

I

RESOLUTION NO. 13- \_\_\_\_\_

A RESOLUTION OF THE MAYOR AND CITY COUNCIL OF THE CITY OF LA VISTA, NEBRASKA RECOMMENDING TO THE NEBRASKA LIQUOR CONTROL COMMISSION, APPROVAL OF THE CLASS LK LIQUOR LICENSE APPLICATION FOR NEBRASKA BREWING CO DBA NEBRASKA BREWING CO. IN LA VISTA, NEBRASKA.

WHEREAS, Nebraska Brewing Co DBA Nebraska Brewing Co, 6946 S 108<sup>th</sup> Street, La Vista, Sarpy County, Nebraska, has applied to the Nebraska Liquor Control Commission for a Class LK Liquor License, and

WHEREAS, the Nebraska Liquor Control Commission has notified the City of said application, and

WHEREAS, the City has adopted local licensing standards to be considered in making recommendations to the Nebraska Liquor Control Commission, and

WHEREAS, said licensing standards have been considered by the City Council in making its decision.

NOW, THEREFORE, BE IT RESOLVED, that the Mayor and City Council of La Vista, Nebraska, hereby recommend to the Nebraska Liquor Control Commission approval of the Class LK Liquor License application submitted by Nebraska Brewing Co DBA Nebraska Brewing Co, 6946 S 108<sup>th</sup> Street, La Vista, Sarpy County, Nebraska.

PASSED AND APPROVED THIS 17TH DAY OF DECEMBER, 2013.

CITY OF LA VISTA

\_\_\_\_\_  
Douglas Kindig, Mayor

ATTEST:

\_\_\_\_\_  
Pamela A. Bueth, CMC  
City Clerk

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**LA VISTA POLICE DEPARTMENT INTEROFFICE MEMORANDUM**

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**TO:** PAM BUETHE, CITY CLERK  
**FROM:** BOB LAUSTEN, POLICE CHIEF  
**SUBJECT:** LOCAL BACKGROUND- CORPORATE LIQUOR LICENSE / MANAGER- NEBRASKA  
BREWING COMPANY  
**DATE:** 11/25/2013  
**CC:**

---

The police department conducted a check of computerized records on the applicants, Paul H. Kavulak and Kimberly A. Kavulak for criminal conduct in Nebraska and Sarpy County in reference to the Liquor License application. The applicants have no entries.

# ► RECEIPT

11/19/2013

From: Jackie B Matulka – jackie.matulka@nebraska.gov

Phone: (402) 471 – 4881

Fax: (402) 471 – 2814

Nebraska Liquor Control Commission

To: City Clerk of La Vista – pbuethe@cityoflavista.org

App Info: Nebraska Brewing Co DBA Nebraska Brewing Co  
Class LK 105931

PLEASE COMPLETE THE BOTTOM SECTION IMMEDIATELY UPON RECEIPT OF THIS APPLICATION

SIGN AND DATE STAMP THIS RECEIPT AND EITHER FAX OR EMAIL THIS FORM BACK

--THANK YOU

11-22-13

DATE OF RECEIPT

M Garrod - La Vista  
SIGNATURE Deputy City Clerk

# RECOMMENDATION OF THE NEBRASKA LIQUOR CONTROL COMMISSION

Date delivered from NLCC office: November 19, 2013

JBM

I, \_\_\_\_\_ Clerk of \_\_\_\_\_  
(City, Village or County)

Nebraska, hereby report to the Nebraska Liquor Control Commission in accordance with Revised Statutes of Nebraska, Chapter 53, Section 134 (7) the recommendation of said city, village or county, as the case may be relative to the application for a license under the provisions of the Nebraska Liquor Control Act as applied for by:

**Nebraska Brewing Co DBA Nebraska Brewing Co**  
**6946 S 108 Street, La Vista, NE 68128 (Sarpy County)**  
**NEW APPLICATION for Class LK 105931**  
**45 days – January 3, 2014**

1. Notice of local hearing was published in a legal newspaper in or of general circulation in city, village or county, one time not less than 7 nor more than 14 days before time of hearing.

**Check one:** Yes \_\_\_\_\_ No \_\_\_\_\_

The Statutes require that such hearing shall be held not more than 45 days after the date of receipt of this notice from the Commission.

