RECEIVED

APR 01 2019

Special Designated License

Local Recommendation (Form 200)

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

Late applications are non-refundable and will be rejected

LANCASTER COUNTY CLERK

Deer Springs Winery

Retail Liquor License Name <u>or</u> *Non-Profit Organization (* <u>Must include Form #201 as Page 2</u>)		
16255 Adams St Lincoln Ne 68527		
Retail Liquor License Address <u>or</u> Non-Profit Business Address		
N// 070007		

YK 072087 D. 4. HT 1 N .

Retail	License	Number	or	Non-Profit Feder	ral ID #

Consecutive Dates only Event Date(s):	1119			
Event Start Time(s):	pm			
Event End Time(s):	<u>1 pm</u>			
Alternate Date:				
Alternate Location Building	& Address:			
Event Building Name:	Ominana Milana			
Event Street Address/City:	16255 Adams St Linco	oln NE 68527		
Indoor area to be licensed in	h length & width: $\frac{30}{X}$			
Outdoor area to be licensed	in length & width: X			
Type of Event: Music ev	vent	Estimate # of at	tendees: 300	
Type of alcohol to be served	vent : Beer X Wine X (If not marked, you will no	Distilled Spirits t be able to serve this type	be of alcohol)	
Event Contact Name:	nifer Reeder Event Con	tact Phone Number: 40	2-310-4375	
	@deerspringswinery.c			
best of my knowledge and belief. I to waive any rights or causes of ac said information to the Liquor Con	resentative: representative of the above named lice l also consent to an investigation of my ction against the Nebraska Liquor Contu trol Commission or the Nebraska State or corporation for profit or not for profit License.	nse applicant and that the sta background including all reco rol Commission, the Nebraska Patrol. I further declare that t	tements made on this appli rds of every kind including a State Patrol or any other i he license applied for will n	cation are true to the police records. I agree individual releasing ot be used by any

*Retail licensee - Must be signed by a member listed on permanent license *Non-Profit Organization - Must be signed by a Corporate Officer

Local Governing Body completes below:

The local governing body for the City/Village of	OR County of	approves
the issuance of a Special Designated License as requested al	bove. (Only one should be written above)	

Iffice of the Sheriff Lancaster County Terry T. Wagner Sheriff



575 S. 10th Street, Lincoln, Nebraska 68508-2869 -Phone (402) 441-6500 Fax (402) 441-8320



April 16, 2019

Ms. Monet McCullen Lancaster County Clerk's Office County-City Building Lincoln, NE 68508

Re: Application for a Special Designated License from Jennifer Reeder, Deer Springs Winery LLC, License YK-072087.

Dear Ms. McCullen:

This letter is regarding an application for a Special Designated License from Jennifer Reeder, Deer Springs Winery, LLC, to provide Beer and wine service for a music event. The event will take place at 16255 Adams Street, Lincoln, Lancaster County, Nebraska, on Saturday, June 1, 2019, from 1:00 pm to 9:00 pm. The event is expected to have 300 attendees.

The Lancaster County Sheriff's Office finds no reason to recommend denial of this application.

Sincerely, Terry T. Wagner, Sheriff Amy Shandera, Sergeant

RECEIVED

Special Designated License

Local Recommendation (Form 200)

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

. Late applications are non-refundable and will be rejected

APR 01 2019 LANCASTER COUNTY CLERK

Deer Springs Winery	Deer	Sprinas	Winerv
---------------------	------	---------	--------

Retail Liquor License Name or *Non-Profit Organization (*Must include Form #201 as Page 2)
16255 Adams St Lincoln Ne 68527
Retail Liquor License Address <u>or</u> Non-Profit Business Address
YK 072087
Retail License Number <u>or</u> Non-Profit Federal ID #
Consecutive Dates only Event Date(s): 6/15/19
Event Start Time(s):
Consecutive Dates only Event Dates only Event Date(s): 6/15/19
Alternate Date:
Alternate Location Building & Address:
Event Building Name: Deer Springs Winery
Event Building Name: Deer Springs Winery Event Street Address/City: 16255 Adams St Lincoln NE 68527
<u>Indoor</u> area to be licensed in length & width: $\frac{30}{2} \times \frac{16}{2}$
<u>Outdoor</u> area to be licensed in length & width: $\frac{700}{2} \times \frac{700}{2}$ (Diagram Form #109 must be attached)
Type of Event: Music event Estimate # of attendees: 300
Type of Event: Music event Estimate # of attendees: 300 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)
Event Contact Name: Jennifer Reeder Event Contact Phone Number:402-310-4375
Event Contact Email: info@deerspringswinery.com
*Signature Authorized Representative: Juncified Budget Printed Name Jennifer Reeder I declare that I am the authorized representative of the above hamed 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. *Retail licensee – Must be signed by a member listed on permanent license *Non-Profit Organization – Must be signed by a Corporate Officer
Local Governing Body completes below:

