City of Scottsbluff, Nebraska

Monday, April 18, 2022 Regular Meeting

Item Public Inp2

Council to discuss and consider action on approving a Special Designated Liquor License for the West Nebraska Arts Center, 106 E. 18th Street, Scottsbluff, NE to serve beer and wine at an Art Exhibit Reception on June 9th from 4:00-8:00 p.m.

Staff Contact: Kim Wright, City Clerk

Special Designated License Local Recommendation (Form 200)

Applications must be entered on the portal after local approval - no exceptions.

I are applications are non-refundable and will be rejected.

| The local governing body for the City/Village of OR County of OR County of the issuance of a Special Designated License as requested above. (Only one should be written above) | approves |
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| Local Governing Body completes below: The local governing body for the City/Village of Scottsbluff OR County of | |
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| *Retail licensee - Must be signed by a member listed on permanent license *Non-Profit Organization - Must be signed by a Corporate Officer | |
| best of my knowledge and belief. Lalso consent to an investigation of my background including all records of every kind including to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will reach person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly holder of this Special Designated License. | r police records. Lagree individual releasing not be used by any |
| *Signature Authorized Representative. July Printed Name Michele Der | Hon fication are true to the |
| Event Contact Email: michele@thewnac.com | |
| Event Contact Name: Michele Denton Event Contact Phone Number: 308-631-1625 | |
| Type of alcohol to be served: Beer X Wine X Distilled Spirits (If not marked, you will not be able to serve this type of alcohol) | |
| Type of Event: Art Exhibit Reception Estimate # of attendees: 100 | |
| Outdoor area to be licensed in length & width: X (Diagram Form #109 must be attached) | |
| Indoor area to be licensed in length & width: 73.5 x 33 | |
| Event Street Address/City: 106 E. 18th Street, Scottsbluff, NE 69361 | |
| Event Building Name: West Nebraska Arts Center | |
| Alternate Location Building & Address: None | |
| Alternate Date: None | |
| Event End Time(s): 8:00 p.m. | |
| Event Start Time(s): 4:00 p.m. | A ANDREAS AND A STATE OF THE ST |
| Event Date(s): June 9, 2022 | |
| Retail License Number or Non-Profit Federal ID # | |
| | |
| Retail Liquor License Address or Non-Profit Business Address | |
| 106 E. 18th Street, Scottsbluff, NE 69361 | |
| Retail Liquor License Name or *Non-Profit Organization (*Must include Form #201 as Page 2) | |
| West Nebraska Arts Center | |

APPLICATION FOR SPECIAL DESIGNATED LICENSE Non-Profit Applicants ONLY

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/



Email Applications: michelle.porter@nebraska.gov

This page is required to be completed by Non-Profit applicants only.

Application for Special Designated License Under Nebraska Liquor Control Act Affidavit of Non-Profit Status

I HEREBY DECLARE THAT THE CORPORATION MAKING APPLICATION FOR A SPECIAL DESIGNATED LICENSE UNDER THE NEBRASKA LIQUOR CONTROL ACT IS EITHER A MUNICIPAL CORPORATION, A FINE ARTS MUSEUM INCORPORATED AS A NONPROFIT CORPORATION, A RELIGIOUS NONPROFIT CORPORATION WHICH HAS BEEN EXEMPTED FROM THE PAYMENT OF FEDERAL INCOME TAXES, A POLITICAL ORGANIZATION WHICH HAS BEEN EXEMPTED FROM THE PAYMENT OF FEDERAL INCOME TAXES, OR ANY OTHER NONPROFIT CORPORATION, THE PURPOSE OF WHICH IS FRATERNAL, CHARITABLE, OR PUBLIC SERVICE AND WHICH HAS BEEN EXEMPTED FROM THE PAYMENT OF FEDERAL INCOME TAXES AS PER §53-124.11(1).

AS SIGNATORY I CONSENT TO THE RELEASE OF ANY DOCUMENTS SUPPORTING THIS DECLARATION AND ANY DOCUMENTS SUPPORTING THIS DECLARATION WILL BE PROVIDED TO THE NEBRASKA LIQUOR CONTROL COMMISSION, THE NEBRASKA STATE PATROL OR ANY AGENT OF THE LIQUOR CONTROL COMMISSION IMMEDIATELY UPON DEMAND. I ALSO CONSENT TO THE INVESTIGATION OF THIS CORPORATE ENTITY TO DETERMINE IT'S NONPROFIT STATUS.

I AGREE TO WAIVE ANY RIGHTS OR CAUSES OF ACTION AGAINST THE NEBRASKA LIQUOR CONTROL CC E Al

| OMMISSION, THE NEBRASKA STATE FOREMENTIONED PARTIES. | | | | | |
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| | West | Nebrg NAME OF COR | | rts Cer | iter |
| | | FEDERAL ID | NUMBER | | |
| | SIGNA | TURE OF TITLE O | F CORPORATE OF | FICERS | |
| IE ABOVE INDIVIDUAL STATES THAT THE STATEM PLICATION, THE APPLICANT SHALL BE DEEMED GU BRASKA LIQUOR CONTROL ACT | | | | | |
| BSCRIBED IN MY PRESENCE AND SWORN TO BEFORE | ME THIS | DAY C | OF | , | |
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| | | - | NOTARY PUR | BLIC SIGNATURE & S | EAL |
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FORM 201 REV NOV 2016

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