

## RESOLUTION NO. \_\_\_\_\_

A RESOLUTION OF THE MAYOR AND CITY COUNCIL OF THE CITY OF LA VISTA, NEBRASKA AUTHORIZING A WINE & SPIRITS TASTING EVENT AT SS TOBACCO/LIQUOR OF 8052 SOUTH 84<sup>TH</sup> STREET, LA VISTA, NEBRASKA ON JUNE 23, 2007 AND JULY 14, 2007

WHEREAS, SS Tobacco/Liquor is located within the City of La Vista; and

WHEREAS, Bryco, Inc dba SS Tobacco/Liquor has requested approval of a Special Designated License to have a wine & spirit tasting event on June 23, 2007 and July 14, 2007 from 3:00 p.m. to 6:00 p.m.

NOW, THEREFORE, BE IT RESOLVED, that the Mayor and City Council of La Vista, Nebraska, do hereby authorize Bryco, Inc dba SS Tobacco/Liquor to proceed with the application for a "Special Designated License" from the Nebraska Liquor Control Commission to have a wine & spirit tasting event on June 23, 2007 and July 14, 2007.

PASSED AND APPROVED THIS 5TH DAY OF JUNE, 2007.

CITY OF LA VISTA

\_\_\_\_\_  
Douglas Kindig, Mayor

ATTEST:

\_\_\_\_\_  
Pamela A. Bueth, CMC  
City Clerk

June 28  
July 14

**APPLICATION FOR SPECIAL DESIGNATED LICENSE  
LICENSEE**

NEBRASKA LIQUOR CONTROL COMMISSION  
P.O. Box 95046  
Lincoln NE 68509-5046

ALL ISSUED LICENSES ARE MAILED TO LOCAL CLERKS WHERE THE EVENT IS HELD

- ☐ All Applications must be received in the Commission Office 10 working days (excluding weekends and holidays) prior to the date of the event
- ☐ Complete and return **THE ORIGINAL WITH A DUPLICATE** to the Nebraska Liquor Control Commission
- ☐ A license fee of \$40 (payable to Nebraska Liquor Control Commission) for each day (no fees if caterer)
- ☐ **APPROVAL FROM CITY, VILLAGE OR COUNTY CLERK** must be included with this application
- ☐ A Signed Statement from Local Police Chief or County Sheriff

1. Type of Beverage(s) to be served or consumed: ☐ Beer ☒ Wine ☒ Distilled Spirits

2. License number and class Class D 71059 ☒ Retailer ☐ Caterer  
(i.e. I/K-12345)

3. **Name and Address** of Applicant (as listed on liquor license) (City, County, Zip Code)

BRYCO INC DBA SS TOBACCO/Liquor  
8052 S 84th ST LAVISTA NE 68128

4. **Address or location** of premises to be covered by license, (street, city, county, zip code)

8052 S 84th ST LAVISTA NE 68128

5. Address of where alcohol is to be stored if other than at location listed in question #4 above

SAME

6. Name, address, phone number/cell phone number of owner or lessee of premises for which the license is requested

BRYAN Steffen 3705 Spruce ST Omaha NE 68147 <sup>work</sup> 402-339-1634 <sup>cell</sup> 402-321-5661

7. **DATE(S) OF EVENT** (If Sunday, attach Sunday sales ordinance) no more than six (6) consecutive days per application

June 23 2007 & July 14 2007

a) If alternate date is requested please list below: (must be approved at local level prior to event)

ALTERNATE DATE:

b) If alternate location is requested please list below: (must be approved at local level prior to event)

ALTERNATE LOCATION:

8. Time(s) of event (example 8:00 am to 1:00 am, this is considered one day)

FROM: 3:00 pm TO: 6:00 pm

9. Describe type of activity to be carried on during the time period for which the license is requested

Tasting of wine & spirits

10. Provide an estimated number of attendees at this event ABOUT 20. If the number of attendees is over 150 attach a separate page indicating the steps that will be taken to prevent underage persons access to alcoholic beverages.

11. **Attach** a signed statement from your local police chief or county sheriff, whichever is applicable, that local law enforcement has been informed in advance of this event, and if they are aware of any reason the event should not occur

12. Description of the premises: ☒ Inside Building ☐ Outdoor Area

Dimensions of area to be covered by license: 60 x 30. Please draw in the space provided below, the area where liquors will be sold and consumed.  
LENGTH WIDTH (In feet)

If outdoor area, how will premises be separated from areas open to the general public?

☐ Fence, type of fence \_\_\_\_\_

☐ Tent

☐ Other (if other, please explain)

13. Is the premises to be covered by the license located within the city/village limits?..... ☒ YES ☐ NO

14. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children?..... ☐ YES ☒ NO

15. Is the premises to be covered by the license within 300 feet of any university or college campus..... ☐ YES ☒ NO

16. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number SS TOBACCO/Liquor # 71059

Check here if for consumption only ☐ (no purchases or sales, i.e. byob)

17. Will the premises to be covered by the license comply with all Nebraska sanitation laws?..... ☒ YES ☐ NO

18. Are there separate toilets for both men and women?..... ☐ YES ☒ NO

19. Other information or requests for exemptions, must be requested and approved prior to event:

20. Will there be any games of chance operating during the event? ☒ YES ☐ NO If so, describe activity

NEBRASKA LOTTO Scratch off tickets


**NOTICE:** 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.**

21. Name and **telephone number/cell phone number** of immediate **supervisor**, who will actually be present at the location of the event when it occurs, that can be contacted by law enforcement before and during the event, and who is responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. **Supervisor must sign on page 3.**

Kelly Steffen

22. 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  President May 5-2007  
Authorized Representative/Applicant Title Date  
Rayon T. Steffen  
Print Name

sign  
here \_\_\_\_\_  
Supervisor Title Date  
\_\_\_\_\_  
Print Name

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**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.**

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In Compliance with ADA, this form is available in  
other formats for persons with disabilities.  
A ten day advance period is requested in writing  
to produce the alternate format.