



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

December 11, 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 Bodega's Alley, 1418 'O' Street requesting a class C liquor license.

This location currently holds a liquor license but has been sold.

The new owner Bryan McFarland currently holds liquor licenses in the City of Lincoln.

Ryan Detlefsen will be the manager of the liquor license and is the current manager of Cliff's Lounge liquor license.

The required training was completed on February 10<sup>th</sup> 2011.

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.

A handwritten signature in black ink that reads "Jim Peschong".

JIM PESCHONG, Chief of Police



A nationally accredited law enforcement agency



Trade Name (doing business as) Bodega's Alley

Street Address #1 1418 O Street

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

City Lincoln County Lancaster #2 Zip Code 68508

Premise Telephone number 402-477-9550 E-mail bam2468@gmail.com

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

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

Name Cereus Snowbirds LLC

Street Address #1 762 W Lakeshore Court

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

City Lincoln State NE Zip Code 68528

**DIAGRAM AND DIMENSIONS OF THE STRUCTURE TO BE LICENSED**

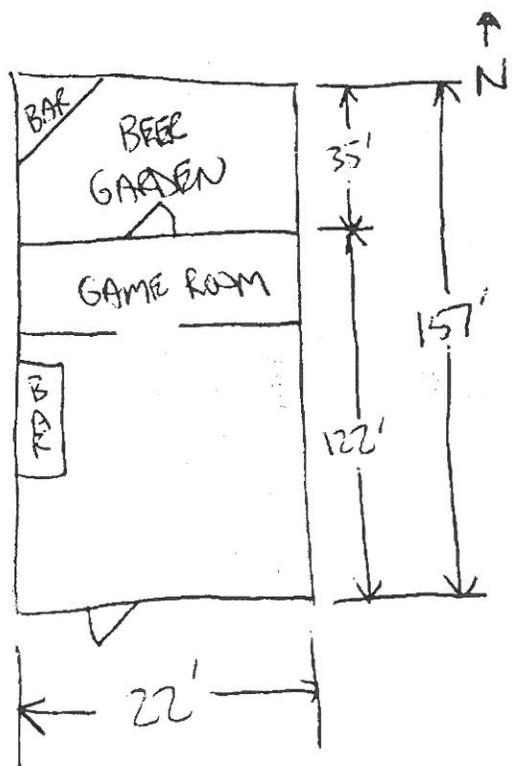
In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, outdoor area, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (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 122 feet  
Width 22 feet

Is there a basement? Yes  No  **PLUS ENCLOSED OUTDOOR AREA 35' X 23'**  
PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPARATE SHEET

Main floor of two story building approx 22 x 122 including basement area and outdoor area approx 22 x 35



**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
Bryan A McFarland	See Attached			

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

YES       NO

If yes, give name of business and liquor license number Bodega's Alley #054306

- 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 \_\_\_\_\_

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) Seller carryback from previous owner.

**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](http://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**

**Corporation/LLC information**

Name of Corporation/LLC: Cereus Snowbirds, LLC

**Premise information**

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

Premise Trade Name/DBA: Bodega's Alley

Premise Street Address: 1418 O Street

City: Lincoln County: Lancaster Zip Code: 68508

Premise Phone Number: 402-477-9550

Email address: rcdetco@msn.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](http://www.lcc.ne.gov/license_search/licsearch.cgi)

**SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER**

(Faxed signatures are acceptable)

*signed, voter reg, passport, prints*

Manager's information must be completed below PLEASE PRINT CLEARLY

Last Name: Detlefsen First Name: Ryan MI: C

Home Address (include PO Box if applicable): 811 South 38th St Court

City: Lincoln County: Lancaster Zip Code: 68510

Home Phone Number: 402-730-4788 Business Phone Number: 402-477-9550

Social Security Number: \_\_\_\_\_ Drivers License Number & State: NE

Date Of Birth: \_\_\_\_\_ Place Of Birth: North Platte, NE

Email address: rcdetco@msn.com

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

YES

NO

*Not Married*

Spouse's information

Spouses Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License Number & State: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Place Of Birth: \_\_\_\_\_

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	2013			

**MANAGER'S LAST TWO EMPLOYERS**

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2012	2013	Mo Chara, LLC	Bryan McFarland	402-525-8838
2002	2012	Bugeater Investments, Inc	Anita McFarland	402-525-2811

**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
Ryan Detlefsen	08/1999	North Platte, NE	Minor in Possession of Alcohol	
				Also see attached

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):

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

\*NLCC Training Certificate Issued: 2/10/2011 Name on Certificate: Ryan Detlefsen

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Ryan Detlefsen	2/10/2011	Responsible Hospitality Council Management Training, LPD

\*For list of NLCC Certified Training Programs see [www.lcc.ne.gov/traininginfo.html](http://www.lcc.ne.gov/traininginfo.html)

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
Ryan Detlefsen, General Manager	2002-2013	Cliff's Lounge, 1323 O Street, Lincoln, NE

5. 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





# LINCOLN POLICE DEPARTMENT PUBLIC RECORD CRIMINAL HISTORY

#1  
Corp  
Manager

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 that were sent to 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.

FOR: RYAN C DETLEFSEN , Male, DOB:  
Date of listing: 11-29-2013

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

THE LINCOLN POLICE DEPARTMENT SHOWS NO ARRESTS WITH A FINAL DISPOSITION FOR THIS PERSON.

