APPLICATION FOR DELETION TO LIQUOR LICENSE

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.nebraska.gov

Office Use

Application:

- **Must include processing fee of $45.00 checks made payable to Nebraska Liquor Control Commission (NLCC) or you may pay online at www.ne.gov/go/NLCCpayport**

- **Must include simple hand drawn sketch showing existing licensed area and area to be deleted, must include outside dimensions in feet (not square feet), and show direction north. NO BLUE PRINTS**

- **May include approval from the local governing body; no deletion shall be approved unless endorsed by the local governing body**

- **Check with your local governing body for any additional requirements that may be necessary in making this request for deletion**

LIQUOR LICENSE #_____**CLASS TYPE**_____

LICENSEE NAME_____

TRADE NAME_____

PREMISE ADDRESS_____

CITY_____**ZIP CODE**_____**COUNTY**_____

CONTACT PERSON_____

PHONE NUMBER OF CONTACT PERSON_____

EMAIL ADDRESS OF CONTACT PERSON_____

BARCODE
LABEL

1.   What is being deleted?
   Explain why this area is being removed from licensed description

_____
_____
_____

2.   Include a sketch of the area to be deleted showing:
   ✓ **existing licensed area with length & width in feet**
   ✓ **area to be deleted with length & width in feet**
   ✓ **direction north**

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

_____
   Signature of Licensee or Officer

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

_____ by _____
                        Date   name of person acknowledged (individual(s) signing document)

```
Affix Seal


```

_____
Notary Public signature