



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 8, 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 Lincoln Holdings LTD, d.b.a. Oso Burrito, 2840 South 70th Street requesting a class I liquor license.

Nader Sepahur, owner has requested that Bradley Whiteley be approved as the manager of the liquor license.

Background information on the manager applicant is as follows:

Bradley Whiteley was born in Lincoln, Nebraska. He attended Western Culinary Institute, Portland Oregon graduating in 1993.

Bradley Whiteley employment history is as follows:

2002 - Present	Chef, Oso Burrito	Lincoln, NE.
2001 - 2005	Bartender, Neighbors Lounge	Lincoln, NE.
2001 - 2002	Cook, Skeeter Barnes	Lincoln, NE.
2001	Cook, Lazlo's	Lincoln, NE.
1992 - 2000	GM, Wichita Bar	Portland, OR.

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) Oso Burrito

Manager Owner Other _____

Name: BRADLEY WHITELEY

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? 40+

Any other employment? No Yes, explain L

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 3/8/07



3-26 9 530

STATE OF NEBRASKA

Dave Heineman
Governor

FILED

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/

FEB 26 2007

February 23, 2007

CITY CLERK'S OFFICE
LINCOLN, NEBRASKA

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

*Lincoln Holding LTD
dba OSO BURRITO
2840 So 70th St Class I*

A7-022305

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

(24)

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

PREMISE INFORMATION

Trade Name (doing business as) OSO BURRITO

Street Address #1 2840 So. 70th St.

Street Address #2 _____

City LINCOLN County LANCASTER #2

Zip Code _____

Telephone number at premise to be licensed 402-483-0227

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: LINCOLN HOLDINGS LTD.

Street Address #1 1423 'O' ST

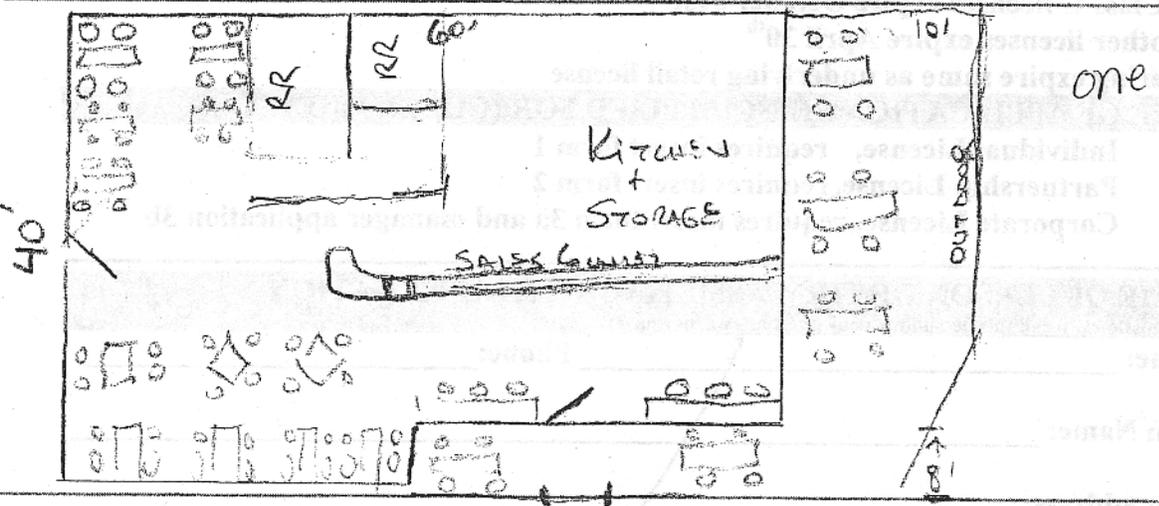
Street Address #2 _____

City LINCOLN County LANCASTER

Zip Code 68508

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.



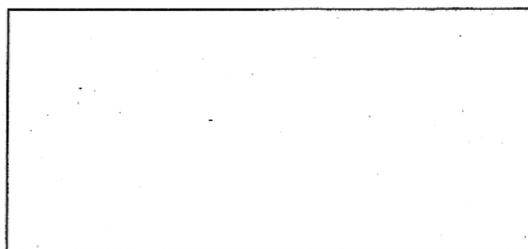
one story

no basement

N

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 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 checked="" 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 (additional fee of \$100 to \$1,000-call for exact amount)	\$ 45.00 10,000 min.
<input type="checkbox"/>	W	Wholesale Beer	
<input type="checkbox"/>	X	Wholesale Liquor	\$545.00 5,000
<input type="checkbox"/>	Y	Farm Winery	\$795.00 5,000
			\$295.00 1,000

All Class C licenses expire October 31st

All other licenses expire April 30th

Catering expire same as underlying retail license

TYPE OF APPLICATION BEING APPLIED FOR (CHECK ONE)

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> | Individual License, requires insert form 1 |
| <input type="checkbox"/> | Partnership License, requires insert form 2 |
| <input checked="" type="checkbox"/> | 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: _____

Firm address: _____

APPLICANT INFORMATION

RECEIVED

FEB 12 2007

NEBRASKA LIQUOR CONTROL COMMISSION

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

No

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.

