CITY OF LINCOLN NEBRASKA

LINCOLN POLICE DEPARTMENT
575 South 10th Street Lincoln, NE 68508
402-441-7204 fax: 402-441-8492 lincoln.ne.gov

February 11, 2015

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 Holmes Golf, Inc., DBA Holmes Golf Course, 3701 S 70th Street, requesting a class C-111533 liquor license. Scott Weihe, president of Holmes Golf, Inc., has contracted with the City of Lincoln as the Golf Professional for Holmes Golf Course.

This license will cover the entire 18-hole golf course, including the driving range and club house, for on and off-sale of beer, wine and distilled spirits.

Scott Weihe has applied to be the manager of the liquor license. Mr. Weihe has not yet completed the required management training.

Scott Weihe's criminal history is as follows:

DRIVING UNDER THE INFLUENCE, 1ST OFFENSE (Lancaster Co/LPD)
Disposition: 10-23-1992, Found Guilty, 1 Year Probation

FAIL TO APPEAR ON CITATION (Lancaster Co/LPD)
Disposition: 8-2-88, Found Guilty, Fined $35

CITED FOR: DWI/.10%, 1ST OFFENSE (Lancaster Co/LPD)
CHARGED: RECKLESS DRIVING
Disposition: 6-6-1986, Found Guilty, Fined $100

DWI/.10%, 1ST OFFENSE (Lancaster Co/LPD)
Disposition: 3-8-1984, Found Guilty, Fined $200, 7 Days Jail

Scott Weihe's driver's history is as follows:

IMPROPER REGISTRATION (Lancaster Co/LPD)
Disposition: 10-17-2014, Found Guilty, Fined $25

A nationally accredited law enforcement agency

NO SEAT BELT (Lancaster Co/LPD)
Disposition: 10-17-2014, Found Guilty, Fined $25

OPERATE MOTOR VEHICLE WITHOUT OPERATORS LICENSE (Lancaster Co/LPD)
Disposition: 5-16-2014, Found Guilty, Fined $75

IMPROPER REGISTRATION (Lancaster Co/LPD)
Disposition: 1-9-2001, Found Guilty, Fined $25

IMPROPER REGISTRATION (Lancaster Co/LPD)
Disposition: 1-29-1996, Found Guilty, Fined $25

Mr. Weihe has had nineteen civil judgments filed against him, from 1998 to 2014. Eighteen of them have been either satisfied or disposed of. As of November 25, 2014, Mr. Weihe has a pending default judgment against him through the Lancaster County Court in the amount of $2,815.13.

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

APPLICATION FOR LIQUOR LICENSE
CHECKLIST - RETAIL

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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NEBRASKA LIQUOR CONTROL COMMISSION

TOP 533

Hot List: YES / NO	New/Replacing # 096737
Class Type C	111533 Initial mm

Applicant name Holmes Golf Incorporated

Trade name Holmes Golf Course

Previous trade name

Contact email address Sweihe6@gmail.com

Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. If your operation depends on receiving a liquor license, the Nebraska Liquor Control Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. You may want to check with the city/village or county clerk, where you are making application, to see if any additional requirements must be met before submitting application to the state.

RECEIPT

DATE 1/30/2015 No. 168279
FROM Holmes Golf Inc.
FOR New Appl.
☐ CASH
☑ CHECK # 100
☐ MONEY ORDER #
$ 400
Received by Mary Monson

Office use only
PAYMENT TYPE CK # 100
AMOUNT: $400
Ref 168279 Received: mm

1500001282

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NEBRASKA LIQUOR
CONTROL COMMISSION

REQUIRED ATTACHMENTS

Each item must be checked and included with application or marked N/A (not applicable)

1. ✓ Fingerprints are required for each person as defined in new application guide, found on our website under "Licensing Tab" in "Guidelines/Brochures". See Form 147 for further information, this form MUST be included with your application.

