

Approve Fire Barn SDL for Easton Memorial Fundraiser

**VILLAGE OF WATERLOO  
RESOLUTION NO. 05-24-16-03**

**APPROVE FIRE BARN SPECIAL DESIGNATED LIQUOR LICENSE**

**WHEREAS**, the Fire Barn Bar and Grill has submitted an application to the Village of Waterloo for a special designated liquor license for a beer garden for the Easton Memorial Fundraiser; and

**WHEREAS**, the beer garden will be located at the Fire Barn Bar and Grill located at 2526 River Road Dr.; and

**WHEREAS**, the date of the event is Saturday, June 11, 2016, hours of the event are from 12:00pm to 1:00am.

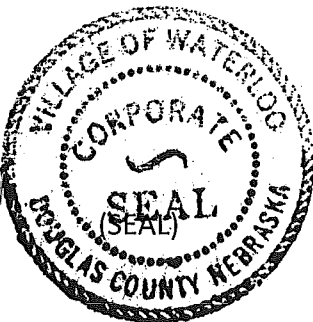
**BE IT RESOLVED, BY THE BOARD OF TRUSTEES OF THE VILLAGE OF WATERLOO, NEBRASKA, AS FOLLOWS:**

**THAT**, the special designated liquor license application for the Fire Barn Bar and Grill for a beer garden for the Easton Memorial Fundraiser on June 11, 2016 from 12pm to 1am is hereby approved.

PASSED THIS 24 DAY OF May, 2016

ATTEST:

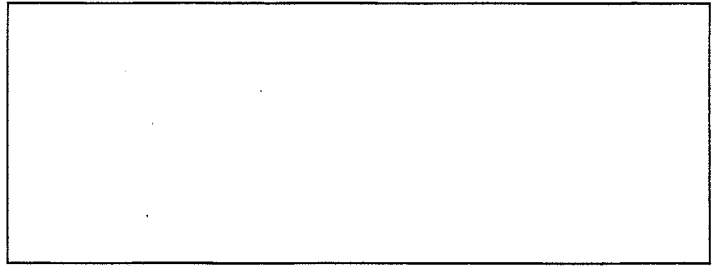
Melissa Johnson  
Melissa Johnson  
Clerk



Ken Hitchler  
Ken Hitchler  
Chairperson

## APPLICATION FOR SPECIAL DESIGNATED LICENSE

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/](http://www.lcc.nebraska.gov/)  
Email Applications: [michelle.porter@nebraska.gov](mailto:michelle.porter@nebraska.gov)



### Special Designated License (SDL) Application Quick Checklist

#### Requirements:

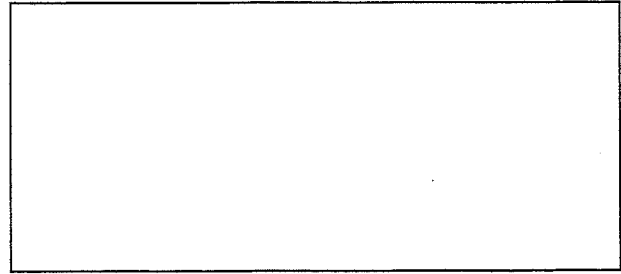
- Application **MUST** include approval from the local governing body (city, village or county clerk of where the event is to be held). Contact this jurisdiction for further requirements. **EFFECTIVE MAY 1, 2015, applications will no longer be accepted without the local approval attached to the application.**
- Only 501c Non-profit organizations or Retail license holders can apply for a Special Designated License. No SDL will be issued to Retail license holders operating under a Temporary Operating Permit (TOP).
- Include \$40 fee for each day/area. Check is payable to the Nebraska Liquor Control Commission (NLCC). If you have a Catering license, there are no fees required. You may also pay online at PAYPORT
- **Applicant** is responsible for all paperwork and fees being sent to the NLCC office before the 10-day deadline. It is not the responsibility of the local governing body to send the application to the NLCC.
- When requesting alternate date(s) and/or location(s), approval from local governing body must include approval for these alternate date(s) and/or locations(s). If requesting sales on Sunday, attach copy of local ordinance or resolution.
- Application must be received in Nebraska Liquor Control Commission (NLCC) office a **MINIMUM** of ten (10) business days prior to date of event (weekends, holidays & date of event are not included in this count). **NO EXCEPTIONS!** \*See the calendar
- When requesting an outdoor area, you must include a box-type diagram of the area to be licensed.
- Non Caterer applicants are only allowed six (6) SDLs per calendar year, this includes consecutive days used on one application (i.e. July 4 – 9 = 6 days).
- Only twelve (12) SDLs will be issued at any specific location that could otherwise hold a liquor license.

#### Non Profit Application **MUST**:

- Include page five (5) of application showing Federal ID number.
- When requesting an exemption from NLCC rules; i.e. waiver of double fencing, request must be received in (NLCC) office a **MINIMUM** of 30 days prior to the date of the event; waiving double fence must complete Form 140.

