

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

December 27, 2006

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 More Enterprises Inc, d.b.a. El Chaparro, 1501 Centerpark Road #200 requesting a class C liquor license.

The owner, Jorge Moreno has stated this will be a restaurant during the week and possibly changing to a dance club on the weekends.

Mr. Moreno has requested that he be approved as the manager of this liquor license.

Background information on the applicant is as follows:

Jorge Moreno was born in Mexico. He attended High School in Mexico, graduating in 1993.

Jorge Moreno employment history is as follows:

1993 - Present                      Supervisor, Block & Beam Construction                      Lincoln, NE.

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



Liquor License Business Report

Completed by Inv. Fosler #843

Business Name: EL Chaparro

Address : 1501 CENTER PARK Phone: \_\_\_\_\_

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: 0 Source: 0

Lease Agreement: 3094 PER month

Sales: %Food: 70 %Liquor: 30

Located: Commercial Industrial Residential

Traffic Flow: moderate Off Street Parking: Yes No

Ready for Operation: Yes No Est Date: JAN 06

Food Service: Yes No Employees: F/T 2 P/T \_\_\_\_\_

Est Seating: 250 Est Daily Customers -

Hours of Operation: 10 AM - 7 PM 6 days per week

Any Additional Comments: \_\_\_\_\_

Liquor License Investigation

Business (DBA) EL CHAPARRO

Manager       Owner      Other \_\_\_\_\_

Name: JORGE MORENO

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?      30+

Any other employment?      No       Yes, explain Block & Beam

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 12/27/06

1-29-07



STATE OF NEBRASKA

Dave Heineman  
Governor

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.lcc.ne.gov/>

December 18, 2006

Lincoln City Clerk  
555 S. 10<sup>th</sup> Street  
Lincoln, NE 68508

AG-13648

CITY OF LINCOLN  
NEBRASKA  
DEC 19 PM 2 12  
CITY CLERK'S OFFICE

RE: Application for Class C License for More Enterprises, Inc. DBA El Chaparro

Dear Local Governing Body:

1501 CENTERPARK Rd #200

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) Publicize one time no less than 7 days, and no more than 14 days prior to date of hearing.
- 2) 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

Katie Lanning  
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

75150

LOCCS  
Class G-75150  
LICENSE APPLICATION CHECKLIST

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NEBRASKA LIQUOR CONTROL COMMISSION

K1

Applicant Name JORGE F. MORENO Telephone # (402) 520-2527

Trade Name EL CHAPARRO Previous Trade Name N/A

Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. If your operation depends on receiving a liquor license, the Nebraska Liquor Control Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. All applications & attachments must be submitted in triplicate. You may want to check with the city/village or county clerk, where you are making application, to see if any additional requirements must be met before submitting application to the state.

REQUIRED ATTACHMENTS

CITY OF LINCOLN  
NEBRASKA  
DEC 19 PM 2  
CLERK'S OFFICE

Each item must be checked off and included or marked N/A for not applicable.

