City of Scottsbluff, Nebraska

Monday, June 15, 2020 Regular Meeting

Item Public Inp1

Council to make a recommendation to the Nebraska Liquor Control Commission naming Doug Ferreyra as the Liquor License Manager of Wal-Mart Inc., dba Wal-Mart 867, 3322 Avenue I, Scottsbluff.

Staff Contact: Kim Wright, City Clerk





NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe

Executive Director 301 Centennial Mall South, 5th Floor P.O. Box 95046 Lincoln, Nebraska, 68509-5046 Phone (402) 471-2571 Fax (402) 471-2814 or (402) 471-2374 TSR USER 800-833-7252 (TTY) Web Address http://www.lcc.nebraska.gov/

May 21, 2020

Го:	CITY CLERK OF SCOTTSBLUFF	
Email:	COMPLIC@WAL-MART.COM	
Manager Name:	DOUG FERREYRA	
_icensee Name:	WALMART INC	
_icensee Trade Name (DBA):	WALMART 867	
_icense Number:	D-057128	
Date Due:	07-06-2020	
Liquor Control Commission. If recommendation. Send back to 2814. If you have questions con	v corporate manager application that was solven complete the following information of Mary Beth Olson at mary.olson@nebrask.cerning this matter, please contact our office	n below to indicate you <u>ca.gov</u> or fax to (402) 471
APPROVED		
NO LOCAL RECO	MMENDATION	
DENIED		
COMMENTS: (YOU MAY ATTACH	MINUTES AND/OR ADDITIONAL NOTES)	
Clerk Signature:	Date:	
MBO		
Janice M. Wiebusch Commissioner	Bruce Bailey Chairman An Equal Opportunity Employer	Harry Hoch Commissioner

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: <u>www.lcc.nc.gov</u> Office Use

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NEBRASKA LIQUOR CONTROL COMMISSION

Manager must:

- Complete all sections of the application. Be sure it is signed by a <u>corporate officer</u>, corporate officer must be an individual on file with the Liquor Control Commission
- Fingerprints are required. See Form 147 for further information, this form MUST be included with your application.
- Provide a copy of one of the following: US birth certificate, naturalization papers or current US
 passport (even if you have provided this before)
- Be a registered voter in the State of Nebraska, include a copy of voter card with application

Spouse who will not participate in the business, spouse must:

- Complete the Spousal Affidavit of Non Participation Insert (must be notarized). The non-participating spouse completes the top half; the manager completes the bottom half. Be sure to complete both halves of this form.
- Need not answer question #1 of the application

Spouse who will participate in the business, the spouse must:

- Sign the application
- Fingerprints are required. See Form 147 for further information, this form MUST be included with your application.
- Provide a copy of one of the following: birth certificate, naturalization papers or current US passport (even if you have provided this before)
- Be a registered voter in the state of Nebraska, include a copy of voter card with application
- Spousal Affidavit of Non Participation Insert not required

2000005135

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MANAGER APPLICATION INSERT - FORM 3c

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NB 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: www.lce.ne.goy Office Use RECEIVED

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NEBRASKA LIQUOR CONTROL COMMISSION

MUST BE:

- ✓ Citizen of the United States. <u>Include copy of US birth certificate</u>, 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

				_	
Liquor License Number: Premise Trade Name/DB			Class Type_		(if new application leave blank)
Premise Street Address:_	3322 Avenue I				
City: Scottsbluff	·	County:	Scotts Bluff		Zip Code:_69361867
Premise Phone Number:_	308-632-2666				
Email address: complice	@wal-mart.com				
The individual whose n	ame is listed as a corp	orate offi	cer or managi	ng mem	iber as reported on inser a suthorized individuals

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

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Manager simiormation must be completed below PLEAST PRINT CLEAREN					
Last Name: Farreyra		Fi	rst Name: Doug	MI:_	Δ
Home Address (include PO Box if applicable): 2970 Monument Shadows					
City: Gesing		County:	Scotlebluff Zip Code	6934/	
Home Phone Number: 308 - 641	3001	Busin	ness Phone Number: 308-6	32-266	2
Social Security Number: Drivers License Number & State:				18 +)	
Date Of Birth: 02/04/1968 Place Of Birth: Scotts bluff, Ne					
Email address: dougferreyra	A hot	maile	Com		
			78 1.8a		3
Appropriation of the country of		Quir 194		la siden i Artificia (i Arti	ethalia N
∑ YES □ N	0				
Same a location of the latest the latest		te back	udbar sarah arang	1 1 1 1 1 1 1 1	
Spouses Last Name: Ferrey			First Name: 50d	MI:	K
Spouses Last Name: Ferrey, Carrier Social Security Number:			First Name: <u>Sod</u> , ers License Number & State:	MI:	K
Social Security Number:		Driv	ers License Number & State:		<u>K</u> _
Social Security Number:		Driv			<i>K</i>
Social Security Number:		Driv	ers License Number & State:		K
Social Security Number: Date Of Birth: 10/03/1968		Driv	ers License Number & State:	F, NE	K
Social Security Number: Date Of Birth: 10/03/1918 CITY & STATE		Driv	ers License Number & State:		
Social Security Number: Date Of Birth: 10/03/1968 CITY & STATE Cecios NE	YEAR	Driv	ers License Number & State:	F, NE	YEAR
Social Security Number: Date Of Birth: 10/03/1968 CITY & STATE Cecios NE	YEAR FROM	Driv	ers License Number & State:	YEAR FROM	YEAR TO
Social Security Number: Date Of Birth: 10/03/1918 CITY & STATE	YEAR FROM 2018	YEAR TO	ers License Number & State:	YEAR FROM	YEAR TO
Social Security Number: Date Of Birth: 10/02/1968 CITY & STATE Gering; NE Leximon, WE	YEAR FROM 2018 2015	YEAR TO 2020	ers License Number & State:	YEAR FROM	YEAR TO

