

---

# City of Broken Bow

Monday, August 13, 2012

City Council Regular Session

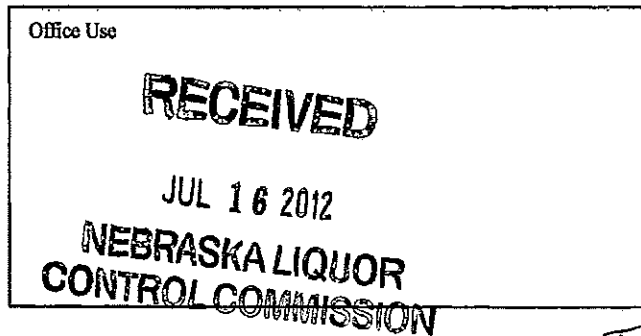
## Managers Liquor License Application for Pump & Pantry #14

*Request for approval of Managers Liquor License Application of Brian Fausch for the Pump & Pantry #14 liquor license in Broken Bow*

Staff Contact: City Administrator

**MANAGER APPLICATION  
INSERT - FORM 3c**

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](http://www.lcc.ne.gov)



Corporate manager, including their spouse, are required to adhere to the following requirements

- 1) Must be a citizen of the United States
- 2) Must be a Nebraska resident (Chapter 2 - 006) and must provide proof of voter registration in the State of Nebraska
- 3) Must provide a copy of one of the following: state issued US birth certificate, naturalization paper or US passport
- 4) Must submit fingerprints (unless a non-participating spouse) (2 cards per person) and fees of \$38 per person, made payable to Nebraska State Patrol
- 5) Must be 21 years of age or older
- 6) May be required to take a training course

**Corporation/LLC information**

Name of Corporation/LLC: Bosselman Pump & Pantry, Inc.

**Premise information**

Premise License Number: B-13139

(if new application leave blank)

Premise Trade Name/DBA: Pump & Pantry #14

Premise Street Address: 1037 E SOUTH E ST

City: Broken Bow

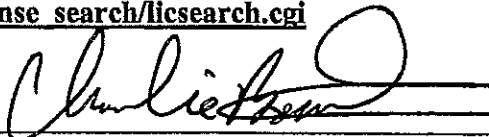
State: NE

Zip Code: 68822

Premise Phone Number: 308-872-6842

The individual whose name is listed as a corporate officer or managing member as reported on insert form 3a or 3b or listed with the Commission. Click on this link to see authorized individuals.

[http://www.lcc.ne.gov/license\\_search/licsearch.cgi](http://www.lcc.ne.gov/license_search/licsearch.cgi)



CORPORATE OFFICER/MANAGING MEMBER SIGNATURE

(Faxed signatures are acceptable)



1200013236

Form 103  
Rev 11/2012  
Page 2 of 5

Manager's information must be completed below PLEASE PRINT CLEARLY

Gender: ☒ MALE

☐ FEMALE

Last Name: Fausch First Name: Brian MI: T

Home Address (include PO Box if applicable): 1404 Meadow RD

City: Grand Island County: Hall Zip Code: 68803

Home Phone Number: 308-258-1639 Business Phone Number: 308-381-2800

Social Security Number: [REDACTED] Drivers License Number & State: [REDACTED]

Date Of Birth: 08/17/72 Place Of Birth: Red Cloud, NE

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

☒ YES

☐ NO

Spouse's information

Spouses Last Name: Fausch First Name: Lori MI: L

Social Security Number: \_\_\_\_\_ Drivers License Number & State: \_\_\_\_\_

Date Of Birth: 12/18/73 Place Of Birth: \_\_\_\_\_

APPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS

APPLICANT

SPOUSE

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Grand Island, NE	2009	Present	Grand Island, NE	2009	present
Gretna, NE	2007	2009	Gretna, NE	2007	2009
Grand Island, NE	2002	2007	Grand Island, NE	2002	2007

Form 103  
Rev 11/2012  
Page 3 of 5

# MANAGER'S LAST TWO EMPLOYERS

YEAR FROM	TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2009	present	Bosselman Administrative Services, Inc.	Charles D. Bosselman, Jr.	308-381-2800
2008	2009	Lutz & Co.	Ron Nebbia	402-496-8800

1. **READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY. Must be completed by both applicant and spouse, unless spouse has filed an affidavit of non-participation.**

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☐ YES ☐ NO

If yes, please explain below or attach a separate page.

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Brian Fausch	1992	Lincoln, NE	DUI	

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state? ☐ YES ☒ NO  
If YES, list the name of the premise.

