



LA VISTA POLICE DEPARTMENT INTER-DEPARTMENT MEMO

TO: Pam Buethe, City Clerk

FROM: Chief Robert S. Lausten

DATE: November 24, 2021

RE: LOCAL BACKGROUND- MANAGER
DUAL STOP

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 Niraj Patel. Carter 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.



Pete Ricketts
Governor

STATE OF NEBRASKA
NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe
Executive Director
301 Centennial Mall South
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 <https://www.lcc.nebraska.gov>

Today's Date: _____

From: _____

To: _____

I have attached a copy of a new corporate manager application submitted to the Nebraska Liquor Control Commission. Please complete the following information below to indicate your recommendation.

Licensee Name: _____

Trade Name (DBA): _____

License Number: _____

Manager Name: _____

Due Date: _____

APPROVED

NO LOCAL RECOMMENDATION

DENIED

COMMENTS: (YOU MAY ATTACH MINUTES AND/OR ADDITIONAL NOTES)

Clerk's Name: _____ Date: _____

Kim Lowe
Commissioner

Bruce Bailey
Chairman

Harry Hoch
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.nebraska.gov

Office Use

110675

RECEIVED

NOV 09 2021

NEBRASKA LIQUOR
CONTROL COMMISSION

BR

FORM MUST BE COMPLETELY FILLED OUT IN ORDER FOR APPLICATION TO BE PROCESSED

MANAGER MUST:

- ☒ Complete all sections of the application. Be sure it is signed by a **member or corporate officer**, corporate officer or member must be an individual on file with the Liquor Control Commission
- ☒ Fingerprints are required. See form 147 for further information, read form carefully to avoid delays in processing, this form **MUST** be included with your application.
- ☒ Provide a copy of one of the following: US birth certificate, naturalization papers or current US passport (even if you have provided this before)
- ☒ Be a registered voter in the State of Nebraska, include a copy of voter card or print document from Secretary of State website with application

Spouse who **will not** participate in the business, spouse must:

- ☒ Complete the Spousal Affidavit of Non Participation Insert (must be notarized). The non-participating spouse completes the top half; the manager completes the bottom half. **Be sure to complete both halves of this form.**
- Need not answer question #1 of the application

Spouse who **will** participate in the business, the spouse must:

- NA
- Sign the application
 - Fingerprints are required. See form 147 for further information, read form carefully to avoid delays in processing, this form **MUST** be included with your application.
 - Provide a copy of one of the following: birth certificate, naturalization papers or current US passport (even if you have provided this before)
 - Be a registered voter in the state of Nebraska, include a copy of voter card with application
 - Spousal Affidavit of Non Participation Insert **not** required



0400
0019

**MANAGER APPLICATION
INSERT - FORM 3c**

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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: Shakti Fuels, LLC

Premise information

Liquor License Number: 110675 Class Type D (if new application leave blank)

Premise Trade Name/DBA: Dual Stop Food & Fuel

Premise Street Address: 8307 Park View Blvd.

City: La Vista County: Sarpy Zip Code: 68128

Premise Phone Number: 402-331-4145

Premise Email address: maulinpatel93@gmail.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](#).

A handwritten signature in black ink, appearing to be "MLP" or similar, written over a horizontal line.

SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER

(Faxed signatures are acceptable)

Manager's information must be completed below PLEASE PRINT CLEARLY

Last Name: Niraj Patel First Name: Patel Niraj MI: R
Home Address: 10708 M Street
City: Omaha County: Douglas Zip Code: 68128
Home Phone Number: 712-490-8054
Driver's License Number & State: [REDACTED]
Social Security Number: [REDACTED]
Date Of Birth: [REDACTED] Place Of Birth: Ahmedabad, India
Email address: 6912harrison@gmail.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: Patel First Name: Jignasu MI:
Social Security Number: [REDACTED]
Driver's License Number & State: [REDACTED]
Date Of Birth: [REDACTED] Place Of Birth: Ahmedabad, India

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, NE	2016	Present	Omaha, NE	2016	Present
Sioux City, IA	2003	2016	Sioux City, IA	2003	2016

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2016	present	Lucky Charm Hospitality	Maulin Patel	712-490-1210
2010	2015	Shakti Petroleum	Mihir Patel	

