

May 8, 2014

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 Hy-Vee, 5020 North 27th Street requesting that Scott Schlatter be approved as the manager of the class C liquor license.

Mr. Schlatter is a currently approved manager.

The applicant completed the required training.

His application is 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.



JIM PESCHONG, Chief of Police



**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

Office Use

MUST BE:

- ✓ **Citizen of the United States. Include copy of US birth certificate, naturalization paper or current US passport**
- ✓ **Nebraska resident. Include copy of voter registration in the State of Nebraska**
- ✓ **Fingerprinted. Two cards per person, fees of \$38 per person, made payable to Nebraska State Patrol. If printed at NSP mail check only.**
- ✓ **21 years of age or older**

RECEIVED JK

Corporation/LLC information

APR 10 2014

Name of Corporation/LLC: Hy-Vee, Inc.

NEBRASKA LIQUOR
CONTROL COMMISSION

Premise information

Liquor License Number: 68413 Class Type C
(if new application leave blank)

Premise Trade Name/DBA: Hy-Vee 3

Premise Street Address: 5020 N 27 Street

City: Lincoln County: Lancaster Zip Code: 68521

Premise Phone Number: 402-477-4764

Email address: 1390director@hy-vee.com

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



JEFF PIERCE
ASS'T. TREASURER, FINANCIAL REPORTING

SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER
(Faxed signatures are acceptable)



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Manager's information must be completed below PLEASE PRINT CLEARLY

APR 10 2014

NEBRASKA LIQUOR CONTROL BOARD

Last Name: Schlatter First Name: Scott

Home Address (include PO Box if applicable): 3325 Longview Court

City: Lincoln County: NE Zip Code: 68506

Home Phone Number: 402-483-2137 Business Phone Number: 402-489-4244

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

Date Of Birth: _____ Place Of Birth: Sumner, IA

Email address: 1390director@hy-vee.com

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: Schlatter First Name: Deborah MI: m

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

Date Of Birth: _____ Place Of Birth: West Union, IA

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	2002	Present	Lincoln, NE	2002	Present
Lee's Summit, MO	2000	2002	Lee's Summit	2000	2002
Ralston, NE	1995	2000	Ralston, NE	1995	2000

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
1990	Present	Hy-Vee, Inc.	Pat Hensley	402-350-2640
1988	1990	MBC Foods	Rick Baker	N/A

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
Scott Schlatter	2005	Lincoln, NE	Speeding/Seatbelt	RECEIVED
				APR 10 2013
				NEBRASKA LIQUOR CONTROL COMMISSION

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(s):

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