**APPLICATION FOR SPECIAL DESIGNATED LICENSE**

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PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: [www.lcc.nebraska.gov/](http://www.lcc.nebraska.gov/)  
Email Applications: [michelle.porter@nebraska.gov](mailto:michelle.porter@nebraska.gov)



DO YOU NEED POSTERS? YES \_\_\_ NO X

**NON PROFIT APPLICANTS**

(Check one that best applies)

Municipal \_\_\_ Political \_\_\_ Fine Arts \_\_\_ Fraternal \_\_\_ Religious \_\_\_ Charitable \_\_\_ Public Service

**LIQUOR LICENSE HOLDERS**

Liquor license number and class (i.e. C-055441)

113428

**COMPLETE ALL QUESTIONS**

1. Type of alcohol to be served and/or consumed: Beer X Wine X Distilled Spirits X

2. Licensee name (last, first,), corporate name or limited liability company (LLC) name  
(As it reads on your liquor license)

NAME: Fire Barn Sports Bar and Grill

ADDRESS: 2523 River Road

CITY Waterloo ZIP 68069

3. Location where event will be held; name, address, city, county, zip code

BUILDING NAME Fire Barn

ADDRESS: 2523 River Road Drive CITY Waterloo

ZIP 68069 COUNTY and COUNTY # Douglas

a. Is this location within the city/village limits? YES X NO \_\_\_

b. Is this location within the 150' of church, school, hospital or home for aged/indigent or for veterans and/or wives? YES \_\_\_ NO X

c. Is this location within 300' of any university or college campus? YES \_\_\_ NO X

4. Date(s) and Time(s) of event (no more than six (6) consecutive days on one application)

Date 6-12-2016	Date	Date	Date	Date	Date
<b>Hours</b> From 12pm	<b>Hours</b> From	<b>Hours</b> From	<b>Hours</b> From	<b>Hours</b> From	<b>Hours</b> From
To 12am	To	To	To	To	To

a. Alternate date: \_\_\_\_\_

b. Alternate location: \_\_\_\_\_  
(Alternate date or location must be specified in local approval)

5. Indicate type of activity to be carried on during event:

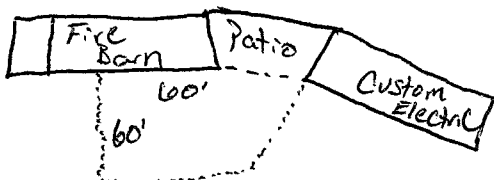
Dance \_\_\_ Reception \_\_\_ Fund Raiser  Beer Garden \_\_\_ Sampling/Tasting \_\_\_  
Other \_\_\_\_\_

6. Description of area to be licensed

Inside building, dimensions of area to be covered **IN FEET** \_\_\_\_\_ x \_\_\_\_\_  
(not square feet or acres)

\*Outdoor area dimensions of area to be covered **IN FEET** <sup>60</sup> \_\_\_\_\_ x <sup>60</sup> \_\_\_\_\_

\***SKETCH OF OUTDOOR AREA (or attach copy of sketch) (sample sketch)**



If outdoor area, how will premises be enclosed?

Fence; \_\_\_ snow fence \_\_\_ chain link \_\_\_ cattle panel  
\_\_\_ other \_\_\_\_\_  
\_\_\_ Tent

7. How many attendees do you expect at event? 150

8. If over 150 attendees. Indicate the steps that will be taken to prevent underage persons from obtaining alcohol beverages. (Attach separate sheet if needed)

2 Off duty Police officers will be on location at 9pm

9. Will premises to be covered by license comply with all Nebraska sanitation laws? YES \_\_\_ NO \_\_\_

a. Are there separate toilets for both men and women? YES \_\_\_ NO \_\_\_

10. Where will you be purchasing your alcohol?

Wholesaler X Retailer \_\_\_\_\_ Both \_\_\_\_\_ BYO \_\_\_\_\_  
(Includes wineries)

11. Will there be any games of chance operating during the event? YES \_\_\_ NO \_\_\_

If so, describe activity \_\_\_\_\_

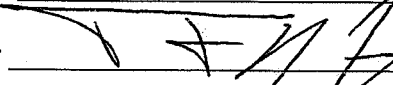
NOTE: Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. All other forms of gambling are prohibited by State Law. There are no exceptions for Non Profit Organizations or any events raising funds for a charity. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

12. Any other information or requests for exemptions: \_\_\_\_\_

Annual Easten Memorial Poker Run for The hand in hand program at Children's Hospital

13. Name and telephone number/cell phone number of immediate supervisor. This person will be at the location of the event when it occurs, able to answer any questions from Commission and/or law enforcement before and during the event, and who will be responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. PLEASE PRINT LEGIBLY

Print name of Event Supervisor Travis Harlow

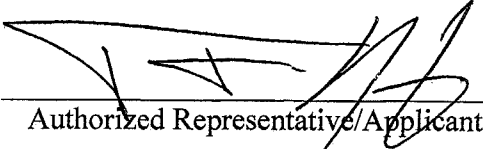
Signature of Event Supervisor 

Event Supervisor phone: Before 402-208-5206 During 402-208-5206

Email address travisharlow@hotmail.com

Consent of Authorized Representative/Applicant

14. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.

sign here  OWNER 5-19-16  
Authorized Representative/Applicant Title Date  
Travis Harlow  
Print Name

This individual must be listed on the application as an officer or stockholder unless a letter has been filed appointing an individual as the catering manager allowing them to sign all SDL applications.

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.