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
Niraj Patel	2/19/2002	Sioux City, NE	DUI	Plea of no contest, fines paid, file since purged
Niraj Patel	8/17/2010	Council Bluffs, IA	Fail to display Resigatration	fines paid
Niraj Patel	12/6/2006	Harrison Co., IA	Speeding	Fines Paid
Niraj Patel	9/20/2007	Harrison Co., IA	Speeding	Fines Paid
Niraj Patel	2/14/2006	Woodbury Co., IA	Speeding	Fines Paid
Niraj Patel	11/21/2001	Woodbury Co., IA	Simple Assault	Fines Paid

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):

NK Corporation, d/b/a Food & Fuels R Us, Nebraska License #119766

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

*NLCC Training Certificate Issued: 6/3/2019 Name on Certificate: Niraj R. Patel

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Niraj R. Patel	06/2019	RBST State Alcohol Training

*For list of NLCC Certified Training Programs see training

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:

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 Douglas

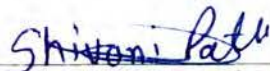
The foregoing instrument was acknowledged before me this

October 12th, 2021
date

by

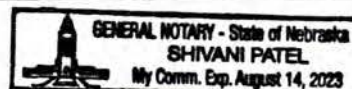
Niraj Patel

NAME OF PERSON BEING ACKNOWLEDGED



Notary Public signature

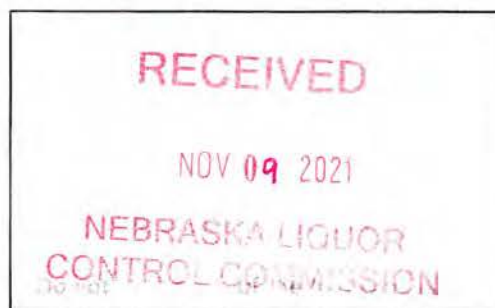
Affix Seal



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.

**PRIVACY ACT STATEMENT/
SUBMISSION OF FINGERPRINTS /
PAYMENT OF FEES TO NSP-CID**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
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THIS FORM IS REQUIRED TO BE SIGNED BY EACH PERSON BEING FINGERPRINTED:
DIRECTIONS FOR SUBMITTING FINGERPRINTS AND FEE PAYMENTS:

- **FAILURE TO FILE FINGERPRINT CARDS AND PAY THE REQUIRED FEE TO THE NEBRASKA STATE PATROL WILL DELAY THE ISSUANCE OF YOUR LIQUOR LICENSE**
- Fee payment of **\$45.25 per person** **MUST** be made **DIRECTLY** to the Nebraska State Patrol;
It is recommended to make payment through the **NSP PayPort** online system at www.ne.gov/go/nsp
Or a check made payable to **NSP** can be mailed directly to the following address:
*****Please indicate on your payment who the payment is for (the name of the person being fingerprinted) and the payment is for a Liquor License*****

The Nebraska State Patrol – CID Division
3800 NW 12th Street
Lincoln, NE 68521

- Fingerprints taken at NSP LIVESCAN locations will be forwarded to NSP – CID
Applicant(s) will not have cards to include with license application.
- Fingerprints taken at local law enforcement offices may be released to the applicants;
Fingerprint cards should be submitted with the application.

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 the FBI identification record. The procedures for obtaining a change, correction, or updating a FBI identification record are set forth in Title 28, CFR, 16.34.

****Please Submit this form with your completed application to the Liquor Control Commission****

Trade Name Dual Stop Food & Fuel

Name of Person Being Fingerprinted: Niraj Patel

Date of Birth: Last 4 SSN:

Date fingerprints were taken: October 2021

Location where fingerprints were taken: Nebraska

How was payment made to NSP?

☒ NSP PAYPORT ☐ CASH ☐ CHECK SENT TO NSP CK #

My fingerprints are already on file with the commission – fingerprints completed for a previous application less than 2 years ago? YES ☐


SIGNATURE REQUIRED OF PERSON BEING FINGERPRINTED



[Back to Lookup](#) / [Registrant Detail](#)

Niraj Rasiklal Patel

Political Party
Republican

Precinct
05-24

Election Details

10/12/2021 Ralston and Westside Elections

Absentee Ballot

Absentee Ballot exists for this election, but we require more information to display it.

