



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

April 7, 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 Ploughshare Brewing, 1630 'P' Street requesting a class C liquor license.

Matthew Stinchfield has requested that he be approved as the manager of the liquor license.

An investigation on Mr. Stichfield shows only minor violations that occurred over 10 years ago.

The required training has been completed.

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) PLOUGHSHARE BREWING CO. LLC

Street Address #1 1630 P ST.

Street Address #2 _____

City LINCOLN

County LANCASTER

Premise Telephone number 402-438-6556

Business e-mail address info@ploughsharebrewing.com

Is this location inside the city/village corporate limits:

YES

NO

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

Name MATT STINCHFIELD

Street Address #1 1630 P ST.

Street Address #2 _____

City LINCOLN

State NE

Zip Code 68508

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

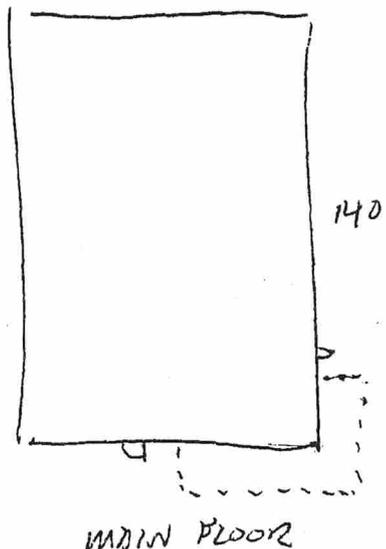
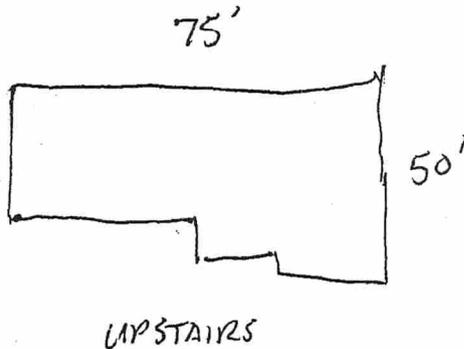
Building: length 140 x width 75 in feet

Is there a basement to be licensed? Yes ___ No X If yes, length ___ x width ___ in feet

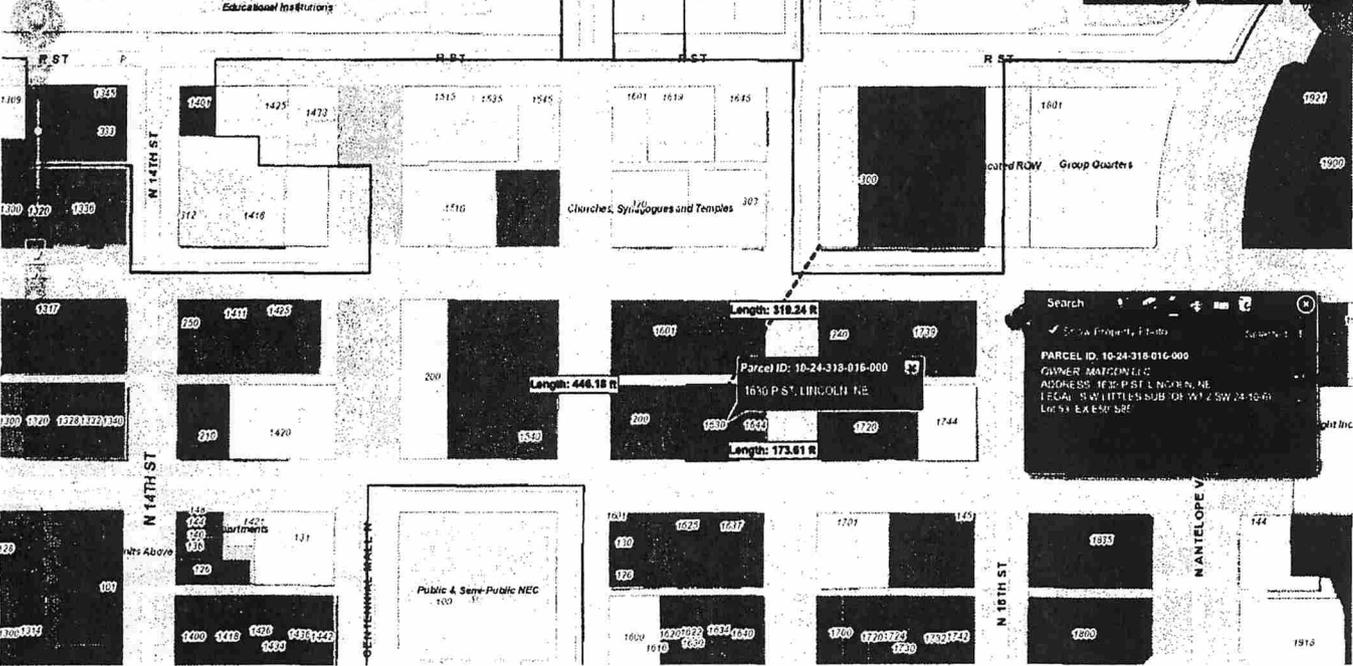
Is there an outdoor area? Yes ___ No X If yes, length ___ x width ___ in feet

