

#349

**REPORT TO CITY CLERK  
SPECIAL DESIGNATED LICENSE APPLICATION**

- Police
- City Attorney
- Bureau of Fire Prevention
- Health Department

DATE: 10/24/12  
Return by: 11/2/12

CATERER:

NON - CATERER:

**APPLICANT NAME & ADDRESS: NORTH AMERICAN MARTYR'S CATHOLIC CHURCH, 1101  
ISAAC DRIVE**

**DATE OF EVENT/S: NOVEMBER 18, 2012 - 12P - 4 PM FUNDRAISER  
ALTERNATE DATE(S): NONE**

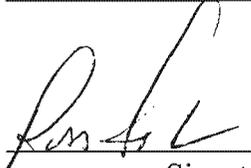
**RECOMMENDATION OF APPROVAL OR DENIAL**

 APPROVED

CONDITIONS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ DENIED

REASON(S) FOR \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 #343  
Signature

(If needed, use back for additional space)

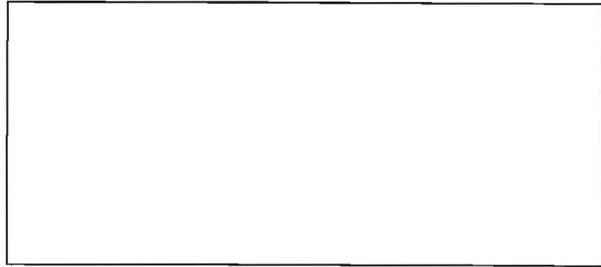
**RECEIVED**  
OCT 25 2012  
TECHNICAL  
INVESTIGATIONS UNIT

**PUBLIC HEARING BEFORE COUNCIL: NOVEMBER 5, 2012**

(SDLRPT.JER)

**APPLICATION FOR SPECIAL DESIGNATED LICENSE NON PROFIT APPLICANTS**

11/18



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/

**BEFORE SUBMITTING APPLICATION TO THE LIQUOR CONTROL COMMISSION**

- Include approval from the City, Village or County Clerk where the event is to be held
- A license fee \$40 (payable to Nebraska Liquor Control Commission) for each day/event to be licensed (i.e. if you have two separate areas at one event they both need to be licensed)
- Application MUST be received at the Liquor Control Commission Office no later than 10 working days prior to event (excluding weekends, Federal and State observed holidays)
- Letter from IRS declaring your organization exempt from payment of federal income taxes or copy of federal tax return, as filed with the IRS, as well as affidavit signed by an officer of the organization declaring that the copy of the tax return is true and correct copy as filed with the IRS

**COMPLETE ALL QUESTIONS**

1. Type of alcohol to be served and/or consumed

- Beer
- Wine
- Distilled Spirits

2. Status of applicant (check one)

- Municipal
- Political
- Fine Arts
- Fraternal
- Religious
- Charitable
- Public Service

3. Licensee name (last, first, middle), Corporate name, Limited Liability Company (LLC)

NAME: North American Martyrs Catholic Church

ADDRESS: 1101 Isaac Drive COUNTY Lancaster  
Lincoln NE 68521

FILED  
CITY CLERK'S OFFICE  
OCT 22 AM 10 45  
CITY OF LINCOLN  
NEBRASKA

\$40# 15511  
\$80# 15512

4. Location where event will be held; name, address, city, county, zip code

ADDRESS: 1101 Isaac Dr COUNTY Lancaster

- a. Is this location within the city/village limits?  YES  NO
- b. Is this location within the 150' of church, school, hospital or home aged/indigent or for veterans their wives?  YES  NO
- c. Is this location within 300' of any university or college campus?  YES  NO

5. Date(s) and Time(s) of event (no more than six (6) consecutive days on one application)

Date	Date	Date	Date	Date	Date
Nov 18 <sup>th</sup>					
Hours From	Hours From	Hours From	Hours From	Hours From	Hours From
12 To 4	To	To	To	To	To
PM	PM				

