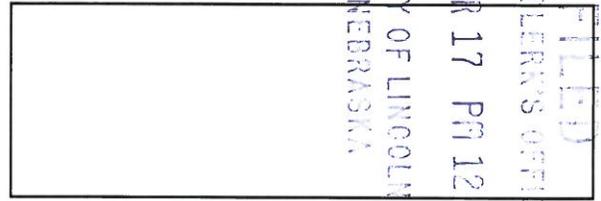


APPLICATION FOR SPECIAL DESIGNATED LICENSE
CITY OF LINCOLN CITY CLERK'S OFFICE
555 S 10TH ST
LINCOLN NE 68508
PHONE: (402) 441-7438



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

1. Beer Wine Distilled Spirits

2. Liquor license number and class (i.e. C55441, CK55441)
(If you're a nonprofit organization leave blank)

C-100689

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

NAME:	Talexmo LLC		
ADDRESS:	2001 W 0 th St		
CITY:	Lincoln	ZIP:	68528

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

BUILDING NAME:	Congress Restaurant + Lounge		
ADDRESS:	2001 W 0 th St	CITY:	Lincoln
ZIP:	68528	COUNTY & COUNTY #:	Lancaster

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>5-31-14</u>	Date	Date	Date	Date	Date
Hours From <u>10 am</u> 8 am	Hours From	Hours From	Hours From	Hours From	Hours From
To <u>12 am</u>	To	To	To	To	To

a. Alternate date: _____

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

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

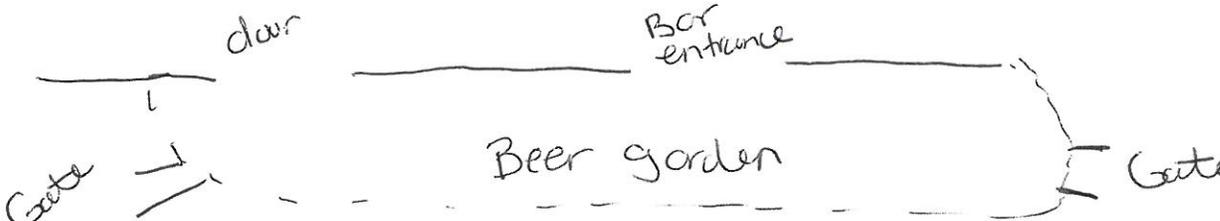
- Dance
 Reception
 Fund Raiser
 Beer Garden
 Sampling/Tasting
 Other: _____

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** 60 x 100

***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: _____

8. How many attendees do you expect at event? 150

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)

ID's will be checked & wrist bands issued to
Persons legal age to drink.

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: 50-50 ~~drawing~~ ~~raffle~~
Silent Auction

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: Heather M. Pawich

Signature of Event Supervisor: Heather M. Pawich

Event Supervisor phone: Before (402) 730-0517 During (402) 730-0517

Email address: huster0669@yahoo.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

Heather M. Pawich
Authorized Representative/Applicant

Managing Member
Title

03-10-14
Date

Heather M. Pawich
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.

**SUPPLEMENTAL FORM
REQUIRED FOR ALL OUTDOOR EVENTS**
(Including those for Non Profit Organizations)

Name of Event:	Congress Poker Run		
Applicant and Sponsoring Organization or Individual (if applicable):	Congress Restaurant + Lounge		
Date(s) of Event:	05-31-14	Hours:	3 pm - midnight
Alternate Date(s):		Hours:	

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 & wrist bands issued to legal age drinkers.

Will food be served? Yes No If yes, please list food to be served: Burgers + brats

Will non-alcoholic beverages be served: Yes No
If yes, please list non-alcoholic beverages to be served: pop, water, lemonade + Ice Tea

Who will serve the beverages containing alcohol? See attached sheet for
Must complete Server/Seller Applicant Information Sheet.

Have the designated servers received responsible beverage server training? Yes No
full handlers & server #s.
I as the owner have but not the others.