2. Local hearing was held not more that 45 days after receipt of notice from the Nebraska Liquor Control Commission.

**Check one:** Yes \_\_\_\_\_ No \_\_\_\_\_

3. Date of hearing of Governing Body: \_\_\_\_\_

4. Type or write the Motion as voted upon by the Governing Body. If additional Motions are made by the Governing Body, then use an additional page and follow same format.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Motion was made by: \_\_\_\_\_ Seconded by: \_\_\_\_\_

6. Roll Call Vote: \_\_\_\_\_

\_\_\_\_\_

7. **Check one:** Motion Passed: \_\_\_\_\_ Motion Failed: \_\_\_\_\_

8. If the motion is for recommendation of denial of the applicant, then list the reasons of the governing body upon which the motion was made.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

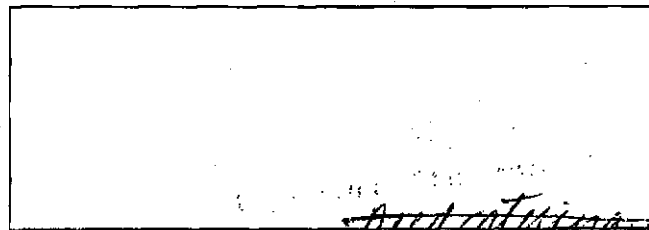
(Attached additional page(s) if necessary)

**SIGN HERE** \_\_\_\_\_ **DATE** \_\_\_\_\_  
(Clerks Signature)

**APPLICATION FOR LIQUOR LICENSE  
CRAFT BREWERY (BREW PUB)  
CHECKLIST**

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

QA  
New



~~Need entering app~~  
Need Federal Permit  
JM

Applicant Name Nebraska Brewing Company  
E-Mail Address: kim@nebraskabrewingco.com  
Web Site Address: www.nebraskabrewingco.com

LK

**105931**

Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. If your operation depends on receiving a liquor license, the Nebraska Liquor Control Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. You may want to check with the city/village or county clerk, where you are making application, to see if any additional requirements must be met before submitting application to the state.

**REQUIRED ATTACHMENTS**

11-19-13 Ag & FM sent out  
entered into database

- ☒ 1) Application fee \$400 plus licensee fee \$250  
Total \$650 (check payable to Nebraska Liquor Control Commission)
- ☒ 2) Copy of Federal Basic Permit issued by Alcohol and Tobacco Tax and Trade Bureau (TTB)
- ☒ 3) Alcoholic Liquor Tax Bond, \$1,000 minimum including the Power of Attorney documentation (May use form 115) *OK*
- ☒ 4) Submit diagram to include:  
a. Facility dimensions and description  
b. Identify production area  
c. Any storage area
- ☒ 5) Copy of business plan
- ☒ 6) Name of Brew Master Tyson Arp  
a. Phone number of Brew Master 402-933-7830
- ☒ 7) Fingerprint cards for each person (two cards per person) must be enclosed with a check payable to the Nebraska State Patrol for processing in the amount of \$38.00 per person. All areas must be completed on cards as per brochure. To prevent the delay in issuing your licer Nebraska State Patrol office or law enforcement agency listed in th



1300023680

CK 6060  
#750  
mm  
Ret 167823

**RECEIVED**

FORM 127  
REV 11/2010  
PAGE 1

X

- 8) Enclose the appropriate application forms  
Individual License (requires insert form 1)  
Partnership License (requires insert form 2)  
Corporate License (requires insert form 3a & 3c)  
Limited Liability Company (LLC) (requires form 3b & 3c)

X

- 9) If building is being leased send a copy of signed lease. Be sure the lease reads in the name of the individual(s), corporation or Limited Liability Company making application. Lease term must run through the license year being applied for.

X

- 10) Corporation or Limited Liability Company must enclose a copy of articles of incorporation; as filed with the Secretary of State's Office. This document must show barcode.

I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

  
Authorized Signature

Kimberly A. Kavulak

Print Name


402-933-6757

Contact Phone Number

10/29/13

Date

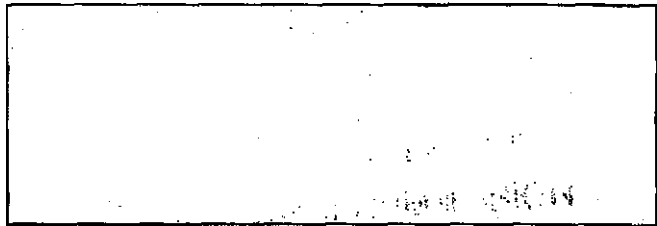
RECEIPT

DATE	11-4-13	No.	167823
FROM	Nebraska Brewing Co.		
FOR	New App - Brew Pub w/ catering		
	<input type="checkbox"/>	CASH	
	<input checked="" type="checkbox"/>	CHECK #	1606
	<input type="checkbox"/>	MONEY#	
	<input type="checkbox"/>	ORDER	
Received by	Parker		

