

ED Advisory Board Meeting
Thursday, May 2, 2024 12:00 PM
Crete City Hall
243 E 13th Street
Crete, NE 68333

1. **Open Meeting**

In accordance with Nebraska law, a copy of the Open Meetings Act can be found in the back of the council chambers. Items listed on the agenda may be considered in any order.

2. **Roll Call**

Attendance of Advisory Board members will be recorded to determine the presence of a quorum for official actions.

3. **Consent Agenda**

The Advisory Board will consider approval of the following items. Explanation may occur for each item and the council may approve and or amend and approve the items listed.

3.A. Meeting Minutes

Review the minutes from the previous meeting

3.B. Financial Report

Review monthly financial reports

4. **Special Order of Business**

The Advisory Board may take action to hear testimony in favor of or in opposition to, discuss/limit discussion and take action to approve or disapprove a recommendation to the City Council on any matter presented under this title.

4.A. City of Crete Economic Development Plan

Review activities within the scope of the City of Crete Economic Development Plan adopted in 2011 and amended from time to time

4.A.1. Status of Investments with Performance Requirements

Review the grant awards with performance requirements

4.A.2. Housing

Review housing activities within the scope of the Crete Economic Development Plan

4.B. Applications for Consideration

Review applications that have been processed and ready for consideration of recommendations to the City Council

4.C. Application Introductions

Review and discuss applications that have been submitted for staff review

4.C.1. Consider the Amended Old Main Bar and Grill application

4.C.2. Consider Rebecca Hansmeyer's (DBA Wool & Whimsy) application

4.C.3. Consider Crete Housing & Community Development Corporation Application

5. **Officers' Reports**

Reports may be given by Department Heads, other Committees and Advisory Board members concerning current operations of the City. Questions may be asked and answered. No action can be taken by the Advisory Board on matters presented under this title except to answer any question posed and to refer the matter for further action.

6. **Adjournment**

The Advisory Board will review the above matters and take such actions as they deem appropriate. The Advisory Board may enter into closed session to discuss any matter on this agenda when it is determined by the Advisory Board that it is clearly necessary for protection of the public interest or the prevention of needless injury to the reputation of an individual and if such an individual has not requested a public meeting, or as otherwise allowed by law. Any closed session shall be limited to the subject matter for which the closed session was called. If the motion to close passes, then the presiding officer immediately prior to the closed session shall restate on the record the

limitation of the subject matter of the closed session. The City of Crete assures that no person shall on the grounds of race, color, national origin, age, disability, handicap or sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity of the City receiving Federal financial assistance. To report discrimination, contact the City Clerk's office.

Disclaimers & Notices

- The Council may enter into closed session to discuss any matter on this agenda when it is determined that a closed session is clearly necessary for the protection of the public interest or the prevention of needless injury to the reputation of an individual (if such individual has not requested a public meeting) or as otherwise allowed by law. Any closed session shall be limited to the subject matter for which the closed session was called. If the motion to close passes, then immediately prior to the closed session the Mayor shall restate on the record the limitation of the subject matter of the closed session.
- The City of Crete assures that no person shall on the grounds of race, color, national origin, age, disability, handicap or sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity of the City receiving Federal financial assistance. To report discrimination, contact the City Clerk's office.
- The complete agenda with attachments is available at www.crete.ne.gov.



CRETE ED ADVISORY BOARD MEETING

February 22nd, 2024 at 8:15 AM
Crete City Hall, 243 East 13th Street

MINUTES

Notice of the meeting was given by posting, the appointed method for giving notice as shown by the attached notice, at the following locations:

City Hall, 243 East 13th Street
Post Office, 1242 Linden Avenue
City Bank and Trust, 1135 Main Avenue

Advance notice of the meeting was also given to committee members. Pursuant to Section 84-1412(8) of the Nebraska Open Meetings Act, the City has posted a current copy of the Open meetings Act, Laws of the State of Nebraska, in the back of the council chambers. All proceedings shown were taken while the meeting was open to the attendance of the public.

1. Open Meeting

2. Roll Call

Manny Dimas: Present

Paul Heath: Present

Ken Marvin: Present

Liz Umana: Absent

Present: 3, Absent:1, Vacancy: 1.

Liz Umana arrived at 12:06 p.m.

3. Consent Agenda

3.A. Meeting Minutes

3.A.1. December 15th 2023 ED Advisory Board Meeting Minutes

Approved ED Advisory Board Meeting minutes from 12.15.2023. Carried with a motion by Ken Marvin and a second by Manny Dimas.

Manny Dimas: Aye, Ken Marvin: Aye: Liz Umana: Aye

3.B. Financial Report

City Administrator Tom Ourada stated that the LB840 fund is healthy. Ourada stated that in today's meeting the board is going to run into something new that they have never seen before. (A Loan Guarantee)

4. Special Order of Business

4.A. City of Crete Economic Development Plan

4.A.1. Status of Investments with Performance Requirements

City Administrator Tom Ourada stated that \$550,000.00 went into workforce housing. \$250,000.00 was contributed to housing addition of the two duplexes. Ourada explained that the City recently partnered with Hawks on the Ron Sacks subdivision for workforce housing up to \$315,000.00.

There will be the closing on the property of the two Barnet lots and LB840 will get that money returned back into the fund. The property was sold for \$37,000.00 and the purchaser is not asking for TIF or LB840 funds and will be investing two and a half million dollars.

4.A.2. Housing

4.B. Applications for Consideration

4.B.1. Consider a recommendation to the City Council on the application from the Blue River Arts Council, Inc.

City Administrator Tom Ourada explained that the Blue River Arts Council is submitting an application for LB840 for a \$300,000 loan guarantee. Ourada stated that the City of Crete already owns the building.

City Attorney Anna Burge explained that there are already signed documents where the City of Crete would acquire the building if the Arts Council defaults on payments prior to the LB840 request.

Approved a recommendation to the City Council on the application from the Blue River Arts Council, Inc to approve the \$300,000.00 loan guarantee. Carried with a motion by Ken Marvin and a second by Paul Heath.