The local governing body for the City/Village of ______ OR County of _____ approves the issuance of a Special Designated License as requested above. (Only one should be written above)

Iffice of the Sheriff Lancaster County Terry T. Wa Sheriff

575 S. 10th Street, Lincoln, Nebraska 68508-2869 4 Phone (402) 441-6500 Fax (402) 441-8320



April 16, 2019

Ms. Monet McCullen Lancaster County Clerk's Office County-City Building Lincoln, NE 68508

Re: Application for a Special Designated License from Jennifer Reeder, Deer Springs Winery LLC, License YK-072087.

Dear Ms. McCullen:

This letter is regarding an application for a Special Designated License from Jennifer Reeder, Deer Springs Winery, LLC, to provide Beer and wine service for a music event. The event will take place at 16255 Adams Street, Lincoln, Lancaster County, Nebraska, on Saturday, June 15, 2019, from 1:00 pm to 9:00 pm. The event is expected to have 300 attendees.

The Lancaster County Sheriff's Office finds no reason to recommend denial of this application.

Sincerely,

Terry T. Wagner, Shefiff

Amy Shandera, Sergeant



Special Designated License

Local Recommendation (Form 200)

<u>Applications must be entered on the portal after local approval – no exceptions</u> <u>Late applications are non-refundable and will be rejected</u> APR 01 2019 LANCASTER COUNTY CLERK

