Lynyrd Skynyrd

**APPLICATION FOR SPECIAL DESIGNATED LICENSE**
CITY OF LINCOLN CITY CLERK'S OFFICE
555 S 10TH ST
LINCOLN NE 68508
PHONE: (402) 441-7438

FILED 126
APR 10 2014
CITY CLERK'S OFFICE

**DO YOU NEED POSTERS?** YES☐ NO☑

**RETAIL LICENSE HOLDER** ☐

**NON PROFIT APPLICANT** ☐

Non Profit Status (check one that best applies):
Municipal☐ Political☐ Fine Arts☐ Fraternal☐ Religious☐ Charitable☐ Public Service☐

**COMPLETE ALL QUESTIONS**

1. Beer☑ Wine☑ Distilled Spirits☑

2. Liquor license number and class (i.e. C55441, CK55441)
(If you're a nonprofit organization leave blank) CK104580

3. Licensee name (last, first,), corporate name or limited liability company (LLC) name (As it reads on your liquor license)

| | | | |
|---|---|---|---|
| **NAME:** | PINNACLE BANK ARENA | | |
| **ADDRESS:** | 400 PINNACLE ARENA DRIVE | | |
| **CITY:** | LINCOLN | **ZIP:** | 68508 |

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

| | | | |
|---|---|---|---|
| **BUILDING NAME:** | PINEWOOD BOWL THEATER | | |
| **ADDRESS:** | 3201 SOUTH CODDINGTON | **CITY:** | LINCOLN |
| **ZIP:** | 68522 | **COUNTY & 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 for aged/indigent or for veterans and/or wives? YES☐ NO☑

c. Is this location within 300' of any university or college campus YES☐ NO☑

Lynyrd Skynyrd PWB Revised

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

| Date | Date | Date | Date | Date | Date |
|---|---|---|---|---|---|
| 8.2.2014 | | | | | |
| **Hours** | **Hours** | **Hours** | **Hours** | **Hours** | **Hours** |
| From | From | From | From | From | From |
| 8 AM | | | | | |
| To | To | To | To | To | To |
| 2 AM | | | | | |

a. Alternate date: N/A

b. Alternate location: N/A
(**Alternate date or location must be specified in local approval**)

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

7. Description of area to be licensed
Inside building, dimensions of area to be covered **IN FEET** _____ x _____
(not square feet or acres)

*Outdoor area dimensions of area to be covered **IN FEET** 700 x 448
***SKETCH OF OUTDOOR AREA (or attach copy of sketch) (sample sketch)**

If outdoor area, how will premises be enclosed?
☑ fence ☐ snow fence ☑ chain link ☐ cattle panel ☐ tent
other: _____

8. How many attendees do you expect at event? 5,000

9. If over 150 attendees. Indicate the steps that will be taken to prevent underage persons from obtaining alcohol beverages. (Attach separate sheet if needed)
TRAINED PINNACLE BANK ARENA EMPLOYEES WILL CHECK ID'S AND WRISTBAND

10. 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 ☐

11. Retailer: Will you be purchasing your alcohol from a wholesaler? YES☑ NO☐
Non-Profit: Where will you be purchasing your alcohol?
Wholesaler ☑ Retailer ☐ (includes wineries) Both ☐ BYO ☐

12. Will there be any games of chance operating during the event? YES☐ NO☑
If so, describe activity: _____

**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.

13. Any other information or requests for exemptions (**must** be received by Commission 30 days prior to event, complete NLCC form 140): N/A

14. 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. **PLEASE PRINT LEGIBLY**

Print name of Event Supervisor: THOMAS E. LORENZ

Signature of Event Supervisor: Tom Lorenz

Event Supervisor phone: Before 402-904-4444 During 402-416-5227

Email address: TLORENZ@SMGLINCOLN.COM

Consent of Authorized Representative/Applicant

15. 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** Tom Lorenz — Authorized Representative/Applicant

GENERAL MANAGER — Title

4.2.2014 — Date

THOMAS E. LORENZ — Print Name

This individual must be listed on the application as an officer or stockholder unless a letter has been filed appointing an individual as the catering manager allowing them to sign all SDL applications.

