

City of Scottsbluff, Nebraska

Monday, August 3, 2015

Regular Meeting

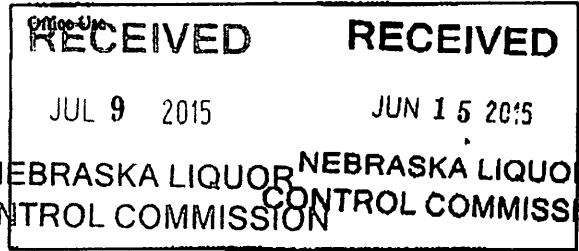
Item Public Inp2

Council to consider making a recommendation to the Nebraska Liquor License Commission regarding the appointment of Hunter Maglitto as the Elks Liquor License Manager.

Staff Contact: Cindy Dickinson, City Clerk

**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



MUST BE:

- ✓ **Citizen of the United States. Include copy of US birth certificate, naturalization paper or current US passport**
- ✓ **Nebraska resident. Include copy of voter registration in the State of Nebraska**
- ✓ **Fingerprinted. See Form 147 for further information, this form **MUST** be included with your application.**
- ✓ **21 years of age or older**

Corporation/LLC information

Name of Corporation/LLC: ELKS BPO Lodge #1367

Premise information

Liquor License Number: CK-01678 Class Type CK (if new application leave blank)

Premise Trade Name/DBA: ELKS ~~Lodge~~ BPO Lodge # 1367

Premise Street Address: 1614 1st Ave.

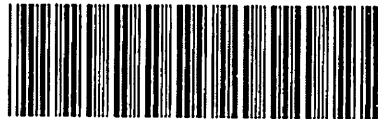
City: Scottsbluff County: Scotts Bluff Zip Code: 69361

Premise Phone Number: (304) 632-2622

Email address: _____

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


SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER
(Faxed signatures are acceptable)



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Manager's information must be completed below PLEASE PRINT CLEARLY

Last Name: Maglitta First Name: Hunter MI: L
 Home Address (include PO Box if applicable): 407 main St. / P.O. Box 52
 City: Melbeta County: Scotts Bluff Zip Code: 69355
 Home Phone Number: Area 308) 631-2129 Business Phone Number: 308) 632-2622
 Social Security Number: _____ Drivers License Number & State: _____
 Date Of Birth: 03/14/92 Place Of Birth: Scottsbluff NE
 Email address: hmaglitta@yahoo.com

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: Maglitta First Name: Car MI: _____
 Social Security Number: _____ Drivers License Number & State: #13538166
 Date Of Birth: 7-18-1990 Place Of Birth: Gordon NE

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
#09 Melbeta, NE	2009	Present	Melbeta, NE		
Melbeta, NE	2008	2009			
Minatare, NE	2008	2008			
Gordon, NE	2005	2008			
Melbeta, NE	2000	2005			

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MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2014	Present	BWMC	Chris Buhr	308)635-
2013	2014	Pizza Hut	Lisa ?	308)632-3700

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
Aunder Maglitta	72/200	Cherry County NE	MFP	Paid fine
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				JUN 15 2015
				NEBRASKA LIQUOR CONTROL COMMISSION

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(s):

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

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CONTROL COMMISSION

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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.

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[Signature]
Signature of Manager Applicant

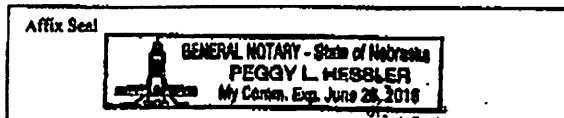
[Signature]
Signature of Spouse

NEBRASKA LIQUOR
CONTROL COMMISSION

ACKNOWLEDGEMENT

State of Nebraska _____
County of Scotts Bluff The foregoing instrument was acknowledged before me this
June 11, 2015 date by Hunter Maglitta name of person acknowledged

[Signature]
Notary Public signature



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.

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CONTROL COMMISSION

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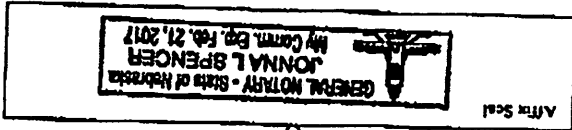
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FORM 35-4178 Revised 1/2008

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.



Notary Public signature
Date: 7-9-15

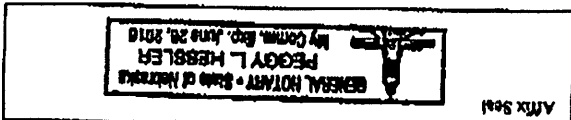
The foregoing instrument was acknowledged before me this
by Hunter Maglito

State of Nebraska
County of Scotts Bluff

Printed name of applying individual
Hunter Maglito

Signature of individual involved with application
(Spouse of individual listed above)

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.



Notary Public signature
Date: 6-10-15

The foregoing instrument was acknowledged before me this
by Car Maglito

State of Nebraska
County of Scotts Bluff

Printed name of spouse asking for waiver
X Car Maglito

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

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 lead 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.

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NEBRASKA LIQUOR CONTROL COMMISSION

SPUSAL AFFIDAVIT OF
NON PARTICIPATION INSERT
NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.licr.ne.gov

Print Form

Memo

To: Rick Kuckkahn, City Manager
From: Kevin E Spencer, Chief of Police
CC: liquor file
Date: July 28, 2015
Re: Manager Application for Hunter L. Maglitto, Elks BPO Lodge1367 1614 1st Ave Scottsbluff, NE
License number CK-01678

This applicant, Hunter Maglitto was investigated for suitability as a license holder. Nothing was discovered that would prohibit him from holding a manager position under the license. Hunter does not have a criminal history, and no traffic violations were found.

On July 16th, 2015 Hunter Maglitto appeared before the City of Scottsbluff Liquor License Holders Investigatory Board. Hunter explained to the board that he would be the responsible party in regards to the alcohol. He will be in charge of the alcohol to include ordering and inventory. Hunter told the board that during special events such as wedding parties they will require that additional staff is present to monitor those type of activities specifically to prevent under aged drinking. Hunter told the board that he is scheduled to attend Responsible Beverage Service Training.

The Elks Club is private club that is open to the public at certain times and during special events.

The Liquor License Holders Investigatory Board recommended approval.

Respectfully,

Kevin E Spencer, Chief of Police

City of Scottsbluff