City of Scottsbluff, Nebraska

Monday, October 7, 2019 Regular Meeting

Item Public Inp3

Council to make a recommendation to the Nebraska Liquor Control Commission naming Desiree R. Ramirez as the Liquor License Manager of B49 Operating LLC, dba The Tangled Tumbleweed.

Staff Contact: Kim Wright, 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.nebraska.gov

Office Use

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SEP 03 2019

NEBRASKA LIQUOR
CONTROL COMMISSION

MUST BE:

- ✓ Include copy of US birth certificate, naturalization paper or current US passport
- ✓ Nebraska resident. <u>Include copy of voter registration card or print out document from Secretary of State website</u>
- ✓ Fingerprinted. See form 147 for further information, read form carefully to avoid delays in processing, this form MUST be included with your application
- ✓ 21 years of age or older

Corporation/LLC information		
Name of Corporation/LLC: B49 C	Operating, LLC	
Premise information	123062	
Liquor License Number:	Class Type C	(if new application leave blank)
Premise Trade Name/DBA: The T	angled Tumbleweed	
Premise Street Address: 1823 Av	venue A	
City: Scottsbluff	County: NE	Zip Code: 69361
Premise Phone Number: 308-63		
Premise Email address: JI m	, , , , , , , , , , , , , , , , , , , ,	
form 3a or 3b or listed with the Corinformation here.	d as a corporate officer or managing mmission. To see authorized officers	or members search your license
SIGNATURE REQUIRED	BY CORPORATE OFFICER / (Faxed signatures are acceptable)	MANAGING MEMBER

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Manager's information must be completed below PLEASE PRINT CLEARLY County: c Home Phone Number:_ Driver's License Number & State: Social Security Number: Place Of Birth: Date Of Birth: () Email address: <u>Cesirani</u> & Me. Corn Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted) □NO Spouse's information Spouses Last Name: Social Security Number:___ Driver's License Number & State: Date 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
Gering, Nebrasica	2007	Occ261	\		
J .		`			
			, , , , , , , , , , , , , , , , , , ,		

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MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
1992 Dresent	Desirée Ramiroz	Self-emplared	208.641.660

				AND ADDITION OF THE
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 <u>anyone</u> who is a party to this application, or their spouse, <u>EVER</u> been convicted of or plead guilty to any <u>charge</u>. <u>Charge</u> means <u>any</u> charge <u>alleging</u> 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, include traffic violations. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name. Commission must be notified of any arrests and/or convictions that may occur after the date of signing this application.

D NO	Э
	D N

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

2.	Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state?
	□YES DO
	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?
	XYES NO

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<u>CC</u> Training Certificate Issued:	N	ame on Certificate:
Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
estrée R. Ramicez	4/24/2019	
*For lis	t of NLCC Certifie	d Training Programs see training
Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
stred. Ramnez marger	Employment:	The Tangked Tuesbleward scott the NG (
	Ĭ.	
Have you enclosed form 147	ragardina finas	rorinte?
have you enclosed form 147	regarding imge	iprints:

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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.

Applicant Notification and Record Challenge: Your singerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in FBI identification record. The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

ACKNOWLEDGEMENT

State of Nebraska The foregoing instrument was acknowledged before me this County of Affix Scal GENERAL NOTARY - State of Nebraska HEATHER M HAUSCHILD Notary Public signature My Comm. Exp. February 6, 2020

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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Signature of Manager Applicat

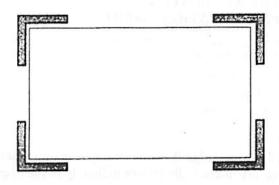
Des

PRIVACY ACT STATEMENT/ SUBMISSION OF FINGERPRINTS / PAYMENT OF FEES TO NSP-CID

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.lec.nebraska.gov



THIS FORM IS REQUIRED TO BE SIGNED BY EACH PERSON BEING FINGERPRINTED:

DIRECTIONS FOR SUBMITTING FINGERPRINTS AND FEE PAYMENTS:

- FAILURE TO FILE FINGERPRINT CARDS AND PAY THE REQUIRED FEE TO THE NEBRASKA STATE PATROL WILL DELAY THE ISSUANCE OF YOUR LIQUOR LICENSE
- Fee payment of \$45.25 per person MUST be made <u>DIRECTLY</u> to the Nebraska State Patrol; It is recommended to make payment through the NSP PayPort online system at <u>www.ne.gov/go/nsp</u> Or a check made payable to <u>NSP</u> can be mailed directly to the following address:

