

Memorandum



To: Mayor and Council
CC: Brenda Gunn, Rita Ramirez
From: Pam Buethe *(Signature)*
Date: 06/15/2012
Re: Consent Agenda Item A5 – Application for manager – Chili's Grill & Bar

This is the manager application for Charles Layne, who is the manager of Chili's Grill & Bar.

All this agenda item would require is a motion to approve the manager application for Charles Layne and therefore it has been placed on the Consent Agenda.

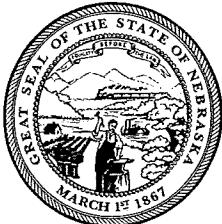
Please contact me with any questions.

LA VISTA POLICE DEPARTMENT INTEROFFICE MEMORANDUM

TO: PAM BUETHE, CITY CLERK
FROM: BOB LAUSTEN, POLICE CHIEF
SUBJECT: LOCAL BACKGROUND- LIQUOR LICENSE- MANAGER
CHILI'S
DATE: 6/12/2012
CC:

The police department conducted a check of computerized records on the applicant, Charles Layne, for criminal conduct in Sarpy and Douglas in reference to the Manager application.

Layne was convicted of 1st offense DUI in 2002 in Douglas County. He was fined and received probation.



Dave Heineman
Governor

June 7, 2012

LA VISTA CITY CLERK
8116 PARK VIEW BLVD
LA VISTA NE 68128 2198

RE: Chili's Grill & Bar
LICENSE #I-86128

STATE OF NEBRASKA

NEBRASKA LIQUOR CONTROL COMMISSION

Robert 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
TRS USER 800 833-7352 (TTY)
web address: <http://www.lcc.ne.gov/>

Dear Clerk:

Enclosed is a copy of a manager application for Charles Layne in connection with Chili's Grill & Bar located in LaVista.

Please present this application for manager to your City/Village Council or County Commissioners and send us the results of their action.

Sincerely,

A handwritten signature in cursive script that reads "Jacqueline Rodriguez".

Jacqueline Rodriguez
Licensing Division
NEBRASKA LIQUOR CONTROL COMMISSION
402-471-2572

encl.

Janice M. Wiebusch
Commissioner

Robert Batt
Chairman

William F. Austin
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: www.lcc.ne.gov

Office Use

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**NEBRASKA LIQUOR
CONTROL COMMISSION**

JR

Corporate manager, including their spouse, are required to adhere to the following requirements

- 1) Must be a citizen of the United States
- 2) Must be a Nebraska resident (Chapter 2 – 006) and must provide proof of voter registration in the State of Nebraska
- 3) Must provide a copy of one of the following: state issued US birth certificate, naturalization paper or US passport
- 4) Must submit fingerprints (unless a non-participating spouse) (2 cards per person) and fees of \$38 per person, made payable to Nebraska State Patrol
- 5) Must be 21 years of age or older
- 6) May be required to take a training course

Corporation/LLC information

Name of Corporation/LLC: MMG Nebraska F&B Inc

Premise information

Premise License Number: I- 86128

(if new application leave blank)

Premise Trade Name/DBA: Chili's Grill & Bar

Premise Street Address: 7865 S 84th St

City: LaVista State: NE Zip Code: 68128

Premise Phone Number: 402-592-4900

The individual whose name is listed as a corporate officer or managing member as reported on insert form 3a or 3b or listed with the Commission. Click on this link to see authorized individuals
http://www.lcc.ne.gov/license_search/licsearch.cgi

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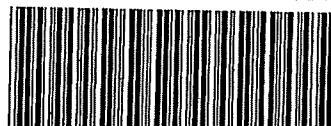


CORPORATE OFFICER/MANAGING MEMBER SIGNATURE
(Faxed signatures are acceptable)

**NEBRASKA LIQUOR
CONTROL COMMISSION**

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**NEBRASKA LIQUOR
CONTROL COMMISSION**

Manager's information must be completed below - PLEASE PRINT CLEARLY

Gender: MALE FEMALE

Last Name: Cayne First Name: Charles MI: S.

Home Address (include PO Box if applicable): 8701 N. 153rd St.

City: Bennington County: Douglas Zip Code: 68007

Home Phone Number: 402-880-3547 Business Phone Number: 402-333-6303

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: 8/9/77 Place Of Birth: Des Moines, IA

Are you married? If yes, complete spouse's information. Box 11a spouse's initial has been submitted

YES

NO

Spouse's Information

Spouses Last Name: Cayne First Name: Emily MI: J

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: Pure, SD

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
Omaha/Bennington, NE	2002	Now	Omaha/Bennington, NE	2004	Now
Sioux Falls, SD	2001	2002	Sioux Falls, SD	1999	2004
Sioux City, IA	1998	2001			

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NEBRASKA LIQUOR
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YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2000	Now	Chilis	Jeff Jones	402-333-6303
1998	2000	Marfield	Dennis Rose	Business Closed

Home Office
972-966-2221

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 anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging 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. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

YES NO

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
Charles Layne	10/1995	Des Moines IA	Concealed weapon	Fine Paid
Charles Layne	12/1999	Sioux City IA	Tres passing	Fine Paid
Charles Layne	10/2001	Sioux City IA	Tres passing	Fine Paid
Charles Layne	11/2002	Omaha, Ne	D.U.I.	Closed, Fine Pd.
Emily Layne	07/1996	Spencer, SD	M.I.P.	Paid fines

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state?