Date of Birth

Month



Day



Year



Look Up

Polling Location

Mockingbird Hills Community Center

📍 10242 Mockingbird Drive Omaha, NE 68127



Ballot Styles

153

**SPOUSAL AFFIDAVIT OF
NON PARTICIPATION INSERT**

NEBRASKA LIQUOR CONTROL COMMISSION
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PO BOX 95046
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☒ I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will not have any interest, directly or indirectly in the operation 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, represent myself as the owner or **in any way participate in the day to day operations of this business in any capacity.** The penalty guideline for violation of this affidavit is cancellation of the liquor license.

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

Jignasu Patel
Signature of **NON-PARTICIPATING SPOUSE**

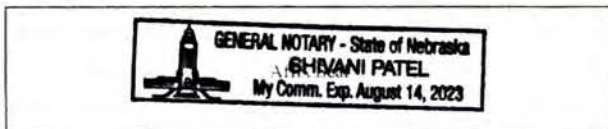
Jignasu Patel
Print Name

State of Nebraska, County of Douglas

The foregoing instrument was acknowledged before me
this October 12th 2021 (date)

by Jignasu Patel
Name of person acknowledged
(Individual signing document)

Shivani Patel
Notary Public Signature



Niraj Patel
Signature of **APPLICANT**

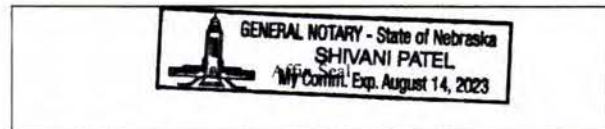
Niraj Patel
Print Name

State of Nebraska, County of Douglas

The foregoing instrument was acknowledged before me
this October 12th 2021 (date)

by Niraj Patel
Name of person acknowledged
(Individual signing document)

Shivani Patel
Notary Public Signature



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.

Certificate of Achievement

- for those who serve or sell alcohol in Nebraska

NIRAJ R PATEL

holds a

State Alcohol certificate

Permit # RB-0113275

Permit Expires: 06-03-2022 Amount Paid: \$



Responsible Beverage Service Training
N E B R A S K A



General	Credential	Number	Earned	Expires
Niraj R Patel 4305 46th st Sioux city IA 51108	STATE ALCOHOL	RB-0113275	06-03-2019	06-03-2022



LA VISTA POLICE DEPARTMENT INTER-DEPARTMENT MEMO

TO: Pam Buethe, City Clerk

FROM: Chief Robert S. Lausten

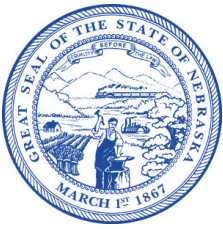
DATE: November 24, 2021

RE: LOCAL BACKGROUND- MANAGER
FOOD & FUELS R US

CC:

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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.



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Governor

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Due Date: _____

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NO LOCAL RECOMMENDATION

DENIED

COMMENTS: (YOU MAY ATTACH MINUTES AND/OR ADDITIONAL NOTES)

Clerk's Name: _____ Date: _____

Kim Lowe
Commissioner

Bruce Bailey
Chairman

Harry Hoch
Commissioner

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INSERT - FORM 3c**

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Office Use

119766
RECEIVED

NOV 09 2021

NEBRASKA LIQUOR
CONTROL COMMISSION

**FORM MUST BE COMPLETELY FILLED OUT IN ORDER FOR APPLICATION TO BE
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- ✓ ☒ Provide a copy of one of the following: US birth certificate, naturalization papers or current US passport (even if you have provided this before)
- ✓ ☒ Be a registered voter in the State of Nebraska, include a copy of voter card or print document from Secretary of State website with application

Spouse who **will not** participate in the business, spouse must:

- ✓ ☒ Complete the Spousal Affidavit of Non Participation Insert (must be notarized). The non-participating spouse completes the top half; the manager completes the bottom half. **Be sure to complete both halves of this form.**
- Need not answer question #1 of the application

Spouse who **will** participate in the business, the spouse must:

