

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

213

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 APR 1 9 2016  
 NEBRASKA LIQUOR CONTROL COMMISSION

DO YOU NEED POSTERS? YES  NO

RETAIL LICENSE HOLDER

FILED

APR 1 8 2016

NON PROFIT APPLICANT

Non Profit Status (check one that best applies):

Municipal  Political  Fine Arts  Fraternal  Religious  Charitable  Public Service

CITY CLERK'S OFFICE

No Local

**COMPLETE ALL QUESTIONS**

5-14-16

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

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

L-105980

3. Licensee name (last, first,), corporate name or limited liability company (LLC) name (As it reads on your liquor license). If you are a nonprofit, name & address of the organization.

<b>NAME:</b>	Empyrean Brewing Co.		
<b>ADDRESS:</b>	729 Q Street		
<b>CITY:</b>	Lincoln	<b>ZIP:</b>	68508

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

<b>BUILDING NAME:</b>	Empyrean Brewing Co.		
<b>ADDRESS:</b>	300 S. 7th Street	<b>CITY:</b>	Lincoln
<b>ZIP:</b>	68508	<b>COUNTY &amp; COUNTY #:</b>	Lancaster, #2

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

CK # 21846

City of Lincoln  
 CK # 621845

\$ 40.00

\$ 80.00

np

np

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

Date 5/14/16	Date	Date	Date	Date	Date
Hours From 1pm To 8pm	Hours From To	Hours From To	Hours From To	Hours From To	Hours From 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** Attachment x \_\_\_\_\_  
 (not square feet or acres)

\*Outdoor area dimensions of area to be covered **IN FEET** Attachment x \_\_\_\_\_  
 \***SKETCH OF OUTDOOR AREA (or attach copy of sketch) (sample sketch)**

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 APR 12 2016  
**NEBRASKA LIQUOR  
 CONTROL COMMISSION**

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? 300

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)  
Please refer to attached letter

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.

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NEBRASKA LIQUOR CONTROL COMMISSION

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: Jim Engelbart

Signature of Event Supervisor: \_\_\_\_\_

Event Supervisor phone: Before 402-540-0440 During 402-540-0440

Email address: jengelbart@telesis-inc.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

Jim Engelbart  
Authorized Representative/Applicant

Brewery Manager  
Title

4/8/16  
Date

Jim Engelbart  
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:	Beer to There		
Applicant and Sponsoring Organization or Individual (if applicable):		Empyrean Brewing Co.	
Date(s) of Event:	5/14/16	Hours:	1 - 8pm <b>RECEIVED</b>
Alternate Date(s):		Hours:	

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Is the event open to the public?     Yes     No

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

How will you ensure that minors will not be served or consume beverages containing alcohol: Please refer to attached letter

Will food be served?     Yes     No    If yes, please list food to be served: APPETIZERS,  
SNACKS

Will non-alcoholic beverages be served:     Yes     No  
If yes, please list non-alcoholic beverages to be served:    Pepsi products, water

Who will serve the beverages containing alcohol?    Certified staff members  
**Must complete Server/Seller Applicant Information Sheet.**