\*\*\* END OF LISTING \*\*\*

**APPLICATION FOR LIQUOR LICENSE  
LIMITED LIABILITY COMPANY (LLC)  
INSERT - FORM 3b**

Office Use  
**RECEIVED**  
DEC 4 2013  
**NEBRASKA LIQUOR  
CONTROL COMMISSION**

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)

All members including spouse(s), are required to adhere to the following requirements:

- 1) All members spouse(s) must be listed
- 2) Managing/Contact member and all members holding over 25% interest and their spouse(s) (if applicable) must submit fingerprints (2 cards per person)
- 3) Managing/Contact member and all members 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 Organization (Articles must show barcode receipt by Secretary of State office)

Name of Registered Agent: Bryan A. McFarland

Name of Limited Liability Company that will hold license as listed on the Articles of Organization

Cereus Snowbirds, LLC

LLC Address: 762 W Lakeshore

City: Lincoln State: NE Zip Code: 68528

LLC Phone Number: 402-261-8280 LLC Fax Number \_\_\_\_\_

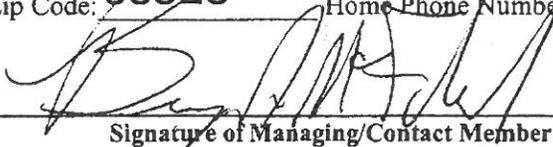
Name of Managing/Contact Member

Name and information of contact member must be listed on following page

Last Name: McFarland First Name: Bryan MI: A

Home Address: 762 Lakeshore Court City: Lincoln

State: NE Zip Code: 68528 Home Phone Number: 402-261-8280



Signature of Managing/Contact Member

**ACKNOWLEDGEMENT**

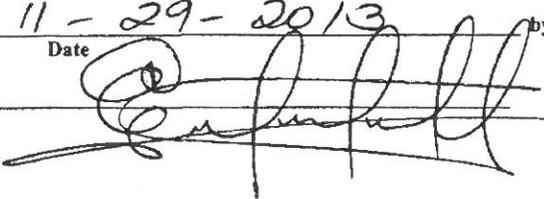
State of Nebraska  
County of Lancaster

The foregoing instrument was acknowledged before me this

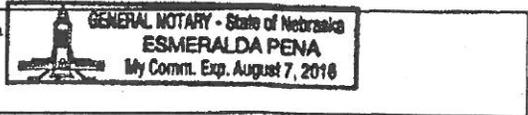
11-29-2013

Date

by Bryan A. McFarland  
name of person acknowledge



Affix Seal



List names of all members and their spouses (even if a spousal affidavit has been submitted)

Last Name: McFarland First Name: Bryan MI: A

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

Spouse Full Name (indicate N/A if single): Anita KH McFarland (legally separated)

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

Percentage of member ownership 100% Holden McFarland

*Signed  
prints on  
file  
4-2-12*  
*Signed  
prints on  
file  
4-5-13*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

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

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

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

Percentage of member ownership \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

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

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

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

Percentage of member ownership \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

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

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

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

Percentage of member ownership \_\_\_\_\_

Crim Hist

#1

12/15/09 1:35 PM

LPD Public Record Criminal History

%APPEND-E-OPENEN, error opening HT\_ROOT:[HTTP\$NOBODY]RECBDLIS; as input -RMS-E-FNF, file not found %DELETE-W-SEARCHFAIL, error searching for HT\_ROOT:[HTTP\$NOBODY]RECHDLIS;\* -RMS-E-FNF, file not found %DELETE-W-SEARCHFAIL, error searching for HT\_ROOT:[HTTP\$NOBODY]RECBDLIS;\* -RMS-E-FNF, file not found



# LINCOLN POLICE DEPARTMENT PUBLIC RECORD CRIMINAL HISTORY

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FOR: BRYAN ANDREW MCFARLAND , Male, DOE  
Date of listing: 12-15-2009

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

Arrested 12-14-1996	for (M)3RD DEG ASSAULT	Case
Disposed 03-28-1997	as (M)DISTURBING THE PEACE	Cit#
<b>FOUND GUILTY</b>		
01 YRS PROB DISCHARGED OFF PROBATION 03-27-98		
Cited on 01-02-1995	for (M)ASSAULT, STRIKE OR CAUSE BODILY INJURY	Case
Disposed 04-19-1995	as (M)DISTURBING THE PEACE	Cit#
<b>FOUND GUILTY Fined \$100.00</b>		
Cited on 07-18-1992	for (M)CONSUME ALCOHOLIC LIQUOR IN PUBLIC	Case
Disposed 09-30-1992	as (M)CONSUME ALCOHOLIC LIQUOR IN PUBLIC	Cit#
<b>FOUND GUILTY Fined \$100.00</b>		
Arrested 08-23-1986	for (M)DRIVE DURING SUSPENSION - 1ST OFFENSE	Case
Disposed 02-13-1987	as (M)DRIVE DURING SUSPENSION - 1ST OFFENSE	Ci
<b>FOUND GUILTY Fined \$250.00 &amp; Sentenced 10 DAYS</b>		

Crim Hist

#1

Cited on 03-28-1986	for (M)UNLAWFUL TO MAKE FALSE STATEMENT TO OFFIC	Case
Disposed 05-09-1986	as (M)UNLAWFUL TO MAKE FALSE STATEMENT TO OFFIC	Cit#
<b>FOUND GUILTY Fined \$100.00</b>		

\*\*\* END OF LISTING \*\*\*