

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

356

PH: 7/25

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**

- Type of alcohol to be served and/or consumed: Beer  Wine  Distilled Spirits
- Liquor license number and class (i.e. C55441, CK55441) (If you're a nonprofit organization leave blank)
- Licensee name (last, first,), corporate name or limited liability company (LLC) name (As it reads on your liquor license). If you are a nonprofit, name & address of the organization.

<b>NAME:</b>	Deligiannis, Fani		
<b>ADDRESS:</b>	3031 Diadem Drive		
<b>CITY:</b>	Lincoln,	<b>ZIP:</b>	68516

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

<b>BUILDING NAME:</b>	Annunciation Greek Orthodox Church		
<b>ADDRESS:</b>	950 N. 63 <sup>rd</sup>	<b>CITY:</b>	Lincoln
<b>ZIP:</b>	68505	<b>COUNTY &amp; COUNTY #:</b>	Lancaster

- Is this location within the city/village limits? YES  NO
- Is this location within the 150' of church, school, hospital or home for aged/indigent or for veterans and/or wives? YES  NO
- 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
8/26	8/27				
Hours From					
4 pm	11 am				
To	To	To	To	To	To
10 pm	10 pm				

a. Alternate date: NA

b. Alternate location: NA  
 (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: \_\_\_\_\_

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** 230 x 116

\***SKETCH OF OUTDOOR AREA (or attach copy of sketch) (sample sketch)**

Attached

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? 1000

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)

Person 19 yrs of age or older will be checking ID's at the entrance. Will be given wristband if over 21

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 X Retailer \_\_\_\_\_ Both \_\_\_\_\_ BYO \_\_\_\_\_  
(includes wineries)

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): \_\_\_\_\_

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: Fani Deligiannis  
Signature of Event Supervisor: *Fani Deligiannis*  
Event Supervisor phone: Before 402-770-5158 During 402-770-5158  
Email address: fdeli75@gmail.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 *Fani Deligiannis* *Festival Chair/supervisor* *7/8/16*  
Authorized Representative/Applicant Title Date  
Fani Deligiannis  
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.

**This page is required to be completed by Non Profit applicants only.**

**Application for Special Designated License  
Under Nebraska Liquor Control Act  
Affidavit of Non-Profit Status**

I HEREBY DECLARE THAT THE CORPORATION MAKING APPLICATION FOR A SPECIAL DESIGNATED LICENSE UNDER THE NEBRASKA LIQUOR CONTROL ACT IS EITHER A MUNICIPAL CORPORATION, A FINE ARTS MUSEUM INCORPORATED AS A NONPROFIT CORPORATION, A RELIGIOUS NONPROFIT CORPORATION WHICH HAS BEEN EXEMPTED FROM THE PAYMENT OF FEDERAL INCOME TAXES, A POLITICAL ORGANIZATION WHICH HAS BEEN EXEMPTED FROM THE PAYMENT OF FEDERAL INCOME TAXES, OR ANY OTHER NONPROFIT CORPORATION, THE PURPOSE OF WHICH IS FRATERNAL, CHARITABLE, OR PUBLIC SERVICE AND WHICH HAS BEEN EXEMPTED FROM THE PAYMENT OF FEDERAL INCOME TAXES AS PER §53-124.11(1).

AS SIGNATORY I CONSENT TO THE RELEASE OF ANY DOCUMENTS SUPPORTING THIS DECLARATION AND ANY DOCUMENTS SUPPORTING THIS DECLARATION WILL BE PROVIDED TO THE NEBRASKA LIQUOR CONTROL COMMISSION, THE NEBRASKA STATE PATROL OR ANY AGENT OF THE LIQUOR CONTROL COMMISSION IMMEDIATELY UPON DEMAND. I ALSO CONSENT TO THE INVESTIGATION OF THIS CORPORATE ENTITY TO DETERMINE IT'S NONPROFIT STATUS.

I AGREE TO WAIVE ANY RIGHTS OR CAUSES OF ACTION AGAINST THE NEBRASKA LIQUOR CONTROL COMMISSION, THE NEBRASKA STATE PATROL OR ANY PARTY RELEASING INFORMATION TO THE AFOREMENTIONED PARTIES.

