

# RECONSTRUCTION TO LICENSED AREA

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
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WEBSITE: [www.lcc.nebraska.gov](http://www.lcc.nebraska.gov)

License Class: _____
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License Number: _____
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Office Use only  Date Stamp HERE ONLY Do not stamp any of the following pages
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### Application Requirements:

- Fee of \$45.00 – You may pay online at [www.ne.gov/go/NLCCpayport](http://www.ne.gov/go/NLCCpayport) or include a check made payable to the Nebraska Liquor Control Commission
- Must include a copy of the lease, deed or purchase agreement showing ownership in the name of the applicant of area.
- Must include simple hand drawn sketch showing existing licensed area and area to be reconstructed, must include outside dimensions in feet (not square feet), show direction North.  
DO NOT SEND BLUE PRINTS, ARCHITECT OR CONSTRUCTION DRAWINGS
- Check with your local governing body for any additional requirements that may be necessary in making this request for reconstruction
  - Rules & Regulations Chapter 2–012.0712.07 Outdoor area shall mean an outdoor area included in licensed premises, which is used for the service and consumption of alcoholic liquors and which is contained by a permanent fence, wall or other barrier approved by the Commission and shall be in compliance with all building and fire, or other applicable local ordinances

LICENSEE NAME \_\_\_\_\_

TRADE NAME \_\_\_\_\_

PREMISE ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_ COUNTY \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

PHONE NUMBER OF CONTACT PERSON \_\_\_\_\_

EMAIL ADDRESS OF CONTACT PERSON \_\_\_\_\_

Office use only  PAYMENT TYPE _____ AMOUNT _____ RCPT _____ RECEIVED: _____ DATE DEPOSITED _____	BARCODE
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1. Will this reconstruction cause the premises to be licensed within 150 feet of a church, school, hospital, home for indigent persons or for veterans, their wives, and children; OR within 300 feet of a college or university campus?

\_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, provide name and address of such institution and where it is located in relation to the premises (Nebraska Revised Statute 53-177(1) **AND PROVIDE FORM 134 – CHURCH OR FORM 135 – CAMPUS AND LETTER OF SUPPORT FROM CHURCH OR CAMPUS**

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1. What is being reconstructed? Explain why this area is being rebuilt \*if adding an outdoor area permanent fencing is required. Please contact the local governing body for other requirements regarding fencing.
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**DESCRIPTION AND DIAGRAM OF THE AREA TO BE LICENSED**

IN THE SPACE PROVIDED BELOW OR ATTACH A DRAWING  
**SHOW EXISTING LICENSED AREA AND AREA THAT IS BEING RECONSTRUCTED**  
DO NOT SEND BLUEPRINTS, ARCHITECT OR CONSTRUCTION DRAWINGS  
PROVIDE LENGTH X WIDTH IN FEET (NOT SQUARE FOOTAGE)  
INDICATE THE DIRECTION OF NORTH

Building length \_\_\_\_\_ x width \_\_\_\_\_ in feet

Is there a basement? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, length \_\_\_\_\_ x width \_\_\_\_\_ in feet

Is there an outdoor area? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, length \_\_\_\_\_ x width \_\_\_\_\_ in feet

\*If adding an outdoor area permanent fencing is required. Please contact the local governing body for other requirements regarding fencing

Number of floors of the building \_\_\_\_\_

**PROVIDE DIAGRAM OF AREA TO BE LICENSED - ATTACH SEPARATE SHEET**

**I acknowledge that the premises as added to comply in all respects with the requirements of the act. Neb Rev Stat §53-129**

\_\_\_\_\_  
Signature of LICENSEE

\_\_\_\_\_  
Printed Name of LICENSEE