

Lincoln Police Department
James Peschong, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

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



MAYOR CHRIS BEUTLER

lincoln.ne.gov

May 30, 2013

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 Asian Fusion, 2840 Jamie Lane requesting a class I liquor license.

Xiu Fang Zhang has requested that she be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Xiu Fang Zhang was born in China. She went to middle school in China.

Xiu Fang Zhang has been self- employed since 1999.

The applicant has been informed about the required training.

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.


JIM PESCHONG, Chief of Police



A nationally accredited law enforcement agency



PREMISE INFORMATION

Trade Name (doing business as) Asian Fusion

Street Address #1 2840 Jamie Ln

Street Address #2 _____

City Lincoln

County Lancaster #2

Zip Code 68516

Premise Telephone number 402.423.8889

E-mail ali0280@ymail.com

Is this location inside the city/village corporate limits:

YES

NO

Mailing address (where you want to receive mail from the Commission)

Name Xiu Fang Zhang

Street Address #1 5701 NW 1st St.

Street Address #2 _____

City Lincoln

State NE

Zip Code 68521

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

READ CAREFULLY

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, outdoor area, 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. 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**

Length 59 feet

Width 56 feet

Is there a basement? Yes No

PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPARATE SHEET

See Attached

1-story

NEBRASKA ALCOHOL CONTROL COMMISSION

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

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

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Xui Fang Zhang	2006	Lincoln, NE	violate hunt/fish regs.	\$50 fine, \$40 rest + costs
" " "	2006,2008	Lincoln & Omaha, NE	speeding	\$100, \$200 fine + costs
" " "	2009	Lincoln, NE	careless driving	\$150 fine + costs
Xin Quan Li	06, 07, 08, 08	Lincoln, NE	speeding	fines 25, 75(2), 125 + costs
" " "	2006	Lincoln, NE	no rabies vac	\$50 + costs
" " "	2007	Lincoln, NE	violate traffic sig	\$75 + costs

2. Are you buying the business of a current retail liquor license?

YES NO

If yes, give name of business and liquor license number _____

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

3. Was this premise licensed as liquor licensed business within the last two (2) years?

YES NO

If yes, give name and license number _____

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NEBRASKA LIQUOR
CONTROL COMMISSION

4. Are you filing a temporary operating permit to operate during the application process?

YES NO

If yes:

- a) Attach temporary operating permit (T.O.P.) (form 125)
- b) T.O.P. will only be accepted at a location that currently holds a valid liquor license.

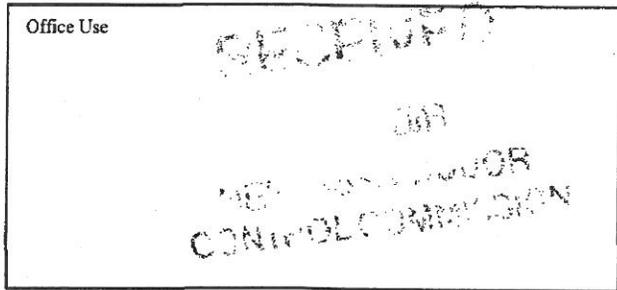
5. Are you borrowing any money from any source, include family or friends, to establish and/or operate the business?

YES NO

If yes, list the lender(s) Cornhusker Bank

**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



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) and must provide proof of voter registration in the State of Nebraska
- 3) Must provide a copy of one of the following: state issued US birth certificate, naturalization paper or US passport
- 4) Must submit fingerprints (unless a non-participating spouse) (2 cards per person) and fees of \$38 per person, made payable to Nebraska State Patrol
- 5) Must be 21 years of age or older
- 6) May be required to take a training course

Corporation/LLC information

Name of Corporation/LLC: Asian Fusion, Inc.

Premise information

Premise License Number: _____

(if new application leave blank)

Premise Trade Name/DBA: Asian Fusion

Premise Street Address: 2840 Jami Lane

City: Lincoln State: NE Zip Code: 68516

Premise Phone Number: 402-423-8869

The individual whose name is listed as a corporate officer or managing member as reported on insert form 3a or 3b or listed with the Commission. Click on this link to see authorized individuals.

http://www.lcc.ne.gov/license_search/licsearch.cgi

Xiu Fang Zheng

CORPORATE OFFICER/MANAGING MEMBER SIGNATURE

(Faxed signatures are acceptable)

Manager's information must be completed below PLEASE PRINT CLEARLY

Gender: MALE FEMALE

Last Name: Zhang First Name: Xiu Fang MI: _____

Home Address (include PO Box if applicable): 5600 NW 11th Cir

City: Lincoln County: Lancaster Zip Code: 68521

Home Phone Number: 402.474.5555 Business Phone Number: 402.423.8889

Social Security Number: _____ Drivers License Number & State: _____ NE

Date Of Birth: _____ Place Of Birth: China

*prints
passport
later
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Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

YES NO

Spouse's information

Spouses Last Name: Li First Name: Xin Quan MI: _____

Social Security Number: _____ Drivers License Number & State: _____ NE

Date Of Birth: _____ Place Of Birth: China

APPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS

APPLICANT SPOUSE

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Lincoln, NE	1999	present	Lincoln, NE	1999	present

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MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2006	2013	Highlands Great Wall	Xiu Fang Zhang	402.438.8888
1999	2006	Great Wall	Xui Fang Zhang	402.488.2112

1. **READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY. Must be completed by both applicant and spouse, unless spouse has filed an affidavit of non-participation.**

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.