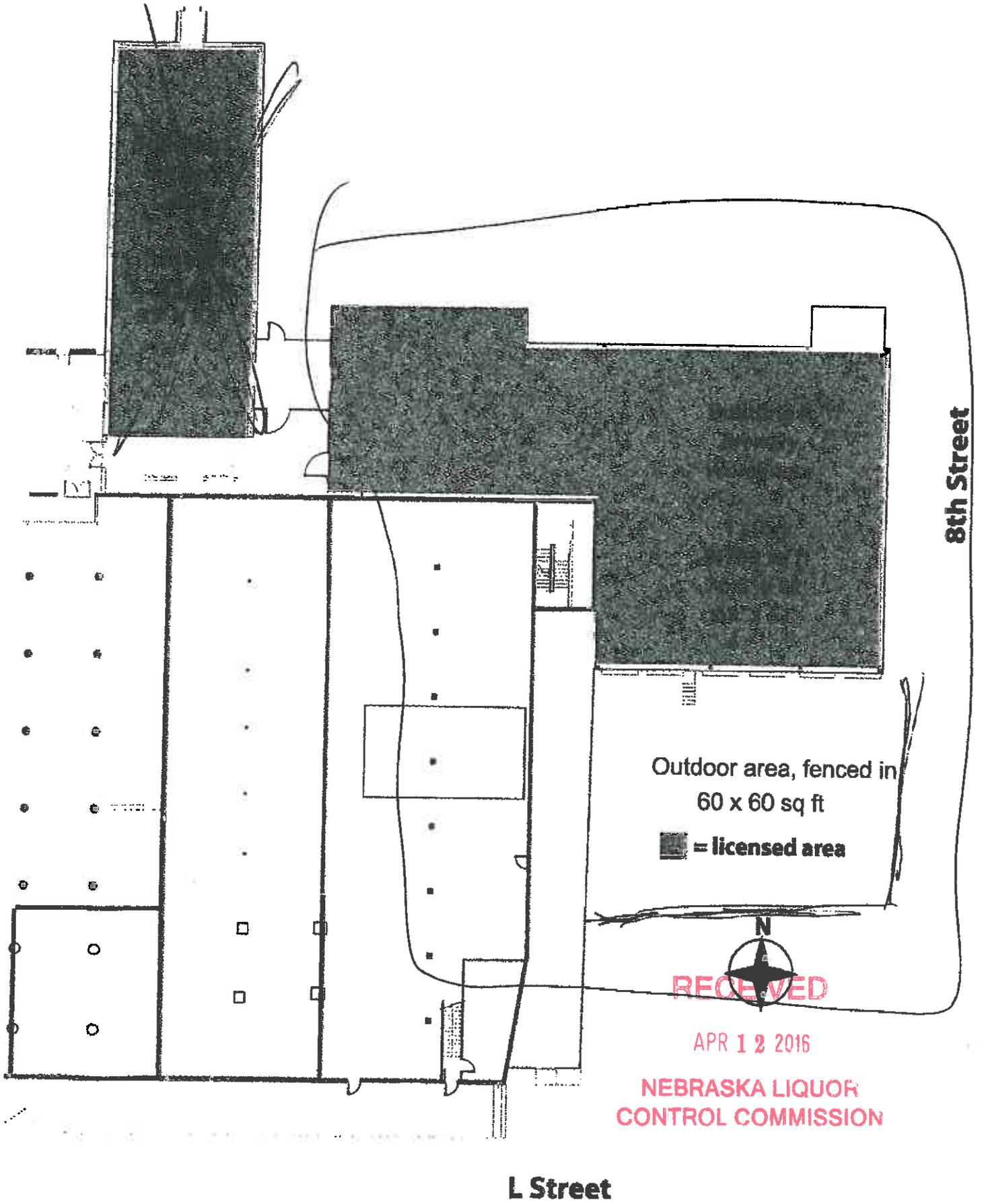
Have the designated servers received responsible beverage server training?     Yes     No

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: \_\_\_\_\_

  
Applicant's Signature

Date    4/8/16



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APR 12 2016  
NEBRASKA LIQUOR  
CONTROL COMMISSION



April 8, 2016

City of Lincoln  
Attn.: Teresa J. Meier, City Clerk  
555 S. 10<sup>th</sup> Street, Room 103  
Lincoln, NE 68508

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APR 12 2016

NEBRASKA LIQUOR  
CONTROL COMMISSION

Re: Alcohol service for Tour de Brew, 300 S. 7<sup>th</sup> Street, Lincoln NE 68508

In compliance with the Nebraska Liquor Control Commission regulations, Empyrean Brewing Co. is submitting an application for a Special Designated License to serve beer, wine, and spirits for an indoor/outdoor event on Saturday, May 14<sup>th</sup>, 2016, called Beer to There, located at 300 S. 7<sup>th</sup> Street. The fundraising event will feature live music along with food and beverages. The dimensions are 76.5' x 82', 69' x 51' and 60' x 60' (total of 13,389 sq ft). Empyrean Brewing Co. is applying for this SDL under its existing brew pub license, L-105980.