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.

# SUPPLEMENTAL FORM
# REQUIRED FOR ALL OUTDOOR EVENTS

| | | | |
|---|---|---|---|
| Name of Event: | LYNYRD SKYNYRD CONCERT | | |
| Applicant and Sponsoring Organization or Individual (if applicable): | PINNACLE BANK ARENA | | |
| Date(s) of Event: | SAT. AUGUST 2, 2014 | Hours: | 7:00 PM |
| Alternate Date(s): | N/A | Hours: | N/A |

Is the event open to the public? ☑ Yes ☐ No

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

TRAINED PINNACLE BANK ARENA EMPLOYEES WILL CHECK ID'S AND WRISTBAND

Will food be served? ☑ Yes ☐ No If yes, please list food to be served: _____

POPCORN, PRETZELS, NACHOS, HAMBURGERS, CHICKEN SANDWICH, ETC.

Will non-alcoholic beverages be served: ☑ Yes ☐ No
If yes, please list non-alcoholic beverages to be served: BOTTLE WATER & PEPSI PRODUCTS

Who will serve the beverages containing alcohol? TRAINED PINNACLE BANK ARENA EMPLOYEES WILL CHECK ID'S AND WRISTBAND
**Must complete Server/Seller Applicant Information Sheet.**

Have the designated servers received responsible beverage server 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: _____

Tom Lorenz
Applicant's Signature

4.2.2014
Date

# SITE PLAN INFORMATION
# REQUIRED FOR ALL OUTDOOR EVENTS

**Please provide a drawing showing the following. Provide as much detail as possible to ensure your application is not returned to you for more information. Attach additional drawings, dimensions if necessary.**

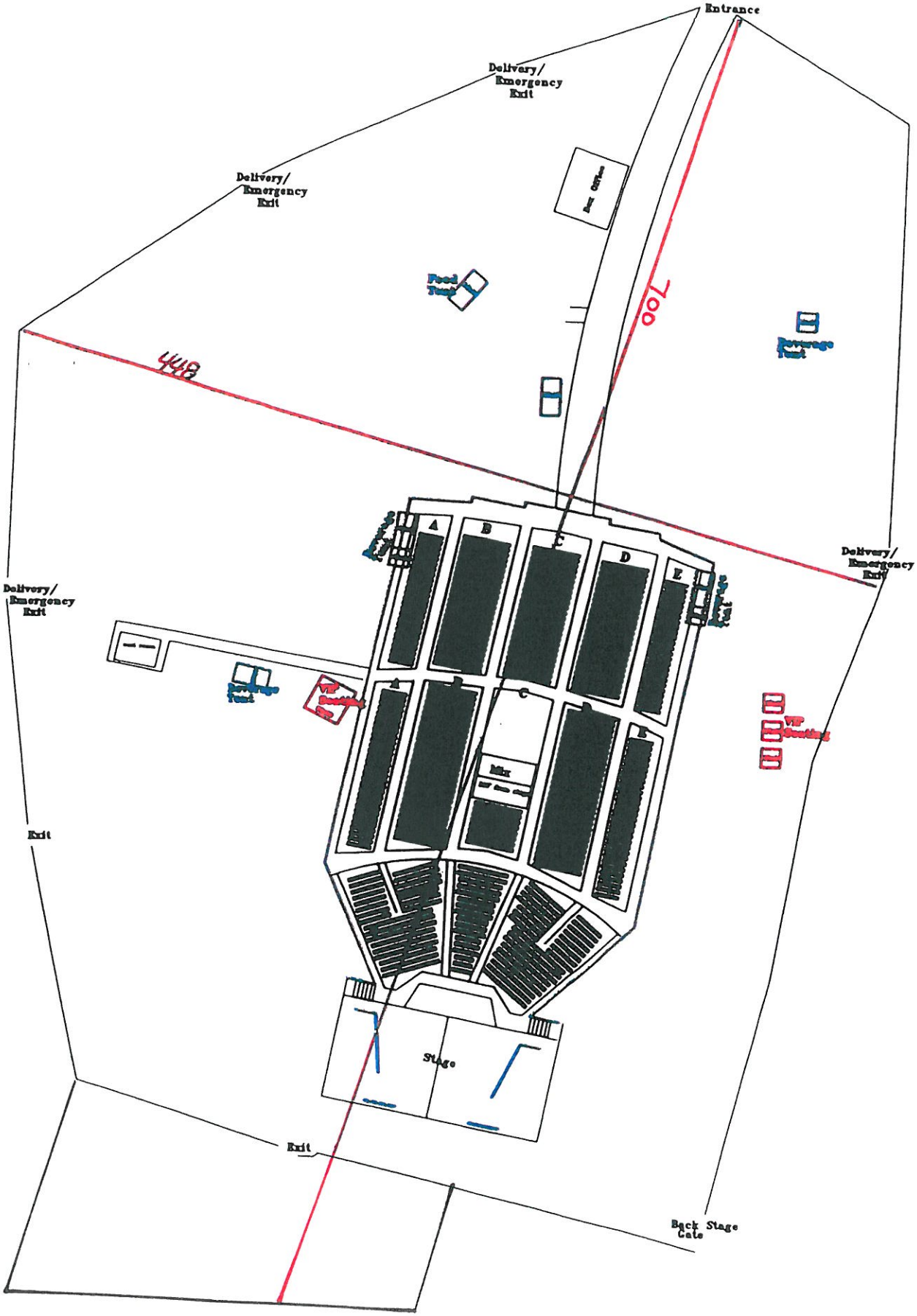
1. Number of Entry & Exit Points & Dimensions: (1 entry ' x 1 exit see map ')
2. Size & location of tent(s) (heights, width, depth)
3. Size of area being used (700 x 448 )
4. Location & type of cooking equipment (if used)
5. Location of tables & chairs; If stage for band provided & dance area, show location & dimensions on drawing.
6. Height & type of fencing to be used.