2. ✓ Enclose application fee of $400, check made payable to the Nebraska Liquor Control Commission.

3. ✓ Enclose the appropriate application forms;
   - Individual License (requires insert form 1)
   - Partnership License (requires insert form 2)
   - Corporate License (requires insert form 3a & 3c) ✓
   - Limited Liability Company (LLC) (requires form 3b & 3c)

4. ✓ If building is being leased send a copy of signed lease. Be sure the lease reads in the name of the individual(s), corporation or Limited Liability Company making application. Lease term must run through the license year being applied for. City Contract

5. NA If building is owned or being purchased send a copy of the deed or purchase agreement in the name of in name of applicant.

6. ✓ If buying the business of a current liquor license holder:
   a. Provide a copy of the purchase agreement from the seller (must read applicants name).
   b. Provide a copy of alcohol inventory being purchased (must include brand names and container size)
   c. Enclose a list of the assets being purchased (furniture, fixtures and equipment).

7. ✓ If requesting to operate on current liquor license; enclose Temporary Operating Permit (TOP)(form 125).

8. ✓ Enclose a list of any inventory or property owned by other parties that are on the premise.

9. ✓ For citizenship enclose U.S. birth certificate; U.S. passport or naturalization paper
   a. For residency enclose proof of registered voter in Nebraska
   b. See guideline for further assistance http://www.lcc.nebraska.gov/brochures.html

10. ✓ Corporation or Limited Liability Company must enclose a copy of articles of incorporation; as filed with the Secretary of State's Office. This document must show barcode.

11. ✓ Submit a copy of your business plan.

I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

Signature

1-28-15

Date

APPLICATION FOR LIQUOR LICENSE
RETAIL

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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CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES
CHECK DESIRED CLASS

RETAIL LICENSE(S) Application Fee $400 (non refundable)

- ☐ A BEER, ON SALE ONLY
- ☐ B BEER, OFF SALE ONLY
- ☒ C BEER, WINE, DISTILLED SPIRTS, ON AND OFF SALE
- ☐ D BEER, WINE, DISTILLED SPIRITS, OFF SALE ONLY
- ☐ I BEER, WINE, DISTILLED SPIRITS, ON SALE ONLY
- ☐ AB BEER, ON AND OFF SALE
- ☐ AD BEER ON SALE ONLY, BEER, WINE, DISTILLED SPIRITS OFF SALE
- ☐ IB BEER, WINE, DISTILLED SPIRITS ON SALE, BEER OFF SALE ONLY
- ☐ ID BEER, WINE, DISTILLED SPIRITS ON AND OFF SALE

☐ Class K Catering license (requires catering application form 106) $100.00

Additional fees will be assessed at city/village or county level when license is issued

---

Class C license term runs from November 1 – October 31
All other licenses run from May 1 – April 30
Catering license (K) expires same as underlying retail license

CHECK TYPE OF LICENSE FOR WHICH YOU ARE APPLYING

- ☐ Individual License (requires insert form 1)
- ☐ Partnership License (requires insert form 2)
- ☒ Corporate License (requires insert form 3a & 3c)
- ☐ Limited Liability Company (LLC) (requires form 3b & 3c)

NAME OF ATTORNEY OR FIRM ASSISTING WITH APPLICATION (if applicable)
Commission will call this person with any questions we may have on this application

Name_____ Phone number:_____

Firm Name_____

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NEBRASKA LIQUOR
CONTROL COMMISSION

