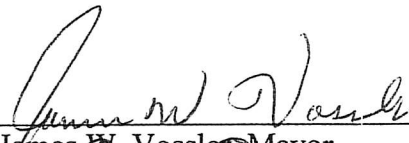
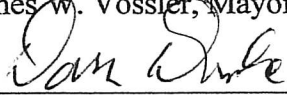


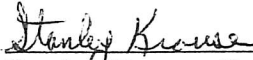
RESOLUTION #11-09

A RESOLUTION OF THE MAYOR AND THE CITY COUNCIL OF THE CITY OF FRIEND, SALINE COUNTY, NEBRASKA, APPROVING THE APPLICATION OF SOC 153, LLC DBA POUR HOUSE, FOR A SPECIAL DESIGNATED LICENSE UNDER THE NEBRASKA LIQUOR CONTROL ACT, TO SELL BEER, WINE AND DISTILLED SPIRITS ON AUGUST 8, 2011 IN THE CITY OF FRIEND. THE SAID SPECIAL DESIGNATED LICENSE TO BE LIMITED TO THE INSIDE AREA OF POUR HOUSE, 511 SECOND STREET, SUITE B TO BE HELD BETWEEN THE HOURS OF 12:00 P.M. NOON AND 10:00 P.M, PURSUANT TO THE MUNICIPAL CODE OF THE CITY OF FRIEND, AND THE NEBRASKA LIQUOR CONTROL ACT.

DATED APRIL 5, 2011


James W. Vossler, Mayor


Dan Drake, Councilman


Stanley Krause, Councilman

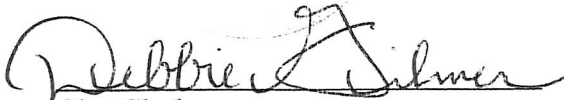

Dale Lawver, Councilman


Harlan Schrock, Councilman

ATTEST:

(seal)

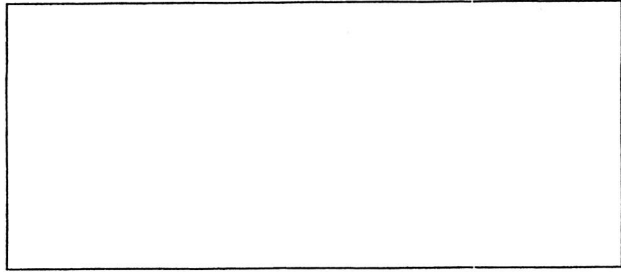



Debbie J. Silver
City Clerk

This resolution was offered by Councilperson _____, seconded by Councilperson _____. Upon roll call, voting aye, _____; voting nay, _____.

Said resolution was passed and approved and the Clerk was directed to enter the same at large upon the minutes and to certify a copy to accompany the application for the special designated permit to the Nebraska Liquor Control Commission.

APPLICATION FOR SPECIAL DESIGNATED LICENSE RETAIL LICENSE HOLDERS



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.ne.gov/

BEFORE SUBMITTING APPLICATION TO THE LIQUOR CONTROL COMMISSION

- Include approval from the City, Village or County Clerk where the event is to be held
- A license fee \$40 (payable to Nebraska Liquor Control Commission) for each day/event to be licensed (i.e. if you have two separate areas at one event they both need to be licensed) (unless licensed as a K Caterer no fees required)
- Application **MUST** be received at the Liquor Control Commission Office no later than 10 working days prior to event (excluding weekends, Federal and State observed holidays)

COMPLETE ALL QUESTIONS

1. Type of alcohol to be served and/or consumed

- Beer Wine Distilled Spirits

2. Liquor license number and class (i.e. C-55441)

CK 87937

3. Licensee name (last, first, middle), Corporate name, Limited Liability Company (LLC)

NAME: Potter, Cara, Ellen, Soc153, LLC dba Pour House

ADDRESS: PO Box 153 / 511 2nd Street Suite A

CITY: Friend ZIP: NE

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

ADDRESS: 511 2nd Street, Suite B

CITY: Friend ZIP: NE

COUNTY: Saline

- a. Is this location within the city/village limits? YES NO
- b. Is this location within the 150' of church, school, hospital or home aged/indigent or for veterans their wives? YES NO
- c. Is this location within 300' of any university or college campus? YES NO

Must be consecutive days

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

Date	Date	Date	Date	Date	Date
8/8					
Hours From	Hours From	Hours From	Hours From	Hours From	Hours From
noon To 10pm	To	To	To	To	To

a. Alternate date: _____

b. Alternate location: _____
(Alternate date or location must be approved by local)

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

- Dance Reception Fund Raiser Beer Garden Sampling/Tasting Other Anniversary party

7. Description of area to be licensed

Inside building, dimensions of area to be covered **IN FEET** 100 x 70
 Name of building Friend Historical Society San Carlo Room (not square feet or acres)

Outdoor area dimensions of area to be covered **IN FEET** _____ x _____
 (not square feet or acres)

If outdoor area, how will premises be enclosed

- fence, type of fence snow fence chain link cattle panels other _____
 tent
 other, explain _____

*If both inside and outdoor area to be licensed include **simple sketch**

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

9. If over 150, indicate the steps that will be taken to prevent underage persons from obtaining alcohol beverages.

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. Where will you be purchasing your alcohol wholesaler retailer both

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.

13. Any other information or requests for exemptions:

[Empty box for additional information]

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.

Cara E Potter Phone: Before 4027300276 During 4029472293
Print name of Event Supervisor

Cara Potter
Signature of Event Supervisor

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.

Cara Potter Owner/Operator *April 4, 2011*
August 22, 2010
Authorized Representative/Applicant Title Date

Cara E. Potter
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.