

July 23, 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 Lincoln Community Playhouse, 2500 South 56th Street requesting a class I liquor license.

The request is for alcohol sales for performances and special events.

Maurice Enders has requested that he be approved as the manager of the liquor license.

No areas of concern on Mr. Enders were found.

The applicant reports that the requested license is 85 feet away from a church.

The applicant has not completed the required training.

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



PREMISE INFORMATION

Trade Name (doing business as) Lincoln Community Playhouse

Street Address #1 2500 S 56th Street

Street Address #2 _____

City Lincoln County Lancaster Zip Code 68506

Premise Telephone number 402-489-7529

Business e-mail address menderso@lincolnplayhouse.com

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Is this location inside the city/village corporate limits: YES

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

**NEBRASKA LIQUOR
CONTROL COMMISSION**

Name Lincoln Community Playhouse

Street Address #1 P.O. Box 6426

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**

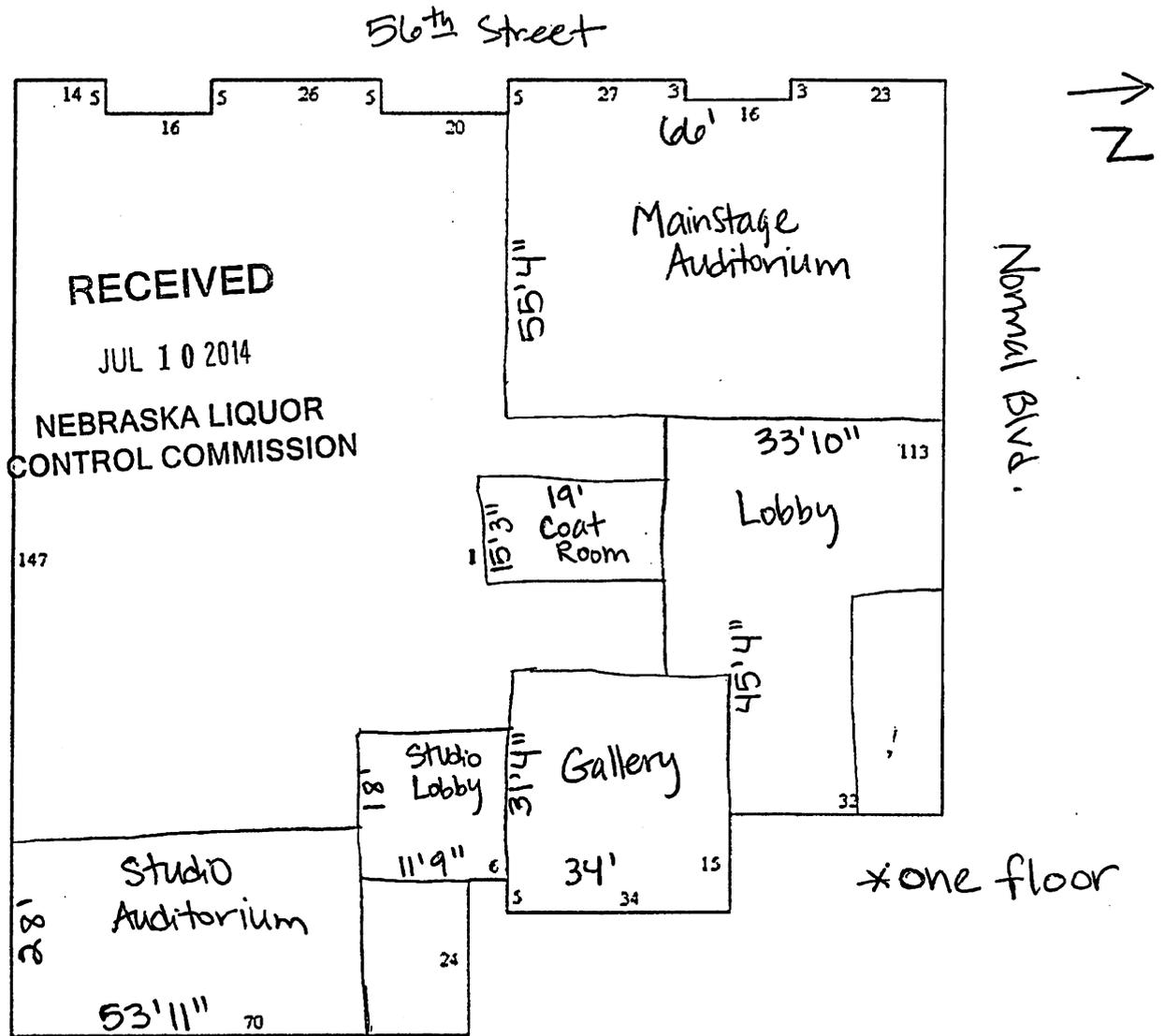
Building: length 147 x width 142 in feet

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

Lancaster County Appraisal Card for Lincoln Community Playhouse



- Areas to be licensed:
- Lobby 45'4" x 33'10"
 - Gallery 31'4" x 34'
 - Mainstage Auditorium 66' x 55'4"
 - Studio Auditorium 53'11" x 28'
 - Studio Lobby 18' x 11'9"
 - Coat Room 19' x 15'3"
- Whole Building

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. Include traffic violations. 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. The 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

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Corporate Manager: Maurice Enders	02 2010	Lincoln, NE	Speeding ticket	paid fine

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

YES NO

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If yes, give name of business and liquor license number NEBRASKA LIQUOR CONTROL COMMISSION
 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 (TOP) (form 125)
 b) TOP will only be accepted at a location that currently holds a valid liquor license.