PREMISE INFORMATION

Trade Name (doing business as) Holmes Golf Course

Street Address #1 3701 South 70th

Street Address #2

City Lincoln County Lancaster 02 Zip Code 68506

Premise Telephone number 402-441-8960

Business e-mail address holmesgolfpro@yahoo.com

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

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

Name Scott Weihe

Street Address #1 3701 South 70th

Street Address #2

City Lincoln State NE Zip Code 68506

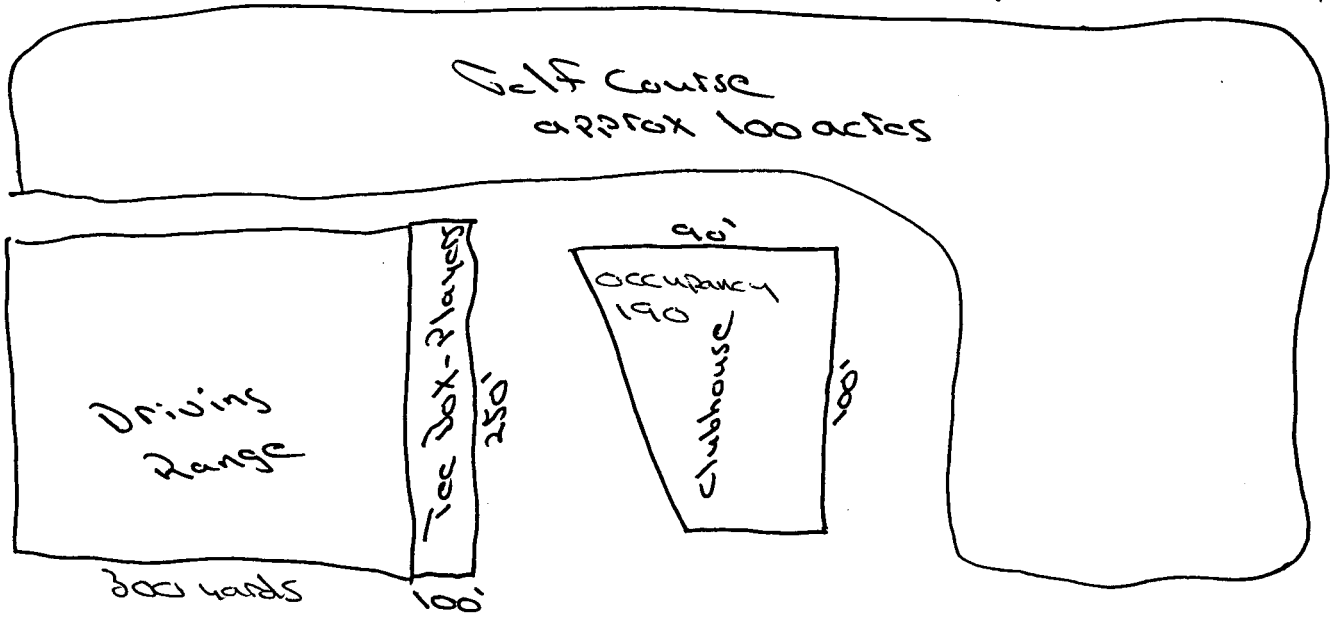
DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED
READ CAREFULLY

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

Building: length 90 x width 100 in feet
Is there a basement? Yes ___ No X If yes, length ___ x width ___ in feet
Is there an outdoor area? Yes X No ___ If yes, length ___ x width ___ in feet
Entire 18 hole golf course including driving range, Clubhouse 100'x90'

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



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NEBRASKA LIQUOR CONTROL COMMISSION

APPLICANT INFORMATION

1. **READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY** §53-125(5)

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. Include traffic violations. Commission must be notified of any arrests and/or convictions that may occur after the date of signing this application.

☒ YES ☐ NO

If yes, please explain below or attach a separate page

Under Review

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Scott Weihe		Lincoln, NE	See Attachment	
Heather Weihe		Lincoln, NE	See Attachment	

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

☒ YES ☐ NO

If yes, give name of business and liquor license number TLR Inc, DBA Holmes Golf Course 096737

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 TLR Incorporated,

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

☒ YES ☐ NO

If yes:
a) Attach temporary operating permit (TOP) (form 125)
b) TOP will only be accepted at a location that currently holds a valid liquor license.