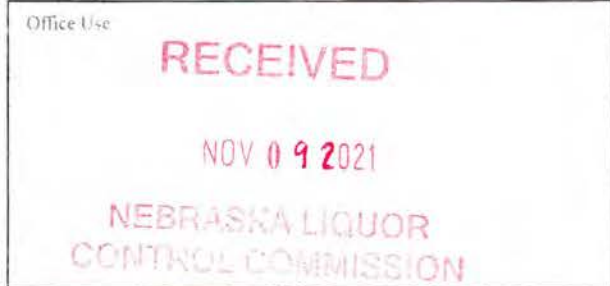
- NA ☒ Sign the application
- Fingerprints are required. See form 147 for further information, read form carefully to avoid delays in processing, this form **MUST** be included with your application.
- Provide a copy of one of the following: birth certificate, naturalization papers or current US passport (even if you have provided this before)
- Be a registered voter in the state of Nebraska, include a copy of voter card with application
- Spousal Affidavit of Non Participation Insert **not** required



2100013207

**MANAGER APPLICATION
INSERT - FORM 3c**

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Corporation/LLC information

Name of Corporation/LLC: NK Corporation

Premise information

Liquor License Number: 119766 Class Type D (if new application leave blank)

Premise Trade Name/DBA: Food & Fuels R Us

Premise Street Address: 6912 South 110th Street

City: La Vista County: Sarpy Zip Code: 68128

Premise Phone Number: 402-597-6800

Premise Email address: maulinpatel93@gmail.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: Niraj Patel First Name: Patel Niraj MI: R
Home Address: 10708 M Street
City: Omaha County: Douglas Zip Code: 68128
Home Phone Number: 712-490-8054
Driver's License Number & State: [REDACTED]
Social Security Number: [REDACTED]
Date Of Birth: [REDACTED] Place Of Birth: Ahmedabad, India
Email address: 6912harrison@gmail.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: Patel First Name: Jignasu MI:
Social Security Number: [REDACTED]
Driver's License Number & State: [REDACTED]
Date Of Birth: [REDACTED] Place Of Birth: Ahmedabad, India

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, NE	2016	Present	Omaha, NE	2016	Present
Sioux City, IA	2003	2016	Sioux City, IA	2003	2016

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2016	present	Lucky Charm Hospitality	Maulin Patel	712-490-1210
2010	2015	Shakti Petroleum	Mihir Patel	

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
Niraj Patel	2/19/2002	Sioux City, NE	DUI	Plea of no contest, fines paid, file since purged
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Niraj Patel	11/21/2001	Woodbury Co., IA	Simple Assault	Fines Paid

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):

NK Corporation, d/b/a Food & Fuels R Us, Nebraska License #119766

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

*NLCC Training Certificate Issued: 6/3/2019 Name on Certificate: Niraj R. Patel

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Niraj R. Patel	06/2019	RBST State Alcohol Training

*For list of NLCC Certified Training Programs see training

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:

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.

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Signature of Manager Applicant



Signature of Spouse

ACKNOWLEDGEMENT

State of Nebraska

County of Douglas

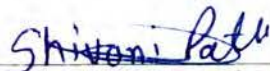
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by

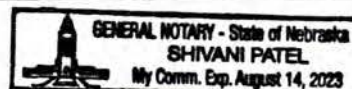
Niraj Patel

NAME OF PERSON BEING ACKNOWLEDGED



Notary Public signature

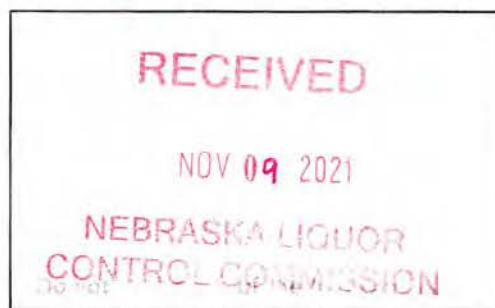
Affix Seal



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.

