

City of Scottsbluff, Nebraska

Monday, November 16, 2015

Regular Meeting

Item Public Inp1

Council to consider making a recommendation to the Nebraska Liquor License Commission regarding the appointment of Tory W. Reding as the manager of the Safeway Liquor License.

Minutes: At the November 12th Liquor License Investigatory Board meeting, the board made the following recommendation : Moved by Kuckkahn, seconded by Larson, "due to the lack of any local supervision, a negative recommendation be forwarded to the Scottsbluff City Council regarding the Safeway liquor license management application because it is an actionable issue with the Liquor Commission," "YEAS, Knight, Larson, Scriptor, Spencer, Kuckkahn. NAYS, None, Absent: Halley, Houdyshell. Abstain: Stobel.

Staff Contact: Cindy Dickinson, City Clerk

Memo

To: Kevin Spencer, Chief of Police

From: Brian E. Wasson, Captain

CC: liquor file

Date: October 27, 2015

Re: Manager application- Tory W. Reding, Safeway of Western Nebraska, Inc., License D-13241, 601 Broadway, Scottsbluff, NE 69361

This applicant, Tory W. Reding, was investigated for suitability as a license holder. Nothing was discovered that would prohibit him from holding a manager position under this license. Tory Reding reported that he had never been convicted of any violations. This was confirmed through a department investigation.

Tuesday October 27, 2015 I called Tory to ask him questions about business policies and procedures as well as his experience in the industry. Tory told me that he has been the manager at the Safeway store in Ogallala for the past three years and prior to that he worked for Safeway stores in Colorado and the Pacific Northwest. He has been employed with Safeway for a total of 22 years. Tory said his store in Ogallala is in preparations for liquor sales and that he has been asked by management to supervise the Scottsbluff store as well due to management turnover there. Tory said that he sees permanency in his position in Ogallala and that the company hopes to improve consistency to the supervision of the Scottsbluff license. Tory told me that he will manage his store license in Ogallala as well as the Scottsbluff store and that he has not previously managed a liquor license.

I asked Tory what measures or processes Safeway has in place to prevent under aged access to alcoholic liquors. Tory said the cash registers halt processes when alcoholic beverages are scanned and that staff is trained to ask persons who appear under the age of 30 years old for identification. Tory said that he and staff are cognizant of the difficulty in assessing age and that if there is any question staff is trained to request identification. Tory said if they ask for ID and the customer is unable to provide any they do not sell liquor to them.

Tory told me that Safeway requires all employees whom will be operating a cash register and are of the age to sell liquor to complete the Nebraska State Patrol online responsible

server training and that he too had recently completed the course in anticipation of the Ogallala store license. Safeway also requires these same employees to review Safeway store policy quarterly and are required to sign off when the review is completed. When asked what would happen to a store employee who violates policy and/or sold to an underage person, Tory said he was not quite sure. Tory said that he has not dealt with a violation but that through other experiences he has seen Safeway employees receive suspensions and/or termination for violations in the past.

I asked Tory about security and inventory of all alcohol. Tory was unfamiliar with how the alcoholic liquors are stored specifically in Scottsbluff. Tory said that in Ogallala his store has a locked storage area for liquor and wine inventories and that the beer is stored in coolers. Tory expected that a similar situation occurs in Scottsbluff. Although Tory said that he would maintain control over inventories at the Ogallala store, the local Safeway manager in Scottsbluff would be responsible for inventory at its store. Tory seemed a bit unsure of how some of his roles over the Scottsbluff store would work and said that much of the direct oversight would come from the local store manager. Tory said that he had no plans to visit the Scottsbluff store on a regular basis after becoming the manager of the license.

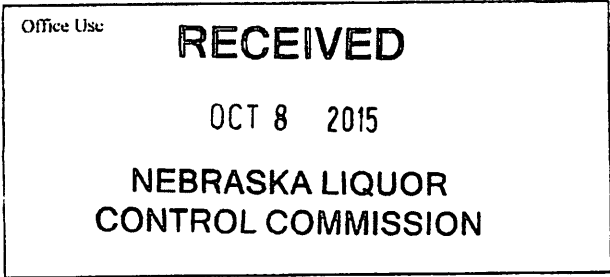
Respectfully,



Brian E. Wasson

**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: Safeway of Western Nebraska, Inc.

Premise information:

Liquor License Number: 013241 Class Type D (if new application leave blank)

Premise Trade Name/DBA: Safeway

Premise Street Address: 601 Broadway

City: Scottsbluff County: Scotts Bluff Zip Code: 69361

Premise Phone Number: (308) 635-1232

Email address: joanna.witt@safeway.com

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)