CITY OF LINCOLN NEBRASKA

LINCOLN POLICE DEPARTMENT
575 South 10th Street Lincoln, NE 68508
402-441-7204 fax: 402-441-8492 lincoln.ne.gov

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PUBLIC RECORD CRIMINAL HISTORY LISTING

PAGE: 1 FOR: SCOTT EVAN WEIHE
Printed 01-28-2015

This is a list of criminal citations and arrests by the Lincoln Police Department for this person since 1980.
- Arrests or citations by any other law enforcement agency are not included.
- Arrests where no charges were filed are only included during the most recent year.
- Charges resulting in diversion are only included during the most recent 2 years.
- Charges that were dismissed are only included during the most recent 3 years.
- Any arrest over 1 year old, that has no disposition, is not included.
- Minor traffic infractions and cases when the subject was under the age of 16 or cases transferred to juvenile court are not included.

If the phrase "***END OF LISTING***" does not appear at the bottom of this report, then this list is not complete.

CODES FOR CRIMINAL HISTORY
M=Misdemeanor F=Felony I= Infraction O=Other

Cited on 01-10-1992 for (M)DRIVING UNDER INFLUENCE, FIRST OFFENSE Case 92-002793
Disposed 10-23-1992 as (M)DRIVING UNDER INFLUENCE, FIRST OFFENSE Cit# LA281106
FOUND GUILTY 1 YEARS PROBATION
CONVICTION SET ASIDE

Cited on 06-20-1988 for (M)FAIL TO APPEAR ON CITATION Case
Disposed 08-02-1988 as (M)FAIL TO APPEAR ON CITATION Cit# LA114310
FOUND GUILTY Fined $35.00

Cited on 03-27-1986 for (M)DWI/.10% 1ST OFFENSE Case 86-22002
Disposed 06-06-1986 as (M)RECKLESS DRIVING (B) Cit# LA028168
FOUND GUILTY Fined $100.00

Cited on 11-15-1983 for (M)1ST OFFENSE DWI ALCOHOL LIQUOR DRUGS (M-W Case 83-90927
Disposed 03-08-1984 as (M).10% 1ST OFFENSE Cit# F030389
FOUND GUILTY Fined $200.00 & Sentenced 7 DAYS

* After the above incidents with the help of the officer involved - I haven't consumed any alcohol since 1992.

CITY OF LINCOLN NEBRASKA

LINCOLN POLICE DEPARTMENT
575 South 10th Street Lincoln, NE 68508
402-441-7284 fax: 402-441-8492 lincoln.ne.gov

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PUBLIC RECORD CRIMINAL HISTORY LISTING

PAGE: 2 FOR: SCOTT EVAN WEIHE
Printed 01-28-2015

*** END OF LISTING ***

4-2014 Credentials violation - Improper Registration
Fine paid

Approx 2001 Expired Drivers License
Fine pd - renewed next day

Approx 1995 Disturb the Peace
Dismissed

Approx 2000? Speeding Ticket
Fine paid

* checked every source available so we didn't omit anything, know I was at fault and ticketed for motor vehicle accident where I didn't yield right of way during snow storm in approx 1979 and believe I also received a speeding ticket in the 1980's but can not find any record of it.

CITY OF LINCOLN NEBRASKA

LINCOLN POLICE DEPARTMENT
575 South 10th Street Lincoln, NE 68508
402-441-7204 fax: 402-441-8492 lincoln.ne.gov

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NEBRASKA LIQUOR
CONTROL COMMISSION

PUBLIC RECORD CRIMINAL HISTORY LISTING

PAGE: 1 FOR: HEATHER D WEIHE
Printed 01-28-2015

This is a list of criminal citations and arrests by the Lincoln Police Department for this person since 1980.
- Arrests or citations by any other law enforcement agency are not included.
- Arrests where no charges were filed are only included during the most recent year.
- Charges resulting in diversion are only included during the most recent 2 years.
- Charges that were dismissed are only included during the most recent 3 years.
- Any arrest over 1 year old, that has no disposition, is not included.
- Minor traffic infractions and cases when the subject was under the age of 16 or cases transferred to juvenile court are not included.

