

A-14

RESOLUTION NO. _____

A RESOLUTION OF THE MAYOR AND CITY COUNCIL OF THE CITY OF LA VISTA, NEBRASKA AUTHORIZING THE CONSUMPTION OF ALCOHOL AT A BEER GARDEN AT 12251 CARY CIRCLE ON SEPTEMBER 19, 2015.

WHEREAS, 12251 Cary Circle is located within the City of La Vista; and

WHEREAS, Patriarch Distillers has requested approval of a Special Designated License to serve alcohol at a beer garden at 12251 Cary Circle on September 19, 2015 from 3:00 p.m. to 11:00 p.m.

NOW, THEREFORE, BE IT RESOLVED, that the Mayor and City Council of La Vista, Nebraska, do hereby authorize Patriarch Distillers to proceed with the application for a "Special Designated License" from the Nebraska Liquor Control Commission to serve alcohol at 12251 Cary Circle on September 19, 2015.

PASSED AND APPROVED THIS 1ST DAY OF SEPTEMBER, 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: 8-17-2015

RE: Application for SDL

CC:

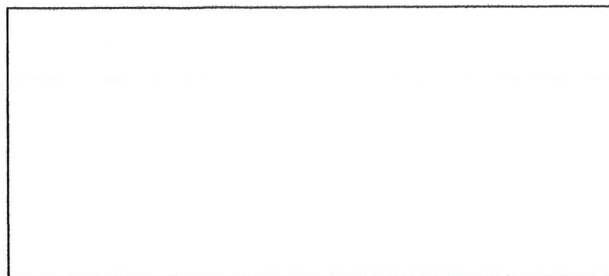
Re: Patriarch Distillers
Special Designated Use Permit

The La Vista Police Department has been informed and has reviewed the request by Patriarch Distillers for a special designated use permit on 9-19-2015 at 12251 Cary Circle in La Vista. The applications states that there will be security staff present, therefore no concerns regarding the event identified by the police department at this time.

rec'd 8/17/15
ck 1127

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.nebraska.gov/
michelle.porter@hotmail.com



DO YOU NEED POSTERS? YES ☐ NO ☒

NON PROFIT APPLICANTS (Check one that best applies)

Municipal Political Fine Arts Fraternal Religious Charitable Public Service

LIQUOR LICENSE HOLDERS

Liquor license number and class (i.e. C-055441)

C-105100

COMPLETE ALL QUESTIONS

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

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

NAME: Patriarch Distillers, LLC

ADDRESS: 12251 Cary Circle, Suite 100

CITY LaVista

ZIP 68128

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

BUILDING NAME Patriarch Distillers

ADDRESS: 12251 Cary Circle, Suite 100 CITY LaVista

ZIP 68128

COUNTY and COUNTY # Sarpy #59

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 ☒

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

Date 9/19/2015	Date	Date	Date	Date	Date
Hours From 3:00 pm	Hours From	Hours From	Hours From	Hours From	Hours From
To 11:00 pm	To	To	To	To	To

a. Alternate date: _____

b. Alternate location: _____
(Alternate date or location must be specified in local approval)

5. Indicate type of activity to be carried on during event:

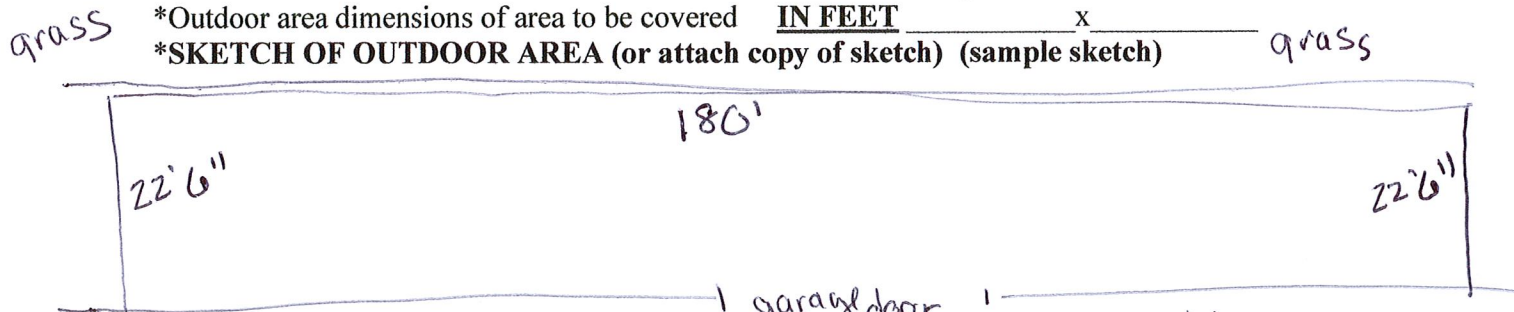
Dance ☐ Reception ☐ Fund Raiser ☒ Beer Garden ☐ Sampling/Tasting ☐

Other Motorcycle show/pin-up contest to benefit Soundz of Freedom

6. 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** _____ x _____
*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 _____

7. How many attendees do you expect at event? 150-200

8. If over 150 attendees. Indicate the steps that will be taken to prevent underage persons from obtaining alcohol beverages. (Attach separate sheet if needed)

We will have security checking ID's and also monitoring outside area to make sure all alcohol stays within fenced off area.

9. 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 ☐

10. **Where will you be purchasing your alcohol?**

Wholesaler X Retailer _____ Both _____ BYO _____
(includes wineries)

11. 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.

12. Any other information or requests for exemptions: _____

13. 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 Kristy Hadden

Signature of Event Supervisor _____

Event Supervisor phone: Before 402-690-0091 During 402-690-0091
Email address khadden@patriarchdistillers.com

Consent of Authorized Representative/Applicant

14. 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


Authorized Representative/Applicant

Owner/Presdient 7/21/2015

Title _____ Date _____

Jeffrey Hadden

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.