\$ 1750.00

**APPLICATION FOR LIQUOR LICENSE  
CRAFT BREWERY (BREW PUB)**

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/



**CHECK CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES  
CHECK DESIRED CLASS(S)**

- ☒ Class L Craft Brewery (Brew Pub)      Application fee \$400 plus licensee fee \$250  
Total \$650 (checks payable to Nebraska Liquor Control Commission)
- ☒ Class K Catering license (requires catering application form 106) \$100.00
- ☐ Copy of Federal Basic Permit
- ☐ Alcoholic Liquor Tax Bond minimum of \$1,000 (form 115 may be used)

Additional fees may be assessed at city/village or county level when license is issued

Term of license runs from May 1 – April 30  
Catering license (K) expires same as craft brewery (brewpub) license

**CHECK TYPE OF LICENSE FOR WHICH YOU ARE APPLYING**

- ☐ Individual License (requires insert form 1)
- ☐ Partnership License (requires insert form 2)
- ☒ Corporate License (requires insert form 3a & 3c)
- ☐ Limited Liability Company (LLC) (requires form 3b & 3c)

**NAME OF ATTORNEY OR FIRM ASSISTING WITH APPLICATION (if applicable)  
Commission will call this person with any questions we may have on this application**

Name N/A Phone number: \_\_\_\_\_

Firm Name \_\_\_\_\_

**PREMISE INFORMATION**

Trade Name (doing business as) Nebraska Brewing Company

Street Address #1 6946-6950 S. 108th Street *while S 108 Street*

Street Address #2 \_\_\_\_\_

City La Vista

County Sarpy *#51*

Zip Code 68128

Premise Telephone number 402-934-0950

Is this location inside the city/village corporate limits:



YES



NO

Mailing address (where you want to receive mail from the Commission)

Name Nebraska Brewing Company

Street Address #1 6946 S. 108th Street

Street Address #2 \_\_\_\_\_

City La Vista

State NE

Zip Code 68128

**DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED  
READ CAREFULLY**

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, outdoor area, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building. No blue prints please. Be sure to indicate the direction north and **number of floors** of the building.

**\*\*For on-premise consumption liquor licenses minimum standards must be met by providing at least two restrooms**

Length See Attached feet

Width \_\_\_\_\_ feet

PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPARATE SHEET

*See  
attached  
diagram*



**APPLICANT INFORMATION****1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.**

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

**2. Are you buying the business of a current retail liquor license?**

☐ YES ☒ NO

If yes, give name of business and liquor license number \_\_\_\_\_

a) Submit a copy of the sales agreement

b) Include a list of alcohol being purchased, list the name brand, container size and how many

c) Submit a list of the furniture, fixtures and equipment

**3. Was this premise licensed as a liquor licensed business within the last two (2) years?**

☐ YES ☒ NO

If yes, give name and license number \_\_\_\_\_

**4. Are you filing a temporary operating permit to operate during the application process?**

☐ YES ☒ NO

If yes:

a) Attach temporary operating permit (form 125)

b) T.O.P. will only be accepted at a location that currently holds a valid liquor license.

**5. Are you borrowing any money from any source, include family or friends, to establish and/or operate the business?**

☐ YES ☒ NO

If yes, list the lender \_\_\_\_\_

6. Will any person or entity, other than applicant, be entitled to a share of the profits of this business?



YES



NO

If yes, explain. (All involved persons must be disclosed on application)

Paul H Kavulak Owner/President/Shareholder, Kimberly A. Kavulak Owner/Treasurer-Secretary/Shareholder, NBC Investment Corporation Shareholder, Paul F Kavulak Shareholder

**No silent partners**

7. Will any of the furniture, fixtures and equipment to be used in this business be owned by others?



YES



NO

If yes, list such item(s) and the owner.

8. Is premise to be licensed within 150 feet of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, and children, or within 300 feet of a college or university campus?