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Xui Fang Zhang	2006	Lincoln, NE	violate hunt/fish regs.	guilty plea. \$50 fine, \$40 rest + costs
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" " "	2008	Omaha, NE	speeding	guilty plea. 200 fine + costs
" " "	2009	Lincoln, NE	careless driving	guilty plea. \$150 fine + costs
Xin Quan Li	06, 07, 08, 08	Lincoln, NE	speeding	guilty plea, fines 25, 75(2), 125 +costs
" " "	06, 07	Lincoln, NE	no rabies vac, violate traffic signal	guilty plea, fines 50, 75 +costs

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state? YES NO
IF YES, list the name of the premise.

3. Do you, as a manager, qualify under Nebraska Liquor Control Act (§53-131.01) and do you intend to supervise, in person, the management of the business? YES NO

4. Have you enclosed the required fingerprint cards and **PROPER FEES** with this application? (Check or money order made payable to the Nebraska State Patrol for \$38.00 per person)

YES NO

prints enclosed for both individuals

5. List any alcohol related training and/or experience (when and where).

RBST, Lincoln, 03/2013

NEBRASKA www.dmv.ne.gov
USA NE

OPERATOR LICENSE

44 License No. [REDACTED] 45 Iss 03-30-2012

3 DOB [REDACTED] 46 EXI [REDACTED]

5a End NONE 6 Class [REDACTED]

12 Rest NONE

15 Sex F 16 Hgt 503 17 Wgt [REDACTED]

18 Eyes BLK 19 Hair [REDACTED]

XIU FANG ZHANG
3504 NW 10th Cir
LINCOLN, NE 68521

Xiu Fang Zhang

NEBRASKA www.dmv.ne.gov
USA NE

OPERATOR LICENSE

44 License No. [REDACTED] 45 Iss 08-24-2009

3 DOB [REDACTED] 46 EXI [REDACTED]

5a End M 6 Class [REDACTED]

12 Rest NONE

15 Sex M 16 Hgt 506 17 Wgt [REDACTED]

18 Eyes BRO 19 Hair [REDACTED]

XIN DUAN EI
3741 NW 1st St
LINCOLN, NE 68521

Xin Duan EI

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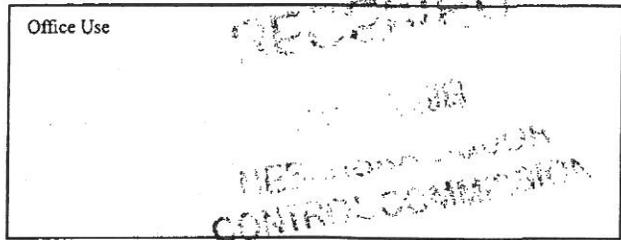
2012

CONTROL (COMMINSION)

Handwritten notes and signatures, including "RECEIVED" and "CONTROL (COMMINSION)"

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



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

- 1) All officers, directors and stockholders must be listed
- 2) President/CEO and stockholders holding over 25% and their spouse(s) (if applicable) must submit fingerprints (2 cards per person)
- 3) Officers, directors and stockholders holding over 25 % shares of stock and their spouse (if applicable) must sign the signature page of the Application for License form 100 (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: Xue Qin Wang

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

Asian Fusion, Inc.

Corporation Address: 2840 Jamie Ln.

City: Lincoln State: NE Zip Code: 68516

Corporation Phone Number: 402.423.8889 Fax Number: 402.421.8889

Total Number of Corporation Shares Issued: 200

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

Last Name: Zhang First Name: Xiu Fang MI: _____

Home Address: 5600 NW 11th Cir City: Lincoln

State: NE Zip Code: 68521 Home Phone Number: 402.474.5555

Xiu Fang Zhang

Signature of President/CEO

ACKNOWLEDGEMENT

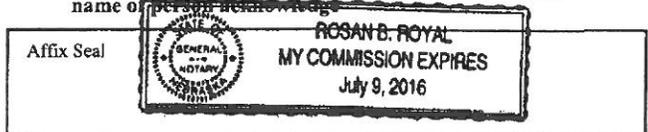
State of Nebraska
County of LANCASTER

The foregoing instrument was acknowledged before me this

May 13, 2013
Date

by Xiu Fang Zhang Xiu Fang Zhang
name of person acknowledged

Rosan B. Royal



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

Last Name: Zhang First Name: Xiu Fang MI: _____

Social Security Number: _____ Date of Birth: _____

Title: President Number of Shares 80

Spouse Full Name (indicate N/A if single): Xin Quan Li

Spouse Social Security Number: _____ Date of Birth: _____

*Signed
prints
passport
water
reg*

40%

Last Name: Li First Name: Xin Quan MI: _____

Social Security Number: _____ Date of Birth: _____

Title: Vice-President Number of Shares 80

Spouse Full Name (indicate N/A if single): Xiu Fang Zhang

Spouse Social Security Number: _____ Date of Birth: _____

*prints
signed*

40%

Last Name: Wang First Name: Xue Qin MI: _____

Social Security Number: _____ Date of Birth: _____

Title: Secretary/Treasurer Number of Shares 40

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

Spouse Social Security Number: _____ Date of Birth: _____

*Not required
to sign
or submit
prints*

20%

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares 500,000

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

Spouse Social Security Number: _____ Date of Birth: _____

CONTROL COMPANY