3. Do you, as a manager, qualify under Nebraska Liquor Control Act (§53-131.01) and do you intend to supervise, in person, the management of the business? ☒ YES ☐ NO

4. Have you enclosed the required fingerprint cards and **PROPER FEES** with this application? (Check or money order made payable to the Nebraska State Patrol for \$38.00 per person)  
☒ YES ☐ NO

5. List any alcohol related training and/or experience (when and where).

Responsible Beverage Service Training, July 2012, Grand Island, NE

PERSONAL OATH AND CONSENT OF INVESTIGATION

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, a spousal affidavit of non participation may be attached.

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.

Brian Fausch  
Signature of Manager Applicant

Lori Fausch  
Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska

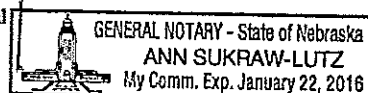
County of Hall The foregoing instrument was acknowledged before me this

7-3-12  
date

by Brian Fausch Lori Fausch  
name of person acknowledged

Ann Sukraw-Lutz  
Notary Public signature

Affix Seal



In compliance with the ADA, this application is available in other formats for persons with disabilities. A ten day advance period is required in writing to produce the alternate format.

# **SPOUSAL AFFIDAVIT OF NON PARTICIPATION INSERT**

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](http://www.lcc.ne.gov)

Office Use

I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will have not have any interest, directly or indirectly in the operation or profit of the business (§53-125(13)) of the Liquor Control Act. I will not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices or represent myself as the owner or in any way participate in the day to day operations of this business in any capacity. I understand my fingerprint will not be required; however, I am obligated to sign and disclose any information on all applications needed to process this application.

*Lori Fausch*  
Signature of spouse asking for waiver  
(Spouse of individual listed below)

Lori Fausch  
Printed name of spouse asking for waiver

State of NE

County of Hall

The foregoing instrument was acknowledged before me this

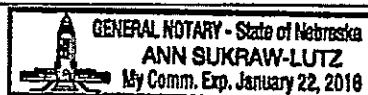
7-3-12  
date

by

Lori Fausch  
name of person acknowledged

*Ann Sukraw-Lutz*  
Notary Public signature

Affix Seal



I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (§53-125(13)) the Commission may cancel or revoke the liquor license.

*Brian Fausch*  
Signature of individual involved with application  
(Spouse of individual listed above)

Brian Fausch  
Printed name of applying individual

State of NE

County of Hall

The foregoing instrument was acknowledged before me this

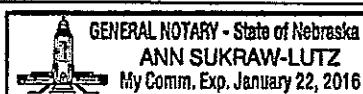
7-3-12  
date

by

Brian Fausch  
name of person acknowledged

*Ann Sukraw-Lutz*  
Notary Public signature

Affix Seal



In compliance with the ADA, this spousal affidavit of non participation is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4178  
Revised 1/2008

WHEN THIS COPY CARRIES THE RAISED SEAL OF THE NEBRASKA STATE DEPARTMENT OF HEALTH, IT CERTIFIES THE BELOW TO BE A TRUE COPY OF AN ORIGINAL RECORD ON FILE WITH THE STATE DEPARTMENT OF HEALTH BUREAU OF VITAL STATISTICS, WHICH IS THE LEGAL DEPOSITORY FOR VITAL RECORDS.