The following steps will be taken to prevent underage persons from obtaining alcohol beverages. Alcohol sales will be confined to inside the building. No outside alcohol will be permitted inside the building or fenced area. No alcohol will be allowed to leave the fenced-in area. Alcohol service will be conducted by experienced Empyrean staff members. Guests who wish to order and consume alcohol will be asked for identification and shall be required to wear a wristband. Empyrean staff will patrol the building and grounds continuously to enforce the rules and to provide a security presence.

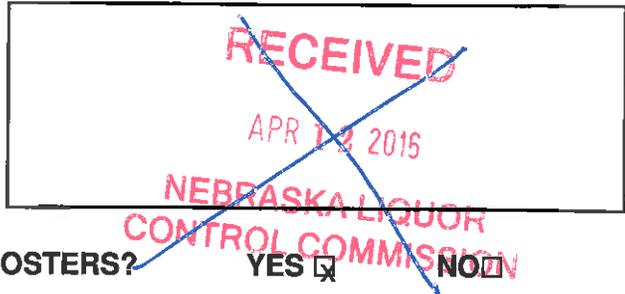
We respectfully request that the City of Lincoln's offices provide the Nebraska Liquor Control Commission with a letter of approval, indicating that your office has been notified of this event. We also ask that a copy be sent to our offices for inclusion with the SDL application. Throughout the application process, questions or concerns may be directed to Angela Tucci at (402) 434-5960 or [atucci@telesys-inc.com](mailto:atucci@telesys-inc.com).

Sincerely,

Angela Tucci  
Director of Corporate Compliance  
Empyrean Brewing Co.

214

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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

No local

**COMPLETE ALL QUESTIONS**

5-19-16

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

2. Liquor license number and class (i.e. C55441, CK55441) (If you're a nonprofit organization leave blank) L-105980

3. Licensee name (last, first, ), corporate name or limited liability company (LLC) name (As it reads on your liquor license). If you are a nonprofit, name & address of the organization.

<b>NAME:</b>	Empyrean Brewing Co.		
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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

CK # 021999 \$40.00  
City of Lincoln  
CK # 021995 \$80.00  
np → np →



Returned 7/13/16

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)

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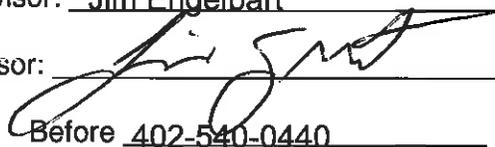
NEBRASKA LIQUOR CONTROL COMMISSION

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If so, describe activity: \_\_\_\_\_

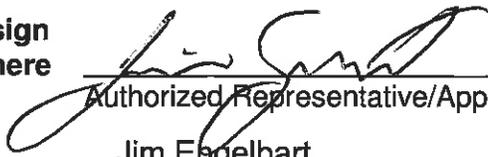
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13. Any other information or requests for exemptions (**must** be received by Commission 30 days prior to event, complete NLCC form 140): \_\_\_\_\_

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: Jim Engelbart  
Signature of Event Supervisor:   
Event Supervisor phone: Before 402-540-0440 During 402-540-0440  
Email address: jengelbart@telesis-inc.com

15. Consent of Authorized Representative/Applicant  
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 \_\_\_\_\_ Title Brewery Manager Date 4/8/16  
Jim Engelbart  
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.

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

Name of Event:	Tour de Brew		
Applicant and Sponsoring Organization or Individual (if applicable):	Empyrean Brewing Co.		
Date(s) of Event:	5/19/16	Hours:	5 - 11pm
Alternate Date(s):		Hours:	

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**NEBRASKA LIQUOR  
CONTROL COMMISSION**

