

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

February 19, 2007

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 Triple D LLC, d.b.a. Dino's Eastside Grille, 2901 South 84<sup>th</sup> Street requesting a class C liquor license.

This location will be an upscale sports bar.

Dean Hart, owner has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Dean Hart was born in Omaha, Nebraska. He attended Northwest High School, Omaha graduating in 1978.

Dean Hart employment history is as follows:

1994 - Present	President, Midwest Web	Lincoln, NE.
1986 - 1994	Sales, Field Paper Co.	Omaha, NE.
1982 - 1986	Manager, Grandmothers	Omaha, 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 Business Report

Completed by Inv. Fosler #843

Business Name: DINO'S EASTSIDE GRILLE

Address : 2901 S 84TH Phone: \_\_\_\_\_

Type of Investigation : Purchase Upgrade Expansion New  
Owner Manager Other: \_\_\_\_\_

Type of Business: SPORT BAR / REST

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

Ownership: Corporation Partnership Individual

Amount Financed: 1.2 mil Source: UNION

Lease Agreement: Lease 5yr 9500<sup>00</sup> 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: APR 2007

Food Service: Yes No Employees: F/T 3 P/T 28

Est Seating: 225 Est Daily Customers 200

Hours of Operation: 11am - 12pm sun - THUR FRI-SAT 1am

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

Liquor License Investigation

Business (DBA) DEAN HART - DINO'S EASTSIDE GRILLE

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

Name: DEAN HART

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? 10-20 WK

Any other employment? No       Yes explain midwest web

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 2/19/07

3-12-07

FILED

STATE OF NEBRASKA



Dave Heineman  
Governor

FEB - 9 2007

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/>

CITY CLERK'S OFFICE  
LINCOLN, NEBRASKA

February 8, 2007

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

*Triple D LLC  
dba Dino's Eastside Grill  
2901 So. 84th, Suite L.*

A7-014460

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) Publicize one time not less than 7 days not 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,

*Jackie B Matulka*

NEBRASKA LIQUOR CONTROL COMMISSION  
Jackie B. Matulka  
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

*local*

LICENSE APPLICATION CHECKLIST

Applicant Name Dean A. Hart Telephone # 402-489-4482

Trade Name Triple D, LLC Previous Trade Name \_\_\_\_\_

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. Your operation depends on receiving a liquor license the Nebraska Liquor 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 local requirements must be met before submitting application to the state.

RECEIVED

JAN 12 2007

REQUIRED ATTACHMENTS

EACH ITEM MUST BE CHECKED OFF AND INCLUDED OR MARKED N/A FOR NEBRASKA LIQUOR CONTROL COMMISSION

- 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 for each person. All areas must be completed on cards as per brochure. To prevent the delay in issuing your license, we strongly suggest you go to a Nebraska State Patrol Agency or law enforcement agency listed in the fingerprint brochure.
- 2. Enclose registration and license fees for the appropriate class of license, made out to the Nebraska Liquor Control Commission.
- 3. Enclose the appropriate additional application forms; Individual License - Form 1; Partnership License - Form 2; Corporate LLC License - Form 3a and Manager application - Form 3b (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 applicant's name.
- 6. Enclose a copy of the temporary agency agreement, if applicable. Must be on Commission form 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.
- 8. Enclose a list of any inventory or property owned by other parties that are on the premise.
- 9. For individual and partnership applications enclose proof of citizenship birth certificates, or naturalization documents for all persons listed on application. Documents must be a certificate from the State, where born, not hospital certificate.

DA

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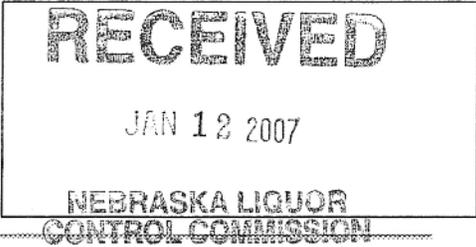
10. If a corporation enclose a copy of the articles of incorporation. This document must show receipt (barcode) by the Secretary of States Office.