Deer Springs Winery

Retail Liquor License Name or *Non-Profit Organization (* <u>Must include Form #201 as Page 2</u>) 16255 Adams St Lincoln Ne 68527 Retail Liquor License Address or Non-Profit Business Address YK 072087 Retail License Number or Non-Profit Federal ID # Consecutive Dates only Event Start Time(s): Event Start Time(s): Event Start Time(s): Event Start Time(s): Event Building & Address: Event Building Name: Deer Springs Winery Event Building Name: Deer Springs Winery Event Street Address/City: 16255 Adams St Lincoln NE 68527 Indoor area to be licensed in length & width: 700 x 700 (Diagram Form #109 must be attached) Type of Event: Music event (If not marked, you will not be able to serve this type of alcohol) Event Contact Fmail: Tog deersprings Winery. Event Contact Email: Event Contact Email: Event Contact Email: Event Contact Email: Event Contact Representative: Signature Authorized Representative: Si	
Retail Liquor License Address or Non-Profit Business Address YK 072087 Retail License Number or Non-Profit Federal ID # Consecutive Dates only Event Date(s): Y/@/J.9 Event Start Time(s): p.m. Event Start Time(s): p.m. Event Start Time(s): p.m. Event End Time(s): p.m. Event Building & Address:	Retail Liquor License Name or *Non-Profit Organization (*Must include Form #201 as Page 2)
YK 072087 Retail License Number or Non-Profit Federal ID # Consecutive Dates only Event Date(s): The product of the second	16255 Adams St Lincoln Ne 68527
Retail License Number or Non-Profit Federal ID # Consecutive Dates only Event Date(s): Profit Federal ID # Event Date(s): Event Start Time(s): Profit Federal ID # Event Start Time(s): Profit Federal ID # Alternate Date: Atternate Date: Event Building & Address: Event Building Name: Deer Springs Winery Event Street Address/City: 16255 Adams St Lincoln NE 68527 Indoor area to be licensed in length & width: 700 x 16 Outdoor area to be licensed in length & width: 700 Type of Event: Music event Event Contact Name: Beer X Wine X Distilled Spirits (If not marked, you will not be able to serve this type of alcohol) Event Contact Name: Jennifer Reeder Event Contact Email: info@deerspringswinery.com Printed Name Jennifer Reeder "Signature Authorized Representative: Printed Name Jennifer Reeder Event Contact So overy kind including police records. Law Comme So overy kind	Retail Liquor License Address <u>or</u> Non-Profit Business Address
Consecutive Dates only Y/6/19 Event Date(s): Y/6/19 Event Start Time(s): PM Event End Time(s): PM Event End Time(s): PM Alternate Date:	YK 072087
Event Date(s): 1/6/19 Event Start Time(s): 1 Event End Time(s): 1 Alternate Date:	Retail License Number <u>or</u> Non-Profit Federal ID #
Alternate Date:	Event Date(s): 7/6/19
Alternate Date:	Event Start Time(s):
Alternate Location Building & Address:	Event End Time(s): <u>9 pm</u>
Event Building Name: Deer Springs Winery Event Street Address/City: 16255 Adams St Lincoln NE 68527 Indoor area to be licensed in length & width: 30 x 16 Outdoor area to be licensed in length & width: 700 x 700 Type of Event: Music event Type of Event: Beer X Wine X Distilled Spirits (If not marked, you will not be able to serve this type of alcohol) Event Contact Name: Jennifer Reeder Event Contact Email: Event Contact Phone Number: *Signature Authorized Representative: Outlow Printed Name *Signature Authorized representative of the above hamed 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 State Patrol. I further declare that the license applied for will not be used by any other persons directly responsible to the vent will be supervised by persons directly responsible to the other person for profit or not for profit and that the event will be supervised by persons directly responsible to the other person directly responsible to the vent will be supervised by persons directly responsible to the other person directly responsible to the not for profit and that the records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska State Patrol. I further declare that the	Alternate Date:
Event Street Address/City: 16255 Adams St Lincoln NE 68527 Indoor area to be licensed in length & width: 30 x 16 Outdoor area to be licensed in length & width: 700 x 700 (Diagram Form #109 must be attached) Type of Event: Music event Estimate # of attendees: 300 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) Event Contact Name: Info@deerspringswinery.com *Signature Authorized Representative of the above hand 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 said information to the Liquor Control Commission or the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or not for profit and that the event will be supervised by persons directly responsible to the New York of the event will be supervised by persons directly responsible to the New York of the event will be supervised by persons directly responsible to the New York of the constant or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the	Alternate Location Building & Address:
Event Street Address/City: 16255 Adams St Lincoln NE 68527 Indoor area to be licensed in length & width: 30 x 16 Outdoor area to be licensed in length & width: 700 x 700 (Diagram Form #109 must be attached) Type of Event: Music event Estimate # of attendees: 300 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) Event Contact Name: Info@deerspringswinery.com *Signature Authorized Representative of the above hand 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 said information to the Liquor Control Commission or the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or not for profit and that the event will be supervised by persons directly responsible to the New York of the event will be supervised by persons directly responsible to the New York of the event will be supervised by persons directly responsible to the New York of the constant or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the	Event Building Name: Deer Springs Winery
Outdoor area to be licensed in length & width: 700 x 700 (Diagram Form #109 must be attached) Type of Event: Music event Estimate # of attendees: 300 Type of alcohol to be served: Beer X Wine X Distilled Spirits Type of alcohol to be served: Beer X Wine X Distilled Spirits Event Contact Name: Jennifer Reeder Event Contact Phone Number: 402-310-4375 Event Contact Email: info@deerspringswinery.com Printed Name Jennifer Reeder *Signature Authorized Representative: Openative of the above hamed 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 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	Event Street Address/City:
Outdoor area to be licensed in length & width: 700 x 700 (Diagram Form #109 must be attached) Type of Event: Music event Estimate # of attendees: 300 Type of alcohol to be served: Beer X Wine X Distilled Spirits Type of alcohol to be served: Beer X Wine X Distilled Spirits Event Contact Name: Jennifer Reeder Event Contact Phone Number: 402-310-4375 Event Contact Email: info@deerspringswinery.com Printed Name Jennifer Reeder *Signature Authorized Representative: Openative of the above hamed 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 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	Indoor area to be licensed in length & width: $\frac{30}{10} \times \frac{16}{10}$
Type of alcohol to be served: Beer X wine X you will not be able to serve this type of alcohol) Event Contact Name: Jennifer Reeder Event Contact Phone Number: Event Contact Email: Info@deerspringswinery.com *Signature Authorized Representative: Printed Name I declare that I am the authorized representative of the above hamed 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 or any other individual releasing solit formation or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the	Outdoor area to be licensed in length & width: $\frac{700}{2}$ X $\frac{700}{2}$ (Diagram Form #109 must be attached)
Type of alcohol to be served: Beer X wine X you will not be able to serve this type of alcohol) Event Contact Name: Jennifer Reeder Event Contact Phone Number: Event Contact Email: Info@deerspringswinery.com *Signature Authorized Representative: Printed Name I declare that I am the authorized representative of the above hamed 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 or any other individual releasing solit formation or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the	Type of Event: Estimate # of attendees:
Event Contact Email: *Signature Authorized Representative: I declare that I am the authorized representative of the above hamed 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	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)
*Signature Authorized Representative: I declare that I am the authorized representative of the above hamed 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	Event Contact Name: Jennifer Reeder Event Contact Phone Number:402-310-4375
*Signature Authorized Representative: I declare that I am the authorized representative of the above hamed 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	Event Contact Email:
	*Signature Authorized Representative: 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