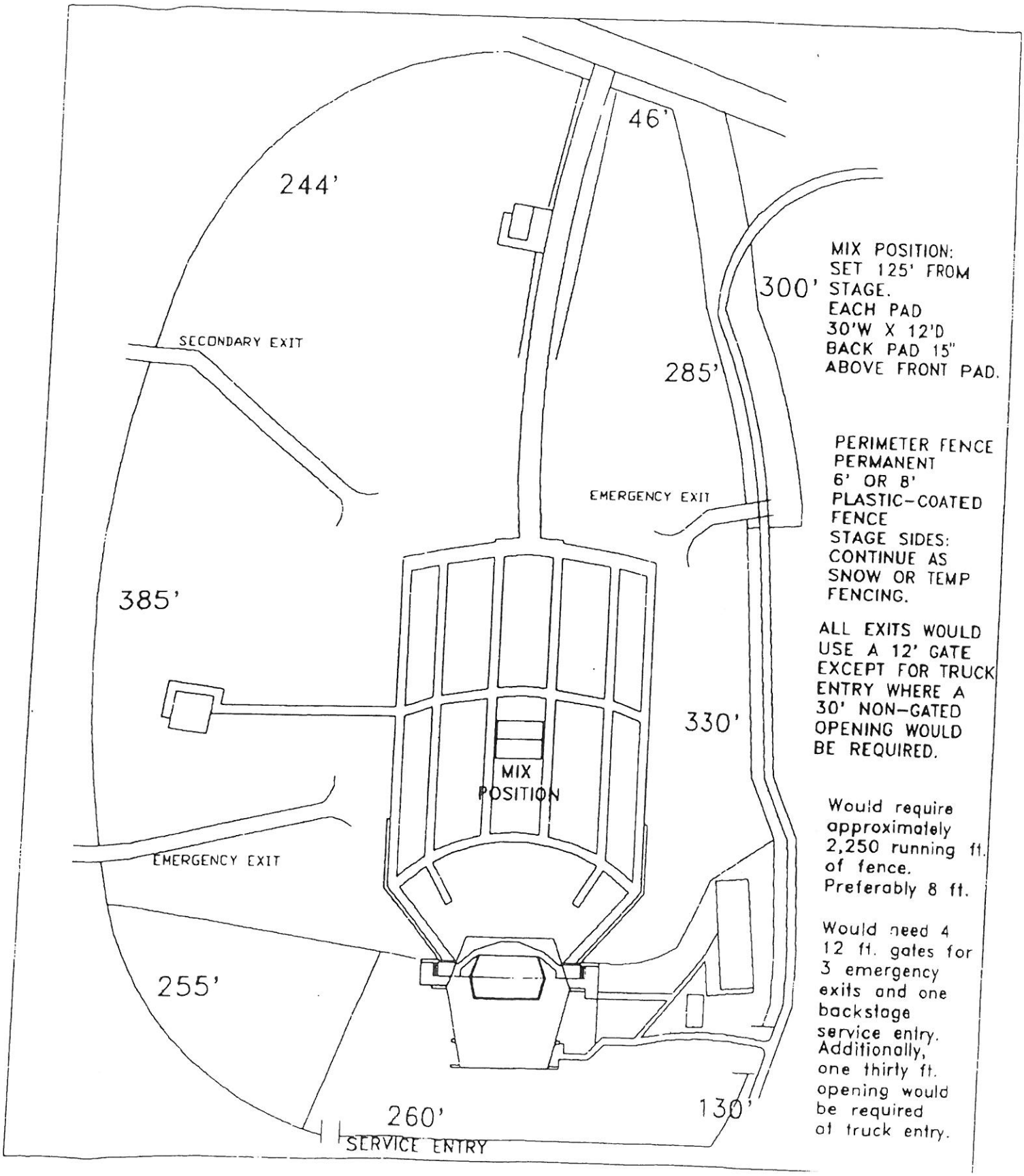
**Note: Two (2) exit points must be indicated on your drawing. These exits cannot lead patrons into the building. Questions relating to entry/exit points; electrical wiring; tent sizes can be directed to: Chuck Schweitzer, Fire Prevention Bureau: (402) 441-6441.**