Is the event open to the public?     Yes     No

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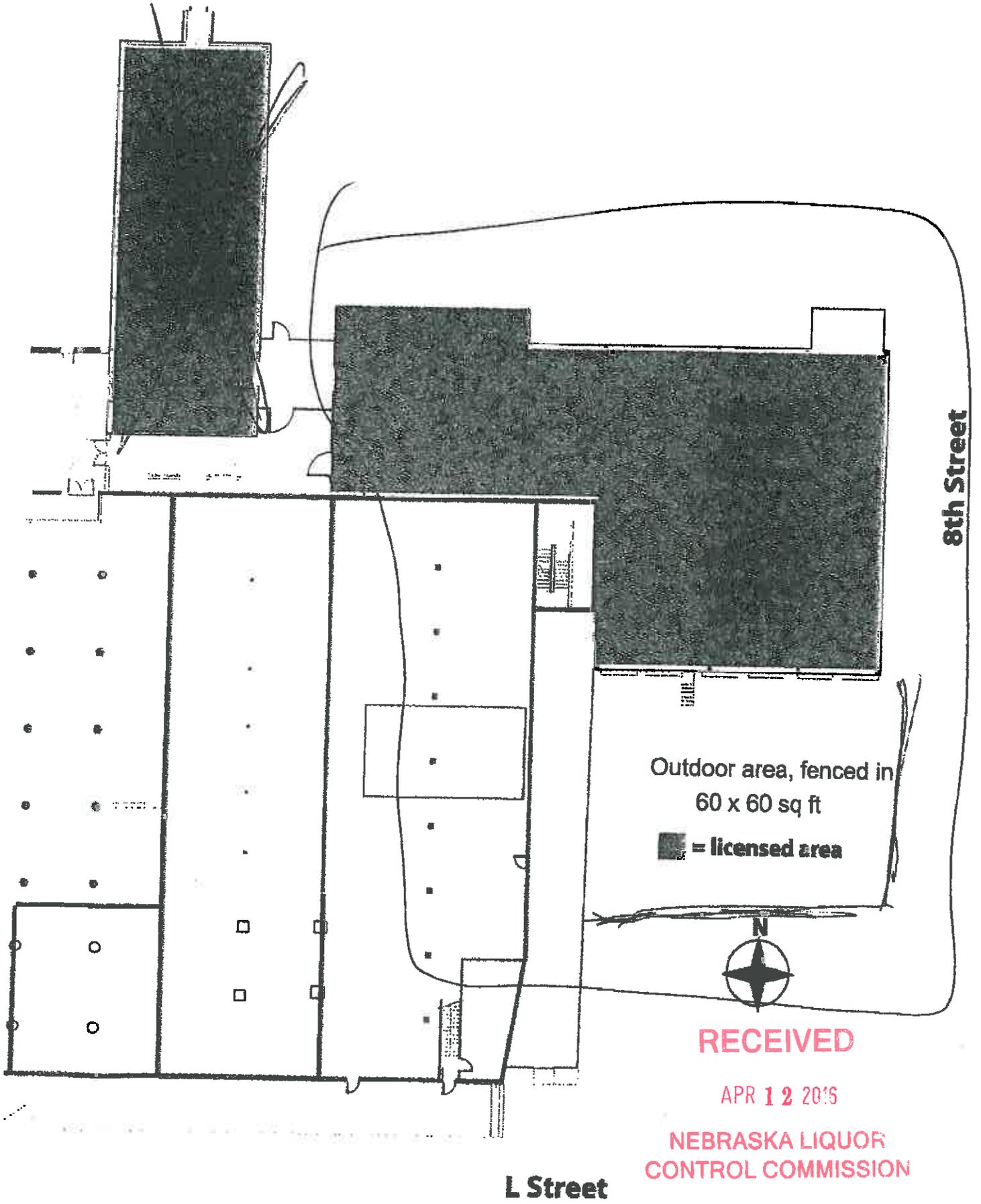
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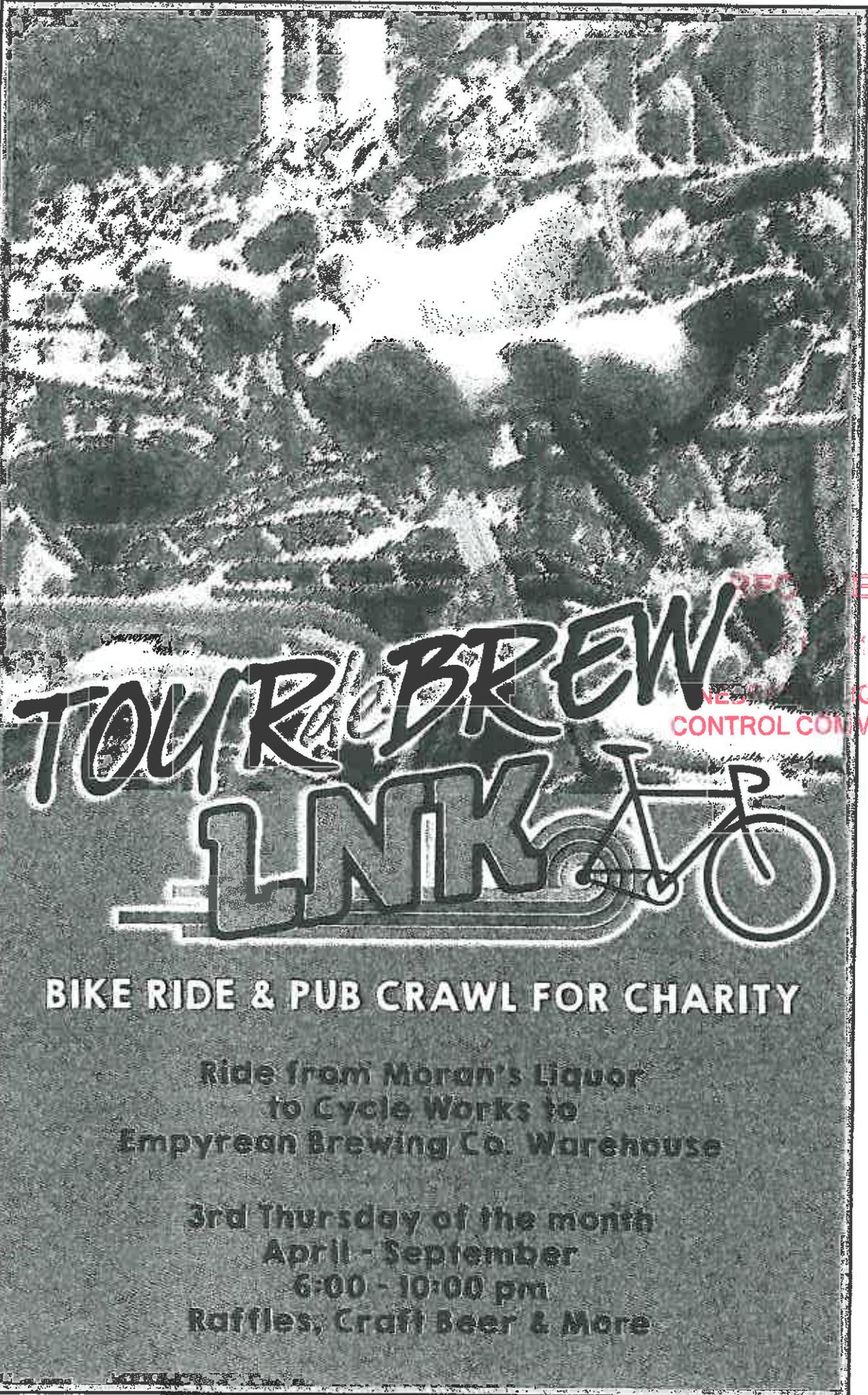
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**APR 12 2015**

**NEBRASKA LIQUOR  
CONTROL COMMISSION**

**L Street**

**8th Street**



**TOUR de BREW  
LNK**



**BIKE RIDE & PUB CRAWL FOR CHARITY**

Ride from Moran's Liquor  
to Cycle Works to  
Empyrean Brewing Co. Warehouse

3rd Thursday of the month  
April - September  
6:00 - 10:00 pm  
Raffles, Craft Beer & More

REC...ED  
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NEED LIQUOR  
CONTROL COMMISSION



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NEBRASKA LIQUOR  
CONTROL COMMISSION

April 8, 2016

City of Lincoln  
Attn.: Teresa J. Meier, City Clerk  
555 S. 10<sup>th</sup> Street, Room 103  
Lincoln, NE 68508

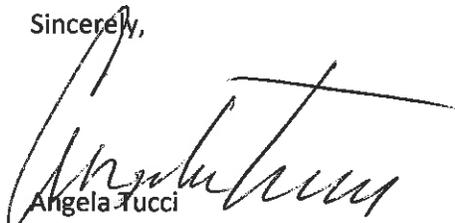
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Angela Tucci  
Director of Corporate Compliance  
Empyrean Brewing Co.