*Retail licensee – Must be signed by a member listed on permanent license *Non-Profit Organization – Must be signed by a Corporate Officer

Local Governing Body completes below:

The local governing body for the City/Village of ______ OR County of ______approves the issuance of a Special Designated License as requested above. (Only one should be written above)

Iffice of the Sheriff Lancaster County Terry T. Wagner Sheriff

575 S. 10th Street, Lincoln, Nebraska 68508-2869 • Phone (402) 441-6500 Fax (402) 441-8320



April 16, 2019

Ms. Monet McCullen Lancaster County Clerk's Office County-City Building Lincoln, NE 68508

Re: Application for a Special Designated License from Jennifer Reeder, Deer Springs Winery LLC, License YK-072087.

Dear Ms. McCullen:

This letter is regarding an application for a Special Designated License from Jennifer Reeder, Deer Springs Winery, LLC, to provide Beer and wine service for a music event. The event will take place at 16255 Adams Street, Lincoln, Lancaster County, Nebraska, on Saturday, July 6, 2019, from 1:00 pm to 9:00 pm. The event is expected to have 300 attendees.

The Lancaster County Sheriff's Office finds no reason to recommend denial of this application.

Sincerely,

Terry T. Wagner, Sheriff

Amy Shandera, Sergeant

Special Designated License Local Recommendation (Form 200)

APR 01 2019

<u>Applications must be entered on the portal after local approval – no exceptions</u> Late applications are non-refundable and will be rejected

LANCASTER COUNTY CLERK

RECEIVED

Deer Springs Winery

Retail Liquor License Name or *Non-Profit Organization (*Must include Form #201 as Page 2)
16255 Adams St Lincoln Ne 68527
Retail Liquor License Address or Non-Profit Business Address
YK 072087
Retail License Number <u>or</u> Non-Profit Federal ID #
Consecutive Dates only Image: Consecutive Dates only Event Date(s): Image: Consecutive Dates only
Event Start Time(s):
Event Date(s): 7/26/19 Event Start Time(s): 1 Event End Time(s): 9
Alternate Date:
Alternate Location Building & Address:
Event Building Name: Deer Springs Winery
Event Street Address/City:16255 Adams St Lincoln NE 68527
<u>Indoor</u> area to be licensed in length & width: $\frac{30}{700} \times \frac{16}{700}$
<u>Outdoor</u> area to be licensed in length & width: $\frac{700}{2} \times \frac{700}{2}$ (Diagram Form #109 must be attached)
Type of Event: Estimate # of attendees:
Type of Event: Music event Estimate # of attendees: 300 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)
Event Contact Name: Jennifer Reeder Event Contact Phone Number:402-310-4375
Event Contact Email: info@deerspringswinery.com
*Signature Authorized Representative: Printed Name Jennifer Reeder 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.
*Retail licensee – Must be signed by a member listed on permanent license *Non-Profit Organization – Must be signed by a Corporate Officer
Local Governing Body completes below:

The local governing body for the City/Village of ______ OR County of ______ the issuance of a Special Designated License as requested above. (Only one should be written above) approves

Iffice of the Sheriff Lancaster County Terry T. Wagner Sheriff



575 S. 10th Street, Lincoln, Nebraska 68508-2869 -Phone (402) 441-6500 Fax (402) 441-8320



April 16, 2019

Ms. Monet McCullen Lancaster County Clerk's Office County-City Building Lincoln, NE 68508

Re: Application for a Special Designated License from Jennifer Reeder, Deer Springs Winery LLC, License YK-072087.

