CITY OF LINCOLN NEBRASKA

LINCOLN POLICE DEPARTMENT
575 South 10th Street Lincoln, NE 68508
402-441-7204 fax: 402-441-8492 lincoln.ne.gov

June 1, 2015

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 Chipotle Mexican Grill, Inc., DBA Chipotle Mexican Grill #673, 2801 Pine Lake Road, requesting that Timothy Peterson be approved as the manager of their class I-066350 liquor license.

Mr. Peterson is currently the approved manager for Chipotle Mexican Grill, 6005 O St, Ste A, Lincoln, NE, and four other Chipotle restaurants in Omaha and Bellevue.

Mr. Peterson completed the required management training on October 10, 2013.

No areas of concern were found.

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

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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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. See Form 147 for further information, this form MUST be included with your application.**
- ✓ **21 years of age or older**

Corporation/LLC information

Name of Corporation/LLC: Chipotle Mexican Grill, Inc.

Premise information

Liquor License Number: 066350 Class Type Class I (if new application leave blank)

Premise Trade Name/DBA: Chipotle Mexican Grill #673

Premise Street Address: 2801 Pine Lake Rd

City: Lincoln County: Lancaster Zip Code: 68512

Premise Phone Number: (402) 420-2801

Email address: Licensing@Chipotle.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

M Steven Ells

SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER
(Faxed signatures are acceptable)

1500010727

Manager's information must be completed below PLEASE PRINT CLEARLY

Last Name: Peterson First Name: Timothy MI: _____

Home Address (include PO Box if applicable): 19907 Ash St

City: Gretna County: Sarpy Zip Code: 68028

Home Phone Number: (402)216-5222 Business Phone Number: (402) 474-1133

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: Faribault, MN

Email address: Licensing@Chipotle.com

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

☐ YES ☑ NO

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Spouse's information

Spouses Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: _____

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
Gretna, NE	2006	Present			
Bellevue, NE	2003	2006			

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MANAGER'S LAST TWO EMPLOYERS

YEAR FROM	TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2004	Present	Chipotle Mexican Grill	Mark Mader	(913)660-4236
2000	2004	Garden Cafe	Brian Lockman	(402)578-6714

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.

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☐ 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

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):
9820 South 71st Plaza, Papillion, NE 68133

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

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4. List the alcohol related training and/or experience (when and where) of the person making application.

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*NLCC Training Certificate Issued: 6/2009 Name on Certificate: Timothy Peterson

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Timothy Peterson	6/2009	TIPS - Online course

*For list of NLCC Certified Training Programs see www.lcc.ne.gov/traininginfo.html

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
Chipotle Mexican Grill/All Jobs	2004 to Present	Managed many different locations with alcoholic beverages

5. Have you enclosed Form 147 regarding fingerprints?

☑ YES ☐ NO

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PERSONAL OATH AND CONSENT OF INVESTIGATION

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, a spousal affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.

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Signature of Manager Applicant

Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska
County of Douglas The foregoing instrument was acknowledged before me this

5/28/15 by Andrew J Zeplin
date name of person acknowledged

Notary Public signature

Affix Seal

GENERAL NOTARY-State of Nebraska
ANDREW J ZEPLIN
My Comm. Exp. May 2, 2017

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

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