DATE OF ISSUANCE

JUL 15 1985  
LINCOLN, NEBRASKA

*Stanley S. Cooper*  
STANLEY S. COOPER, DIRECTOR  
BUREAU OF VITAL STATISTICS

STATE OF NEBRASKA—DEPARTMENT OF HEALTH  
Bureau of Vital Statistics

72 15732

CERTIFICATE OF LIVE BIRTH

126-

F 200

BIRTH NUMBER

CHILD—NAME			DATE OF BIRTH (MONTH, DAY, YEAR)		HOUR
FIRST	MIDDLE	LAST	2. AUGUST 17 1972		2. 10:13P
1. BRIAN THOMAS FAUSCH					
SEX	THIS BIRTH—SINGLE, TWIN, TRIPLET, ETC. (SPECIFY)	IF NOT SINGLE BIRTH—BORN FIRST, SECOND, THIRD, ETC. (SPECIFY)	COUNTY OF BIRTH		
3. MALE	4a. SINGLE	4b.	5a. WEBSTER		
CITY, TOWN, OR LOCATION OF BIRTH			HOSPITAL—NAME (IF NOT IN HOSPITAL, GIVE STREET AND NUMBER)		
6a. RED CLOUD, NEBRASKA			6b. WEBSTER COUNTY COMMUNITY		
MOTHER—MARDEN NAME			AGE (AT TIME OF THIS BIRTH)	STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY)	
7a. BARRARA ANN SIMONSON			8a. 20	8b. NEBRASKA	
RESIDENCE—STATE	COUNTY	CITY, TOWN, OR LOCATION, zip code	INSIDE CITY LIMITS (SPECIFY YES OR NO)	STREET AND NUMBER	
7c. NEBRASKA	7d. WEBSTER	7e. GUIDE ROCK, NEBRASKA	7f. INSIDE		
FATHER—NAME			AGE (AT TIME OF THIS BIRTH)	STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY)	
9a. THOMAS HOWARD FAUSCH			9b. 23	9c. WEBSTER COUNTY NEBRASKA	
INFORMANT—NAME OR SIGNATURE			RELATION TO CHILD		
10a. <i>Mrs. Barbara Simonson</i>			10b.		
I CERTIFY THAT THE ABOVE NAMED CHILD WAS BORN ALIVE AT THE PLACE AND TIME AND ON THE DATE STATED ABOVE.			DATE SIGNED (MONTH, DAY, YEAR)	ATTENDANT—M.D., D.O., OTHER (SPECIFY)	
10c. SIGNATURE <i>Francis Obert</i>			10d.	10e. M.D.	
CERTIFIER—NAME (TYPE OR PRINT)			MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP)		
10f. DR. F.C. OBERT			10g. RED CLOUD, NEBRASKA		
REGISTRAR—SIGNATURE			DATE RECEIVED BY LOCAL REGISTRAR		
11a. <i>Letty Johnson</i>			11b. Sept. 5, 1972		



**Search Your Voter  
Registration  
Information**



**Search Your Polling  
Place**



**Search Your  
Provisional Ballot**



**Search Your  
Absentee Ballot**

**Registrant Detail**

<b>Name</b>	Brian Fausch
<b>Party</b>	Republican
<b>Polling Place</b>	14 014 Peace Lutheran Church 1710 N North Road Grand Island, NE 68803

**Districts**

<b>District Name</b>	<b>District Type</b>
Grand Island Public Schools	School District
Central Com College Dist 4	Community College District
Central Com College At Large	Community College District
U.S. Congressional District 3	U.S. Congressional District
Appeals Court Judge Dist 5	Judge of Appeals Court Dist.
County Judge Dist 9	Judge of County Court Dist.
District Judge, Dist 9	Judge of District Court Dist.
Supreme Court Judge Dist 5	Judge of Supreme Court Dist.
Legislative District 34	Legislative District
Central Platte NRD SubD 7	Natural Resources District
Nebraska PPD SubD 3	Public Power District
PSC District 5	Public Service Comm District
Board of Regents District 6	Board of Regents
ESU 10 District 4	ESU District
Supervisor District 2	County Board (Commiss./Superv)
Gr Island City Council Ward 1	City Council (Ward)
GI School Board Ward A	School Board Ward
Mayor of Grand Island	Mayor
NW Advisory Board	School Board Ward
State Board of Education Dist6	State Board of Education

Información en español

© Copyright 2011 Election Systems and Software. All rights reserved.  
VoterView 2.2.961.1



**BOSSELMAN**



3123 West Stolley Parkway Suite 100 Box 4905 • Grand Island, Nebraska 68802-4905  
Phone (308) 687-2800 • Fax (308) 382-1160 • www.bosselman.com

AUG 1 2012

**NEBRASKA LIQUOR  
CONTROL COMMISSION**  
July 31, 2010

Nebraska Liquor Control Commission  
301 Centennial Mall South  
Box 95046  
Lincoln, NE 68509-5046

Re: Addendum to Manager Application of Brian Fausch – Bosselman Pump & Pantry, Inc.

Dear Commissioners,

I applied as the manager applicant for 37 Pump & Pantry convenience stores owned and operated by Bosselman Pump & Pantry, Inc., a Nebraska corporation. (Attached is a list of the stores and their locations.) I forgot to include two criminal convictions on that application, they were:

1999 - Disturbing the Peace which involved my sister having an unwanted get together at my home and her guests getting too loud, I was 26; and

2006 - Open Container which involved my attendance at a Nebraska Husker home game where we parked inside a parking garage and were consuming alcohol.

Both charges were misdemeanor criminal charges and, I think, both were taken care of with a fine but I don't really remember.

