

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

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



MAYOR CHRIS BEUTLER

lincoln.ne.gov

September 19, 2007

Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of Michel's Ville Grille, 2701 North 48th Street requesting a class C liquor license.

This location was previously known as Hepburn's Ville Grille & Pub which held a class J liquor license

Debra Michel, owner has requested that she be approved as the manager of the liquor license.

Background information on the applicant will be omitted as the Council approved Mrs. Michel as an owner of the liquor license held at The Restaurant featuring The Other room located at 500 West Gate Boulevard.

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



PREMISE INFORMATION

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Trade Name (doing business as) Michel's Ville Grille

SEP 11 2007

Street Address #1 2701 N. 48th Street

NEBRASKA LIQUOR
CONTROL COMMISSION

Street Address #2 _____

City Lincoln County Lancaster Zip Code 68504

Premise Telephone number 402-466-1011

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

Mail address (where you want receipt of mail from the commission)

Name Michel's Ville Grille

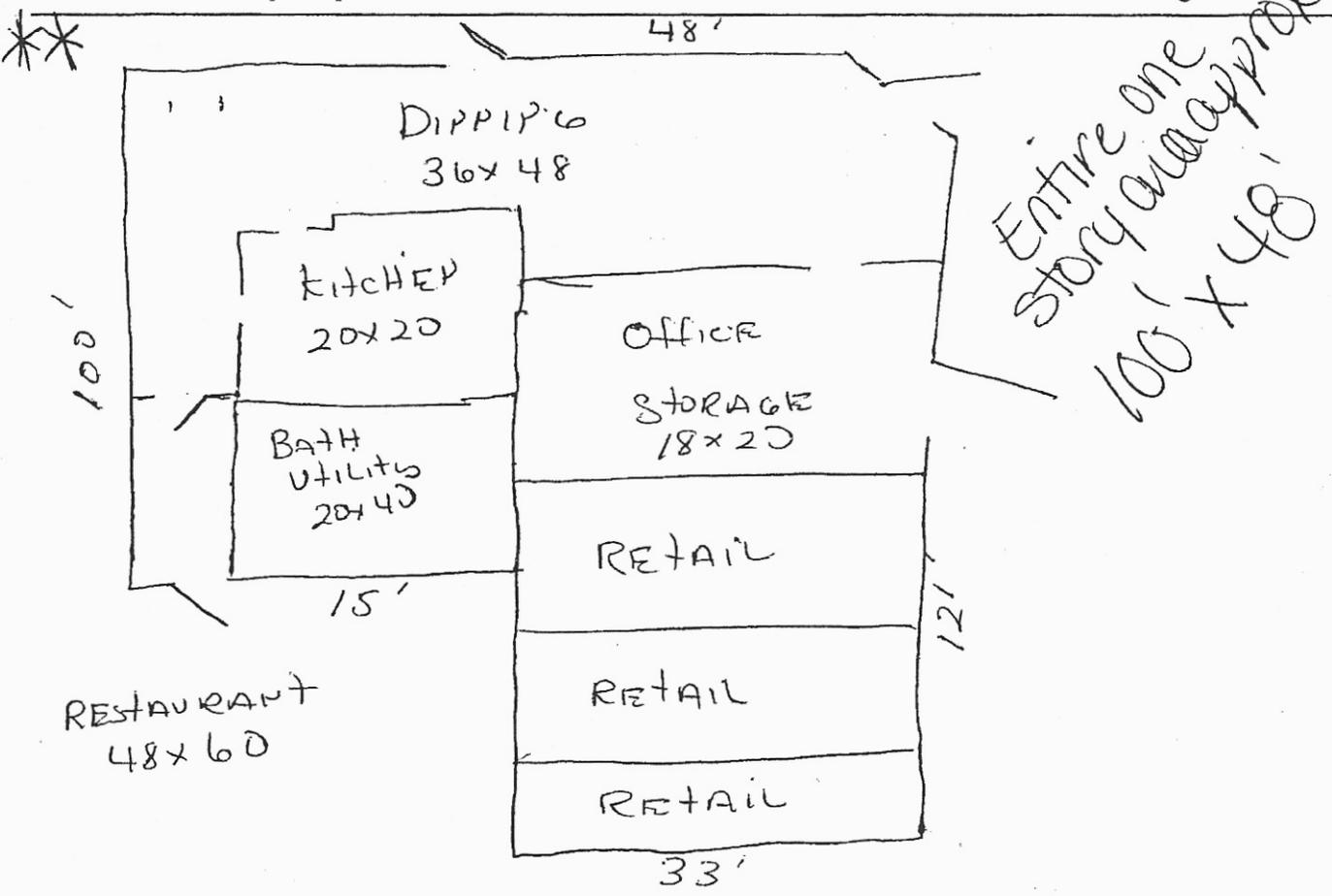
Street Address #1 2701 N. 48th

Street Address #2 _____

City Lincoln County Lancaster Zip Code 68504

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.



