APPLICATION FOR LIQUOR LICENSE **CHECKLIST PEDAL PUB** NEBRASKA LIQUOR CONTROL COMMISSION License 301 CENTENNIAL MALL SOUTH Class: PO BOX 95046 **Date Stamp HERE ONLY** LINCOLN, NE 68509-5046 Do not stamp any of the following pages **License Number:** PHONE: (402) 471-2571 FAX: (402) 471-2814 EMAIL: lcc.frontdesk@nebraska.gov WEBSITE: www.lcc.nebraska.gov Office Use Only Initial: **NEW / REPLACING** TOP: Yes/No Hot List: Yes / No Approved / Denied PLEASE READ CAREFULLY: See directions on the next page. Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. If your operation depends on receiving a liquor license, the Nebraska Liquor Control Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. You may want to check with the city/village or county clerk, where you are making application, to see if any additional requirements must be met before submitting application to the Nebraska Liquor Control Commission. APPLICANT NAME: _____ TRADE (DBA) NAME: PREVIOUS TRADE (DBA) NAME: CONTACT EMAIL ADDRESS: ____

Office use only	
PAYMENT TYPE	
AMOUNT:	BARCODE
RCPT:	
RECEIVED:	

DIRECTIONS

PEDAL-PUB VEHICLE means a multi-passenger, human-powered vehicle

The holder of a pedal-pub vehicle license may sell alcoholic liquor in individual drinks to customers who are 21 or older to consume while they are on or in the pedal-pub vehicle and may allow such customers to consume alcoholic liquor not purchased from the licensee. Licensee shall serve alcoholic liquor in opaque plastic containers that prominently display the licensee's trade name or logo or some other mark that is unique to the licensee under the licensee's pedal-pub vehicle license and shall require the use of such containers for the consumption of alcoholic liquor not purchased from the licensee.

No customer shall take any open container of alcoholic liquor from the pedal-pub vehicle or consume the alcoholic liquor after leaving the pedal-pub vehicle. A customer may take unopened containers of alcoholic liquor not purchased from the licensee from the pedal-pub vehicle.

Licensee shall not allow open containers of alcoholic liquor to leave the pedal-pub vehicle. The licensee shall be responsible for picking up and disposing of any litter or other waste or any personal property that originates from the pedal-pub vehicle and lands on public or private property.

Each item must be included with your application

- 1. Application fee of \$95 (nonrefundable), please pay online thru our PAYPORT system or enclose payment made payable to the Nebraska Liquor Control Commission
- 2. Enclose the appropriate application forms

Individual License (Form 104)

Partnership License (Form 105)

Corporate License (Form 101 & Form 103)

Limited Liability Company (LLC) (Form 102 & Form 103)

- 3. For citizenship enclose U.S. birth certificate; U.S. passport or naturalization paper
 - a. For residency enclose proof of registered voter in Nebraska
 - b. If permanent resident include Employment Authorization Card or Permanent Resident Card
 - c. See guideline for further assistance
- 4. If buying the business of current Pedal-Pub operator:
 - a) Provide a copy of the purchase agreement from the seller (must read applicants name)
 - b) Provide a copy of alcohol inventory being purchased (must include brand names, container size & quantity)
 - c) Enclose a list of the assets being purchased (furniture, fixtures and equipme
- 5. Form 147 Fingerprints are required for each person as defined in new application guide, found on our website under "Licensing Tab" in "Guidelines/Brochures".
- 6. Submit a copy of your business plan.
 - a. How you plan on disposing of waste alcohol
 - b. How is vehicle equipped for use on the road, i.e. lights, signs
- 7. Enclose a list of all property to be used in the Pedal-Pub operation

I acknowledge that this application is not a guarantee that the average processing period is 60 days. Furthermore, I u and I accept all responsibility for any false documents.	<u>*</u>
Signature	
Date	

8. Submit a photocopy of your opaque plastic container that will be used in the licensed vehicles

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES CHECK DESIRED CLASS

LICENSE TERM IS	MAY 1 – APRIL 30			
Slass Q Pedal-Pub \$95 check made payable to the Nebraska Liquor Control Commission or you may pay onli www.ne.gov/go/NLCCpayport				
	\$1 each, number of duplicates neededst be posted in each pedal-pub vehicle where alcoholic liquor is sold or consumed			
ADDITIONAL FEES LICENSE IS ISSUEI	WILL BE ASSESSED AT THE CITY/VILLAGE OR COUNTY LEVEL WHEN THE			
CHECK TYPE OF	LICENSE FOR WHICH YOU ARE APPLYING			
Individual Lic Partnership Li Corporate Lice Limited Liabil	ense (requires insert 1 <u>FORM 104</u>) cense (requires insert 2 <u>FORM 105</u>) ense (requires insert 3a <u>FORM 101</u> & 3c <u>FORM 103</u>) ity Company (LLC) (requires form 3b <u>FORM 102</u> & 3c <u>FORM 103</u>)			
NAME OF ATTOR	NEY OR FIRM ASSISTING WITH APPLICATION (if applicable)			
Name	Phone Number:			
Firm Name				
Email address:				
Should we contact you	with any questions on the application? YES NO			