Dear Ms. McCullen:

This letter is regarding an application for a Special Designated License from Jennifer Reeder, Deer Springs Winery, LLC, to provide Beer and wine service for a music event. The event will take place at 16255 Adams Street, Lincoln, Lancaster County, Nebraska, on Saturday, July 20, 2019, from 1:00 pm to 9:00 pm. The event is expected to have 300 attendees.

The Lancaster County Sheriff's Office finds no reason to recommend denial of this application.

Sincerely,

Terry T. Wagner, Sheriff Amy Shandera, Sergeant

RECEIVED

Special Designated License

Local Recommendation (Form 200)

<u>Applications must be entered on the portal after local approval – no exceptions</u> <u>Late applications are non-refundable and will be rejected</u>

LANCASTER COUNTY CLERK

APR 01 2019

Deer Springs Winery

Retail Liquor License Name or *Non-Profit Organization (*Must include Form #201 as Page 2)
16255 Adams St Lincoln Ne 68527
Retail Liquor License Address <u>or</u> Non-Profit Business Address
YK 072087
Retail License Number <u>or</u> Non-Profit Federal ID #
Consecutive Dates only &/3/19/ Event Date(s):
Event Start Time(s):
Alternate Date:
Alternate Location Building & Address:
Event Building Name: Deer Springs Winery
Event Street Address/City: 16255 Adams St Lincoln NE 68527
Indoor area to be licensed in length & width: $\frac{30}{100} \times \frac{16}{1000}$
<u>Outdoor</u> area to be licensed in length & width: <u>700</u> X <u>700</u> (Diagram Form #109 must be attached)
Type of Event: Estimate # of attendees:
Type of Event: Music event Estimate # of attendees: 300 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)
Event Contact Name: Jennifer Reeder Event Contact Phone Number:402-310-4375
Event Contact Email: info@deerspringswinery.com
*Signature Authorized Representative: 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.
*Retail licensee – Must be signed by a member listed on permanent license *Non-Profit Organization – Must be signed by a Corporate Officer

Local Governing Body completes below:

The local governing body for the City/Village of ______ OR County of ______ approves the issuance of a Special Designated License as requested above. (Only one should be written above)

Iffice of the Sheriff Lancaster County Terry T. Wagner Sheriff



575 S. 10th Street, Lincoln, Nebraska 68508-2869 • Phone (402) 441-6500 Fax (402) 441-8320

April 16, 2019

Ms. Monet McCullen Lancaster County Clerk's Office County-City Building Lincoln, NE 68508

Re: Application for a Special Designated License from Jennifer Reeder, Deer Springs Winery LLC, License YK-072087.

Dear Ms. McCullen:

This letter is regarding an application for a Special Designated License from Jennifer Reeder, Deer Springs Winery, LLC, to provide Beer and wine service for a music event. The event will take place at 16255 Adams Street, Lincoln, Lancaster County, Nebraska, on Saturday, August 3, 2019, from 1:00 pm to 9:00 pm. The event is expected to have 300 attendees.

The Lancaster County Sheriff's Office finds no reason to recommend denial of this application.

Sincerely,

erry T. Wagner, Sheriff Amy Shandera, Sergeant

Special Designated License

Local Recommendation (Form 200)

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

. Late applications are non-refundable and will be rejected

Deer Springs Winery

Deer Springs Winery	01
Retail Liquor License Name or *Non-Profit Organization (*Must include Form #201 as Page 2)	
16255 Adams St Lincoln Ne 68527	
Retail Liquor License Address or Non-Profit Business Address	
YK 072087	
Retail License Number <u>or</u> Non-Profit Federal ID #	
Consecutive Dates only Event Date(s): 8/24/19	
Event Start Time(s):	
Event Date(s): \$124119	
Alternate Date:	
Alternate Location Building & Address:	
Event Building Name: Deer Springs Winery	
Event Street Address/City: 16255 Adams St Lincoln NE 68527	
<u>Indoor</u> area to be licensed in length & width: $\frac{30}{X} \times \frac{16}{10}$	
<u>Outdoor</u> area to be licensed in length & width: $\frac{700}{2} \times \frac{700}{2}$ (Diagram Form #109 must be attached)	
Type of Event: Estimate # of attendees:	
Type of alcohol to be served: (If not marked, you will not be able to serve this type of alcohol)	
Event Contact Name: Jennifer Reeder Event Contact Phone Number: 402-310-4375	

info@deerspringswinery.com **Event Contact Email:**

Alelen Printed Name Jennifer Reeder

*Signature Authorized Representative: Printed Name 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.