YES



NO

If yes, provide name and address of such institution and where it is located in relation to the premises (Neb. Rev. Stat. 53-177)

9. Is anyone listed on this application a law enforcement officer?



YES



NO

If yes, list the person, the law enforcement agency involved and the person's exact duties

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business

a) List the individual(s) who will be authorized to write checks and/or withdrawals on accounts at this institution.

a) Paul H. Kavulak and/or Kimberly A. Kavulak

11. List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reason for termination of any license(s) previously held.

Nebraska Brewing Company 7474 Towne Center Parkway Suite 101 Papillion, NE 68046 Class C 78151 Class LK 78152

12. List the alcohol related training and/or experience (when and where) of the person(s) making application. Those persons required are listed as followed:

- a) Individual, applicant only (no spouse)
- b) Partnership, all partners (no spouses)
- c) Corporation, manager only (no spouse)
- d) Limited Liability Company, manager only (no spouse)

Applicant Name	Date Trained (mm/yyyy)	Name of program where trained (name, city)
Paul H Kavulak	4-24-2013	NLCC RBST online

13. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership. If leased, submit a copy of the lease covering the entire license year. **Documents must show title or lease held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed.**



Lease: expiration date

10/21/2023

10-31-2023



Deed



Purchase Agreement

14. When do you intend to open for business? November 15, 2013

15. What will be the main nature of business? Production & Packaging Brewery with Tasting Room

16. What are the anticipated hours of operation? Brewery M-F 0800-2200; Tasting Room Thurs-Sun 1600-2200

17. List the principal residence(s) for the past 10 years for all persons required to sign, including spouses.

APPLICANT: CITY & STATE	YEAR FROM TO		SPOUSE: CITY & STATE	YEAR FROM TO	
8711 Raven Drive Louisville NE 68037	2002	2013	8711 Raven Drive Louisville NE 68037	2002	2013

If necessary attach a separate sheet.

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background and release present and future records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation of any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. 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.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock) and spouses. Full (birth) names only, no initials.

Paul  
Signature of Applicant

[Signature]  
Signature of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Applicant

Kimberly  
Signature of Spouse

[Signature]  
Signature of Spouse

\_\_\_\_\_  
Signature of Spouse

\_\_\_\_\_  
Signature of Spouse

\_\_\_\_\_  
Signature of Spouse

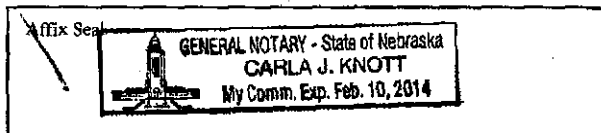
#### ACKNOWLEDGEMENT

State of Nebraska  
County of CASS

10-30-13  
date

[Signature]  
Notary Public signature

The foregoing instrument was acknowledged before me this  
by Paul H. Kavulak & Kimberly A. Kavulak  
name of person acknowledged



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.

**APPLICATION FOR LIQUOR LICENSE  
CATERING LICENSE**

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE (402) 471-2571  
FAX (402) 471-2814  
Website www.lcc.ne.gov

**FEE \$100.00**

A catering license allows a retail licensee to deliver, sell or dispense alcoholic liquors, including beer, for consumption at a location designated on a Special Designated License (SDL). The catering license is renewed in the same manner and time as the retail license held by the licensee. A licensee shall not cater an event unless a SDL has been obtained. *An applicant seeking a SDL must be filed with the local governing body where the event is to be held at least 21 days prior to the event.* The application must then be filed with the Commission ten working days prior to the event. The local or county approval and law enforcement notification letter must accompany the SDL when submitted to the Commission. The \$40 per day license fee is waived for the holder of a catering license and the number of events allowed is unlimited.

CLASS OF LICENSE AND NUMBER \_\_\_\_\_

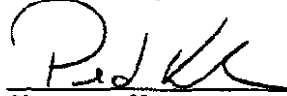
NAME OF LICENSEE Nebraska Brewing Co. Inc.

TRADE NAME Nebraska Brewing Company

PREMISE ADDRESS 6946 S. 108th Street

CITY/STATE/ZIP CODE La Vista NE 68128

A copy of your application for a catering license will be forwarded to the local governing body for recommendation Neb.rev.state., the Liquor Commission shall set for hearing any application receiving local governing body denial, a citizens protest or having statutory problems discovered by the Commission. If the local governing body does not make a recommendation, the Commission may approve or deny the issuance of a license. Catering licenses shall be delivered to the licensee in the same manner as provided in subsection (4) of Neb. rev. state., for delivery of licenses.