BRAD WHITELEY - 40 - 50 hrs /wk

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.

4 YRS BARTENDING AND BAR MANAGING AT NEIGHBORS LOUNGE

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 expires 12-1-2011
 Deed
 Purchase Agreement

15. When do you intend to open for business? Nov. 15th 2006

16. What will be the main nature of business? What are the anticipated hours of operation? QUICK SERVICE FOOD 11AM - 10PM M - SUNDAY

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>NADER SEPAHPUR</u>	<u>1986</u>	<u>PRESENT</u>	<u>LINCOLN NE</u>
<u>INGRID SEPAHPUR</u>	<u>1986</u>	<u>PRESENT</u>	<u>LINCOLN NE</u>

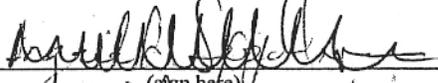
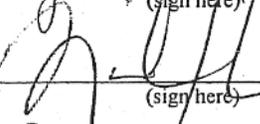
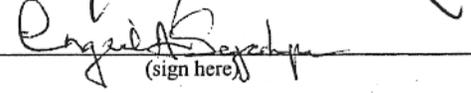
The undersigned applicant(s) hereby consent(s) to a background investigation and release present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes 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

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.

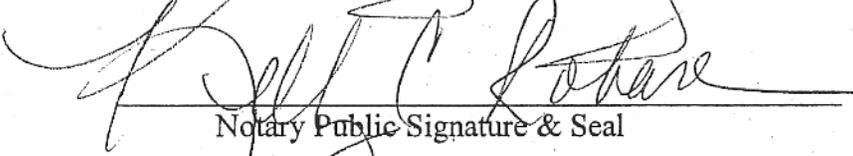
Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person 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.

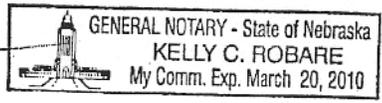
Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock) and spouses. Full (birth) names only, no initials.

✓
Lader
ngrid

 (sign here)	_____	(sign here)
 (sign here)	_____	(sign here)
 (sign here)	_____	(sign here)
_____	_____	(sign here)
_____	_____	(sign here)

Subscribed in my presence and sworn to before me this
8th day of February, 2007

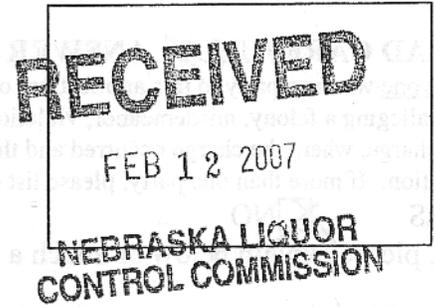

Notary Public Signature & Seal



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.

**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/



LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION LINCOLN HOLDINGS LTD
CLASS & LICENSE NUMBER 'C'
TRADE NAME OSO BUREITO
STREET ADDRESS 2840 So. 70th St. CITY LINCOLN

SIGNATURE OF CORPORATION PRESIDENT/CEO

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

NAME Bradley G. Whiteley
ADDRESS 1220 S. 25th St.
CITY Lincoln STATE NE ZIP CODE 68502
HOME PHONE NUMBER 402-438-0303 BUSINESS PHONE NUMBER 402-477-1717
SEX MALE FEMALE SOCIAL SECURITY NUMBER _____
DATE OF BIRTH _____ PLACE OF BIRTH Lincoln, NE
DRIVERS LICENSE NUMBER & STATE _____ NE

CEL 304-7737

SPOUSES INFORMATION (IF NOT MARRIED INDICATE)

SPOUSE NAME Kelly J. Whiteley
SOCIAL SECURITY NUMBER _____ DATE OF BIRTH _____
DRIVERS LICENSE NUMBER & STATE _____ NE

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 NO

If yes, please explain below or attach a separate page.