THE LINCOLN POLICE DEPARTMENT SHOWS NO ARRESTS THAT FALL INTO THE ABOVE GUIDELINES FOR THIS PERSON.

*** END OF LISTING ***

Approx 2011 Speeding Ticket
Fine Paid

Approx 2007 Speeding Ticket
Fine Paid

Approx 2000 At fault in Motor Vehicle Accident
not positive what if any citation
was involved

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NEBRASKA LIQUOR
CONTROL COMMISSION

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)_____

6. 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)

No silent partners

7. Will any of the furniture, fixtures and equipment to be used in this business be owned by others?

☒ YES ☐ NO

If yes, list such item(s) and the owner. Entire contents, tables, chairs, equipment
City of Lincoln Parks & Recreation

8. Is premise to be licensed within 150 feet of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, and children, or within 300 feet of a college or university campus?

☐ YES ☒ NO

If yes, provide name and address of such institution and where it is located in relation to the premises (Neb. Rev. Stat. 53-177)(1)

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
a) List the individual(s) who will be authorized to write checks and/or withdrawals on accounts at this institution.

Cornhusker Bank, Scott Weihe

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.

None

12. List the alcohol related 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) as listed on form 3c
d) Limited Liability Company, manager only (no spouse) as listed on form 3c

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NLCC certified training program completed:

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Scott Weihe	4-3-14	Nebraska Responsible Bev Serv Training
Scott Weihe	4-3-14	Lincoln Servsafe (Seller Training

For list of NLCC certified training programs see: www.lcc.ne.gov/traininginfo.html

Experience:

Applicant Name/Job Title	Date of Employment:	Name & Location of Business
Scott Weihe - Head Pro	9-1-13 Thru Present	Holmes GC, Lincoln Nebraska
Scott Weihe - Assistant Pro	4-1-01 Thru 2-1-07	Pioneers GC, Lincoln Nebraska

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.**

- [x] Lease: expiration date 12-31-2015
- [ ] Deed
- [ ] Purchase Agreement

14. When do you intend to open for business? 2-1-15

15. What will be the main nature of business? Professional Golf operations

16. What are the anticipated hours of operation? 7:00 am - 10:00 pm (seasonal)

17. List the principal residence(s) for the past 10 years for all persons required to sign, including spouses.

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE					
APPLICANT: CITY & STATE	YEAR FROM	TO	SPOUSE: CITY & STATE	YEAR FROM	TO
Lincoln, Nebraska	1962	2015	Lincoln, Nebraska	1977	2015

If necessary attach a separate sheet.

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background 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). See guideline for required signatures

Signature	Signature
Scott Weihe Print Name	Heather D. Weihe Print Name
Signature of Spouse	Signature of Spouse
Print Name	Print Name

ACKNOWLEDGEMENT

State of Nebraska
County of Lancaster

The foregoing instrument was acknowledged before me this

Jan. 31st. 2015 (date) by Heather D. Weihe & Scott E. Weihe (name of person(s) acknowledged (individual(s) signing))

Notary Public Signature

GENERAL NOTARY - State of Nebraska
CRYSTAL J. MEREDITH
My Comm. Exp. Sept. 12, 2016

RECEIVED
FEB 02 2015
NEBRASKA LIQUOR CONTROL COMMISSION

In compliance with the ADA, this application 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

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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. See Form 147 for further information, this form MUST be included with your application.**
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 (must show electronic stamp or barcode receipt by Secretary of States Office)

Name of Registered Agent: Scott Weihe

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

Holmes Golf Incorporated

Corporation Address: 3205 Curtis Dr.