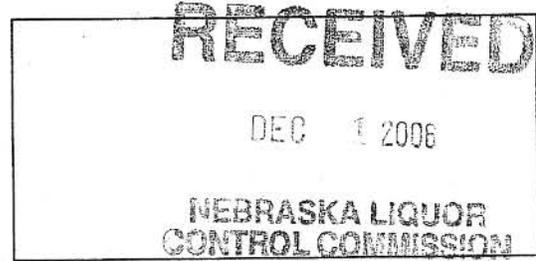
2A

- 1. Fingerprint cards for each person (two cards per person) must be enclosed with a separate check payable to the Nebraska State Patrol for processing in the amount of \$38.00 per person. All areas must be completed on cards as per brochure.
- 2. Enclose registration fee for the appropriate class of license, made out to the Nebraska Liquor Control Commission.
- 3. Enclose the appropriate application forms; Individual License – Form 1; Partnership License – Form 2; Corporate/LLC License – Form 3 and manager application (with corporate application only). LLC application must include all members.
- 4. If building is being leased send a copy of the lease. Be sure it is in the individual(s) or corporate name being applied for. Also, the lease must extend through the license year being applied for. If building is owned, send a copy of the deed or purchase agreement in the appropriate name.
- 5. If you are buying the business of a current licensee, provide a copy of the purchase agreement from licensee. This also needs to be in applicants name.
- 6. Enclose a copy of the Temporary Agency Agreement, if applicable. Must be on Commission forms only. Include a copy of the signature card from the bank showing both the sellers and buyers name(s) on account.
- 7. Copy of alcohol inventory being purchased. Inventory shall include brand names and container sizes. Inventory may be taken at the time application is being submitted.

Per 2077  
45-mm

# APPLICATION FOR LIQUOR LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: www.nol.org/home/NLCC/



OFFICE USE ONLY

## CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES CHECK DESIRED CLASS(S)

### RETAIL LICENSE(S)

- |                                     |   |   |         |
|-------------------------------------|---|---|---------|
| <input type="checkbox"/>            | A | Beer, On Sale Only                            | \$45.00 |
| <input type="checkbox"/>            | B | Beer, Off Sale Only                           | \$45.00 |
| <input checked="" type="checkbox"/> | C | Beer, Wine & Distilled Spirits, On & Off Sale | \$45.00 |
| <input type="checkbox"/>            | D | Beer, Wine & Distilled Spirits, Off Sale Only | \$45.00 |
| <input type="checkbox"/>            | I | Beer, Wine & Distilled Spirits, On Sale Only  | \$45.00 |

Class K Catering license may be added to any of these classes with an additional fee of \$100.00 and filing form 35-4202

### MISCELLANEOUS

- |                          |   |  | Bond                 |
|--------------------------|---|--|----------------------|
| <input type="checkbox"/> | L | Craft Brewery (Brew Pub)   | \$295.00 1,000 min.  |
| <input type="checkbox"/> | O | Boat   | \$ 95.00 N/A         |
| <input type="checkbox"/> | V | Manufacturer, Beer, Wine & Distilled Spirits<br>(additional fee of \$100 to \$1,000-call for exact amount) | \$ 45.00 10,000 min. |
| <input type="checkbox"/> | W | Wholesale Beer   | \$545.00 5,000       |
| <input type="checkbox"/> | X | Wholesale Liquor   | \$795.00 5,000       |
| <input type="checkbox"/> | Y | Farm Winery  | \$295.00 1,000       |

All Class C licenses expire October 31st

All other licenses expire April 30<sup>th</sup>

Catering expire same as underlying retail license

### TYPE OF APPLICATION BEING APPLIED FOR (CHECK ONE)

- Individual License, requires insert form 1  
 Partnership License, requires insert form 2  
 Corporate License, requires insert form 3a and manager application 3b

### NAME OF PERSON OR FIRM ASSISTING WITH APPLICATION

(Commission will call this person with any questions we may have)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

