

City of Scottsbluff, Nebraska

Monday, December 18, 2017

Regular Meeting

Item Public Inp1

Approve issuance of special arts-related event wine permits for the West Nebraska Arts Center, 106 East 18th Street and special designated liquor licenses for three events on January 4, 2018; January 20, 2018; and May 3, 2018.

Staff Contact: Cindy Dickinson, City Clerk

CITY OF SCOTTSBLUFF
SPECIAL ARTS-RELATED EVENT WINE PERMIT APPLICATION

Organization Name West Nebraska Arts Center

Address 106 E. 18th Street, Scottsbluff Phone 632-2226

Date of Event 1-4-18 Starting Time 4:00 Ending Time 8:00

Authorized Contact: Donna Thompson

Description of Event Art Exhibit Opening Reception

Estimated Attendance: 150

Event Chairman: Donna Thompson

Address 106 E. 18th Street, Seb. Phone 632-2226

email donna@thewnac.com

The undersigned acknowledges reading a copy of the applicable ordinances and agrees to comply thereby:

Signed: Donna Thompson Date: 12-4-17

Print Name Donna Thompson

Additional Information: _____

PERMIT

THIS PERMIT AUTHORIZES THE CONSUMPTION OF WINE ON THE DESCRIBED PREMISE BY INDIVIDUALS WHO ARE OF LEGAL DRINKING AGE. OTHER RESTRICTIONS ARE AS FOLLOWS: _____

Approved by Mayor and City Council on _____

City Clerk _____ Date: _____

Cc: Police Chief

**Special Designated License
Local Recommendation Form**

West Nebraska Arts Center

Name of Retail Liquor Licensee or Non-Profit Organization

106 E. 18th Street, Scottsbluff, NE 69361

Licensee Business Address or Non-Profit Business Address

47-0499224

Retail License Number or Non-Profit Federal ID # (Form #201 must be submitted as attachment)

Event Location: West Nebraska Arts Center

Event Date & Time: 1/4/18 - 4:00 p.m. to 8:00 p.m.

Alternate Date/Location: none

Description of area to be licensed in length & width: 73.5 x 33

Indoor: Outdoor: (must include Form # 109 as attachment)

Type of Event: Art Exhibit Opening Reception Estimated # of attendees: 150

Event Supervisor: Donna Thompson

(Please print)

Contact Phone Number: 308-641-3940

Contact Email: donna@thewnac.com

Local governing completes below:

City/County approving event: _____

Local Governing Body Authorized Signature

Date

CITY OF SCOTTSBLUFF
SPECIAL ARTS-RELATED EVENT WINE PERMIT APPLICATION

Organization Name West Nebraska Arts Center
Address 106 E. 18th Street, Scottsbluff Phone 632-2226
Date of Event 1-20-18 Starting Time 6:00 Ending Time 11:00 pm
Authorized Contact: Donna Thompson
Description of Event Wine Tasting Fundraiser
Estimated Attendance: 175
Event Chairman: Donna Thompson
Address 106 E. 18th Street, Sclb. Phone 632-2226
email donna@thewnac.com

The undersigned acknowledges reading a copy of the applicable ordinances and agrees to comply thereby:

Signed: Donna Thompson Date: 12-4-17

Print Name Donna Thompson

Additional Information: _____

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Approved by Mayor and City Council on _____

City Clerk _____ Date: _____

Cc: Police Chief

**Special Designated License
Local Recommendation Form**

West Nebraska Arts Center

Name of Retail Liquor Licensee or Non-Profit Organization

106 E. 18th Street, Scottsbluff, NE 69361

Licensee Business Address or Non-Profit Business Address

47-0499224

Retail License Number or Non-Profit Federal ID # (Form #201 must be submitted as attachment)

Event Location: West Nebraska Arts Center

Event Date & Time: 1/20/18 - 6:00 p.m. to 11:00 p.m.

Alternate Date/Location: none

Description of area to be licensed in length & width: 73.5 x 33

Indoor: Outdoor: (must include Form # 109 as attachment)

Type of Event: Wine Tasting Fundraiser Estimated # of attendees: 175

Event Supervisor: Donna Thompson
(Please print)

Contact Phone Number: 308-641-3940

Contact Email: donna@thewnac.com

Local governing completes below:

City/County approving event: _____

Local Governing Body Authorized Signature

Date

CITY OF SCOTTSBLUFF
SPECIAL ARTS-RELATED EVENT WINE PERMIT APPLICATION

Organization Name West Nebraska Arts Center
Address 106 E. 18th Street, Scottsbluff Phone 632-2226
Date of Event 5-3-18 Starting Time 4:00 Ending Time 8:00 p.m.
Authorized Contact: Donna Thompson
Description of Event Art Exhibit Opening Reception
Estimated Attendance: 150
Event Chairman: Donna Thompson
Address 106 E. 18th Street, Sdb Phone 632-2226
email donna@thewnac.com

The undersigned acknowledges reading a copy of the applicable ordinances and agrees to comply thereby:

Signed: Donna Thompson Date: 12-4-17
Print Name Donna Thompson

Additional Information: _____

PERMIT

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Approved by Mayor and City Council on _____

City Clerk _____ Date: _____

Cc: Police Chief

**Special Designated License
Local Recommendation Form**

West Nebraska Arts Center

Name of Retail Liquor Licensee or Non-Profit Organization

106 E. 18th Street, Scottsbluff, NE 69361

Licensee Business Address or Non-Profit Business Address

47-0499224

Retail License Number or Non-Profit Federal ID # (Form #201 must be submitted as attachment)

Event Location: West Nebraska Arts Center

Event Date & Time: 5/3/18 - 4:00 p.m. to 8:00 p.m.

Alternate Date/Location: none

Description of area to be licensed in length & width: 73.5 x 33

Indoor: Outdoor: (must include Form # 109 as attachment)

Type of Event: Art Exhibit Opening Reception Estimated # of attendees: 150

Event Supervisor: Donna Thompson
(Please print)

Contact Phone Number: 308-641-3940

Contact Email: donna@thewnac.com

Local governing completes below:

City/County approving event: _____

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Date