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APPLICANT INFORMATION

READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

NEBRASKA LIQUOR CONTROL COMMISSION

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any 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.

Michael J. Michel - DWI 1989, Lincoln, NE
Debra S. Michel - Misdemeanor (2), 1989, Lincoln, NE
Violations have been pardoned by the board of pardons as of 7/4/07
Pardon letter on file.

2. Are you buying the business and/or assets of a licensee? YES NO

If yes, give name of business and license number

- a) Submit a copy of the sales agreement including a list of the furniture, fixtures and equipment.
b) Include a list of alcohol being purchased, list the name brand, container size and how many?

3. Are you filing a temporary agency agreement whereby current licensee allows you to operate on their license? YES NO

If yes, attach temporary agency agreement form and signature card from the bank.

This agreement is not effective until you receive your three (3) digit ID number from the Commission.

4. Are you borrowing any money from any source to establish and/or operate the business? YES NO

If yes, list the lender

5. Will any person or entity other than applicant be entitled to a share of the profits of this business? YES NO

If yes, explain. All involved persons must be disclosed on application.

6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? YES NO

If yes, list such items and the owner. Pepsi machine - owned by Pepsi / Fryer, stove/oven, Salamander, Coolers, Steam table, microwave - owned by Mary Hepburn O'Neale, Brian Watkins.

7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? YES NO

If yes, explain. No silent partners

Salamander Coolers, Steam table, microwave - owned by Mary Hepburn O'Neale, Brian Watkins.

8. Are you premises to be licensed within 150 feet of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 feet of a college or university campus?
 YES NO
 If yes, list the name of such institution and where it is located in relation to the premises (Neb. Rev. Stat. 53-177)

9. Is anyone listed on this application a law enforcement officer?
 YES NO
 If yes, list the person, the law enforcement agency involved and the person's exact duties

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 withdrawals on accounts at the institution.
Wells Fargo Debra S. Michel Michael J. Michel

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 reason for termination of any license(s) previously held.
 * # 76571 - Class C Culca kg, Trac The Restaurant featuring The Other Room. 500 West gate Blvd Lincoln NE 68504

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.
Debra S. Michel 70 hrs per week

13. List the training and/or experience (when and where) of the person lists in #12 above in connection with selling and/or serving alcoholic beverages.
Michael J. Michel has gone through the class, and Debra S. Michel will go through the class. Debra S. Michel also has 5 years of bartending experience.

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 February 28, 2008
 Deed
 Purchase Agreement

15. When do you intend to open for business? were already open since 2/28/05
 16. What will be the main nature of business? restaurant/drinks
 17. What are the anticipated hours of operation? Mon-Sat 11-8pm

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

| RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE | | | | | |
|--|--------------|-------------|----------------------|------|----|
| APPLICANT: CITY & STATE | YEAR | | SPOUSE: CITY & STATE | YEAR | |
| | FROM | TO | | FROM | TO |
| <u>Michael + Debra Michel</u> <u>2741 N. 50th</u> | | | <u>SAME</u> | | |
| <u>Michael + Debra Michel</u> <u>820 Lakeshore Dr.</u> | <u>1/03</u> | <u>6/07</u> | <u>Lincoln NE</u> | | |
| <u>Michael + Debra Michel</u> <u>6518 Baldwin Ave.</u> | <u>12/97</u> | <u>9/03</u> | | | |

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background investigation and release present and future records of every kind and description including police records, tax records (State and Federal), and 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 of 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.

Debra S. Michel
Signature of Applicant

Michael J. Michel
Signature of Spouse

Signature of Applicant

Signature of Spouse

State of Nebraska
County of Lancaster

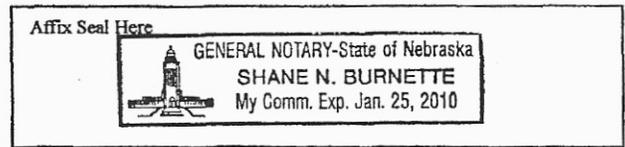
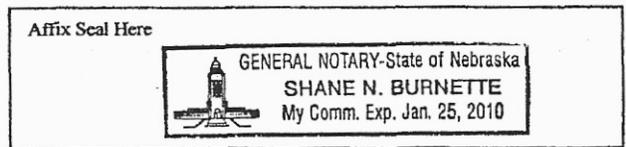
County of Lancaster

The foregoing instrument was acknowledged before me this 09/04/2007 by

The foregoing instrument was acknowledged before me this Michael J. Michel by 09/10/2007

Debra S. Michel
Shane N. Burnette
Notary Public signature

Michael J. Michel
Shane N. Burnette
Notary Public signature



in compliance with the ADA, this manager insert form 3c is available in other formats for persons with disabilities. A ten day advance period is required in writing to produce the alternate format.