Manny Dimas: Aye, Ken Marvin: Aye: Lizbeth Umana: Aye
Aye: 3, No:0

4.C. Application Introductions

City Administrator Tom Ourada explained that there are no new applications. However, there will be new applications coming in. There are many new business ventures coming to Crete.

5. Officers' Reports

6. Adjournment

Paul Heath motioned and Ken Marvin seconded to adjourn the meeting.

12:19 p.m.



To LB840 Applicant:

CONGRATULATIONS on taking the first step to being awarded additional funds to help your business or event in Crete. The funds available for Economic Development, resulting from the citizen-approved sales tax increase that took effect April 1, 2011, are available first come to businesses, events and projects that meet the requirements of Crete's written Economic Development Plan, which can be found online at www.crete.ne.gov/vnews/display.v/ART/58fa7907ccebfc. A written copy is also available from the City of Crete Economic Development Director.

Please review the Economic Development Plan and confirm that your project or business is eligible. Applications may be recommended for funding in full or in part or may be denied based upon the review of the Board. Final decisions regarding funding will be made by the City Council but according to the terms of the Plan, in no event may the City Council fund any Application not previously reviewed and approved by the citizen Board.

In this packet you will find an Application for Funds, a US Citizenship Attestation Form and a Check List of required items. As you will see, the Application is detailed and requires significant information and additional verification documents. If you need assistance with the application please contact any Economic Development Advisory Board member. *If you have questions, please call the Economic Development Office, at 402-826-4312 or email the City Administrator, tom.ourada@crete.ne.gov*

Please note that the first portion of the application will be open to the public and may be provided to the City Council for final funding review. The balance of the application and all supporting documentation including personal financial information is confidential and will only be shared with members of the Economic Advisory Board for purposes of considering your application. All confidential records will be maintained in the office of the Economic Development Board and will be kept separately and not be available for review by the public. Any questions or concerns regarding this process shall be directed to the City Administrator.

All Applicants will be required to attend a public hearing for presentation regarding their request for funding. Public hearings will be held at least quarterly and may be held more frequently at the request of the Board. All Applications presented within the three months preceding a Public Hearing will be set for presentation and consideration at the same meeting. The Board may make a recommendation for funding at the public hearing, or may vote to table an application for further information, but in no event shall an application be tabled more than once so that all decisions will be made not more than three months after the initial public hearing regarding an application. There is no guarantee that a determination will be made less than three months after submission so all applicants are urged to make timely requests for funding if projects or events have set timelines.

Mail or deliver completed application with all supporting documentation and forms to:

Economic Development Program Director
City of Crete City Hall
243 E. 13th Street, P.O. Box 86
Crete, NE 68333

We look forward to working with you through the application process.
Equal Opportunity and Fair Housing Provider and Employer



**ECONOMIC DEVELOPMENT PROGRAM
APPLICATION FOR FUNDS**

Please Type or Print Clearly and Answer Each Question (If Question Does Not Apply - Mark N/A).

Please Note: The Information Contained in this portion of the document is Public Information and will **NOT** be Considered Confidential.

A. APPLICANT INFORMATION:

Name of Entity Applying for Assistance: PWR & DVD Rental Properties, LLC dba "Old Main Bar and Grill"

Business Address: 1103 Main Ave Crete NE 68333
(City) (State) (Zip Code)

Contact Person: Chris Collins Telephone Number: 402-786-3333

Fax Number: 402-786-3339 Email Address: ChrisC@Capitaltower.com

Federal Tax ID Number: 46-0743756

Type of Entity: Start-Up Buyout Existing

If Existing, Number of Years in Business in Crete: _____

Business Classification: (Please Choose One)

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Retail | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Research & Development |
| <input type="checkbox"/> Headquarter | <input type="checkbox"/> Telecommunications | <input type="checkbox"/> Tourism |
| <input type="checkbox"/> Warehouse/Distribution | <input type="checkbox"/> Government | <input type="checkbox"/> Other |

Business Type: (Please Choose One)

- | | | |
|---|--|--------------------------------------|
| <input type="checkbox"/> Proprietorship | <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership |
| <input checked="" type="checkbox"/> LLC | <input type="checkbox"/> Governmental Entity | <input type="checkbox"/> Other |

Does the Company have a Parent or Subsidiaries? Yes No

If Yes, Please List Name: _____

Address: _____
(City) (State) (Zip Code)

Ownership Identification: Please List all Officers, Directors, Partners, Owners, Co-owners and Stockholders.

Full Name	Title	Ownership Percentage
Patrick Reed	Managing Member	51%
Gregory Mach	Member	49%

Which type of assistance is the entity applying for?

Grant
 Loan Guarantee If so, Lender? _____
 Other

Explain: _____

What is the general purpose of the request (must be an allowed LB840/Economic Dev. Plan Project)?

- New Development
 New Business Startup
 Building Renovation
 Public Works
 Professional/Employee Recruitment
 Promotion/Tourism
 Job Training
 Working Capital
 Low - Moderate Income Housing
 Workforce Housing
 Technology
 Plan Management
 Technical Assistance
 Equity Investment

Does the business qualify to receive any incentives from the State of Nebraska? Yes No DK

Has the business applied for any incentives from the State of Nebraska? Yes No

If yes, please explain: _____

Employee Information: (FTE = Full-Time Equivalent = 2,080 Hours/Per Year)

Number of Existing Full-Time Equivalent Employees: 1

Number of Full-Time Equivalent Positions to Be Created: _____

Will all of the Full-Time Equivalent Positions be Physically Located within the City of Crete, their Two-Mile Extraterritorial Jurisdiction or on Land Held in the Name of the City of Crete?

Yes No

If no, please explain: _____

Does the Company Employ Any Seasonal Employees? Yes No

If Yes, How Many: _____

(Seasonal employees must work for at least three continuous months and the position must reoccur annually)

B. PROJECT INFORMATION:

Please provide a Brief Project Summary Description:

Phase 1 of 2 Phases will consist of the following:

1. Replacement of concrete in outdoor dining area and the addition of an area of pavers in the dining area.
2. Addition of a legal means of egress from the second floor to the alley way area.
3. Replacement of the worn-out windows on the first and second floors with new.
4. Enlargement of the outdoor dining area fences. Privacy fence on alley side and metal fencing on Main ave. side with lighted custom entrance gate.
5. Brick repair and addition of a legal egress door from basement on alley side.
6. Architectural review and design by Fakler Architects Beatrice, NE
7. Purchase of 2 Ovention ovens to expand menu options.
8. Repair of lighting for outdoor areas and installation of 3phase power for new ovens.

Use of Funds	Total Project Cost	Econ Dev Funds Requested
Land or Building Acquisition	\$ 166,000.00	\$ 0
Renovation/Rehabilitation	\$ \$18299107	\$ \$149541.52
New Construction	\$	\$
Machinery / Equipment Acquisition	\$ \$10,700	\$ \$8,560.00
Business / Employee Recruitment Activities	\$	\$
Technology Costs	\$	\$
Small Business Development	\$	\$
Working Capital (Includes Inventory)	\$	\$
Job Training	\$	\$
Other	\$	\$
Total Project Cost	\$343945.77 0.00	
	Total LB840 Funds Requested:	\$ 158101.52

C. FUNDING SOURCES AND EQUITY INJECTION:

If Borrowing, Name of Lender: NA

Loan Amount: _____ Loan Term (Years): _____

Amount Injected Into the Project by Business/Partners/Owners:

Other Funding Source(s) and Amount(s): _____

C. PROJECT LOCATION:

- Within the Crete City Limits? Yes No
 Within the Crete Two-Mile Jurisdiction? Yes No
 Land Owned by the City of Crete? Yes No
 Not Located in Crete but for area benefit? Yes No

If Not in City Jurisdiction, please explain local benefit:

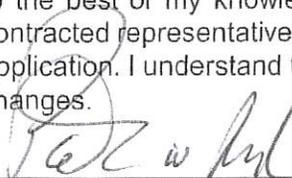
D. ATTACHMENTS: - Please Include the Attachments that Apply to Your Entity – See *checklist Page 5.*

Please Note: The Information provided pursuant to this Section **Will** be Deemed Confidential and will not be Available for Public Disclosure.

- ✓ Business Plan: Brief Description of the Business
 - Resumes of all Owners/Co-Owners/Directors/Partners/Stockholders
 - For Existing Businesses – Three (3) Yearly Financial Statements
 - For Existing Businesses – Current Financial Statements (Less Than Sixty (60) Days Old)
 - For Existing Businesses - List of Current Obligations (Include Company Names and Amounts)
- ✓ For Start-Up Businesses – Current Business Plan
 - For Start-Up Businesses – Three Year Projections
 - Tax Returns – Previous Three (3) Years – Personal Tax Returns May be Required for Proprietorship
- ✗ Letter from Lending Institution if applicable *N/A*
- ✓ If a Corporation, LLC or Other Legal Entity - Copy of Organizational Documents (Articles, Bylaws)
 - Please Note that Other Financial Documents May Be Required

E. APPLICANT SIGNATURE:

I certify that the information contained in this application and all attachments are correct to the best of my knowledge. By signing below, I authorize the City of Crete or their contracted representative to check my credit and the credit of all who are listed within this application. I understand that I must update my credit information if my financial situation changes.



 Applicant's Signature

4/18/24

 Date



Checklist for Local Economic Development Program Application

For a qualifying business to be considered for direct or indirect financial assistance under the Crete Local Economic Development Program an applicant must provide to the City Administrator or Program Administrator:

- A completed and signed application with all required support documents including, but not limited to:
 - A detailed description summary of the proposed project which clearly states what assistance the business is requesting from the program, including evidence that the project qualifies for assistance under the Local Option Municipal Economic Development Act and is consistent with the goals of the Crete Local Economic Development Program.
 - Use of Funds – Total project costs and financing requirement; include copies of any preliminary bids (if applicable/available).
 - A review of key management and employees and their experience as related to the proposed project.
- Start Up Business
 - Current Business Plan for the project and the company, including employment and financial projections;
 - Three (3) Years Financial Projections
 - Past three years personal tax returns
- Existing Business:
 - Most Current Business Plan
 - Three (3) Yearly Financial Statements: Profit & Loss Statements, Cash Flows and Income Statements covering the last three years of business operation, or if a new business, personal income statements.
 - List of Current Obligations (include company Names and Amounts)
 - Past three years personal tax returns
- Letter from Lending Institution(s) (if applicable): Evidence of private financing commitments for investors or lenders.
- If a Corporation, LLC or Other Legal Entity - Copy of Organizational Documents (Articles, ByLaws)
- Resume(s) of all owners/co-owners/directors/partners/stockholders: Necessary entity or personal financial information about the Applicant(s), including name, address, past experience, work history, and related information.
- Other information or financial documentation as requested.

Questions: Contact City Administrator, Tom Ourada, at 402-826-4313 or email tom.ourada@crete.ne.gov. **Return** application and supporting documentation to City Administrator, at City Hall, 243 E. 13th Street, Crete, NE 68333

United States Citizenship Attestation Form

For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, I attest as follows:

I am a citizen of the United States.

— OR —

I am a qualified alien under the federal Immigration and Nationality Act, my immigration status and alien number are as follows: _____ and I agree to provide a copy of my USCIS documentation upon request.

I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States.

PRINT NAME

Patrick W. Reed

(first, middle, last)

SIGNATURE

Patrick W. Reed

DATE

4/22/24

1/19/2010

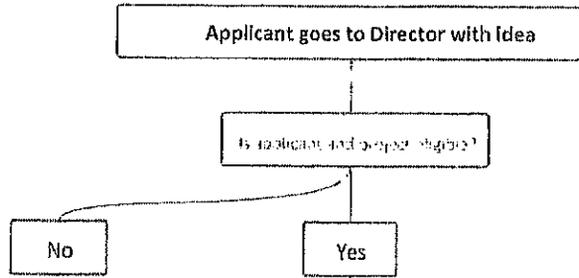
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PRINT

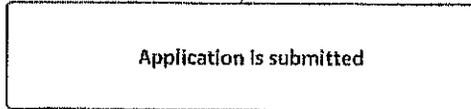
LB 840 APPLICATION PROCESS

First Step in Process
 If application is rejected, the applicant has the ability to appeal to the advisory committee at a public meeting.

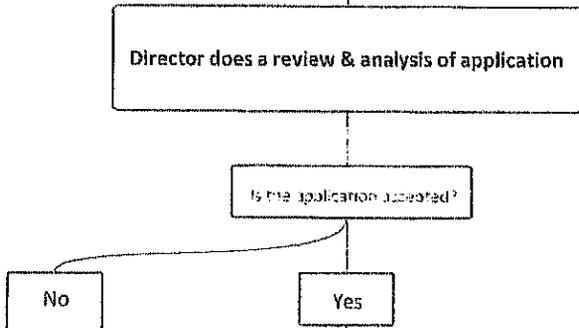
Step 1



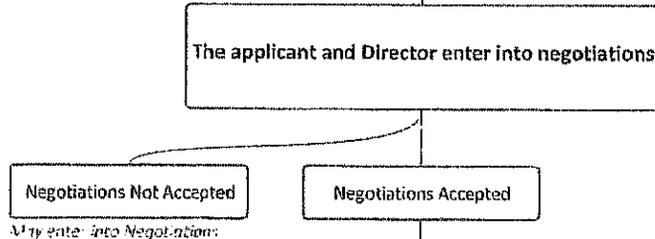
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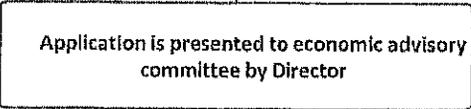
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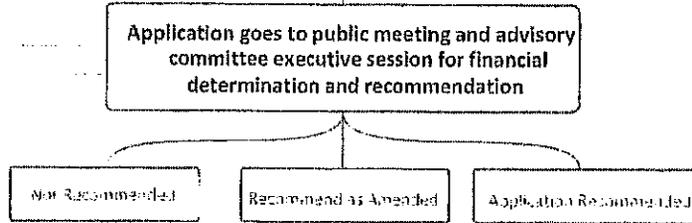
Step 4



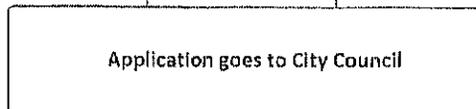
Step 5



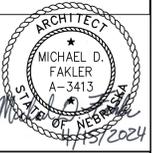
Step 6



Step 7

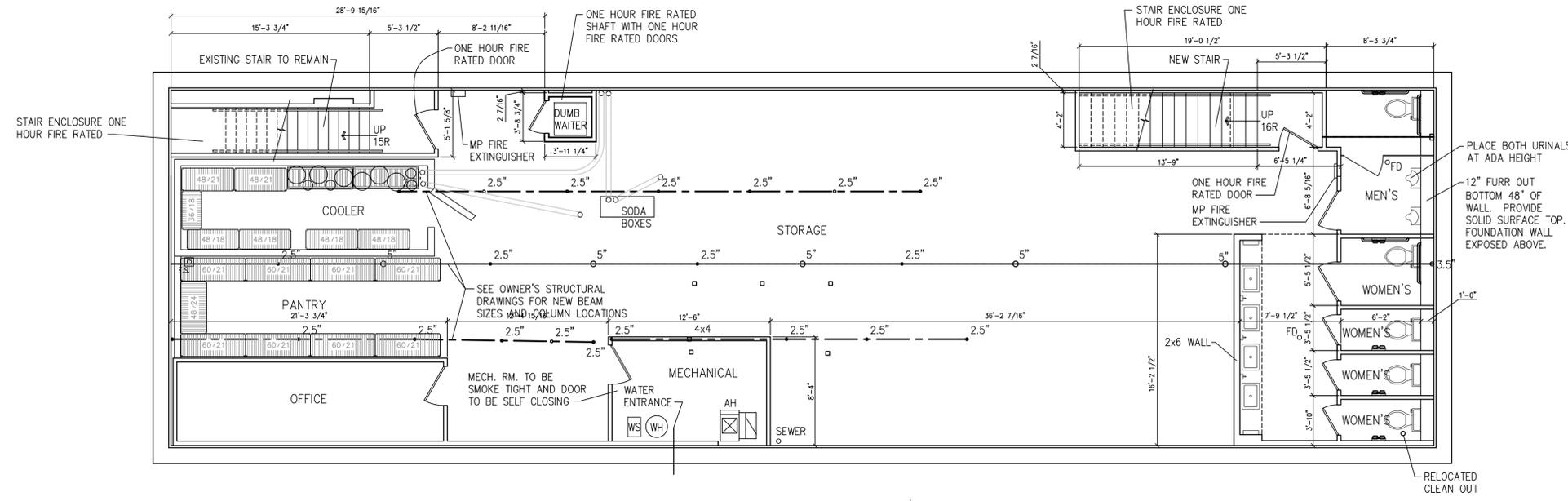
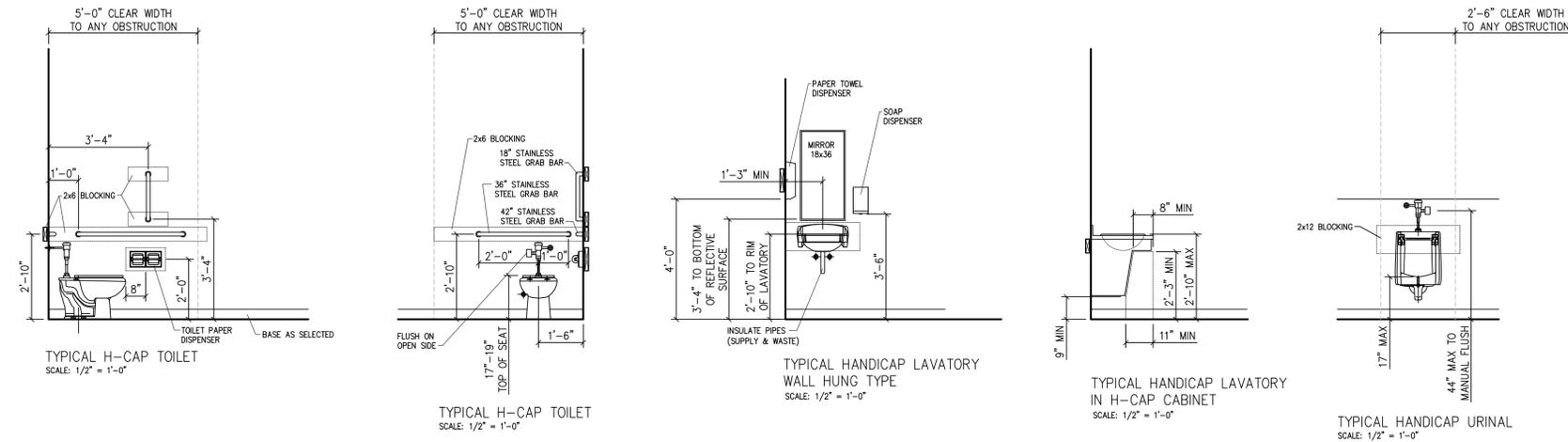


FIELD VERIFY
ALL EXISTING DIMENSIONS



I, MICHAEL D. FAKLER, AM THE COORDINATING PROFESSIONAL ON THE OLD MAIN BAR & GRILL PROJECT
THE RECORD COPY OF THIS DRAWING IS ON FILE AT THE OFFICE OF FAKLER ARCHITECTS, L.L.C. 1001 N. 6TH ST. BEATRICE, NEBRASKA 68310. THIS DOCUMENT IS RELEASED FOR THE PURPOSES OF REGULATORY APPROVAL, PERMITTING, AND CONSTRUCTION UNDER THE AUTHORITY OF MICHAEL D. FAKLER, NEBRASKA REGISTRATION # A-3413, ON APRIL 15, 2024. ANY MODIFICATIONS TO THIS DRAWING SHALL BE IN COMPLIANCE WITH THE NEBRASKA BOARD OF ENGINEERS AND ARCHITECTS RULES.

FAKLER ARCHITECTS, L.L.C.
1001 N. 6th St., BEATRICE, NE 68310
PH 402-228-3020 FAX 402-228-3018
E-MAIL michael@faklerarchitects.com



NEW BASEMENT FLOOR PLAN
SCALE: 3/16" = 1'-0"

- NOTE: ALL FIRE RATED OPENINGS (INCLUDING DUMB WAITER SHAFT OPENINGS) ARE TO BE SELF CLOSING AND SELF LATCHING. PROVIDE PANIC HARDWARE ON ALL EXIT & EXIT ACCESS DOORS.
- NOTE: ALL NEW STAIRS 7" MAX RISER, 11" TREAD, HANDRAILS ON EACH SIDE OF STAIR, TOP OF HANDRAIL 34" ABOVE STAIR NOSINGS
- NOTE: SEE OWNER'S STRUCTURAL DRAWINGS FOR ALL STRUCTURAL INFORMATION AND REQUIREMENTS.

- MP FIRE EXTINGUISHER:
LARSEN'S MP10 - 10 POUND MULTI-PURPOSE DRY CHEMICAL EXTINGUISHER
- LARSEN'S 2409-6R OR 2409-SM FIRE EXTINGUISHER CABINET AS REQUIRED BY LOCATION
STEEL/VERTICAL DUO/CLEAR ACRYLIC/RECESSED HANDLE
- WC FIRE EXTINGUISHER:
LARSEN'S WC-6L - 6 LITER WET CHEMICAL EXTINGUISHER
- LARSEN'S 2712-SM FIRE EXTINGUISHER CABINET
STEEL/VERTICAL DUO/CLEAR ACRYLIC/RECESSED HANDLE

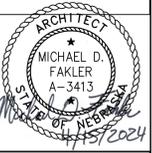
NEW BASEMENT FLOOR PLAN

Old Main Bar & Grill
1103 Main St., Crete, Nebraska 68333

REVISIONS	
PRELIMINARY ISSUE	8/23/2023
BID ISSUE	
PERMIT ISSUE	4/15/2024
CONST. ISSUE	

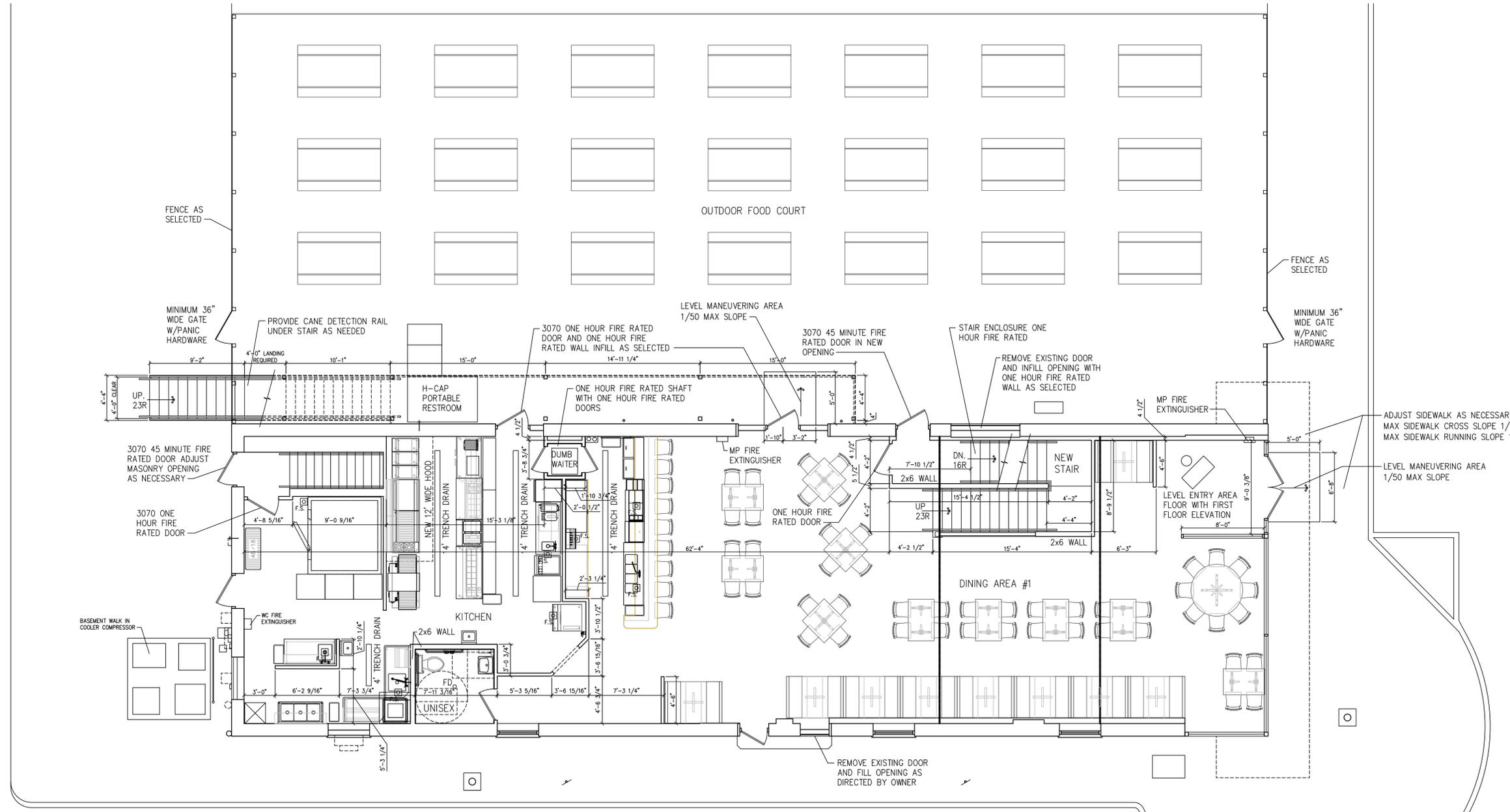
A-1
PROJECT #1455

FIELD VERIFY
ALL EXISTING DIMENSIONS



I, MICHAEL D. FAKLER, AM THE COORDINATING PROFESSIONAL ON THE OLD MAIN BAR & GRILL PROJECT
THE RECORD COPY OF THIS DRAWING IS ON FILE AT THE OFFICE OF FAKLER ARCHITECTS, L.L.C. 1001 N. 6TH ST. BEATRICE, NEBRASKA 68310. THIS DOCUMENT IS RELEASED FOR THE PURPOSES OF REGULATORY APPROVAL, PERMITTING, AND CONSTRUCTION UNDER THE AUTHORITY OF MICHAEL D. FAKLER, NEBRASKA REGISTRATION # A-3413, ON APRIL 15, 2024. ANY MODIFICATIONS TO THIS DRAWING SHALL BE IN COMPLIANCE WITH THE NEBRASKA BOARD OF ENGINEERS AND ARCHITECTS RULES.

FAKLER ARCHITECTS, L.L.C.
1001 N. 6th St., BEATRICE, NE 68310
PH 402-228-3020 FAX 402-228-3018
E-MAIL michael@faklerarchitects.com



PROPOSED USE:
RESTAURANT & BAR - TYPE A-2 OCCUPANCY
TYPE OF CONSTRUCTION: TYPE VB
AUTOMATIC SPRINKLER SYSTEM: PROVIDED

TOTAL AREA:
3008 SQ. FT. BASEMENT FLOOR
3008 SQ. FT. MAIN FLOOR
3008 SQ. FT. 2ND FLOOR

OUTDOOR FOOD COURT OCCUPANCY LOAD
A-2 OCCUPANCY 3946 SQ. FT. = 264 OCCUPANTS

2ND LEVEL OCCUPANCY LOAD
BAR A-2 OCCUPANCY TABLES & CHAIRS 1306 SQ. FT. = 88 OCCUPANTS
BAR A-2 OCCUPANCY FIXED SEATS = 9 OCCUPANTS
DINING AREA 2 A-2 OCCUPANCY 707 SQ. FT. = 48 OCCUPANTS

MAIN LEVEL OCCUPANCY LOADS:
DINING AREA 1 A-2 OCCUPANCY 1581 SQ. FT. = 106 OCCUPANTS
KITCHEN A-2 OCCUPANCY 870 SQ. FT. = 4 OCCUPANTS
BAR A-2 OCCUPANCY FIXED SEATS = 9 OCCUPANTS

BASEMENT LEVEL OCCUPANCY LOADS:
PANTRY/COOLER 1826 SQ. FT. = 7
OFFICE 142 SQ. FT. = 1
MECHANICAL 104 SQ. FT. = 1 OCCUPANTS

TOTAL OCCUPANT LOAD RESTAURANT AREA (INCLUDES KITCHEN AND MECHANICAL) - 431
TOTAL OCCUPANT LOAD BAR AREA - 106

NEW FIRST FLOOR & SITE PLAN
SCALE: 3/16" = 1'-0"

REQUIRED PLUMBING FIXTURES:
A-2 OCCUPANCY (RESTAURANT)
216 MEN & 216 WOMEN
216/75 = 2.88 WC MEN
216/200 = 1.08 LAVATORIES MEN
216/75 = 2.88 WC WOMEN
216/200 = 1.08 LAVATORIES WOMEN
432/500 = 0.86 DRINKING FOUNTAIN
1 SERVICE SINK

A-2 OCCUPANCY (BAR)
53 MEN & 53 WOMEN
53/40 = 1.33 WC MEN
53/75 = 0.71 LAVATORIES MEN
53/40 = 1.33 WC WOMEN
53/75 = 0.71 LAVATORIES WOMEN
106/500 = 0.21 DRINKING FOUNTAIN,
1 SERVICE SINK

TOTAL REQUIRED PLUMBING FIXTURES
WC MEN = 2.88 + 1.33 = 4.21 = 5
LAVATORIES MEN = 1.08 + 0.71 = 1.79 = 2
WC WOMEN = 2.88 + 1.33 = 4.21 = 5
LAVATORIES WOMEN = 1.08 + 0.71 = 1.79 = 2
DRINKING FOUNTAINS = 0.86 + 0.21 = 1.07 = 2 PER IBC = 2 PER ADA (NOT REQUIRED PER CITY OF CRETE)
1 SERVICE SINK



NOTE:
ALL FIRE RATED OPENINGS (INCLUDING DUMB WAITER SHAFT OPENINGS) ARE TO BE SELF CLOSING AND SELF LATCHING. PROVIDE PANIC HARDWARE ON ALL EXIT & EXIT ACCESS DOORS.

NOTE:
ALL NEW STAIRS 7" MAX RISER, 11" TREAD, HANDRAILS ON EACH SIDE OF STAIR, TOP OF HANDRAIL 34" ABOVE STAIR NOSINGS

NOTE:
SEE OWNER'S STRUCTURAL DRAWINGS FOR ALL STRUCTURAL INFORMATION AND REQUIREMENTS.

MP FIRE EXTINGUISHER:
LARSEN'S MP10 - 10 POUND MULTI-PURPOSE DRY CHEMICAL EXTINGUISHER
LARSEN'S 2409-6R OR 2409-SM FIRE EXTINGUISHER CABINET AS REQUIRED BY LOCATION STEEL/VERTICAL DUO/CLEAR ACRYLIC/RECESSED HANDLE

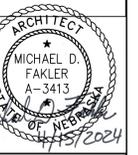
WC FIRE EXTINGUISHER:
LARSEN'S WC-6L - 6 LITER WET CHEMICAL EXTINGUISHER
LARSEN'S 2712-SM FIRE EXTINGUISHER CABINET STEEL/VERTICAL DUO/CLEAR ACRYLIC/RECESSED HANDLE

NEW FIRST FLOOR PLAN

PRELIMINARY ISSUE	8/23/2023
BID ISSUE	
PERMIT ISSUE	4/15/2024
CONST. ISSUE	

A-2
PROJECT #1455

FIELD VERIFY
ALL EXISTING DIMENSIONS

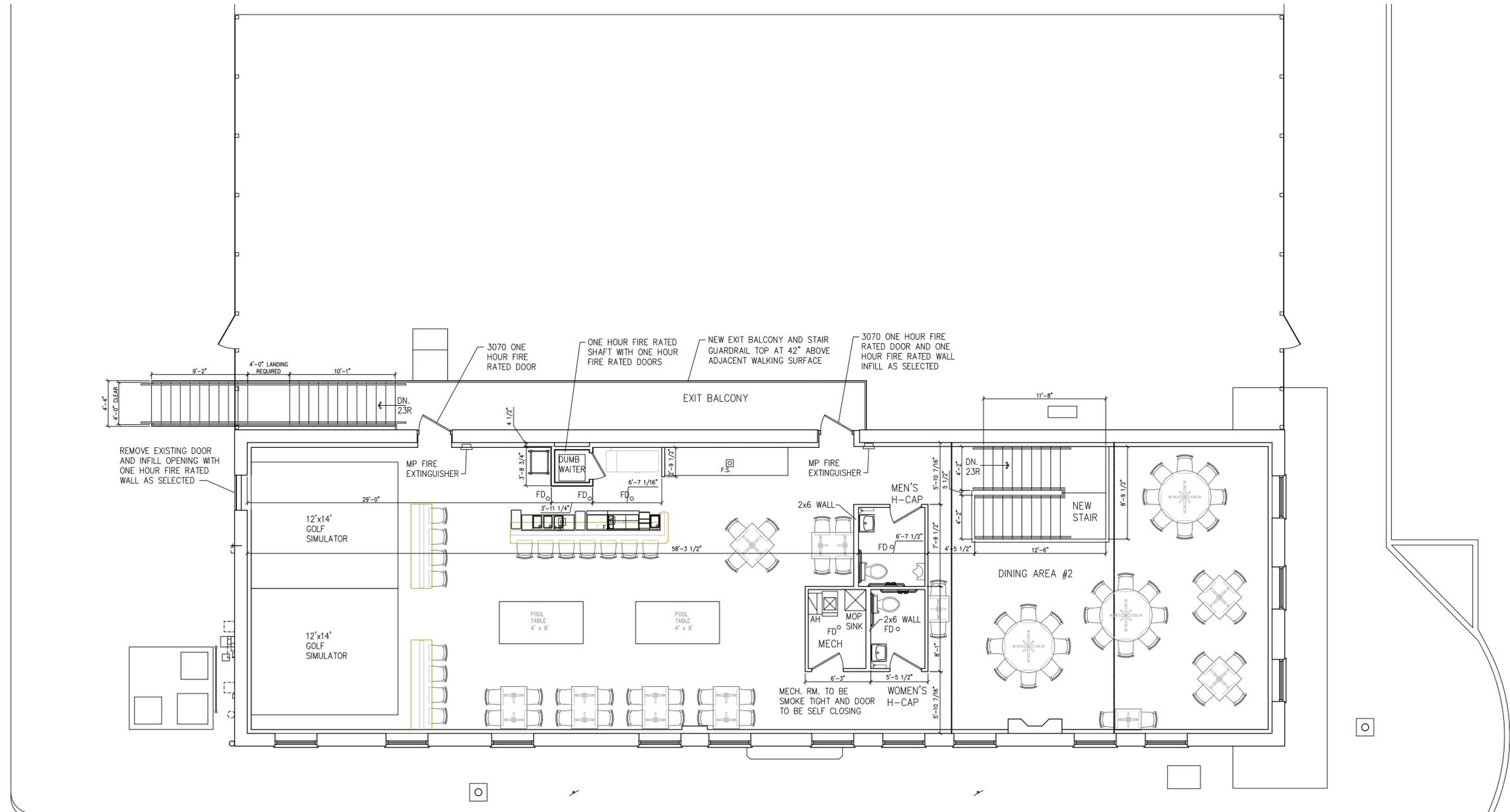


I, MICHAEL D. FAKLER, AM THE COORDINATING PROFESSIONAL ON THE OLD MAIN BAR & GRILL PROJECT

THE RECORD COPY OF THIS DRAWING IS ON FILE AT THE OFFICE OF FAKLER ARCHITECTS, L.L.C., 1001 N. 6TH ST. BEATRICE, NEBRASKA 68310. THIS DOCUMENT IS RELEASED FOR THE PURPOSES OF REGULATORY APPROVAL, PERMITTING, AND CONSTRUCTION UNDER THE AUTHORITY OF MICHAEL D. FAKLER, NEBRASKA REGISTRATION # A-3413, ON APRIL 15, 2024. ANY MODIFICATIONS TO THIS DRAWING SHALL BE IN COMPLIANCE WITH THE NEBRASKA BOARD OF ENGINEERS AND ARCHITECTS RULES.