  
\_\_\_\_\_  
Signature of Licensee

Subscribed in my presence and sworn to before me this 5th day of November, 2013



  
\_\_\_\_\_  
Notary Public Signature & Seal

**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](http://www.lcc.ne.gov)

Office Use

**MUST BE:**

- ✓ **Citizen of the United States. Include copy of US birth certificate, naturalization paper or current US passport**
- ✓ **Nebraska resident. Include copy of voter registration in the State of Nebraska**
- ✓ **Fingerprinted. Two cards per person, fees of \$38 per person, made payable to Nebraska State Patrol. If printed at NSP mail check only.**
- ✓ **21 years of age or older**

**Corporation/LLC Information**

Name of Corporation/LLC: Nebraska Brewing Co.

**Premise Information**

Liquor License Number: \_\_\_\_\_ Class Type \_\_\_\_\_  
(if new application leave blank)

Premise Trade Name/DBA: Nebraska Brewing Company

Premise Street Address: 6246 S. 108th Street

City: La Vista County: Sarpy Zip Code: 68128

Premise Phone Number: 402-934-0950

Email address: kim@nebraskabrewingco.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. Click on this link to see authorized individuals.  
[http://www.lcc.ne.gov/license\\_search/licsearch.cgi](http://www.lcc.ne.gov/license_search/licsearch.cgi)

  
**SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER**

(Faxed signatures are acceptable)

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

✓ Last Name: Kavulak

First Name: Paul

MI: H

Home Address (include PO Box if applicable): 8711 Raven Drive

City: Louisville

County: Cass

Zip Code: 68037

Home Phone Number: \_\_\_\_\_

Business Phone Number: 402-933-3040

Social Security Number: \_\_\_\_\_

Drivers License Number & State: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Place Of Birth: Omaha, NE

Email address: paul@nebraskabrewingco.com

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

✓ ☒ YES

☐ NO

**Spouse's Information**

✓ Spouses Last Name: Kavulak

First Name: Kimberly

MI: A

Social Security Number \_\_\_\_\_

Drivers License Number & State \_\_\_\_\_

Date Of Birth \_\_\_\_\_

Place Of Birth: Council Bluffs IA

**APPLICANT & SPOUSE MUST LIST RESIDENCES FOR THE PAST TEN (10) YEARS**

APPLICANT

SPOUSE

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
8711 Raven Drive Louisville NE 68037	2002	2013	8711 Raven Drive Louisville NE 68037	2002	2013

# MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
2007	Present	Nebraska Brewing Company	N/A	402-834-7100
2000	2007	West Corporation	Skip Hanson	

## 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

## 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):**

Nebraska Brewing Company 7474 Towne Center Parkway Suite 101 Papillion, NE 68046

## 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: 4-24-2013 Name on Certificate: Paul Harold Kavulak

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Paul Kavulak	4-24-2013	<del>none</del> RBST RB-0009285

\*For list of NLCC Certified Training Programs see [www.lcc.ne.gov/traininginfo.html](http://www.lcc.ne.gov/traininginfo.html)

Experience:

Applicant Name / Job Title	Date of Employment:	Name & Location of Business:
Paul H. Kavulak / President	11/2007 - Present	Nebraska Brewing Company 7474 Towne Center Pkwy Suite 101 Papillion, NE 68046
Kimberly A. Kavulak / Brewpub GM	11/2007- Present	Nebraska Brewing Company 7474 Towne Center Pkwy Suite 101 Papillion, NE 68046

5. 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

prints submitted  
w/ other app

**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.

  
Signature of Manager Applicant

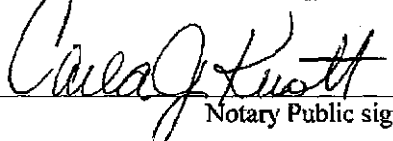
  
Signature of Spouse

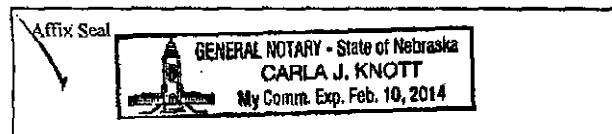
**ACKNOWLEDGEMENT**

State of Nebraska  
County of Cass

10-30-13  
date

The foregoing instrument was acknowledged before me this  
by Paul H. Kavutak & Kimberly A. Kavutak  
name of person 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.



***Certificate of Achievement***

- for those who serve or sell alcohol in Nebraska

**PAUL HAROLD KAVULAK**

holds a

**RBST GENERAL CERTIFICATE**

Permit # RB-0009285

Permit Expires: 04-24-2016 Amount Paid: \$

foodsafety  is in your HANDS 