Form 105
REV JAN 2015
Page 2 of 6

Manager's information must be completed below PLEASE PRINT CLEARLY

Last Name: Reding First Name: Tory MI: W
 Home Address (include PO Box if applicable): 7 K-1 Road
 City: Ogallala County: Keith Zip Code: 69153
 Home Phone Number: (720) 427-3507 Business Phone Number: (308) 284-4044
 Social Security Number: _____ Drivers License Number & State: H13694388 NE
 Date Of Birth: 6-8-77 Place Of Birth: Salem, OR
 Email address: S0557c90@safeway.com

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OCT 8 2015

NEBRASKA LIQUOR CONTROL COMMISSION

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: Reding First Name: Brandi MI: A
 Social Security Number: _____ Drivers License Number & State: _____
 Date Of Birth: _____ 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
Ogallala, NE	2013	Present	Ogallala, NE	2013	Present
Denver, Co	2004	2013	Denver, Co	2004	2013

Form 103
 REV JAN 2015
 Page 3 of 6

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
1993	Present	Safeway	Jay Gomez	(970) 210-5814

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

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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):

Tory Reding listed on license for Safeway store in Aurora, Colorado -- no longer in business;

Corporate Manager application pending in Nebraska #114727

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. List the alcohol related training and/or experience (when and where) of the person making application.

*NLCC Training Certificate Issued: 9/17/2015 Name on Certificate: Tory Wayne Reding

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Tory Wayne Reding	09/2015	Responsible Beverage Service Training

*For list of NLCC Certified Training Programs see www.lcc.ne.gov/traininginfo.html

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:

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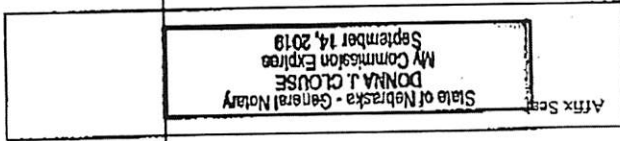
5. Have you enclosed Form 147 regarding fingerprints?

YES

NO

Fingerprints on file on currently-pending application for licensee's store in Ogallala, NE (#114727)

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.



Donna J. Clouse
Notary Public signature

_____ date
by Tory W. Reding name of person acknowledged

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

ACKNOWLEDGEMENT

NEBRASKA LIQUOR CONTROL COMMISSION

Signature of Applicant _____
Signature of Spouse _____

OCT 8 2015

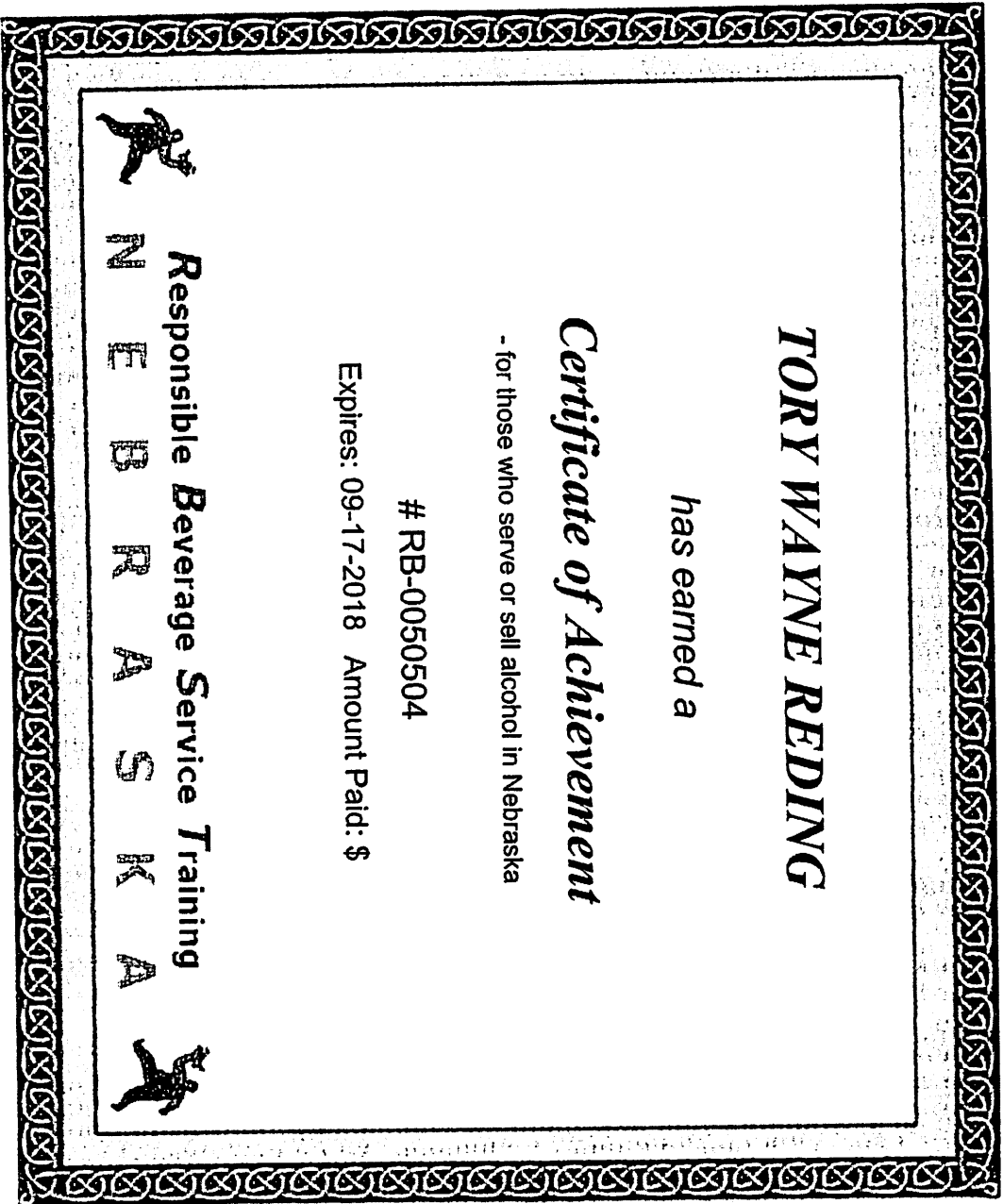
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The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application that said application has been read and that the contents thereof 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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CONTROL COMMISSION