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

One story bldg approx 75' x 140' plus mezzanine area



approx 75' x 50'
A
N



1

ATTACHMENT TO
QUESTION NO. 1
RECEIVED

MAR 19 2014

Attachment to No. 1, Convictions

Application for Class C Liquor License
Applicant: Ploughshare Brewing Co., LLC

NEBRASKA LIQUOR
CONTROL COMMISSION

Name of Applicant	Date of Conviction	Where Convicted	Description of Charge	Disposition & Explanation
Matthew Stinchfield	8/11/2000	Roanoke, VA	Improper stop. Code of Virginia, Traffic Infraction. Public intoxication. Code of Virginia § 18.2-388, Class IV Misdemeanor, Non-aggravated. Case No	Guilty in absentia. Explanation: Applicant had driven for several hours, then stopped for a meal and some drinks near where he planned to camp. Camping was unavailable, and since he was tired and thought he might have had too much to drink to drive safely, he pulled off the road. Parking was not allowed where he pulled over. Officer charged public drunkenness based on field sobriety test.
"	10/4/1999	Tucson, AZ	DUI Class III Misdemeanor, Non-aggravated. Case No	Convicted. Sentence carried out, driver's licensed restored. Explanation: Friends took applicant out to celebrate on the day his divorce was finalized. He was stopped at a roadblock and smelled of alcohol. BAC=0.108.
"	10/17/1991	Tucson, AZ	Speeding. Arizona Administrative Code Infraction. Case No.	Fine Paid.
"	6/11/1984 3/14/1983	Northampton, MA	Unauthorized use of motor vehicle, insurance violation. Misdemeanor Docket nos.	Case closed. Court costs paid. Explanation: Not alcohol related. Applicant and an acquaintance borrowed a car belonging to acquaintance's stepfather. During the course of the evening, acquaintance met up with someone and asked applicant to drive the car home. Applicant was stopped by police who determined applicant was not the car's owner; applicant did not have permission from the stepfather to be driving his car.
"	3/11/1982	Worcester, MA	Possession of an alcoholic beverage (beer). Misdemeanor Docket no	Paid \$15 fine. Explanation: 2 months before applicant's 21 st birthday during college; he was with an of-age acquaintance who had purchased a six-pack of beer.

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Manager's information must be completed below PLEASE PRINT CLEARLY

MAR 19 2014

Last Name: STINCHFIELD First Name: MATT **NEBRASKA LIQUOR CONTROL COMMISSION**

Home Address (include PO Box if applicable): 3621 EVERETT ST.

City: LINCOLN County: LANCASTER Zip Code: 68508

Home Phone Number: 402-318-1689 Business Phone Number: 402-438-6556 **NE**

Social Security Number: _____ Drivers License Number & State: _____
GREENFIELD, MA

Date Of Birth: _____ Place Of Birth: _____

Email address: matt@ploughsharebrewing.com

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

YES NO

Spouse's information

N/A - NOT MARRIED

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	2010	2014	N/A - NO SPOUSE		
BOULDER CITY, NV	2003	2010			

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2011	2014	Ploughshare Brewing Co.	Self	402-318-1689
2003	2010	Zenitech Environmental	Self	402-318-1689

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

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

NEBRASKA LIQUOR CONTROL COMMISSION

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (City & State)	Description of Charge	Disposition
Please see attached no. 1.				

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

#1
Manager

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Application for Manager
Applicant: Ploughshare Brewing Co., LLC

NEBRASKA LIQUOR
CONTROL COMMISSION

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"	3/11/1982	Worcester, MA	Possession of an alcoholic beverage (beer). Misdemeanor Docket n	Paid \$15 fine. Explanation: 2 months before applicant's 21 st birthday during college; he was with an of-age acquaintance who had purchased a six-pack of beer.

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

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**

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 States office)

Name of Registered Agent: KELLY HOFFSCHNEIDER, MATTSON RICKETTS LAW FIRM

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

PLOUGHSHARE BREWING CO., LLC #

LLC Address: 1630 P ST.

City: LINCOLN State: NE Zip Code: 68508

LLC Phone Number: 402-438-6556 LLC Fax Number 402-488-5484

Name of Managing/Contact Member

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

Last Name: STINCHFIELD First Name: MATT MI: _____

Home Address: 3621 EVERETT ST. City: LINCOLN

State: NE Zip Code: 68506 Home Phone Number: 402-318-1689


Signature of Managing/Contact Member

ACKNOWLEDGEMENT

State of Nebraska
County of Lancaster

The foregoing instrument was acknowledged before me this

March 10 2014

by Matt Stinchfield
name of person acknowledge

Date
Carrie D. Woodbury

Affix Seal



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

Last Name: STINCHFIELD First Name: MATT MI: _____

Social Security Number _____ Date of Birth: _____

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

Spouse Social Security Number: N/A Date of Birth: N/A

Percentage of member ownership 60.0

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**NEBRASKA LIQUOR
CONTROL COMMISSION**

Last Name: Please see attached Member Roster 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 _____

40% #

Listing Members

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 _____