YES NO

IF YES, list the name of the premise.

Chilis → 3202 S. 143rd Plg Omaha Ne

68144

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?

YES NO

4. Have you enclosed the required fingerprint cards and PROPER FEES with this application?
(Check or money order made payable to the Nebraska State Patrol for \$38.00 per person)

YES NO

5. List any alcohol related training and/or experience (when and where).

Responsible Alcohol → on line through chilis

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NEBRASKA LIQUOR
CONTROL COMMISSION



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.

Charles S. Layne

Signature of Manager Applicant

E. Layne

Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska
County of Dallas

May 15, 2012

date

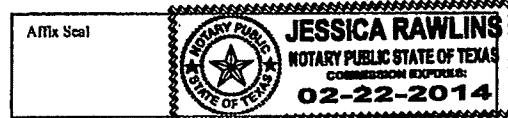
The foregoing instrument was acknowledged before me this

Charles Layne

name of person acknowledged

Jessica Rawlins

Notary Public signature



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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NEBRASKA LIQUOR
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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.lcc.ne.gov

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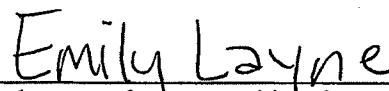
JUN 5 2012

NEBRASKA LIQUOR
CONTROL COMMISSION

I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will have not have any interest, directly or indirectly in the operation or profit of the business (§53-125(13)) of the Liquor Control Act. I will not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices or represent myself as the owner or in any way participate in the day to day operations of this business in any capacity. I understand my fingerprint will not be required; however, I am obligated to sign and disclose any information on all applications needed to process this application.



Signature of spouse asking for waiver
(Spouse of individual listed below)



Printed name of spouse asking for waiver

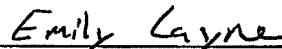
State of Nebraska

County of Douglas

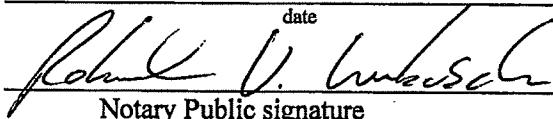
5-29-2012

date

by

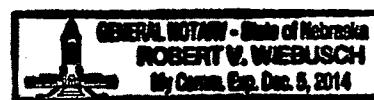


name of person acknowledged

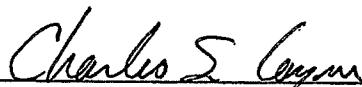
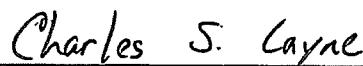


Notary Public signature

Affix Seal



I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (§53-125(13)) the Commission may cancel or revoke the liquor license.

Signature of individual involved with application
(Spouse of individual listed above)

Printed name of applying individual

State of Nebraska

County of Douglas

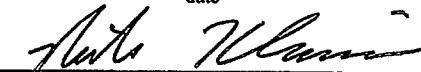
5/31/12

date

by

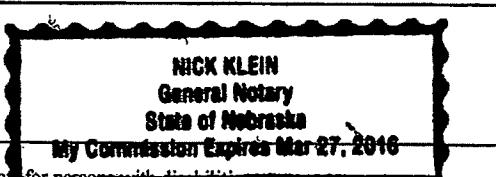


name of person acknowledged

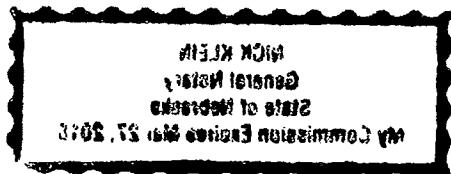
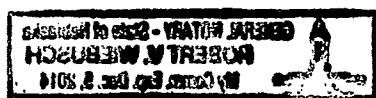


Notary Public signature

Affix Seal



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.





Douglas County Election Commission

225 North 115th Street • Omaha, Nebraska 68154

DAVE PHIPPS, ELECTION COMMISSIONER

STATE OF NEBRASKA } SS
COUNTY OF DOUGLAS }

I, DAVE PHIPPS, Election Commissioner of Douglas County, Nebraska, do certify that Charles S Layne now residing at 8701 N 153rd St, Bennington, Nebraska 68007 registered for voting in this office on October 14, 2009 stating under oath that he was born in Des Moines, Iowa and giving his birth date as August 9, 1977.

In testimony whereof, I have hereunto set my hand and caused to be affixed hereto, the seal of this office, in the City of Omaha, County of Douglas, State of Nebraska, this 13th day of April, 2012.

DAVE PHIPPS
Election Commissioner of
Douglas County, Nebraska

(Seal)

By Rachel Kinnan

NEBRASKA LIQUOR
CONTROL COMMISSION

MAY 16 2012

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Deputy

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JUN 5 2012

NEBRASKA LIQUOR
CONTROL COMMISSION