General	Credential	Number	Earned	Expires
Tony Wayne Reding 611 n spruce st. Ogallala NE 69153	RBST GENERAL	RB-0050504	09-17-2015	09-17-2018

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OCT 8 2015

NEBRASKA LIQUOR
 CONTROL COMMISSION

**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

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Brandi A. Reding
Signature of spouse asking for waiver
(Spouse of individual listed below)

Brandi A. Reding
Printed name of spouse asking for waiver

State of Nebraska

County of Keith

10-7-15
date

The foregoing instrument was acknowledged before me this
Brandi A. Reding
by _____
name of person acknowledged

Donna J. Clouse
Notary Public signature

Affix Seal
State of Nebraska - General Notary
DONNA J. CLOUSE
My Commission Expires
September 14, 2019



Tory W. Reding
Signature of individual involved with application
(Spouse of individual listed above)

Tory W. Reding
Printed name of applying individual

State of Nebraska

County of Keith

10-7-15
date

The foregoing instrument was acknowledged before me this
Tory W. Reding
by _____
name of person acknowledged

Donna J. Clouse
Notary Public signature

Affix Seal
State of Nebraska - General Notary
DONNA J. CLOUSE
My Commission Expires
September 14, 2019

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

RECEIVE:

NO. 2571

10/07/2015/WED 12:45PM

OHDBS LAW

Monument Prevention Coalition
1601 East 27th Street
Scottsbluff, NE 69361

October 30, 2015

Scottsbluff City Council
2525 Circle Drive
Scottsbluff, NE 69361

RE: Safeway manager application

Dear Council Members;

Monument Prevention Coalition would like to address the appointment of Tory Reding as manager of Safeway Stores in Scottsbluff.

We would like to let the council know that they have options on requesting local management on any license. Although it is not uncommon for managers not to be local, the council is able to request that they be local. The council has two choices on management change, they can approve or deny. They can deny on the grounds of "lack of management and control due to not residing locally." However, it is the discretion of the Nebraska Liquor Control Commission to make that decision. They do listen to local councils in making those decisions.

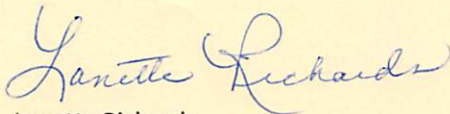
In looking at the memo from Captain Brian Wasson, it appears that although Mr. Reding is manager of the Ogallala Safeway Stores and has been with Safeway stores for many years although he has not managed a liquor license. He seems to not be quite sure on Safeway policies on any violations to sales to minors as well as he had no plans to visit the Scottsbluff store on a regular basis. This causes concern.

Monument Prevention Coalition is sharing this information to the council in order to share with them that there are options and the commission takes into consideration of the recommendation of the local environment and their requests. However, again I emphasize it is ultimately the decision of the Nebraska Liquor Control Commission.

I will be in Lincoln on Monday, so I am unable to be at the council meeting on Monday evening. I ask that you submit my letter into the packet for the council members.

Thank you for your continued support in making this a healthy and safe community for our youth.

Sincerely,



Lanette Richards
Project Coordinator

Phone: (308) 635-6162

Email: monumentprevention@wncc.edu