~~Firm~~ Name: Jorge Moreno

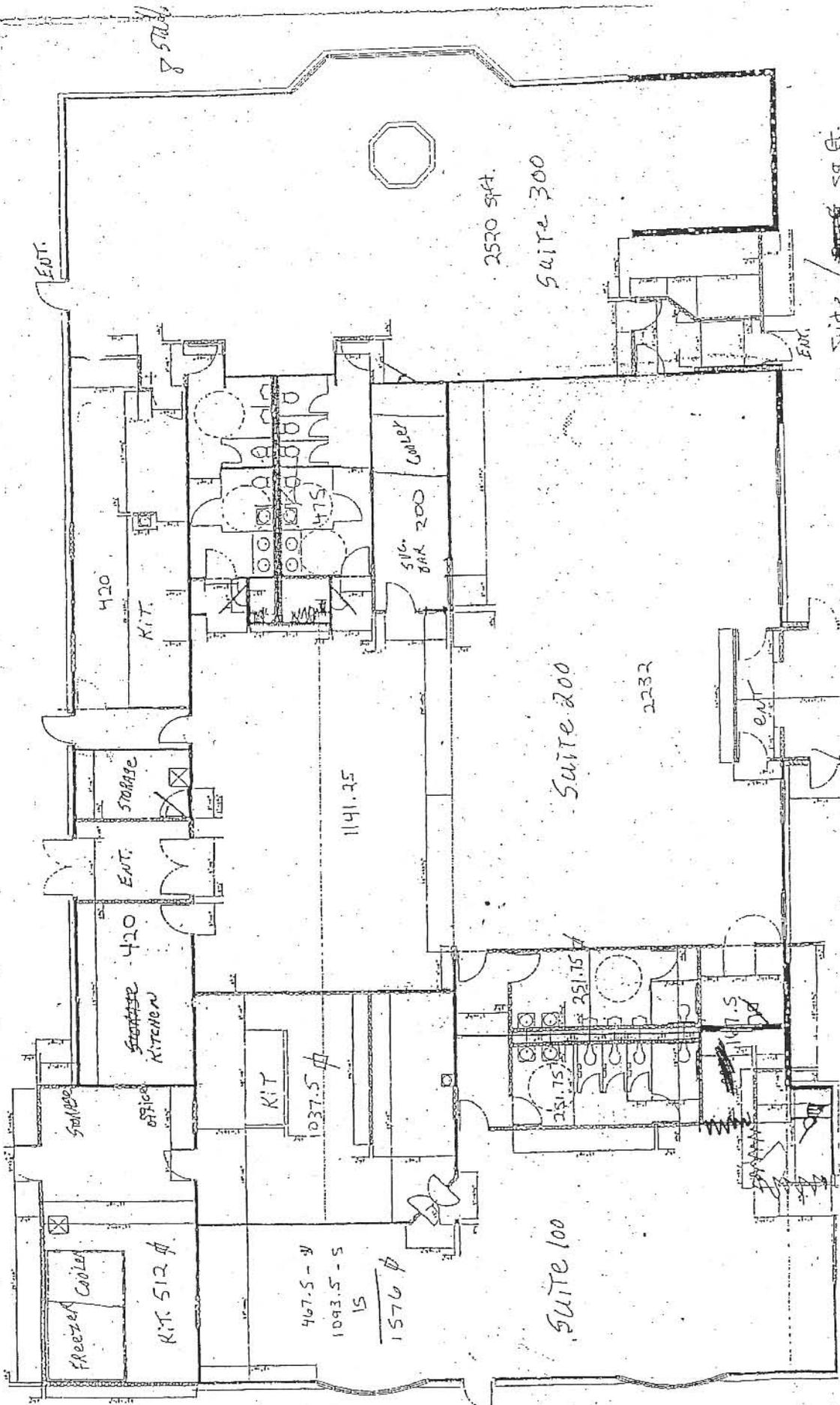
~~Firm~~ address: # 570-2527



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NEBRASKA LIQUOR CONTROL COMMISSION



Suite 300 / 3208 sq. ft.

Suite 200 / 4641 sq. ft.

Suite 100 / 3215 sq. ft.

Suite 300  
2520 sq. ft.

Suite 200

Suite 100

67' x 67'  
Irregular shaped bldg.



37 stalls

**APPLICANT INFORMATION**

**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 charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; 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 If yes, please explain below or attach a separate page.  
 No

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**NEBRASKA LIQUOR  
CONTROL COMMISSION**

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). Liquor Inventory may be taken at time of application being submitted.

- Yes  
Current business name and license number \_\_\_\_\_  
 No

3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license. If yes, attach agreement. **Please note: This agreement is not effective until Commissions assigns you a 3-digit ID number.**

- Yes  
 No

4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.

- Yes \_\_\_\_\_  
 No \_\_\_\_\_

DEC 1 2006

NEBRASKA LIQUOR CONTROL COMMISSION

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.