**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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NEBRASKA LIQUOR CONTROL COMMISSION

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 (2 cards per person)
- 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 (Articles must show barcode receipt by Secretary of States Office)

Name of Registered Agent: Andrew Loudon, Baylor Evnen Law Firm

Name of Corporation that will hold license as listed on the Articles
Lincoln Community Playhouse, Inc.

Corporation Address: 2500 S 56th Street

City: Lincoln State: NE Zip Code: 68506

Corporation Phone Number: 402-489-7529 Fax Number n/a

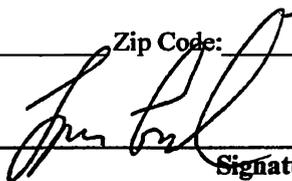
Total Number of Corporation Shares Issued: _____

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

Last Name: Leach First Name: Lyn MI: E

Home Address: 1336 Pelican Bay Place City: Lincoln

State: NE Zip Code: 68528 Home Phone Number: 402-429-6442



Signature of President/CEO

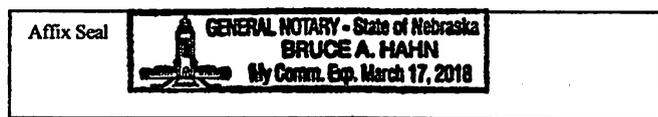
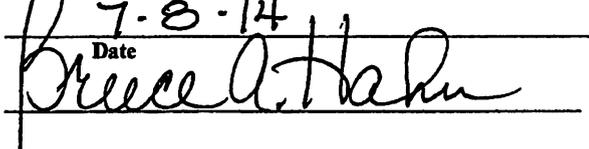
ACKNOWLEDGEMENT

State of Nebraska
County of Lancaster

The foregoing instrument was acknowledged before me this

7-8-14
Date

by Lyn Leach
name of person acknowledge



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

Last Name: Kalin First Name: Alyssa MI: L
Social Security Number: _____ Date of Birth: _____
Title: Treasurer Number of Shares _____
Spouse Full Name (indicate N/A if single): Matthew P. Kalin
Spouse Social Security Number: _____ Date of Birth: _____

Last Name: Wills First Name: Karen MI: F
Social Security Number: _____ Date of Birth: _____
Title: Secretary Number of Shares _____
Spouse Full Name (indicate N/A if single): Matthew T. Wills
Spouse Social Security Number: _____ Date of Birth: _____

Last Name: LEACH First Name: LYN MI: E
Social Security Number: _____ Date of Birth: _____
Title: PRESIDENT Number of Shares _____
Spouse Full Name (indicate N/A if single): NATALIE J. LEACH
Spouse Social Security Number: _____ Date of Birth: _____

Last Name: Derr First Name: Michelle MI: A
Social Security Number: _____ Date of Birth: _____
Title: Vice President Number of Shares _____
Spouse Full Name (indicate N/A if single): N/A
Spouse Social Security Number: N/A Date of Birth: 11/1/1978

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NEBRASKA LIQUOR
CONTROL COMMISSION

**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

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: Lincoln Community Playhouse, Inc.

Premise information

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

Premise Trade Name/DBA: Lincoln Community Playhouse

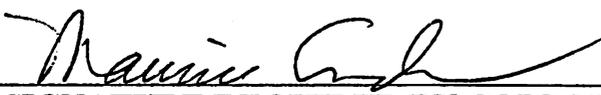
Premise Street Address: 2500 S 56th Street

City: Lincoln County: Lancaster Zip Code: 68506

Premise Phone Number: 402-489-7529

Email address: menders@lincolnplayhouse.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 information must be completed below PLEASE PRINT CLEARLY

Last Name: Ender First Name: Maurice MI: D
 Home Address (include PO Box if applicable): 3010 S. 72nd Street #51
 City: Lincoln County: Lancaster Zip Code: 68506
 Home Phone Number: 608-397-7048 Business Phone Number: 402-473-5069
 Social Security Number: _____ Drivers License Number & State: _____
 Date Of Birth: _____ Place Of Birth: Jackson, MI
 Email address: menders@lincolnplayhouse.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: _____ First Name: _____ MI: _____
 Social Security Number: _____ Drivers License Number & State: _____
 Date Of Birth: _____ Place Of Birth: _____

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NEBRASKA LIQUOR CONTROL COMMISSION

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	Now			
Kalamazoo MI	2005	2010			

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2005	2010	Kalamazoo Civic Theatre	Kristen Chesak	269-343-1313
1987	2005	La Crosse Community Theatre	Mark Carpenter	608-783-0909

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

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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

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

