



**LA VISTA POLICE DEPARTMENT
INTER-DEPARTMENT MEMO**

TO: Pam Buethe, City Clerk

FROM: Chief Robert S. Lausten

DATE: September 16, 2020

RE: LOCAL BACKGROUND- MANAGER
HOOTERS

CC:

The police department reviewed the Nebraska Liquor Control Commission documents completed by the applicant and conducted a check of local records relating to the Manager Application for Troy Faulk. Faulk has no criminal record in Sarpy County.

As with all Nebraska Retail Liquor Licenses, I am asking that the applicant strictly conform to Nebraska Liquor Control Commission rules and regulations under (Sec 53-131.01) Nebraska Liquor Control Act.

**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.nebraska.gov

Office Use

RECEIVED

SEP 14 2020

NEBRASKA LIQUOR
CONTROL COMMISSION

MUST BE:

- ✓ Include copy of US birth certificate, naturalization paper or current US passport
- ✓ Nebraska resident. Include copy of voter registration card or print out document from Secretary of State website
- ✓ Fingerprinted. See form 147 for further information, read form carefully to avoid delays in processing, this form MUST be included with your application
- ✓ 21 years of age or older

Corporation/LLC information

Name of Corporation/LLC: HOA Restaurant Holder, LLC

Premise information

Liquor License Number: 122922 Class Type C (if new application leave blank)

Premise Trade Name/DBA: Hooters

Premise Street Address: 12710 Westport Parkway

City: La Vista County: Sarpy Zip Code: 68138

Premise Phone Number: (402) 281-1300

Premise Email address: sfulton@hooters.com

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. To see authorized officers or members search your license information [here](#).


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

Manager's information must be completed below PLEASE PRINT CLEARLY

Last Name: Falk First Name: Troy MI: J

Home Address: 511 Surfside Drive #133

City: Lincoln County: Lancaster Zip Code: 68528

Home Phone Number: [REDACTED]

Driver's License Number & State: [REDACTED]

Social Security Number: [REDACTED]

Date Of Birth: [REDACTED] Place Of Birth: [REDACTED]

Email address: Lavista & hooters.com

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

☐ YES

☒ NO

Spouse's information

Spouses Last Name: N/A First Name: _____ MI: _____

Social Security Number: _____

Driver's License Number & State: _____

Date Of Birth: _____ Place Of Birth: _____

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
Lincoln, NE	2010	2020			

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2018	2019	Heartland	Lynette Sorrentino	(402) 250-7074
2019	2019	THE GALA	Jeff Rothgeb	(402) 601-2564

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, include traffic violations. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name. Commission must be notified of any arrests and/or convictions that may occur after the date of signing this application.

☒ 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
See Attached				

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(s):

Doc's Place and J. Finnegans

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

List any conviction or guilty plea for 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. include traffic violations. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Name of Applicant	Date of Conviction (mm/yyyy)	City & State of Conviction	Description of Charge	Disposition
Troy Falk	07/1991	Lincoln, Nebraska	Littering of Public or Private Property	Paid Fine
Troy Falk	07/1991	Lincoln, Nebraska	Failure to Appear When on Bail for a Misdemeanor	Paid Fine
Troy J. Falk	08/1995	Lincoln, Nebraska	Parks: Entered After Hours; Infraction	Guilty plea; Paid Fine
Troy J. Falk	04/1997	Lincoln, Nebraska	Violating speed limit 6-10 mph; Infraction	Guilty plea; Paid Fine
Troy J. Falk	09/2004	Lincoln, Nebraska	DUI and Improper Registration. Misdemeanor	Plea of no contest; finding is guilty. Paid Fine
Troy Falk	08/2005	Lincoln, Nebraska	Operating a food establishment without a permit	Guilty plea; Paid Fine
Troy J. Falk	08/2005	Lincoln, Nebraska	Food establishment without a permit	Guilty plea, Paid Fine
Troy J. Falk	05/2009	Hamilton County, Nebraska	Speeding 6-10 mph Interstate; Infraction	Guilty plea, Paid Fine

Name of Applicant	Date of Conviction (mm/yyyy)	City & State of Conviction	Description of Charge	Disposition
Troy J. Falk	10/2016	Lincoln, Nebraska	Violate Yield Sign: Infraction	Guilty plea; Paid Fine
Troy J. Falk	05/2018	Lincoln, Nebraska	Reckless Driving: Misdemeanor	Plea of no contest; finding is guilty. fine of \$500

4. List the alcohol related training and/or experience (when and where) of the person making application.

*NLCC Training Certificate Issued: Seide Safe Name on Certificate: Troy Falk

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)

*For list of NLCC Certified Training Programs see training

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
Troy Falk		Owned and operated a bar/restaurant - Doc's Place and J. Finnegans

5. Have you enclosed form 147 regarding fingerprints?

☒ YES

☐ NO

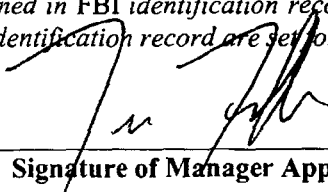
PERSONAL OATH AND CONSENT OF INVESTIGATION

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.

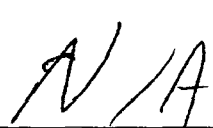
The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action 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.

Applicant Notification and Record Challenge: Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in FBI identification record. The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.



Signature of Manager Applicant



Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska
County of Sarpy

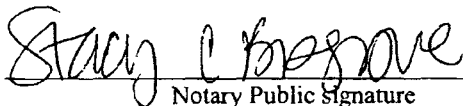
The foregoing instrument was acknowledged before me this

8/28/2020

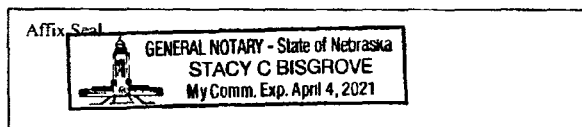
date

by Troy Falk

NAME OF PERSON BEING ACKNOWLEDGED



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.