APPLICATION FOR LIQUOR LICENSE CORPORATION 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.lcc.ne.gov

Office Use
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NEBRASKA LIQUOR CONTROL COMMISSION

Officers, directors and stockholders holding over 25%, including spouses, are required to adhere to the following requirements

- 1) The president and stockholders holding over 25% and their spouse (if applicable) must submit their fingerprints (2 cards per person)
- 2) All officers, directors and stockholders holding over 25 % and their spouse (if applicable) must sign the signature page of the Application for License form (Even if a spousal affidavit has been submitted)

Attach copy of Articles of Incorporation (Articles must show barcode receipt by Secretary of States Office)

Name of Registered Agent: ^{DLP} Debra S. Michel

Name of Corporation that will hold license as listed on the Articles

Ca Na ka, Inc

Corporation Address: 2701 N 48th Street

City: Lincoln State: NE Zip Code: 68504

Corporation Phone Number: 402-466-1011 Fax Number

Total Number of Corporation Shares Issued: 10,000 Shares

Name and notarized signature of president (Information of president must be listed on following page)

Last Name: Michel First Name: Debra MI: S

Home Address: 2741 N. 50th City: Lincoln

State: NE Zip Code: 68504 Home Phone Number: 402-742-5008

Debra S. Michel

Signature of president

State of Nebraska

County of Lancaster

The foregoing instrument was acknowledged before me this

09/04/2007
date

by Debra S. Michel
name of person acknowledged

Notary Public signature

Affix Seal Here



GENERAL NOTARY-State of Nebraska
SHANE N. BURNETTE
My Comm. Exp. Jan. 25, 2010

**MANAGER APPLICATION
INSERT - FORM 3c**

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

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|------------|
| Office Use |
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NEBRASKA LIQUOR
CONTROL COMMISSION

Corporate manager, including their spouse, are required to adhere to the following requirements

- 1) Must be a citizen of the United States
- 2) Must be a Nebraska resident (Chapter 2 - 006)
- 3) Must provide a copy of their certified birth certificate or INS papers
- 4) Must submit their fingerprints (2 cards per person)
- 5) Must be 21 years of age or older
- 6) Applicant may be required to take a training course

Name of Corporation/LLC: Ca Na ka, Inc

Premise License Number: _____

Premise Trade Name/DBA: Michel's Ville Grille

Premise Street Address: 2701 N 48th street

City: Lincoln State: NE Zip Code: 68504

Premise Phone Number: 402-742-5008

Debra S. Michel

CORPORATE OFFICER SIGNATURE
(Faxed signatures are acceptable)

1. READ PARAGRAPH CAREFULLY AND 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.

Michael J. Michel - DWI 1989, Lincoln NE
Debra S. Michel - Misdemeanor(2) 1989, Lincoln, NE
Violations have been pardoned by the board of pardons
as of 4/4/07
Pardon letter on file

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state? **IF YES**, list the name of the premise.

YES NO

3. Do you, as a manager, have all the qualifications required to hold a Nebraska Liquor License? Nebraska Liquor Control Act (§53-131.01)

YES NO

4. Have you filed the required fingerprint cards and **PROPER FEES** with this application? (The check or money order must be made out to the Nebraska State Patrol for \$38.00 per person)

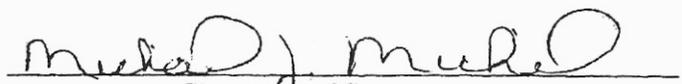
YES NO

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, a spousal 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.

 Debra S. Michel
Signature of Manager Applicant

 Michael J. Michel
Signature of Spouse

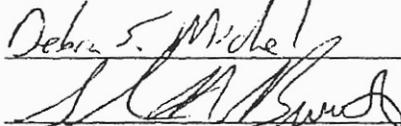
State of Nebraska

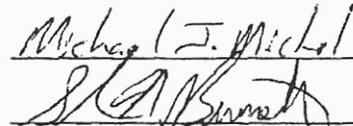
County of Lancaster

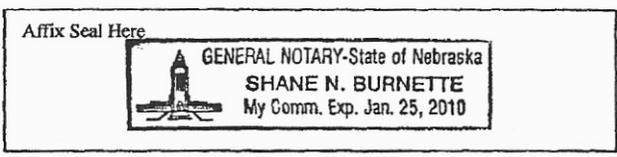
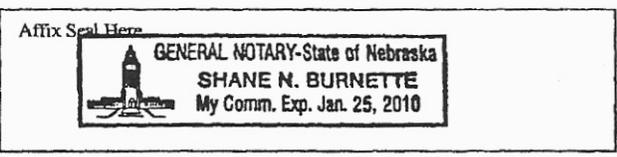
County of Lancaster

The foregoing instrument was acknowledged before me this Debra S. Michel by 09/04/2007

The foregoing instrument was acknowledged before me this Michael J. Michel by 09/04/2007


Notary Public signature


Notary Public signature



In compliance with the ADA, this manager insert form 3c is available in other formats for persons with disabilities. A ten day advance period is required in writing to produce the alternate format.