PREMISES INFORMATIO	N			
Trade Name (doing business as)				<u>.</u>
Street Address				
City		County		_Zip Code
Premises Telephone number				
Business e-mail address				
Is this location inside the city/vil	lage corporate limi	ts: YES	NO	
MAILING ADDRESS (when	re you want to re	eceive mail from	the Commission)	
Name				
Street Address				
City		State_		Zip Code
APPLICANT INFORMATI	ON			
Has <u>anyone</u> who is a party to this Charge means any charge alleging ordinance or resolution. List the or plea. Also list any charges periodividual's name. Include traffic violations. Communication this application. YESNO If yes, please explain below or	ng a felony, misdem nature of the chargending at the time of nission must be not	neanor, violation of ge, where the charg f this application.	f a federal or state law; a veceocurred and the year and the more than one party, pl	violation of a local law, nd month of the conviction ease list charges by each
Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition

2. <i>A</i>	Are you buying the busing	ness of a current pedal pub license?
	YES	NO
2 1	a) Submit a copy ofb) Include a list ofc) Submit a list of	of business and liquor license number
3. \	•	sed as liquor licensed business within the last two (2) years?
	YES	
	If yes, give name a	nd license number
4 . <i>A</i>	Are you borrowing any	money from any source, include family or friends, to establish and/or operate the business?
	YES	NO
	If yes, list the lend	er(s)
5. V	Will any person or entit	y, other than applicant, be entitled to a share of the profits of this business?
	YES	NO
		l involved persons must be disclosed on application)
N _o		
Liqu	or License shall permit a	1E Silent Partners; Profit Sharing: No licensee or partner, principal, agent or employee of any Retail ny other person not licensed or included as a partner, principal, or stockholder of any Retail Liquor haring of profits or liabilities arising from any Retail Liquor License. (53-1,100)
	•	application a law enforcement officer? If yes, list the person, the law enforcement agency exact duties. (Nebraska Revised Statute 53-125(15)
	YES	NO
		nd/or financial institution (branch if applicable) to be utilized by the business. who are authorized to write checks and/or withdrawals on accounts at this institution.
Incl		liquor licenses held in Nebraska or any other state by any person named in this application. e, location of license and license number. Also list reason for termination of any license(s)

- 9. List the alcohol related training and/or experience (when and where) of the person(s) making application. Those persons required are listed as followed:
 Individual: Applicant and spouse; spouse is exempt if they filed Form 116 Affidavit of Non-Participation.
 - Partnership: All partners and spouses, spouses are exempt if they filed <u>Form 116</u> Affidavit of Non-Participation.
 - Limited Liability Company: All member of LLC, Manager and all spouses; spouses are exempt if they filed Form 116 Affidavit of Non-Participation.

NLCC certified training program cor		
Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
	33337	
List of NLCC certified training programs	<u>s</u>	
Experience: Applicant Name/Job Title	Date of	Name & Location of Business
	Employment:	
3. If the property for which this lies	ense is sought is own	ed, submit a copy of the deed, or proof of ownership. If lease
submit a copy of the lease covering tapplicant as owner or lessee in t	he entire license year	ed, submit a copy of the deed, or proof of ownership. If lease c. Documents must show title or lease held in name of r corporate name for which the application is being
submit a copy of the lease covering tapplicant as owner or lessee in taled.	he entire license year he individual(s) o	. Documents must show title or lease held in name of r corporate name for which the application is being
submit a copy of the lease covering to applicant as owner or lessee in to filed. Lease: expiration date Deed	he entire license year he individual(s) o	. Documents must show title or lease held in name of r corporate name for which the application is being
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submit a copy of the lease covering to applicant as owner or lessee in to filed. Lease: expiration date Deed Purchase Agreement	he entire license year he individual(s) or	E. Documents must show title or lease held in name of recorporate name for which the application is being
submit a copy of the lease covering to applicant as owner or lessee in to filed. Lease: expiration date Deed Purchase Agreement 10. When do you intend to open for	he entire license year he individual(s) or business?	E. Documents must show title or lease held in name of recorporate name for which the application is being
pubmit a copy of the lease covering to applicant as owner or lessee in to iled. Lease: expiration date Deed Purchase Agreement O. When do you intend to open for the interval of the interva	he entire license year he individual(s) of business?	E. Documents must show title or lease held in name of recorporate name for which the application is being
Lease: expiration date Deed Purchase Agreement O. When do you intend to open for What will be the main nature of What are the anticipated hours o	he entire license year he individual(s) of business? business? f operation?	E. Documents must show title or lease held in name of recorporate name for which the application is being
submit a copy of the lease covering to applicant as owner or lessee in to filed. Lease: expiration date Deed Purchase Agreement 10. When do you intend to open for 11. What will be the main nature of 12. What are the anticipated hours of 13.	he entire license year he individual(s) of business? business? f operation?	E. Documents must show title or lease held in name of recorporate name for which the application is being
Lease: expiration date Deed Purchase Agreement 10. When do you intend to open for 11. What will be the main nature of 12. What are the anticipated hours o 13. List the principal residence(s) fo	he entire license year he individual(s) of business? business? f operation? r the past 10 years for	E. Documents must show title or lease held in name of recorporate name for which the application is being

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE					
APPLICANT: CITY & STATE	YEAR FROM TO		SPOUSE: CITY & STATE	YEAR FROM TO	

If necessary, attach a separate sheet

PERSONAL OATH AND CONSENT OF INVESTIGATION SIGNATURE PAGE – PLEASE READ CAREFULLY

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background and release present and future records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation of any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. 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.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Applicant Notification and Record Challenge: Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in FBI identification record. The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

Must be signed in the presence of a notary public by applicant(s) and spouse(s). (YOU MAY NEED TO PRINT MULITPLE SIGNATURE PAGES)

Signature of APPLICANT	Signature of SPOUSE
Printed Name of APPLICANT	Printed Name of SPOUSE
Signature of APPLICANT	Signature of SPOUSE
Printed Name of APPLICANT	Printed Name of SPOUSE