My application is also a little misleading regarding my tenure at Bosselman Pump & Pantry, Inc. I have been employed by Bosselman since August of 1996. I left their employ in 2008 to pursue employment with Lutz & Co. in Omaha, but returned to Bosselman in 2009 to present. My current position is Administrative Manager and Chief Operating Officer.

I apologize for the oversight, it was not intentional.

Please accept this letter as an addendum to my application.

If I can be of any further assistance, please feel free to contact me at 308-258-1639.

Sincerely,

Brian Fausch  
BOSSELMAN PUMP & PANTRY, INC.

RECEIVED

AUG 1 2012

<u>Present Licenses</u>	<u>Location</u>	<u>License #</u>	<u>Entity</u>
Pump & Pantry # 1	Grand Island	#D-35401	Bosselman Pump & Pantry, Inc.
Pump & Pantry #2	Grand Island	#B-13150	Bosselman Pump & Pantry, Inc.
Pump & Pantry #3	Grand Island	#B-13151	Bosselman Pump & Pantry, Inc.
Pump & Pantry #4	Cairo	#B-13138	Bosselman Pump & Pantry, Inc.
Pump & Pantry #5	Chapman	#DK-4469	Bosselman Pump & Pantry, Inc.
Pump & Pantry #6	Grand Island	#B-13152	Bosselman Pump & Pantry, Inc.
Pump & Pantry #7	Aurora	#B-12964	Bosselman Pump & Pantry, Inc.
Pump & Pantry #8	Grand Island	#B-13153	Bosselman Pump & Pantry, Inc.
Pump & Pantry #9	Lincoln	#D-86099	Bosselman Pump & Pantry, Inc.
Pump & Pantry #10	Grand Island	#B-13154	Bosselman Pump & Pantry, Inc.
Pump & Pantry #11	Grand Island	#B-13155	Bosselman Pump & Pantry, Inc.
Pump & Pantry #12	Chadron	#B-65332	Bosselman Pump & Pantry, Inc.
Pump & Pantry #13	St. Paul	#B-14964	Bosselman Pump & Pantry, Inc.
Pump & Pantry #14	Broken Bow	#B-13139	Bosselman Pump & Pantry, Inc.
Pump & Pantry #15	Grand Island	#B-16782	Bosselman Pump & Pantry, Inc.
Pump & Pantry #16	York	#D-51172	Bosselman Pump & Pantry, Inc.
Pump & Pantry #18	Doniphan	#B-13137	Bosselman Pump & Pantry, Inc.
Pump & Pantry #19	Ogallala	#D-12997	Bosselman Pump & Pantry, Inc.
Pump & Pantry #20	O'Neill	#B-13474	Bosselman Pump & Pantry, Inc.
Pump & Pantry #21	Lexington	#B-13010	Bosselman Pump & Pantry, Inc.
Pump & Pantry #24	Hastings	#B-23129	Bosselman Pump & Pantry, Inc.
Pump & Pantry #27	Kearney	#D-25700	Bosselman Pump & Pantry, Inc.
Pump & Pantry #29	Central City	#B- 58311	Bosselman Pump & Pantry, Inc.
Pump & Pantry #30	Elm Creek	#B-18426	Bosselman Pump & Pantry, Inc.
Pump & Pantry #32	Cozad	#D-20762	Bosselman Pump & Pantry, Inc.
Pump & Pantry #34	Gordon	#B-21529	Bosselman Pump & Pantry, Inc.
Pump & Pantry #37	St. Libory	#D-32331	Bosselman Pump & Pantry, Inc.
Pump & Pantry #38	Gretna	#D-85546	Bosselman Pump & Pantry, Inc.
Pump & Pantry #39	North Platte	#B-66633	Bosselman Pump & Pantry, Inc.
Pump & Pantry #40	Kearney	#B-79434	Bosselman Pump & Pantry, Inc.
Pump & Pantry #41	Kearney	#B-79474	Bosselman Pump & Pantry, Inc.
Pump & Pantry #42	Grand Island	#B-83476	Bosselman Pump & Pantry, Inc.
Pump & Pantry #43	Grand Island	#D-96501	Bosselman Pump & Pantry, Inc.
Pump & Pantry #44	Grand Island	#D-96502	Bosselman Pump & Pantry, Inc.
Pump & Pantry #45	Hastings	#D-96504	Bosselman Pump & Pantry, Inc.
Pump & Pantry #46	York	#D-96503	Bosselman Pump & Pantry, Inc.
Pump & Pantry #47	LaVista	New Application	Bosselman Pump & Pantry, Inc.