Mail checklist, all applications and attachments to: Nebraska Liquor Control Commission, 301 Centennial Mall South,  
PO Box 95046, Lincoln NE 68509-5046

I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 45-60 days. Furthermore, I understand that all the information is truthful and I accept all

**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.lcc.ne.gov



OFFICE USE ONLY

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

**RETAIL LICENSE(S)**

- A Beer, On Sale Only \$45.00
- B Beer, Off Sale Only \$45.00
- C Beer, Wine & Distilled Spirits, On & Off Sale \$45.00
- D Beer, Wine & Distilled Spirits, Off Sale Only \$45.00
- 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 (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 min.
<input type="checkbox"/>	X	Wholesale Liquor	\$795.00 5,000 min.
<input type="checkbox"/>	Y	Farm Winery	\$295.00 1,000 min.

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: Dean A. Hart

Phone: 402-489-4482 (H)

402-610-0834 (cell)

Firm Name: Triple D, LLC

Firm address: 2901 S. 84<sup>th</sup> St Suite 16 Lincoln, NE 68506

**PREMISE INFORMATION**

Trade Name (doing business as) Dino's Eastside Grille

Street Address #1 2901 S 84<sup>th</sup> St. Suite #6 "L"

<sup>Residence</sup>  
Street Address #2 5600 S. 96<sup>th</sup> Pl. Lincoln, NE 68526

City Lincoln County Lancaster #2

Zip Code 68506

Telephone number at premise to be licensed TBD

Is this location inside the city/village corporate limits:  YES  NO

*City*

Mail to Address (where you want receipt of Liquor Control Commission mailings)

Name: Dean A. Hart

Street Address #1 2901 S 84<sup>th</sup> ST

Street Address #2 5600 S 96<sup>th</sup> Pl. Lincoln, NE 68526

City Lincoln County Lancaster

Zip Code 68506

**DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED**

In the space provided or on an attachment 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. No blue prints please. Be sure to indicate the direction north and number of floors of the building.

*See attached*

**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

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 Union Bank & Trust, Dana Falter  
 No

*All attached email*

5. Will any person or entity other than applicant be entitled to a share of the profits of this business? If yes, explain. All involved members must be disclosed on application.

Yes Paul Kuhl, Dennis Hill, Doug Hart  
 No listed on app corp manager site

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.

Yes  
 No

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? (No silent partners)

Yes  
 No

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. Neb. Rev. Stat. 53-177.

Yes  
 No

9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the person's exact duties.

Yes  
 No

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the individual(s) who will be authorized to write checks and/or make withdrawals on accounts at the institutions.

ⓐ Union Bank & Trust, ⓑ Dean Hart, Paul Kuhl

11. List all past and present liquor licenses held in Nebraska or any other state 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.

0 or None

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.

Dennis Hill - 60 hours - General manager  
 Doug Hart - 60 hours - manager

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.

Dennis Hill past restaurant with Holiday Inn, Valentinos. Past work experience with 20 year NWS/Republic wine & spirits.

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 10/24/2011  
 Deed  
 Purchase Agreement

15. When do you intend to open for business? 3/6/2007

16. What will be the main nature of business? What are the anticipated hours of operation? Restaurant / Lounge 7 Days 11:00 am - 12:00 am

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
<del>5620</del> Evergreen Dr Lincoln, NE 68510	7/1996	11/2004	
5600 S 96th Pl Lincoln, NE 68526	11/2004	Current	Lin/NE

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

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, inaccurate or fraudulent.

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.

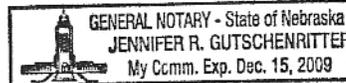
Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock) and spouses. Full (birth) names only, no initials.

✓  
Deon a. Hart \_\_\_\_\_ (sign here) \_\_\_\_\_ (sign here)  
✓  
Barbara P. H. \_\_\_\_\_ (sign here) \_\_\_\_\_ (sign here)  
✓  
Paul C Kull \_\_\_\_\_ (sign here) \_\_\_\_\_ (sign here)  
✓  
Margaret A Kuhl \_\_\_\_\_ (sign here) \_\_\_\_\_ (sign here)  
\_\_\_\_\_  
(sign here) \_\_\_\_\_ (sign here)