City: Lincoln State: NE Zip Code: 68506

Corporation Phone Number: 402-730-4170 Fax Number

Total Number of Corporation Shares Issued: 100

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

Last Name: Weihe First Name: Scott MI: E

Home Address: 3205 Curtis Dr City: Lincoln

State: NE Zip Code: 68506 Home Phone Number: 402-730-4170

Signature of President/CEO

ACKNOWLEDGEMENT

State of Nebraska
County of Lancaster **The foregoing instrument was acknowledged before me this**

Jan. 28, 2015 **by**
Date **name of person acknowledge**

Karen R Layton

Affix Seal

GENERAL NOTARY - State of Nebraska
KAREN R LAYTON
My Comm. Exp. August 20, 2018

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

Last Name: Weihe First Name: Scott MI: E

Social Security Number: Date of Birth:

Title: President Number of Shares 100

Spouse Full Name (indicate N/A if single): Heather D. Weihe

Spouse Social Security Number: Date of Birth:

Last Name: Weihe First Name: Phyllis MI:

Social Security Number: Date of Birth:

Title: Secretary Number of Shares 0

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

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:

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NEBRASKA LIQUOR
CONTROL COMMISSION

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

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:_____

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CONTROL COMMISSION

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:_____

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:_____

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NEBRASKA LIQUOR
CONTROL COMMISSION

Is the applying corporation controlled by another corporation/company?

☐YES ☒NO

If yes, provide the following:
1) Name of corporation _____
2) Supply an organizational chart of the controlling corporation named above
3) Controlling corporation **MUST** be registered with the Nebraska Secretary of State, copy of articles must be submitted with application §53-126

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

Starting Date: Jan 1 Ending Date: Dec 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.

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

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NEBRASKA LIQUOR
CONTROL COMMISSION

Manager must:

- Complete all sections of the application. Be sure it is signed by a **corporate officer,** corporate officer must be an individual on file with the Liquor Control Commission
- Fingerprints are required. See Form 147 for further information, this form MUST be included with your application.
- Provide a copy of one of the following: US birth certificate, naturalization papers or current US passport (even if you have provided this before)
- Be a registered voter in the State of Nebraska, include a copy of voter card with application

Spouse who **will not** participate in the business, spouse must:

- Complete the Spousal Affidavit of Non Participation Insert (must be notarized). The non-participating spouse completes the top half; the manager completes the bottom half. **Be sure to complete both halves of this form.**
- Need not answer question #1 of the application

Spouse who **will** participate in the business, the spouse must:

- Sign the application
- Fingerprints are required. See Form 147 for further information, this form MUST be included with your application.
- Provide a copy of one of the following: birth certificate, naturalization papers or current US passport (even if you have provided this before)
- Be a registered voter in the state of Nebraska, include a copy of voter card with application
- Spousal Affidavit of Non Participation Insert **not** required

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

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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. See Form 147 for further information, this form MUST be included with your application.**
- ✓ **21 years of age or older**

Corporation/LLC information

Name of Corporation/LLC: Holmes Golf Incorporated

Premise information

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

Premise Trade Name/DBA: Holmes Golf Course

Premise Street Address: 3701 South 70th

City: Lincoln County: Lancaster Zip Code: 68506

Premise Phone Number: 402-441-8960

Email address: Sweihe62@gmail.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

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

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM	TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2013	2015	TLR Incorporated	Tim Rowland	402-441-8966
2007	2013	City of Lincoln	Dale Hardy	402-441-7860

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.