✓ Victoria Sanchez Approx. 50 hrs  
Jorge Moreno

13. List the training or experience (when and where) of the person listed in #12 above in connection with selling and/or serving alcohol products.

☆ Need 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 held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed.

\*  Lease: expiration date 4-30-08  
 Deed  
 Purchase Agreement Need copy of full, signed lease

✓ 15. When do you intend to open for business? Jan 1, 2007

✓ 16. What will be the main nature of business? What are the anticipated hours of operation? Restaurant

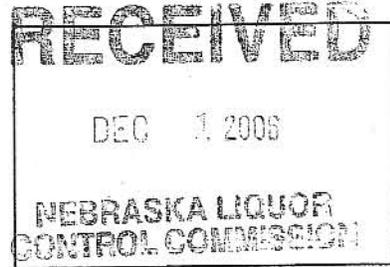
17. List the principal residence(s) for the past 10 years for all persons required to sign application, including spouses. If necessary attach a separate sheet.

Applicant Name	From: Year	To: Year	City/State
<u>Jorge F. Moreno</u> <u>901 Donnie Ln.</u> <u>LINCOLN, NE. 68522</u>	<u>1996</u>	<u>2006</u>	<u>LINCOLN, NE.</u>
<u>Spouse</u>			

The undersigned applicant(s) hereby consent(s) to a background investigation and release 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

**APPLICATION FOR LIQUOR LICENSE  
CORPORATION/LLC INSERT - FORM 3a**

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: [www.nol.org/home/NLCC](http://www.nol.org/home/NLCC)



\* Name of Corporation or Limited Liability Company that will hold license. Attach copy of Articles of Incorporation. (Document must show [barcode] receipt by Secretary of States Office. ✓

MORE ENTERPRISES, Inc.

Corporate Street Address: P.O. Box 81914

City: LINCOLN State: NE Zip Code: 68501

Corporate Telephone Number (402) 570-2527

Total number of shares issued (if corporation) 1,000

Is this a Non Profit Corporation?  YES  NO  
If yes, what is your Federal ID #? 20-5933010

Name of Registered Agent ROBERT OTOS

Name of Proposed Manager JORGE MORENO  
This person must complete form 35-4013

List name of Chief Executive Officer

Last Name: JORGE MORENO First Name: JORGE MI F.

Address Street 901 DONNIS LN. City LINCOLN

State NE Zip Code 68522 Home Phone number (402) 435-4507

Social Security Number \_\_\_\_\_ Date of Birth 1/1

Is this Corporation or Limited Liability Company controlled by another Corporation?

Yes  No

If yes, give name of corporation and supply organizational chart

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Indicate tax year with the IRS

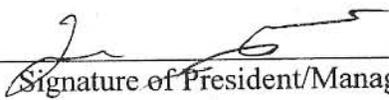
Starting Date

Jan 1

Ending Date

Dec 31

NEBRASKA LIQUOR CONTROL COMMISSION

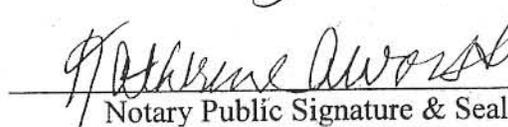
  
Signature of President/Managing Member

  
Notary Public Signature & Seal

GENERAL NOTARY-State of Nebraska  
KATHERINE A. WORSTER  
My Comm. Exp. Sept. 17, 2010

Subscribed in my presence and sworn to before me this

1st day of December, 2006

  
Notary Public Signature & Seal

GENERAL NOTARY-State of Nebraska  
KATHERINE A. WORSTER  
My Comm. Exp. Sept. 17, 2010

In compliance with the 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.