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		SPOUSE: CITY & STATE	YEAR	
	FROM	TO		FROM	TO
Lincoln, NE	2001	Present	Lincoln, NE	2001	Present
Oregon City, OR	1992	2001	Oregon City, OR	1992	2001

EMPLOYERS - LIST LAST TWO EMPLOYERS

MONTH/YEAR FROM	TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
7/02	Present	Lincoln Holding Co dba ^{OSO} Burrito	Mader S	890-9565
11/01	3/05	Neighbors Lounge	STAN Dinges	

**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 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.

Bradley

[Handwritten Signature]

Signature of Applicant

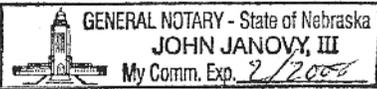
Kelly

[Handwritten Signature]

Signature of Spouse

Subscribed in my presence and sworn to before me this 19th
day of September, 2006

Subscribed in my presence and sworn to before me this 19th
day of September, 2006

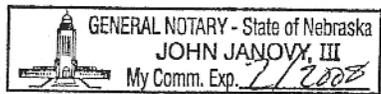


[Handwritten Signature]

Notary Signature & Seal

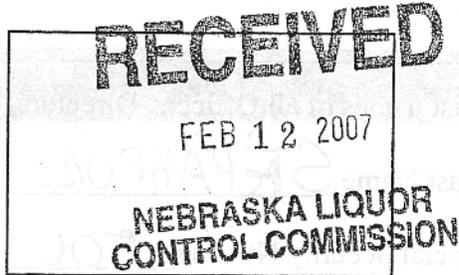
[Handwritten Signature]

Notary Signature & Seal



**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



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.

LINCOLN HOLDINGS LTD.

Corporate Street Address: 1423 'O' ST

City: LINCOLN State: NE Zip Code: 68508

Corporate Telephone Number (402) 477-9166

Total number of shares issued (if corporation) 10000

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

Name of Registered Agent NADER SEPAHPUR

Name of Proposed Manager BRADLEY WHITELY
This person must complete form 35-4013

List name of Chief Executive Officer

Last Name: SEPAHPUR First Name: NADER MI NA

Address Street 3245 W. SUMMIT BLDG City LINCOLN

State NE Zip Code 68502 Home Phone number (402) 420-1350

Social Security Number - - - Date of Birth 1/1/

List names of all Officers, Directors, Stockholders, Members and their Spouses

Last Name SEPAHPUR First Name NADEL

Social Security Number _____ Date of Birth 1/1

Title PRESIDENT Number of Shares 10000

Spouse Name (indicate N/A if single) INGRID A SEPAHPUR

Spouse Social Security Number _____ Date of Birth 1/1

Title _____ Number of Shares 0

done
xpp
prints

done
xpp
prints

Last Name _____ First Name _____

Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

Spouse Name (indicate N/A if single) _____

Spouse Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

Last Name _____ First Name _____

Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

Spouse Name (indicate N/A if single) _____

Spouse Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

Liability Company controlled by another Corporation?

and supply organizational chart

S

Ending Date DECEMBER

[Handwritten mark]

Nader

Managing Member

[Signature]
Signature & Seal

State of Nebraska
ROBARE
March 20, 2010

and sworn to before me this

February, 2007

[Signature]
Signature & Seal



NEBRASKA RECEIVED

Secretary of State

FEB 12 2007



John A. Gale

Corporation and Business Entity Searches

NEBRASKA LIQUOR CONTROL COMMISSION

Mon Feb 12 13:05:28 2007

For Letters of Good Standing (\$6.50), Certificates of Good Standing (\$10.00), and/or images (\$0.45 per page) of documents filed with the Secretary of State please click the corresponding service below:

[New Search](#)

[Back to Search Results](#)

Pay Services:

[Online Images of Filed Documents](#) | [Good Standing Documents](#)

Entity Name	SOS Account Number
--------------------	---------------------------

LINCOLN HOLDINGS, LTD.

Principal Office Address	Registered Agent and Office Address
---------------------------------	--

1423 "O" ST
LINCOLN, NE

NADER SEPAHPUR
1423 'O' ST
LINCOLN, NE 68508

Nature of Business	Entity Type	Date Filed	Account Status
---------------------------	--------------------	-------------------	-----------------------

RESTAURANT

Domestic Corp

Jun 04 1981

Active

Corporation Position	Name	Address
-----------------------------	-------------	----------------

President	NADER SEPAHPUR	3245 W. SUMMIT BLVD LINCOLN, NE 68502
Secretary	NADER SEPAHPUR	3245 W. SUMMIT BLVD LINCOLN, NE 68502
Treasurer	NADER SEPAHPUR	3245 W. SUMMIT BLVD LINCOLN, NE 68502

Pay Services: