NEBRASKA LIQUOR CONTROL COMMISSION

PHONE: (402) 471-2571 Website: www.lcc.nebraska.gov

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

Burtonian Ente	erprises LLC d/b/a Tin Lizzy Tavern	
Retail Liquor License	Name <u>or</u> *Non-Profit Organization (* <u>Must include Form #201 as Page 2</u>)	
1682 E. 23rd St. Fremont, NE 68025		42
Retail Liquor License	Address <u>or</u> Non-Profit Business Address	
CK-88370		
Retail License Number	or Non-Profit Federal ID #	
Consecutive Dates only Event Date(s):	Sept 28, 2019	n n
Event Start Time(s):	3pm	
Event End Time(s):	midnight	and a second
Alternate Date:		
Alternate Location Bui	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Fremont State Lake Clubhouse	
Event Street Address/C	tity: 4349 State Lake Rd. Fremont, NE 68025	
<u>Indoor</u> area to be licen	sed in length & width: 25' X 100'	
	nsed in length & width:X(Diagram Form #109 must be attached)	
Type of Event: Rend	ewel of Wedding Celebration Estimate # of attendees: 100	
	erved: Beer X Wine X Distilled Spirits X (If not marked, you will not be able to serve this type of alcohol)	*
Event Contact Name:	Sean Mullen or Victoria Valdez Event Contact Phone Number: 402-953-7579	
Event Contact Email:	lauralee@tinlizzytavern.com	
best of my knowledge and b to waive any rights or cause said information to the Liquo	nized representative of the above named license applicant and that the statements made on this app relief. I also consent to an investigation of my background including all records of every kind including s of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other or Control Commission or the Nebraska State Patrol. I further declare that the license applied for will reation or corporation for profit or not for profit and that the event will be supervised by persons directly	lication are true to the police records. I agree individual releasing not be used by any
	signed by a member listed on permanent license – Must be signed by a Corporate Officer	
		OK SHI
Local Governing Bod	y completes below:	
The local governing by the issuance of a Spec	ody for the City/Village of OR County of ial Designated License as requested above. (Only one should be written above)	approves
Local Govern	ning Body Authorized Signature Date	

in Pation 25 Ft Fenced Group Lodge