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☒ 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 Weihe -	See Attachment			

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

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Manager's information must be completed below. PLEASE PRINT CLEARLY

Last Name: Weihe First Name: Scott MI: E

Home Address (include PO Box if applicable): 3205 Curtis Dr

City: Lincoln County: Lancaster Zip Code: 68506

Home Phone Number: 402-730-4176 Business Phone Number: 402-441-8960

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

Date Of Birth: _____ Place Of Birth: Lincoln, Nebraska

Email address: sweihe6@pga.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: Weihe First Name: Heather MI: D

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

Date Of Birth: _____ Place Of Birth: Lincoln Nebraska

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	1962	2015	Lincoln, NE	1977	2015

4. List the alcohol related training and/or experience (when and where) of the person making application.

*NLCC Training Certificate Issued: _____ Name on Certificate: Scott Weihe

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Scott Weihe	04/2014	Responsible Bev Serv Training
Scott Weihe	04/2014	Lincoln Server/Seller Training

*For list of NLCC Certified Training Programs see www.lcc.ne.gov/traininginfo.html

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
Scott Weihe - Head Pro	9/13 Thru Present	Holmes GC, Lincoln, NE
Scott Weihe - Assistant PTO	4/01 Thru 3/07	Dionnots GC, Lincoln, NE

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5. Have you enclosed Form 147 regarding fingerprints?

☐YES ☒NO Have cards from Lincoln Police Dept.

PERSONAL OATH AND CONSENT OF INVESTIGATION

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.

Signature of Manager Applicant

Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska
County of Lancaster The foregoing instrument was acknowledged before me this

Jan. 31st 2015 by Heather D. Weihe & Scott E. Weihe
date name of person acknowledged

Notary Public signature

Affix Seal

GENERAL NOTARY - State of Nebraska
CRYSTAL J. MEREDITH
My Comm. Exp. Sept. 12, 2016

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

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FEB 02 2015

NEBRASKA LIQUOR
CONTROL COMMISSION

SUBMISSSION OF FINGERPRINTS / PAYMENT OF FEES TO NSP-CID

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
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Class:	License #:

Applicant Name: Holmes Golf Incorporated
(Corporation, LLC, Partnership or Individual)

Trade Name: Holmes Golf Course
(Doing Business As)

(402)441-8960 — Phone Number

sweihe6pga.com — Contact E-mail Address

DIRECTIONS FOR SUBMITTING FINGERPRINTS AND FEE PAYMENTS:

- ☐ See New Application Requirement Guide for listing of Fingerprint Requirements, found on our website under "Licensing" tab in "Brochures".
- ☒ Fingerprints taken at NSP locations will be forwarded to NSP – CID; Spouse
  Applicant(s) will not have cards to include with license application.
- ☒ Fingerprints taken at local law enforcement offices will be released to the applicants; me
  Fingerprint cards should be submitted with the application.
- ☐ Fee payment of $~~38~~ per person must be made directly to the NSP; 28.75
  You may submit the payment through the NSP PayPort online system at www.ne.gov/go/nsp or checks made payable to NSP should be mailed directly to the following address:
  - **The Nebraska State Patrol – CID Division**
  - **3800 NW 12th Street**
  - **Lincoln, NE 68521**
- ☐ DO NOT send fee payments to the NLCC, fees MUST be paid directly to NSP;
  Include a list of names covered by your payment to insure proper application of payment.
- ☐ This completed form MUST be included with your Liquor License Application and/or Manager Application or Changes to: Corporate Officers or Stockholders, LLC Members, Partners or Addition of Spouse where new fingerprint cards are required (see New Application Requirement Guide).
- ☐ Fingerprints are not required for spouses that have no involvement with business - Spousal Affidavit of Non Participation (Form 116) is required in lieu of fingerprints.

Please complete information on the following pages for EACH person fingerprinted.

Barcode

Making payment today

Name (Print): Scott Weihe Title: President

Name (Print): Title: Spouse

Location: Lincoln Police Dept. Date 1-27-15
Where fingerprints were taken

Paid cash - cards attached

PayPort Receipt #: $ Check Name & No.: $

Name (Print): Title:

Name (Print): Heather Weihe Title: Spouse

Location: Nebraska State Patrol Date
Where fingerprints were taken

attached

PayPort Receipt #: $ Check Name & No.: $

Name (Print): Title:

Name (Print): Title: Spouse

Location: Date
Where fingerprints were taken

PayPort Receipt #: $ Check Name & No.: $

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Name (Print): Title:

