



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

July 21, 2009

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 Fuji Japanese Restaurant, 1501 Pine Lake Road requesting a class I liquor license.

Debbie Ngo, owner has requested that she be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Debbie Ngo was born in Vietnam. She was employed at Peking Palace as a manager 2001-2008.

The required training will be completed on August 13, 2009.

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



**APPLICATION FOR LIQUOR LICENSE**

301 CENTENNIAL MALL SOUTH  
 PO BOX 95046  
 LINCOLN, NE 68509-5046  
 PHONE: (402) 471-2571  
 FAX: (402) 471-2814  
 Website: www.lcc.ne.gov/

45 days = 8/28/08

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 JUL 13 2009  
 NEBRASKA LIQUOR  
 CONTROL COMMISSION

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

RETAIL LICENSE(S)		<u>Application Fee</u>
<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
<input type="checkbox"/>	Class K Catering license (requires catering application form)	\$100.00

MISCELLANEOUS		<u>Application Fee</u>	<u>Bond Required</u>
<input type="checkbox"/>	L Craft Brewery (Brew Pub)	\$295.00	\$1,000 minimum
<input type="checkbox"/>	O Boat	\$ 95.00	none
<input type="checkbox"/>	V Manufacturer		
<input type="checkbox"/>	Alcohol & Spirits	\$1,045.00	\$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$145.00	1 to 100 barrel* \$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$245.00	100 to 150 barrel* \$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$395.00	150 to 200 barrel* \$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$545.00	200 to 300 barrel* \$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$695.00	300 to 400 barrel* \$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$745.00	400 to 500 barrel* \$1,000 minimum
<input type="checkbox"/>	W Wholesale Beer	\$545.00	\$5,000 minimum
<input type="checkbox"/>	X Wholesale Liquor	\$795.00	\$5,000 minimum
<input type="checkbox"/>	Y Farm Winery	\$295.00	\$1,000 minimum
<input type="checkbox"/>	Z Micro Distillery	\$295.00	\$1,000 minimum
<input type="checkbox"/>	Copy of TTB permit (if applying for L, V, W, X, Y or Z)		

\*daily capacity, average daily barrel production for the previous twelve months of manufacturing operation. If no such basis for comparison exists, the manufacturing licensee shall pay in advance for the first year's operation a fee of five hundred dollars

All Class C licenses expire October 31<sup>st</sup>  
 All other licenses expire April 30<sup>th</sup>  
 Catering license (K) expires 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 & 3c)
- Limited Liability Company (requires form 3b & 3c)

**NAME OF PERSON OR FIRM ASSISTING WITH APPLICATION  
 (commission will call this person with any questions we may have on this application)**

Name Debbie Ngo Phone number: (402) 202-7370  
 Firm Name Fuji Japanese Restaurant

**PREMISE INFORMATION**

Trade Name (doing business as) Fuji Japanese Restaurant

Street Address #1 1501 Pine Lake Rd Bay 5

Street Address #2 \_\_\_\_\_

City Lincoln County Lancaster Zip Code 68512

Premise Telephone number 402-202-7370

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

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

Name Debbie Ngo

Street Address #1 7620 Kennelley Drive

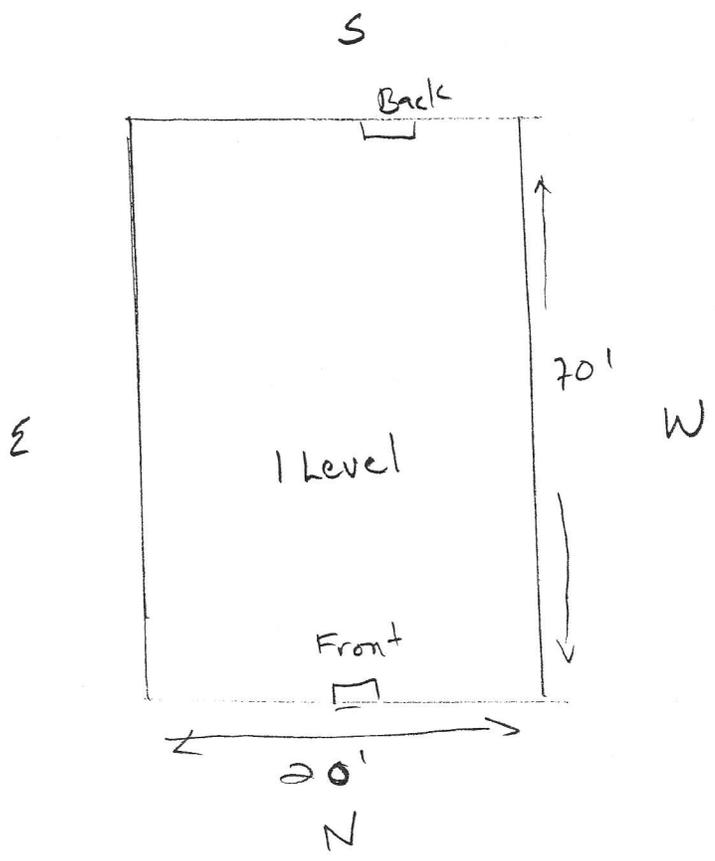
Street Address #2 \_\_\_\_\_

City Lincoln State NE Zip Code 68516

**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.

\*\*For on-premise consumption liquor licenses minimum standards must be met by providing at least two restrooms



**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  NO

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

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**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?

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**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.**

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**4. Are you borrowing any money from any source to establish and/or operate the business?**

YES  NO

If yes, list the lender \_\_\_\_\_

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**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. \_\_\_\_\_

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**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. \_\_\_\_\_

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**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**

8. Are your 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.

US BANK Debbie Ngo

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.