- a. Alternate date: \_\_\_\_\_
- b. Alternate location: \_\_\_\_\_  
(alternate date or location must be approved by local and law enforcement)

6. Indicate type of activity to be carried on during event  
 Dance  Reception  Fund Raiser  Beer Garden  Sampling/Tasting  Other

7. Description of area to be licensed  
 Inside building, dimensions of area to be covered INFEET \_\_\_\_\_ x \_\_\_\_\_  
Name of building \_\_\_\_\_ (not square feet or acres)

Outdoor area dimensions of area to be covered INFEET 40 x 10  
(not square feet or acres)

If outdoor area, how will premises be enclosed  
 fence, type of fence  
 tent  
 other, explain \_\_\_\_\_

\*If both inside and outdoor area to be licensed include **simple sketch**

8. Indicate the steps that will be taken to prevent underage persons from obtaining alcohol beverages.  
Entrance into tent - will ~~be~~ check id's & wrist bands will be given.

9. Will premises to be covered by license comply with all Nebraska sanitation laws?  
 YES  NO  
a. Are there separate toilets for both men and women?  YES  NO

10. Will there be any games of chance operating during the event?  YES  NO  
If so, describe activity Raffle

**NOTE:** Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. All other forms of gambling are prohibited by State Law: There are no exceptions for Non Profit Organizations or any events raising funds for a charity. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

11. Any other information or requests for exemptions:

12. Name and **telephone number/cell phone number** of immediate **supervisor**. This person will be at the location of the event when it occurs, able to answer any questions from Commission and/or law enforcement before and during the event, and who will be responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to.

Patrick Hagedorn Phone: Before 402-202-9288 During 402-202-9288  
Print name of Event Supervisor

Patrick Hagedorn  
Signature of Event Supervisor

Consent of Authorized Representative/Applicant

13. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.

sign here Fr Brian Connor Pastor 10/18/12  
Authorized Representative/Applicant Title Date

Fr. Brian Connor  
Print Name

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.

**THE FOLLOWING SUPPLEMENTAL FORM IS REQUIRED FOR ALL OUTDOOR EVENTS**

**SPECIAL DESIGNATED LICENSE APPLICATION  
SUPPLEMENTAL FORM**

The Special Designated License process is not intended to be used as a means to expand the existing licensed premise.

Name of Event: North American Martyrs Spaghetti Dinner & Parish Bazaar

Applicant and Sponsoring Organization or Person (if applicable): North American Martyrs Catholic Church

Date of Event: November 18, 2012 Time of Event: 9 AM - 3:00 pm

Has the applicant applied for and received liquor liability insurance?  Yes  No

Number of persons expected to attend: \_\_\_\_\_ Number of persons under 21 expected: \_\_\_\_\_ Is the event open to the public?  Yes  No

How will you ensure that minors will not be served or consume beverages containing alcohol:

We will have people stationed at both entries ~~car to card~~ every individual, they will receive a wristband, they can only purchase a ticket for beer with a wristband on.

Will food be served?  Yes  No If yes, please list food to be served: spaghetti & meatballs, breadsticks, lettuce salad & a variety of desserts

Will non-alcoholic beverages be served:  Yes  No If yes, please list non-alcoholic beverages to be served: water, tea & coffee - indoors only

Please identify the beverages containing alcohol that will be served: \_\_\_\_\_ Wine  Beer \_\_\_\_\_ Distilled Spirits

Will this be a cash or complimentary bar?  Cash  Complimentary

Who will serve the beverages containing alcohol? Bob Hanks

Have the designated servers received responsible beverage service training?  Yes  No

Will there be a charge for admission? \_\_\_\_\_ Yes  No

In the last 12 months, have you received notice of a liquor law violation that occurred during an event at which you were the special designated licensee? \_\_\_\_\_ Yes  No If so, explain: \_\_\_\_\_

10-19-12  
Applicant's Signature

R Brian Lewis  
Date