Name (Print): Title: Spouse

Location: Date
Where fingerprints were taken

PayPort Receipt #: $ Check Name & No.: $

Name (Print): _____ Title: _____

Name (Print): _____ Title: Spouse

Location: _____ Date _____
Where fingerprints were taken

PayPort Receipt #: _____ $ _____ Check Name & No.: _____ $ _____

Name (Print): _____ Title: _____

Name (Print): _____ Title: Spouse

Location: _____ Date _____
Where fingerprints were taken

PayPort Receipt #: _____ $ _____ Check Name & No.: _____ $ _____

Name (Print): _____ Title: _____

Name (Print): _____ Title: Spouse

Location: _____ Date _____
Where fingerprints were taken

PayPort Receipt #: _____ $ _____ Check Name & No.: _____ $ _____

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I hereby certify that fingerprint cards and/or fees of $38 per person have been submitted directly to the Nebraska State Patrol – CID office. The undersigned certifies on behalf of the Corporation, LLC, Partnership or Licensee that it is understood that a misrepresentation of fact is cause for rejection of this application or suspension, cancellation or revocation of any license issued.

Click HERE for information regarding criminal background checks.

Name (Print): Scott Weihe Title: President

Signature: _____ Date: 1-28-15

APPLICATION FOR TEMPORARY OPERATING PERMIT (TOP)

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
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- [x] **Application for a temporary operation permit (TOP) must be included with the application for liquor license. TOP will not be considered without the completed application for a liquor license.**
- [x] **Enclose documentation showing sale of business; document may be in the form of a purchase agreement/contract, management agreement or promissory note. Sale of business document must include the following: name of business being sold, purchase date or closing date within 2-3 weeks of requesting TOP and must be signed by the seller and buyer.**
- [ ] **TOP's are valid for 90 days from date of issuance and cannot be extended past the expiration date (no exceptions).**
- [ ] **Seller's liquor license will terminate upon issuance of the TOP.**
- [ ] **If the seller's liquor license is up for renewal during the TOP it will not be necessary for the seller to renew.**

NAME OF CURRENT LICENSEE (SELLER): TLR Incorporated

SELLER'S LICENSE #: 096737

On (date) _____ seller and buyer entered into a contract for sale of the

business known as (TRADE NAME): Holmes Golf Course

Buyer seeks to obtain a temporary operating permit (TOP) to allow buyer to operate the business under the same terms and conditions of the current licensee; subject to approval by the Nebraska Liquor Control Commission (NLCC) for a period not to exceed 90 days (no exceptions).

Seller hereby declares that they are current on all accounts with all Nebraska licensed wholesalers under section §53-123.02. Any seller who provides false information regarding such accounts is guilty of a Class IV misdemeanor for each offense.

BARCODE
for office use only

Signature of **SELLER**

TIM ROWLAND
Print Name

State of Nebraska, County of Lancaster
The foregoing instrument was acknowledged before me
this 30th day of January 2015 (date)
by Tim Rowland
Name(s) of Person(s) Acknowledged [individual(s) signing document]

Jessica Chrisp
Notary Public signature

GENERAL NOTARY - State of Nebraska
JESSICA CHRISP
My Comm. Exp. March 25, 2018

Signature of **BUYER**

Scott Weihe
Print Name

State of Nebraska, County of Lancaster
The foregoing instrument was acknowledged before me
this Jan 28, 2015 (date)
by
Name(s) of Person(s) Acknowledged [individual(s) signing document]

Karen R Layt
Notary Public signature

GENERAL NOTARY - State of Nebraska
KAREN R LAYTON
My Comm. Exp. August 20, 2018

ADMINISTRATIVE REVIEW – Office use only

Date: 2/4/2014 Rep: mm – Lic. Class: C – Lic. # 111533

☑ Approved mm ☐ Denied

Reason for Denial:

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