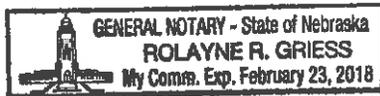
Annunciation Greek Orthodox Church  
NAME OF CORPORATION

47-05710665  
FEDERAL ID NUMBER

Jane Salij  
SIGNATURE OF TITLE OF CORPORATE OFFICERS

THE ABOVE INDIVIDUAL STATES THAT THE STATEMENT ABOVE IS TRUE AND CORRECT: IF ANY FALSE STATEMENT IS MADE ON THIS APPLICATION, THE APPLICANT SHALL BE DEEMED GUILTY OF PERJURY AND SUBJECT TO PENALTIES PROVIDED BY LAW. (SEC. §53-131.01) NEBRASKA LIQUOR CONTROL ACT

SUBSCRIBED IN MY PRESENCE AND SWORN TO BEFORE ME THIS 12<sup>th</sup> DAY OF July, 2016.



Rolayne R. Griess  
NOTARY PUBLIC SIGNATURE & SEAL

Internal Revenue Service  
District Director

Department of the Treasury

Date: May 15, 1978

Greek Orthodox Archdiocese of North  
and South America and its affiliated  
Churches and Institutions  
18 East 79th Street  
New York, New York 10021

Person to Contact  
T. Davenport  
Contact Telephone Number:  
(212) 264-1079

Gentlemen:

Reference is made to your request for verification of the tax exempt status of your organization.

We are unable to furnish you with a copy of the original determination or ruling letter that was issued to your organization. However, our records indicate that exemption was granted as shown below.

A determination or ruling letter issued to an organization granting exemption under the Internal Revenue Code of 1954 or under a prior or subsequent Revenue Act remains in effect until exempt status has been terminated, revoked or modified.

Our records indicate that there has been no change in your organization's exempt status.

Sincerely yours,

W. Charles H. Brunner

District Director

~~Internal Revenue Service~~

Name of Organization: ~~Greek Orthodox Archdiocese of North and South America~~

Date of Exemption Letter: October 26, 1942

Exemption granted pursuant to 1954 Code section 501(c) (3) or its predecessor Code section.

Foundation Classification (If Applicable): Public Foundation under Sections 170(b)(1)(a)(1) and 509(a)

## SUPPLEMENTAL FORM REQUIRED FOR ALL OUTDOOR EVENTS

(Including those for Non Profit Organizations)

Name of Event:	My Big Fat Greek Festival 2		
Applicant and Sponsoring Organization or Individual (if applicable):	Fani Deligiannis		
Date(s) of Event:	8/26 & 8/27	Hours:	4pm-10pm & 11am-10pm
Alternate Date(s):	NA	Hours:	NA

Is the event open to the public?     Yes     No

How will you ensure that minors will not be served or consume beverages containing alcohol: ID's  
will be checked at entrance and wrist bands will be put on for those 21 and over

Will food be served?     Yes     No    If yes, please list food to be served: Pork Kebabes,  
gyro, greek chicken, potatoes, spanakopita, tiropita, dolmatoes,  
hummus, greek salad, greek pastries

Will non-alcoholic beverages be served:     Yes     No  
 If yes, please list non-alcoholic beverages to be served:    Soda, water,  
Greek coffee

Who will serve the beverages containing alcohol? Individuals 19 yrs or older  
**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: \_\_\_\_\_