Please indicate on your payment who the payment is for (the name of the person being fingerprinted) and the payment is for a <u>Liquor License</u>

The Nebraska State Patrol – CID Division 3800 NW 12th Street Lincoln, NE 68521

- Fingerprints taken at NSP LIVESCAN locations will be forwarded to NSP CID
 Applicant(s) will not have cards to include with license application.
- Fingerprints taken at local law enforcement offices may be released to the applicants;
 Fingerprint cards should be submitted with the application.

contained in FBI identification record. The procedures for obtaining a change, correction, or updating a FBI identification record are set forth in Title 28, CFR, 16.34.
Trade Name: The Tanker Turbleweed
Name of Person Bring Fingerprinted Desirce R Ramirez
Date of Birth: 02/20/12 Last 4 SSN: 2596 Date fingerprints were taken: 8/26/19
Location where fingerprints were taken: Seb. County Sherrit's Dept.
How was payment made to NSP?
□NSP PAYPORT © CASH □CHECK SENT TO NSP CK #
My fingerprints are already on file with the commission - fingerprints completed for a previous
application less than 2 years ago? YES
1 Marine K Ramer
SIGNATURE REQUIRED OF PEASON BEING FINGERPRINTED
FORM 14
REV MAY 201

Applicant Notification and Record Challenge: Your fingerprints will be used to check the criminal history

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.nebraska.gov Office Use

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NEBRASKA LIQUOR CONTROL COMMISSION

not have any interest, directly or indirectly in the operation Act. I will not tend bar, make sales, serve patrons, stock as the owner or in any way participate in the day to depend to guideline for violation of this affidavit is cancellated.	shelves, write checks, sign invoices, represent myseling operations of this business in any capacity. The tion of the liquor license.
l acknowledge that I am the applicant of the non- understand that my spouse and I are responsible for co determined that my spouse has violated (§53-125(13)) the	participating spouse of the individual signing below. I mpliance with the conditions set out above. If, it is commission may cancel or revoke the liquor license.
Signature of NON-PARTICIPATING SPOUSE Print Name	Signature of APPLICANT Print Name Print Name
State of Nebraska, County of Scottsbluce	State of Nebraska, County of Scotts Huff
The foregoing instrument was acknowledged before me	The foregoing instrument was acknowledged before me
this super 2019 (date)	this Stath of Thurst, 2019 (date)
Name of person acknowledged (Individual signing document)	by Desicus Ramices Name of person acknowledged (Individual signing document)
Notary Public Signature	Notary Public Signature
GENERAL NOTARY * State of Nebraska HEATHER M HAUSCHILD My Comm. Exp. February 6, 2020	GENERAL NOTARY - State of Nebraska HEATHER M HAUSCHILD My Comm. Exp. February 6, 2020

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.

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Memo

To:

Nathan Johnson, City Manager

From: Kevin E Spencer, Chief of Police

CC:

liquor file

Date:

October 3, 2019

Re:

Desiree Ramirez manager application Class C Liquor License number C-123062, B49

Operating, LLC dba The Tangled Tumbleweed, 1823 Ave A Scottsbluff, NE

The applicant, Desiree Ramirez, was investigated for suitability as the manager of The Tangled Tumbleweed liquor license. Nothing was discovered that would prohibit her from holding a manager's position under the license. Desiree disclosed no criminal history, nor did I find any during this investigation.

On October 3, 2019 Desiree appeared before the Liquor License Holders Investigatory Board to discuss her application. Desiree explained that she has worked at the Tangled Tumbleweed for the past year adding this is her only experience in the alcohol business. Desiree told us that she does all of the ordering and inventory adding that they only sell wine and beer. Desiree told us that they card anyone that looks younger than 30 years of age. Desiree explained that they have a "born on calendar" to assist employees in determining age. Desiree told us that all of the employees except kitchen staff have to attend alcohol server training and anyone caught selling alcohol to a minor would be terminated.

The Liquor License Holders Investigatory Board is recommending a positive recommendation to the Nebraska Liquor Commission.

Respectfully,

Kevin E Spencer, Chief of Police

City of Scottsbluff