✓  
Subscribed in my presence and sworn to before me this

22<sup>nd</sup> day of December, 2006

*Jennifer R. Gutschenritter*  
Notary Public Signature & Seal

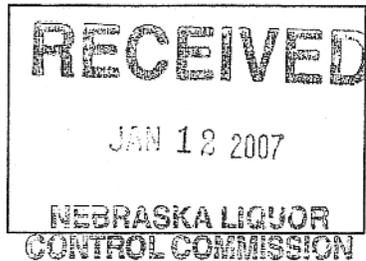


In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4010  
REV. 4/05

**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 Triple D, LLC

CLASS & LICENSE NUMBER C

TRADE NAME Dino's Eastside Grille

STREET ADDRESS 2901 S 84<sup>th</sup> St Suite 16 CITY Lincoln

Dean a Hart

**SIGNATURE OF CORPORATION PRESIDENT/CEO**

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

NAME Dean Hart

ADDRESS 5600 S 90<sup>th</sup> Pl

CITY Lincoln STATE NE ZIP CODE 68526

HOME PHONE NUMBER 402-489-4482 BUSINESS PHONE NUMBER 402-464-6900

SEX  MALE  FEMALE SOCIAL SECURITY NUMBER \_\_\_\_\_

DATE OF BIRTH 1/1 PLACE OF BIRTH Omaha, NE

DRIVERS LICENSE NUMBER & STATE \_\_\_\_\_ Nebraska

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

SPOUSE NAME Barbara Hart

SOCIAL SECURITY NUMBER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

DRIVERS LICENSE NUMBER & STATE \_\_\_\_\_ Nebraska

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

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 a 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.

✓  
Dean A Hart  
Signature of Applicant

✓  
Babara R H  
Signature of Spouse

Subscribed in my presence and sworn to before me this 4  
day of January 2007.

Subscribed in my presence and sworn to before me this 4  
day of January 2007.

Shannon A Dohmen  
Notary Signature & Seal

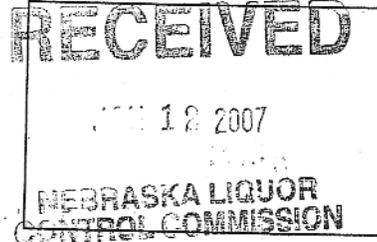
Seal  
GENERAL NOTARY - State of Nebraska  
SHANNON A. DOHMEN  
My Comm. Exp. Oct. 12, 09

Shannon A Dohmen  
Notary Signature & Seal

Seal  
GENERAL NOTARY - State of Nebraska  
SHANNON A. DOHMEN  
My Comm. Exp. Oct. 12, 09

**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.

Triple D, LLC

Corporate Street Address: 4900 Superior St

City: Lincoln State: NE Zip Code: 68504

Corporate Telephone Number 402-464-6900

Total number of shares issued (if corporation) 10000

Is this a Non Profit Corporation?  YES  NO  
If yes, what is your Federal ID #? 20-5795332

Name of Registered Agent Dean A. Hart

Name of Proposed Manager Dean A. Hart  
This person must complete form 35-4013

List name of Chief Executive Officer

Last Name: HART First Name: DEAN MI A

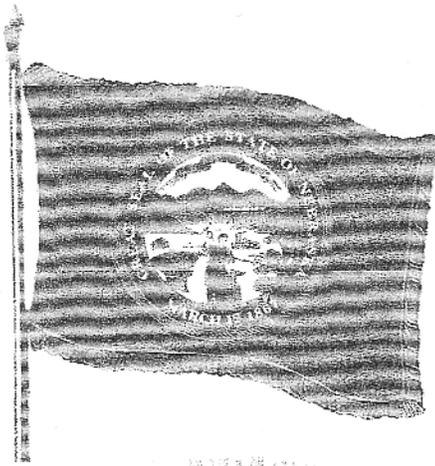
Address Street 5600 S 96<sup>th</sup> Pl City Lincoln

State NE Zip Code 68526 Home Phone number 402-489-4482

Social Security Number                      Date of Birth   /  /

STATE OF

NEBRASKA



RECEIVED

JAN 18 2007

NEBRASKA LIQUOR CONTROL COMMISSION  
Department of State  
Lincoln, Nebraska

United States of America, } ss.  
State of Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

the attached is a true and correct copy of the Articles of Organization of

TRIPLE D, LLC

with its registered office located in LINCOLN, Nebraska, as filed in this office on August 24, 2006.

In Testimony Whereof,

I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on August 24, 2006.

*John A. Gale*  
SECRETARY OF STATE



This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.