Fani Deligiannis  
 Applicant's Signature

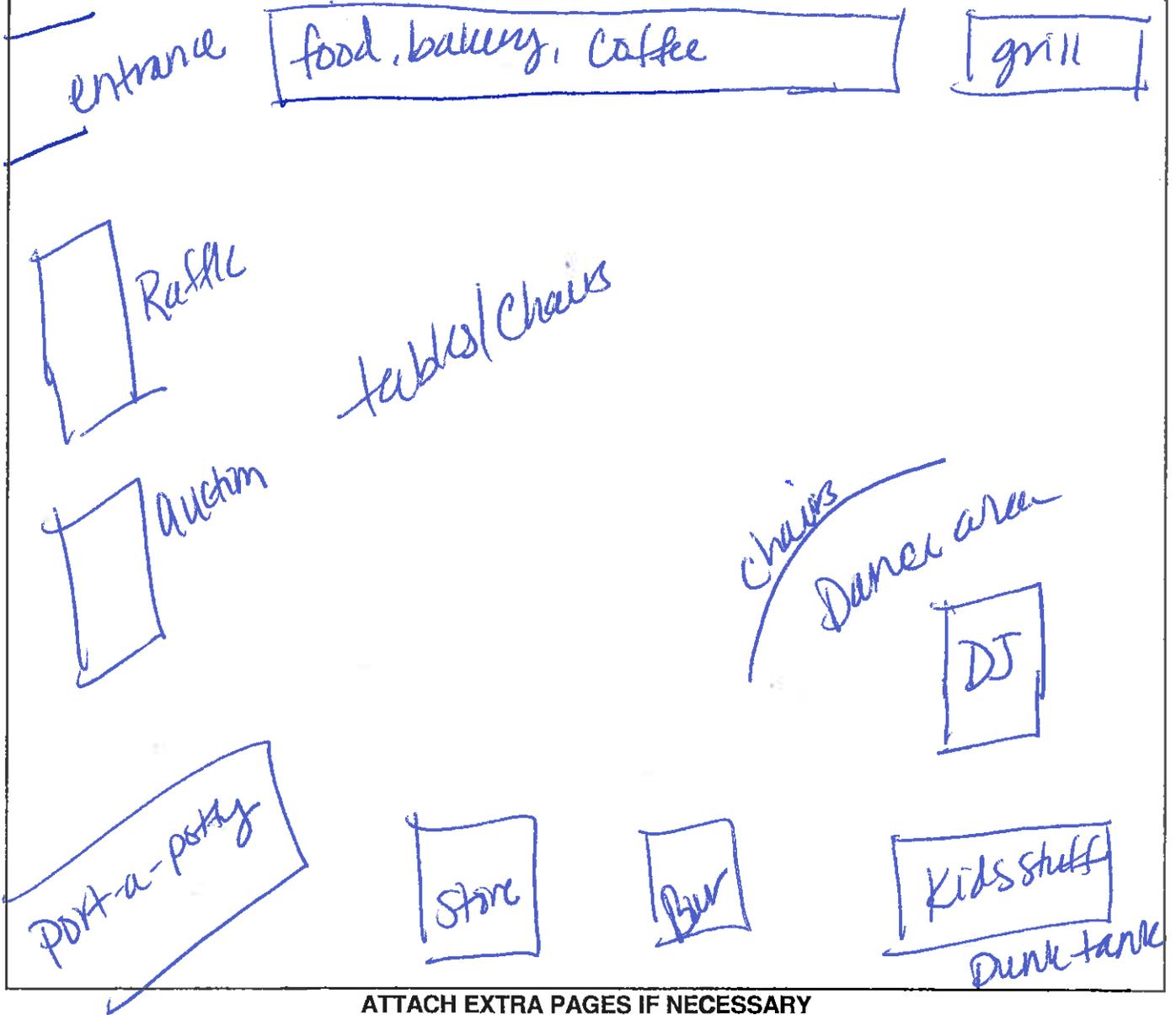
7/18/16  
 Date

## 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 ' x 3')
2. Size & location of tent(s) (heights, width, depth) all around church parking lot 10x10
3. Size of area being used (230 x 116)
4. Location & type of cooking equipment (if used) church kitchen / outdoor grill
5. Location of tables & chairs; if stage for band provided & dance area, show location & dimensions on drawing. all around church parking lot
6. Height & type of fencing to be used. chain linked, snow fence

**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.**



ATTACH EXTRA PAGES IF NECESSARY

6x3'

Entrance

Entrance - take money/  
tickets/food, check age if drinking

Tickets

Tickets

Tickets

Bakery

Bakery

Bakery

Coffee/  
Sundae

Food

Food

Food

Food

Food

Grill

Dumpster

Raffle

Auction

Auction

Auction

Auction

Tables & chairs

Chairs

Dance Area

DJ

911

911

Potty

Greek Gear

Greek Gear

Greek Gear

Bar

Kids

Kids

Airbrush

Dunk  
Tank

922'

921'