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NEBRASKA LIQUOR CONTROL COMMISSION  
AFFIDAVIT OF NON PARTICIPATION

DEC 2 2006

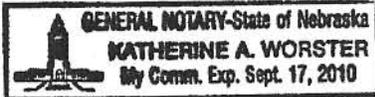
NEBRASKA LIQUOR CONTROL COMMISSION

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. The undersigned individual will also be waived of filing fingerprint cards, however, will be required to disclose any violation(s) on all applications and sign all necessary documents.

Lorena Moreno

Signature of Spouse Asking to be Waived

SUBSCRIBED in my presence and sworn to before me this 1st day  
of December, 2006.



Katherine A. Worster

Signature of Notary Public

The applying individual, whose spouse is requesting to be waived, 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.

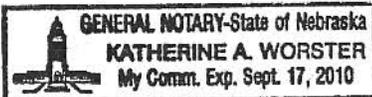
J. S., Jorge F. Moreno  
\*Signature of applying individual (spouse of individual listed above)      Print name of applying individual

SUBSCRIBED in my presence and sworn to before me this 1st day  
of December, 2006.

Katherine A. Worster

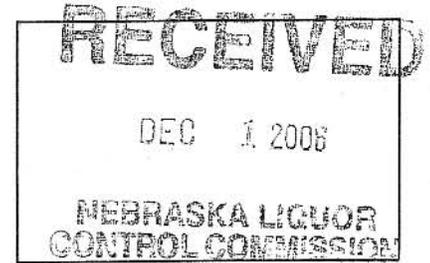
Signature of Notary Public

\*spouse of individual listed above is the individual required to sign bottom portion of affidavit



**APPLICATION FOR LIQUOR LICENSE  
CORPORATION MANAGER - FORM 3b  
\*MUST BE A NEBRASKA RESIDENT\***

301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: [www.nol.org/home/NLCC/](http://www.nol.org/home/NLCC/)



**LIQUOR LICENSE INFORMATION**

NAME OF LICENSED CORPORATION MORE ENTERPRISES, INC.  
CLASS & LICENSE NUMBER N/A  
TRADE NAME EL CHAPARRO FINE MEXICAN FOOD AND NIGHT CLUB  
STREET ADDRESS 1501 CENTER PARK AV. CITY LINCOLN

*Applicant*

**SIGNATURE OF CORPORATION PRESIDENT/CEO**

**APPLICANT INFORMATION (MUST BE 21 OR OVER AND NEBRASKA RESIDENT)**

NAME JORGE F. MORENO  
ADDRESS 901 DONNICK LN.  
CITY LINCOLN STATE NE ZIP CODE 68522  
HOME PHONE NUMBER (402) 435-4567 BUSINESS PHONE NUMBER (402) 570-2527  
SEX  MALE  FEMALE SOCIAL SECURITY NUMBER - - -  
DATE OF BIRTH / / PLACE OF BIRTH MEXICO, E  
DRIVERS LICENSE NUMBER & STATE \_\_\_\_\_

**SPOUSES INFORMATION (IF NOT MARRIED INDICATE)**

SPOUSE NAME LORENA MORENO  
SOCIAL SECURITY NUMBER - - - DATE OF BIRTH / /  
DRIVERS LICENSE NUMBER & STATE N/A

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

NEBRASKA LIQUOR

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, inaccurate, or fraudulent.

*[Handwritten Signature]*  
\_\_\_\_\_  
Signature of Applicant

*Lorena Moreno*  
\_\_\_\_\_  
Signature of Spouse

Subscribed in my presence and sworn to before me this 1st  
day of December 2006

Subscribed in my presence and sworn to before me this 1st  
day of December 2006

*[Handwritten Signature]*  
\_\_\_\_\_  
Notary Signature & Seal

GENERAL NOTARY-State of Nebraska  
KATHERINE A. WORSTER  
My Comm. Exp. Sept. 17, 2010

*[Handwritten Signature]*  
\_\_\_\_\_  
Notary Signature & Seal

GENERAL NOTARY-State of Nebraska  
KATHERINE A. WORSTER  
My Comm. Exp. Sept. 17, 2010