*Retail licensee - Must be signed by a member listed on permanent license *Non-Profit Organization - Must be signed by a Corporate Officer

Local Governing Body completes below:

OR County of The local governing body for the City/Village of _____ the issuance of a Special Designated License as requested above. (Only one should be written above) approves

Iffice of the Sheriff Lancaster County Terry T. Wa Sheriff

575 S. 10th Street, Lincoln, Nebraska 68508-2869 -Phone (402) 441-6500 Fax (402) 441-8320



April 16, 2019

Ms. Monet McCullen Lancaster County Clerk's Office County-City Building Lincoln, NE 68508

Re: Application for a Special Designated License from Jennifer Reeder, Deer Springs Winery LLC, License YK-072087.

Dear Ms. McCullen:

This letter is regarding an application for a Special Designated License from Jennifer Reeder, Deer Springs Winery, LLC, to provide Beer and wine service for a music event. The event will take place at 16255 Adams Street, Lincoln, Lancaster County, Nebraska, on Saturday, August 24, 2019, from 1:00 pm to 9:00 pm. The event is expected to have 300 attendees.

The Lancaster County Sheriff's Office finds no reason to recommend denial of this application.

Sincerely,

Amy Shandera, Sergeant

OUTDOOR AREA DIAGRAM

HOW AREA WILL BE PATROLLED WVIST Bands For 21 Jolder

- IF APPLICABLE, OUTDOOR AREA MUST BE CONNECTED TO INDOOR AREA IF INDOOR AREA IS TO LICENSED
- MEASUREMENT OF OUTER WALLS OF AREA TO BE LICENSED MUST INCLUDED LENGTH &
 WIDTH IN FEET
- DOUBLE FENCING IS REQUIRED FOR ALL NON-PROFIT ORGANIZATIONS UNLESS FORM #140 IS FILED WITH THIS FORM AND IS APPROVED BY THE COMMISSION
- RETAILER LIQUOR LICENSE HOLDERS ARE NOT REQUIRED TO DOUBLE FENCE, ALTHOUGH MEASURES NEED TO BE TAKEN TO SECURE THE AREA

DIAGRAM OF PROPOSED AREA:

See Attached Diagram

Form 109 Rev Nov 2016



Monet J. McCullen

From: Sent: To: Subject: Monet J. McCullen Thursday, April 11, 2019 11:24 AM Tom J. Cajka RE: Deer Springs Winery - 6 SDL's

Hi Tom,

I did speak to LCC and they confirmed that if the winery selects to serve beer on the Form 200 then the LCC will give them an exemption for the SDL date to be able to serve beer.

From: Tom J. Cajka
Sent: Thursday, April 11, 2019 10:52 AM
To: Monet J. McCullen <MMcCullen@lancaster.ne.gov>
Subject: RE: Deer Springs Winery - 6 SDL's

This shows Deer Springs Winery as the liquor license name. I wasn't aware that their liquor license allowed them to sell beer. Other than that, Planning odes not object to the SDL's.

Tom Cajka, Planner II County Planner Lincoln-Lancaster County Planning 402-441-5662

From: Monet J. McCullen
Sent: Thursday, April 11, 2019 10:33 AM
To: Amy L. Shandera <<u>AShandera@lancaster.ne.gov</u>>; Barbi M. Loschen <<u>bloschen@lancaster.ne.gov</u>>; David A. Derbin
<<u>DDerbin@lancaster.ne.gov</u>>; David R. Cary <<u>dcary@lincoln.ne.gov</u>>; Greg R. Topil <<u>gtopil@lincoln.ne.gov</u>>; Jenifer T.
Holloway <<u>JHolloway@lancaster.ne.gov</u>>; Josh D. Clark <<u>JClark@lancaster.ne.gov</u>>; Justin L. Daniel
<<u>idaniel@lincoln.ne.gov</u>>; Kelsey A. Varisco <<u>KVarisco@lincoln.ne.gov</u>>; Ken D. Schroeder
<<u>kschroeder@lancaster.ne.gov</u>>; Robert K. Simmering <<u>RSimmering@lincoln.ne.gov</u>>; Steve S. Henrichsen
<<u>shenrichsen@lincoln.ne.gov</u>>; Terry A. Kathe <<u>tkathe@lincoln.ne.gov</u>>; Tom J. Cajka <<u>tcajka@lincoln.ne.gov</u>>
Subject: Deer Springs Winery - 6 SDL's