STATE OF



NEBRASKA

LIQUOR LICENSE

GRANTED UNDER PROVISIONS OF NEBRASKA LIQUOR CONTROL ACT

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SEP 11 2007

NEBRASKA LIQUOR CONTROL COMMISSION

76571

CLASS C - ALCOHOLIC LIQ ON/OFF SALE (INSIDE CORPORATE LIMITS)

LICENSEE

CANAKA, INC
2701 N 48TH STREET

PREMISE

RESTAURANT FEATURING THE OTHER ROOM
500 WEST GATE BLVD LANCASTER

LINCOLN NE 68504

LINCOLN NE 68528

LEGAL DESCRIPTION:

ONE STORY BLDG APPROX 39' X 86' WITH OUTDOOR SIDEWALK CAFE APPROX 35' X 38'

WHEREAS, THE ABOVE HAS ON FILE WITH THE LIQUOR COMMISSION AN APPLICATION AND BOND AS REQUIRED BY LAW WHICH HAS BEEN DULY APPROVED, AND HAS PAID ALL FEES REQUIRED BY LAW, AS PROVIDED IN THE NEBRASKA LIQUOR CONTROL ACT

LICENSE PERIOD: 06/26/2007 - 10/31/2007

UNLESS SOONER REVOKED, SUBJECT TO THE PROVISIONS OF SAID ACT AND SUCH RULES AND REGULATIONS AS MAY HAVE BEEN OR MAY HEREAFTER BE PROMULGATED OR ADOPTED.

Attest

NEBRASKA LIQUOR CONTROL COMMISSION

Handwritten signature of Executive Director

Executive Director

Handwritten signature of Chairma

Chairma

ARTICLES OF INCORPORATION

OF

CA NA KA, INC.

The undersigned, Darrell K. Stock, acting as incorporator of a corporation under the Nebraska Business Corporation Act, adopts the following Articles of Incorporation for such corporation:

ARTICLE I

The name of the corporation shall be Ca Na Ka, Inc.

ARTICLE II

The aggregate number of shares which this corporation shall have authority to issue is 10,000 shares of common stock having a par value of \$1.00 each.

All transfers of the shares of this corporation shall be made in accordance with the provisions of the By-Laws of the corporation.

ARTICLE III

The corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation in the manner now and hereafter permitted by law, and all rights conferred upon shareholders herein are granted subject to this reservation.

ARTICLE IV

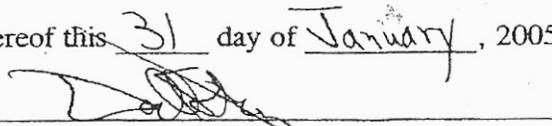
The address of the initial registered office of the corporation is 820 Lakeshore Dr., Lincoln, NE 68528 and the name of the initial registered agent at such address is Debra S. Michel.

ARTICLE V

The name and street address of the incorporator is as follows:

Darrell K. Stock
1115 "K" St., Suite 104
Lincoln, NE 68508

WITNESS my signature in execution hereof this 31 day of January, 2005.


Darrell K. Stock, Incorporator

List names of all officers, directors and stockholders including spouses (Even if a spousal affidavit has been submitted)

Last Name: Michel First Name: Michael MI: J

Social Security Number: _____ Date of Birth: _____

Title: Treasurer Number of Shares 10,000

Spouse Full Name (indicate N/A if single): Michael J. Debra Sue Michel

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: Michel First Name: Debra MI: S

Social Security Number: _____ Date of Birth: _____

Title: President Number of Shares 10,000

Spouse Full Name (indicate N/A if single): Michael James Michel

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Is the applying Corporation controlled by another Corporation?

YES

NO

If yes, provide the name of corporation and supply an organizational chart

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NEBRASKA LIQUOR
CONTROL COMMISSION

Indicate the Corporation's tax year with the IRS (Example January through December)

Starting Date: January 1 Ending Date: December 31

Is this a Non-Profit Corporation?

YES

NO

If yes, provide the Federal ID #.

In compliance with the ADA, this corporation insert form 3a is available in other formats for persons with disabilities.
A ten day advance period is requested in writing to produce the alternate format.

REVISED 5/2007