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	dia 11.0	274 IV	at Marking			
FROM	EAR TO	NAME	OF EMPLOY	ER NAME	OF SUPERVISOR	TELEPHONE NUMBER
1988	2020	Wal-	Mart	M:ke	Graddy	-308-440-373,
l		ompleted b			ACCURATELY. Inless spouse has file	d an affidavit of non-
Charge rordinance	neans <u>any</u> c e or resolu on or plea.	harge allegir tion. List th	ng a felony, misde the nature of the y charges pending	meanor, violation of charge, where the	of a federal or state law; charge occurred and the	lead guilty to any charge. a violation of a local law, e year and month of the han one party, please list
×	YES		NO			
If yes, p	lease expla	in below or	r attach a separat	te page.		
Na	ame of Appl	icant	Date of Conviction (mm/yyyy)	Where Convicted (City & State)	Description of Charge	Disposition
1 Dag	Ferre	iyru_	09/1996	Scottsblut, NE	Failure 10 Yiela	Fine / Diversion
	any other s	tate?	3			r license in Nebraska or
	IF YES, li	st the name	of the premise(s	1): Wal - Ma	rt Lexingto	n, NE
3.	Do you, as supervise,	a manager in person, t	, qualify under N he management	Nebraska Liquor (of the business?	Control Act (§53-131.0	1) and do you intend to

Form 103 REV JAN 2015 Page 4 of 6

⊠YES

□NO

	, , , , , , , , , , , , , , , , , , , ,	lame on Certificate:
Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificat
*For list of NLC	C Certified Training P	rograms see www.lcc.ne.gov/traininginfo.html
perience: Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
	Į.	

Form 103 REV JAN 2015 Page 5 of 6 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.

Signature of Manager Applicant Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska Softs Bluff

The foregoing instrument was acknowledged before me this

March 19, 2020

by Daglas & Jode Ferrerya

name of person acknowledged

Affix Seal

Notary Public signature

Affix Seal

General Notary - State of Nebraska

CRYSTAL WILSON

My Comm. Exp. June 22, 2022

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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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.loc.nebraska.gov Office Use

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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 depenalty guideline for violation of this affidavit is cancellated.	shelves, write checks, sign invoices, represent myself ay operations of this business in any capacity. The ion of the liquor license. Descripting spouse of the individual signing below. I mpliance with the conditions set out above. If, it is
Signature of NON-PARTICIPATING SPOUSE Todi & Ferreya Print Name	Signature of APPLICANT Dug as A Ferry, Y Print Name
State of Nebraska, County of Scott Buff	State of Nebraska, County of Solls Bluff
The foregoing instrument was acknowledged before me	The foregoing instrument was acknowledged before me
this March 19, 2020 (date)	this
by Jode K. Ferreyra Name of person acknowledged (Individual signing document)	by Douglas Ferrerya Name of person acknowledged (Individual signing document)
Cleptal Welson Notary Public Signature	Notary Public Signature
A GENERAL NOTATO: Size of Hebrasia CRYSTAL WILSON	GENERAL NOTARY - State of Nebrasika Afficisentstal Wilson My Comin. Exp. June 22, 2022

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 116 REV NOV 2016 Page | 1



This certificate is awarded to

DOUG FERREYRA

for successfully completing Alcohol Sales Training

July 10, 2019 Completion Date







Scottsbluff



Licensing Compliance 702 SW 8th Street, Dept 8916 Bentonville, AR, 72716 Mailstop 0500

jessica.burns@walmart.com Phone: 479-258-7034 Fax: 479-204-9864

May 14, 2020

To Whom It May Concern,

RE: Liquor License Manager Change

Please find the attached manager change paperwork and attachments for Walmart

#867. License#:057128. If you have any questions or concerns please feel free to give

me a call.

Sincerely,

Jessica Noyes

Licensing Compliance Specialist

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NEBRASKA LIQUOR CONTROL COMMISSION

Memo

To: Rick Kuckkahn, City Manager

From: Kevin E Spencer, Chief of Police

CC: liquor file

Date: June 8, 2020

Re: Manager Application - Doug D. Ferreyra, Walmart Inc. 3322 Ave I Scottsbluff, NE License

number D-57128

The applicant, Doug Ferreyra, was investigated for suitability as the manager of Walmart's liquor license. Nothing was discovered that would prohibit him from holding a manager's position under the license. Doug disclosed receiving a Failure to Yield citation in Scottsbluff in 1996, nothing further was found.

Doug explained Walmart's processes relating to their handling of alcohol. Doug told me that all of Walmart's employees have to take an alcohol class every six months no matter their job responsibilities. Doug further explained, that any of the employees are expected to run a register if needed so they all have to complete the course. Doug told us that the alcohol vendors complete an order and then present it to the store manager for approval. The vendors then put their own products on the shelf with the overstock in a specific area of the warehouse that his under surveillance. Doug said that anyone selling alcohol to a minor would be terminated. Doug said that the registers prompts the clerk to check identification once alcohol is scanned, adding, if a customer is at a self-checkout the transaction is stopped until a host can approve the sell.

Wal-Mart currently has a robust video system that covers most areas in the store and parking lot. Wal-Mart is open from 07:00 am to 08:30 pm, except for Tuesdays they open at 06:00 am for senior and handicapped shopping.

I have found no information that would indicate that Doug Ferreyra is not fit, willing and able to manage the Wal-Mart Liquor License.

Respectfully,

Kevin E Spencer Chief of Police

K. Sponcer

City of Scottsbluff