Hello,

Deer Springs Winery has submitted 6 SDL requests. All are the same event on June 1st, June 15th, July 6th, July 20th, August 3rd and August 24th at 16255 Adams Street, Lincoln. I'd like to place all these on the same agenda. Please have recommendations back to me by May 1st.

Thanks,

Monét McCullen County Clerk's Office 402.441.7485

Monet J. McCullen

From:David A. VoborilSent:Tuesday, April 16, 2019 9:14 AMTo:Kelsey A. Varisco; Monet J. McCullenSubject:RE: Deer Springs Winery - 6 SDL's

Health Dept. approves the applications.

Dave Voboril Environmental Health Specialist II <u>dvoboril@lincoln.ne.gov</u> 402-441-8633

From: Kelsey A. Varisco
Sent: Thursday, April 11, 2019 11:32 AM
To: David A. Voboril <dvoboril@lincoln.ne.gov>
Cc: Justin L. Daniel <jdaniel@lincoln.ne.gov>
Subject: FW: Deer Springs Winery - 6 SDL's

Hi Dave, Could you please review these requests and respond to Monet (and CC me)? Thank you, Kelsey

From: Monet J. McCullen
Sent: Thursday, April 11, 2019 10:33 AM
To: Amy L. Shandera <<u>AShandera@lancaster.ne.gov</u>>; Barbi M. Loschen <<u>bloschen@lancaster.ne.gov</u>>; David A. Derbin
<<u>DDerbin@lancaster.ne.gov</u>>; David R. Cary <<u>dcary@lincoln.ne.gov</u>>; Greg R. Topil <<u>gtopil@lincoln.ne.gov</u>>; Jenifer T.
Holloway <<u>JHolloway@lancaster.ne.gov</u>>; Josh D. Clark <<u>JClark@lancaster.ne.gov</u>>; Justin L. Daniel
<<u>idaniel@lincoln.ne.gov</u>>; Kelsey A. Varisco <<u>KVarisco@lincoln.ne.gov</u>>; Ken D. Schroeder
<<u>kschroeder@lancaster.ne.gov</u>>; Robert K. Simmering <<u>RSimmering@lincoln.ne.gov</u>>; Steve S. Henrichsen
<<u>shenrichsen@lincoln.ne.gov</u>>; Terry A. Kathe <<u>tkathe@lincoln.ne.gov</u>>; Tom J. Cajka <<u>tcajka@lincoln.ne.gov</u>>
Subject: Deer Springs Winery - 6 SDL's

Hello,

Deer Springs Winery has submitted 6 SDL requests. All are the same event on June 1st, June 15th, July 6th, July 20th, August 3rd and August 24th at 16255 Adams Street, Lincoln. I'd like to place all these on the same agenda. Please have recommendations back to me by May 1st.

Thanks,

Monét McCullen County Clerk's Office 402.441.7485

LANCASTER COUNTY

Pamela L. Dingman, P.E. County Engineer

ENGINEERING

Kenneth D. Schroeder, R.L.S. Deputy County Surveyor

DEPARTMENT

DATE:	April 17, 2019
то:	Monet McCullen County Clerk's Office
FROM:	Ken Schroeder <u>Kenssahrouder</u> County Surveyor
SUBJECT:	SPECIAL DESIGNATED LICENSE APPLICATIONS – DEER SPRING WINERY MUSIC EVENT – 16255 ADAMS STREET SATURDAY, JUNE 1, 15, JULY 6, 20, AUGUST 3, 24, 2019 – FROM 1:00 P.M. TO 9:00 P.M.

Upon review, this office has no direct objections to this submittal, subject to no parking allowed along adjacent County roads during the time of the event and subject to review by the Lancaster County Sheriff's Office for safety precautions.

Cc: Amy Shandera, Lancaster County Sheriff's Office Jenifer Holloway, Deputy County Attorney Ron Bohaty, Road Maintenance Superintendent

KDS/bml