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RESOLUTION NO. _____

A RESOLUTION OF THE MAYOR AND CITY COUNCIL OF THE CITY OF LA VISTA, NEBRASKA AUTHORIZING THE CONSUMPTION OF ALCOHOL AT AN OPEN HOUSE AT 10933 HARRISON STREET ON FEBRUARY 10, 2015.

WHEREAS, 10933 Harrison Street is located within the City of La Vista; and

WHEREAS, Real Deals on Home Décor has requested approval of a Special Designated License to serve alcohol at an open house at 10933 Harrison Street on February 10, 2015 from 5:00 p.m. to 8:00 p.m.

NOW, THEREFORE, BE IT RESOLVED, that the Mayor and City Council of La Vista, Nebraska, do hereby authorize Real Deals on Home Decor to proceed with the application for a "Special Designated License" from the Nebraska Liquor Control Commission to serve alcohol at 10933 Harrison Street on February 10, 2015.

PASSED AND APPROVED THIS 20TH DAY OF JANUARY, 2015.

CITY OF LA VISTA

Douglas Kindig, Mayor

ATTEST:

Pamela A. Buethe, CMC
City Clerk



LA VISTA POLICE DEPARTMENT INTER-DEPARTMENT MEMO

TO: Pam Buethe, City Clerk

FROM: Robert S. Lausten, Police Chief

DATE: 01-14-2015

RE: Application for SDL

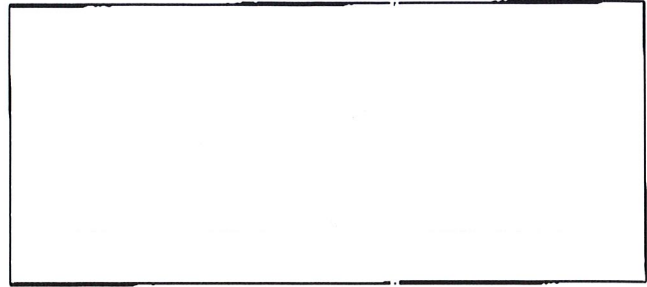
CC:

Re: Real Deals on Home Décor
Special Designated Use Permit

The La Vista Police Department has been informed and has reviewed the request by Real Deals on Home Décor for a special designated use permit on 2-10-15 from 5 pm to 8 pm at 10933 Harrison Street. There are no concerns regarding the event identified by the police department at this time.

**APPLICATION FOR SPECIAL
DESIGNATED LICENSE**

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/



DO YOU NEED POSTERS? YES ☐ NO ☒

RETAIL LICENSE HOLDERS ☒

NON PROFIT APPLICANTS ☐

Non Profit Status (check one that best applies)

Municipal ☐ Political ☐ Fine Arts ☐ Fraternal ☐ Religious ☐ Charitable ☐ Public Service ☐

COMPLETE ALL QUESTIONS

1. Type of alcohol to be served and/or consumed: Beer ☐ Wine ☒ Distilled Spirits ☐

2. Liquor license number and class (i.e. C-55441)
(If you're a nonprofit organization leave blank)

C-098253

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

NAME: Wastrel Prairie Farms

ADDRESS: 2405 So. Hwy 75

CITY Union ZIP 68455

4. Location where event will be held; name, address, city, county, zip code ^{in the} Real Deals on Home Decor

BUILDING NAME Brooks Valley Business Park

ADDRESS: 10933 Harrison St. CITY La Vista

ZIP 68128 COUNTY and COUNTY # _____

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 ☒

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

Date <u>2/10/15</u>	Date	Date	Date	Date	Date
Hours From <u>5:00 PM</u>	Hours From	Hours From	Hours From	Hours From	Hours From
To <u>8:00 PM</u>	To	To	To	To	To

a. Alternate date: none

b. Alternate location: none
(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 75 ft x 23 ft.
(not square feet or acres)

*Outdoor area dimensions of area to be covered IN FEET _____ x _____

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

If outdoor area, how will premises be enclosed?

☐ Fence; snow fence ☐ chain link ☐ cattle panel ☐ other _____
☐ Tent

8. How many attendees do you expect at event? 80

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)

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 ☐ 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: _____

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 Clinton Wostrel

Signature of Event Supervisor Clinton Wostrel

Phone of Event Supervisor: Before 303-905-2627 During 303-905-2627

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 Carla Wostrel _____ Secretary/Assistant 1/13/15
Authorized Representative/Applicant Title Date
CARLA WOSTREL
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.