N/A

12. List the training and/or experience (when and where) of the person(s) making application. Those persons required are listed as followed:

- a) Individual, applicant only (no spouse)
- b) Partnership, all partners (no spouses)
- c) Corporation, manager only (no spouse)
- d) Limited Liability Company, manager only (no spouse)

Name:	Date:	Where:
Debbie Ngo	1999-2003	Peking Palace 3421 W. State #6 grand Island, NE
Debbie Ngo	2004-2009	Peking Palace 8341 O St. Lincoln, NE

13. 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 5 yrs 3 months from day opening (grand opening estimated on Nov 2009) <sup>to be</sup>
- Deed
- Purchase Agreement

14. When do you intend to open for business? Mid October 2009 - November 2009

15. What will be the main nature of business? Food - restaurant

16. What are the anticipated hours of operation? 11:00 am - 9:00 pm

17. 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
grand Island, NE	1999	2003	grand Island, NE	1999	2003
Lincoln, NE	2004	Current	Lincoln, NE	2004	Current

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.

*[Handwritten Signature]*

Signature of Applicant

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*[Handwritten Signature]*

Signature of Spouse

**NEBRASKA LIQUOR CONTROL COMMISSION**

Signature of Applicant

Signature of Spouse

State of Nebraska

County of Lancaster

County of Lancaster

The foregoing instrument was acknowledged before me this July 13 2009 by

The foregoing instrument was acknowledged before me this July 13 2009 by

John Brosius

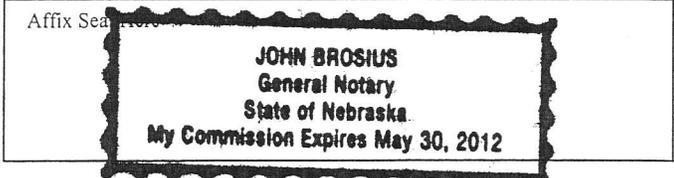
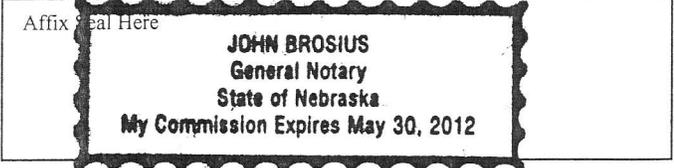
John Brosius

*[Handwritten Signature]*

*[Handwritten Signature]*

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.

APPLICATION FOR LIQUOR LICENSE  
INDIVIDUAL  
INSERT - FORM 1

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](http://www.lcc.ne.gov)

Office Use

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Individual applicants, including 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 sign the signature page of the Application for License form
- 6) Applicant may be required to take a training course

Name of individual applicant who will hold license

Last Name: NGO

First Name: Debbie MI: T.

Home Address: 7620 Kennelley Drive City: LINCOLN Zip Code: 68516

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Telephone Number: (402) 202-7370

Drivers License Number: \_\_\_\_\_ State: NE

Are you married? (Please note if the above listed individual is separated, etc. spouse's information is still required to be listed below)

YES

NO

If yes, provide your spouse's information below

Spouses Last Name: Luu

Spouses First Name: Trung MI: T.

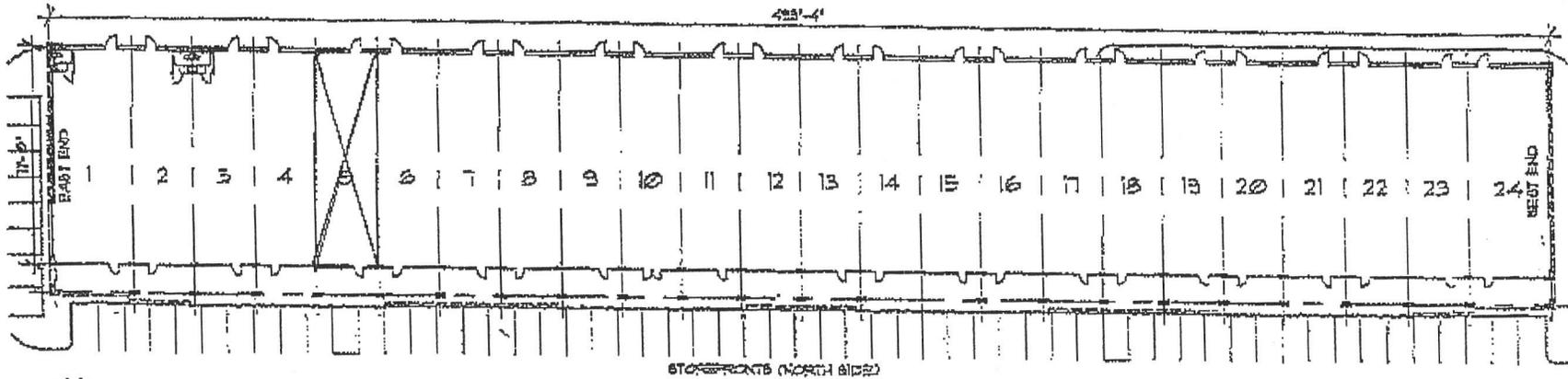
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ State: NE

In compliance with the ADA, this individual insert form 1 is available in other formats for person with disabilities. A ten day advance period is required in writing to produce the alternate format.







**OVERALL FLOOR PLAN**

SCALE: 1/32" = 1'-0"



**OVERALL BUILDING ELEVATIONS**

SCALE: 1/32" = 1'-0"

Exhibit "A"



HITCHINSON DESIGN, P.C.  
 6516 SOUTH 68TH STREET, SUITE C2  
 LINCOLN, NEBRASKA 68516  
 PHONE 402.421.1502 FAX 402.421.2833  
 EMAIL: HITCH@HITCHDESIGN.COM  
 WWW.HITCHINSONDESIGN.COM