**PRIVACY ACT STATEMENT/
SUBMISSION OF FINGERPRINTS /
PAYMENT OF FEES TO NSP-CID**

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



THIS FORM IS REQUIRED TO BE SIGNED BY EACH PERSON BEING FINGERPRINTED:
DIRECTIONS FOR SUBMITTING FINGERPRINTS AND FEE PAYMENTS:

- **FAILURE TO FILE FINGERPRINT CARDS AND PAY THE REQUIRED FEE TO THE NEBRASKA STATE PATROL WILL DELAY THE ISSUANCE OF YOUR LIQUOR LICENSE**
- Fee payment of **\$45.25 per person** **MUST** be made **DIRECTLY** to the Nebraska State Patrol;
It is recommended to make payment through the **NSP PayPort** online system at www.ne.gov/go/nsp
Or a check made payable to **NSP** can be mailed directly to the following address:
*****Please indicate on your payment who the payment is for (the name of the person being fingerprinted) and the payment is for a Liquor License*****

The Nebraska State Patrol – CID Division
3800 NW 12th Street
Lincoln, NE 68521

- Fingerprints taken at NSP LIVESCAN locations will be forwarded to NSP – CID
Applicant(s) will not have cards to include with license application.
- Fingerprints taken at local law enforcement offices may be released to the applicants;
Fingerprint cards should be submitted with the application.

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 the FBI identification record. The procedures for obtaining a change, correction, or updating a FBI identification record are set forth in Title 28, CFR, 16.34.

****Please Submit this form with your completed application to the Liquor Control Commission****

Trade Name Dual Stop Food & Fuel

Name of Person Being Fingerprinted: Niraj Patel

Date of Birth: Last 4 SSN:

Date fingerprints were taken: October 2021

Location where fingerprints were taken: Nebraska

How was payment made to NSP?

☒ NSP PAYPORT ☐ CASH ☐ CHECK SENT TO NSP CK #

My fingerprints are already on file with the commission – fingerprints completed for a previous application less than 2 years ago? YES ☐


SIGNATURE REQUIRED OF PERSON BEING FINGERPRINTED



[Back to Lookup](#) / [Registrant Detail](#)

Niraj Rasiklal Patel

Political Party
Republican

Precinct
05-24

Election Details

10/12/2021 Ralston and Westside Elections

Absentee Ballot

Absentee Ballot exists for this election, but we require more information to display it.

Date of Birth

Month



Day



Year



Look Up

Polling Location

Mockingbird Hills Community Center

📍 10242 Mockingbird Drive Omaha, NE 68127



Ballot Styles

153

**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.nebraska.gov



☒ I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will not have any interest, directly or indirectly in the operation 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, represent myself as the owner or **in any way participate in the day to day operations of this business in any capacity.** The penalty guideline for violation of this affidavit is cancellation of the liquor license.

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

Jignasu Patel
Signature of **NON-PARTICIPATING SPOUSE**

Jignasu Patel

Print Name

Niraj Patel
Signature of **APPLICANT**

Niraj Patel

Print Name

State of Nebraska, County of Douglas

The foregoing instrument was acknowledged before me

this October 12th 2021 (date)

by Jignasu Patel

**Name of person acknowledged
(Individual signing document)**

State of Nebraska, County of Douglas

The foregoing instrument was acknowledged before me

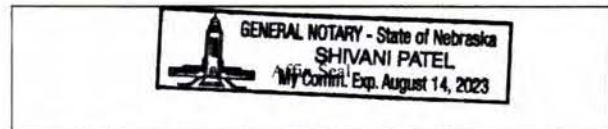
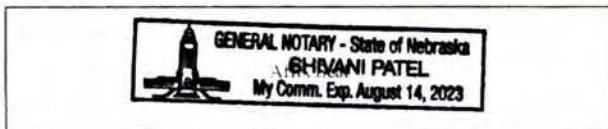
this October 12th 2021 (date)

by Niraj Patel

**Name of person acknowledged
(Individual signing document)**

Shivani Patel
Notary Public Signature

Shivani Patel
Notary Public Signature



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.

Certificate of Achievement

- for those who serve or sell alcohol in Nebraska

NIRAJ R PATEL

holds a

State Alcohol certificate

Permit # RB-0113275

Permit Expires: 06-03-2022 Amount Paid: \$



Responsible Beverage Service Training
N E B R A S K A



General	Credential	Number	Earned	Expires
Niraj R Patel 4305 46th st Sioux city IA 51108	STATE ALCOHOL	RB-0113275	06-03-2019	06-03-2022