NOTE: we will be using 6' Chain Link Fence

Please See following maps

ATTACH EXTRA PAGES IF NECESSARY


Entrance
Delivery/
Emergency
Exit
Delivery/
Emergency
Exit
Box Office
Food
Tent
700
448
Beverage
Tent
A
B
C
D
E
Beverage
Tent
Delivery/
Emergency
Exit
Delivery/
Emergency
Exit
Beverage
Tent
VIP
Seating
Mix
VIP
Seating
Exit
Stage
Exit
Back Stage
Gate


46'
244'
300'
SECONDARY EXIT
285'
EMERGENCY EXIT
385'
330'
MIX
POSITION
EMERGENCY EXIT
255'
260'
SERVICE ENTRY
130'
MIX POSITION:
SET 125' FROM
STAGE.
EACH PAD
30'W X 12'D
BACK PAD 15"
ABOVE FRONT PAD.
PERIMETER FENCE
PERMANENT
6' OR 8'
PLASTIC-COATED
FENCE
STAGE SIDES:
CONTINUE AS
SNOW OR TEMP
FENCING.
ALL EXITS WOULD
USE A 12' GATE
EXCEPT FOR TRUCK
ENTRY WHERE A
30' NON-GATED
OPENING WOULD
BE REQUIRED.
Would require
approximately
2,250 running ft.
of fence.
Preferably 8 ft.
Would need 4
12 ft. gates for
3 emergency
exits and one
backstage
service entry.
Additionally,
one thirty ft.
opening would
be required
at truck entry.

# SERVER/SELLER APPLICANT INFORMATION SHEET

You must provide the **NAME** and **DATE OF BIRTH** of **ALL** Employees/Volunteers who will sell or dispense alcoholic beverages at your event.

**This applies to nonprofit corporations as well.**

| NAME | DATE OF BIRTH | PHONE # DURING EVENT | EMPLOYEE OF WHOLESALE DISTRIBUTOR YES OR NO |
|---|---|---|---|
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| City clerks office has a master list on file | | | |
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