (if corporation) N/A NO SHARES IN LLC.	
Corporate Street Address (1) 3930 VILLAGE DR.		Mailing address for receipt of Liquor Control Commission Mailings SAME	Corporate Telephone Number 402-421-6888
City LINCOLN	County LANCASTER	State NE	Zip Code 68516
Name of Registered Agent TRUSTS INC.		Name of Proposed Manager STANLEY JOU	
IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER			
Name STANLEY JOU	Title MANAGER	Date of Birth	Social Security Number
Home Address (1) 2611 So. 75th St		State NEBRASKA	Home Telephone Number 402-770-8373
City LINCOLN	State NE	Zip Code 68506	

RECEIVED

MAY 24 2005

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 JOU, STANLEY			MANAGER	40%	
Spouse Name JOU, WENDY			NONE		
NAME GUAN, XIANG			MEMBER	30%	
Spouse Name NONE					
NAME BIN DONG, JIAN			MEMBER	30%	
Spouse Name NONE					
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

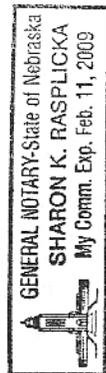
If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned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

Please indicate below your corporate tax year with the IRS

Starting Date: MAY 2004 Ending Date: DEC 31, 2004

STATE OF NEBRASKA)
)
) ss.)
)
)
LANCASTER County)

Sharon K. Rasplicka
Notary Public Signature & Seal



By XX Stanley Jon
SS PRESIDENT/MEMBER MANAGER

N/A RECEIVED
SECRETARY/MEMBER

MAY 24 2005

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