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: _____

Heather M Pawick
Applicant's Signature

05-10-14
Date

SITE PLAN INFORMATION REQUIRED FOR ALL OUTDOOR EVENTS

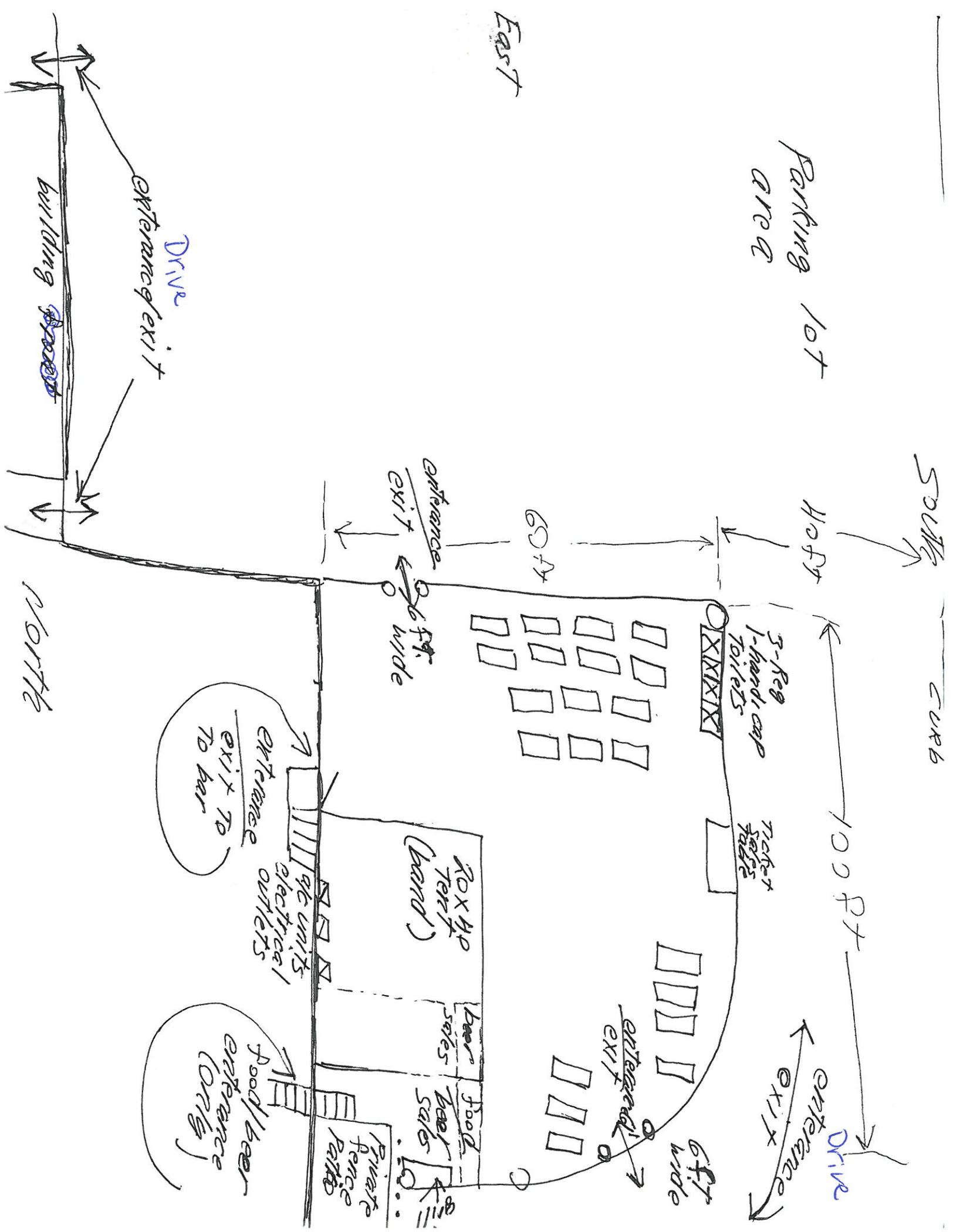
Please provide a drawing showing the following. Provide as much detail as possible to ensure your application is not returned to you for more information. Attach additional drawings, dimensions if necessary.

1. Number of Entry & Exit Points & Dimensions: (2 x 6 wide)
2. Size & location of tent(s) (heights, width, depth) 20x40x10 w/canopy extending west over food area
3. Size of area being used (60' x 120')
4. Location & type of cooking equipment (if used) grill and Roaster container
5. Location of tables & chairs; If stage for band provided & dance area, show location & dimensions on drawing.
6. Height & type of fencing to be used. 4 1/2 FT tall - Plastic 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.

*See
attached*

ATTACH EXTRA PAGES IF NECESSARY



Food Handlers/Server Permits

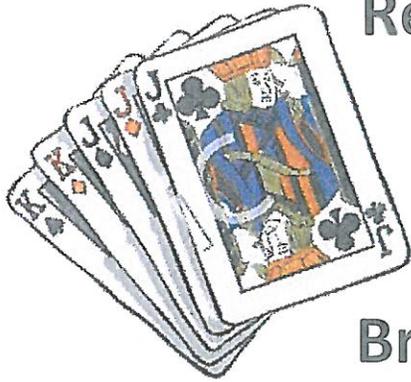
<u>Name</u>								
Heather Pavich	FM-003375	6/11/2016	RB-0000494	12/20/2015	LNK-0016990	4/16/2016		
Amanda Asch	RS-0117296	4/3/2014	RB-0008305	4/5/2016	LNK-0016009	4/5/2016		
Terry Schubert	SC-0114286	12/2/2013	RB-0008886	4/17/2016	LNK-0017048	4/17/2016		
Brenton Keefer	PC-1014633	12/3/2014						
Terese Anderson	PC-1028569	3/21/2016						
Amanda Brick			RB-0017731	5/1/2016	LNK-0017775	5/2/2016		
Tami Ryder	SC-120141	7/11/2014						

1st

Annual Congress Poker Run

To Benefit Wounded Warriors of Nebraska

Saturday May 31st, 2014



Registration from 8am-10am

Registration Fee \$10

All wheels welcome

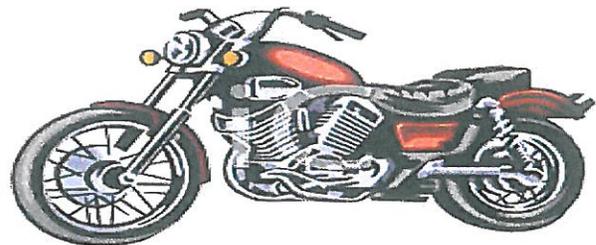


Breakfast specials 6am-10am

Slyder James Band 6p-11pm

Outside concessions with Burger, Brats and Beer

Special Room Rates from Days Inn



Congress Restaurant & Lounge

2001 W 'O' Street Lincoln, NE

402-477-4289

Days Inn Hotel

Lincoln, NE

402-477-4488

Roca Tavern
Roca

Triple Crown Bar
Pickrell

Hallam Steak House
Hallam

Big V's
Pleasant Dale

Congress Lounge
Lincoln