FAKLER ARCHITECTS, L.L.C.

1001 N. 6th ST., BEATRICE, NE 68310
PH 402-228-3020 FAX 402-228-3018
E-MAIL michael@faklerarchitects.com



NEW SECOND FLOOR PLAN
SCALE: 3/16" = 1'-0"

NOTE:
ALL FIRE RATED OPENINGS (INCLUDING DUMB WAITER SHAFT OPENINGS) ARE TO BE SELF CLOSING AND SELF LATCHING. PROVIDE PANIC HARDWARE ON ALL EXIT & EXIT ACCESS DOORS.

NOTE:
ALL NEW STAIRS 3" MAX RISER, 11" TREAD, HANDRAILS ON EACH SIDE OF STAIR, TOP OF HANDRAIL 34" ABOVE STAIR NOSINGS

NOTE:
SEE OWNER'S STRUCTURAL DRAWINGS FOR ALL STRUCTURAL INFORMATION AND REQUIREMENTS.



MP FIRE EXTINGUISHER:
LARSEN'S MP10 - 10 POUND MULTI-PURPOSE DRY CHEMICAL EXTINGUISHER
LARSEN'S 2409-6R OR 2409-SM FIRE EXTINGUISHER CABINET AS REQUIRED BY LOCATION
STEEL/VERTICAL DUO/CLEAR ACRYLIC/RECESSED HANDLE

WC FIRE EXTINGUISHER:
LARSEN'S WC-6L - 6 LITER WET CHEMICAL EXTINGUISHER

LARSEN'S 2712-SM FIRE EXTINGUISHER CABINET
STEEL/VERTICAL DUO/CLEAR ACRYLIC/RECESSED HANDLE

NEW SECOND FLOOR PLAN

REVISIONS

PRELIMINARY ISSUE	8/23/2023
BID ISSUE	
PERMIT ISSUE	4/15/2024
CONST. ISSUE	

A-3
PROJECT #1455

Old Main Bar & Grill

1103 Main St., Crete, Nebraska 68333

ECONOMIC DEVELOPMENT PROGRAM APPLICATION FOR FUNDS

Please Type or Print Clearly and Answer Each Question (If Question Does Not Apply – Mark N/A).

Please Note: The Information Contained in this portion of the document is Public Information and will **NOT** be Considered Confidential.

A. APPLICANT INFORMATION:

Name of Entity Applying for Assistance: Rebecca Hansmeyer (DBA Wool & Whimsy)

Business Address: 131 West 13th St Suite 1 Crete NE 68333
(City) (State) (Zip Code)

Contact Person: Rebecca Hansmeyer Telephone Number: 402-910-3131

Fax Number: _____ Email Address: beckyhansmeyer@gmail.com

Federal Tax ID Number: 99-1754190

Type of Entity: Start-Up Buyout Existing

If Existing, Number of Years in Business in Crete: _____

Business Classification: (Please Choose One)

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Retail | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Research & Development |
| <input type="checkbox"/> Headquarter | <input type="checkbox"/> Telecommunications | <input type="checkbox"/> Tourism |
| <input type="checkbox"/> Warehouse/Distribution | <input type="checkbox"/> Government | <input type="checkbox"/> Other |

Business Type: (Please Choose One)

- | | | |
|--|--|--------------------------------------|
| <input checked="" type="checkbox"/> Proprietorship | <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Governmental Entity | <input type="checkbox"/> Other |

Does the Company have a Parent or Subsidiaries? Yes No

If Yes, Please List Name: _____

Address: _____
(City) (State) (Zip Code)

Ownership Identification: Please List all Officers, Directors, Partners, Owners, Co-owners and Stockholders.

Full Name	Title	Ownership Percentage
Rebecca Lee Hansmeyer	Owner	100%

Which type of assistance is the entity applying for?

Grant Loan Guarantee If so, Lender? _____ Other

Explain: Assistance with business start-up costs

What is the general purpose of the request (must be an allowed LB840/Economic Dev. Plan Project)?

- New Development New Business Startup Building Renovation Public Works
 Professional/Employee Recruitment Promotion/Tourism Job Training
 Working Capital Low - Moderate Income Housing Workforce Housing
 Technology Plan Management Technical Assistance Equity Investment

Does the business qualify to receive any incentives from the State of Nebraska? Yes No DK

Has the business applied for any incentives from the State of Nebraska? Yes No

If yes, please explain: _____

Employee Information: (FTE = Full-Time Equivalent = 2,080 Hours/Per Year)

Number of Existing Full-Time Equivalent Employees: 1

Number of Full-Time Equivalent Positions to Be Created: 0

Will all of the Full-Time Equivalent Positions be Physically Located within the City of Crete, their Two- Mile Extraterritorial Jurisdiction or on Land Held in the Name of the City of Crete?

Yes No

If no, please explain: _____

Does the Company Employ Any Seasonal Employees? Yes No

If Yes, How Many: _____
(Seasonal employees must work for at least three continuous months and the position must reoccur annually)

B. PROJECT INFORMATION:

Please provide a Brief Project Summary Description:

I will be opening up a yarn and fabric shop in the space that is currently being renovated by Charpen Properties, LLC (owned by my husband, Lukas). In order to get the shop opened this year, I am requesting assistance with start-up costs including purchasing a computer, printer/copier, furniture, shelving/store displays, signage, point-of-sale equipment, and the hiring of a graphic designer to develop branding for the store. A detailed breakdown of the start-up costs can be found in the attached business plan. Yarn and fabric stores tend to be destination spots for hobbyists throughout the region; my hope is that this will attract many visitors to Crete.

Use of Funds	Total Project Cost	Econ Dev Funds Requested
Land or Building Acquisition	\$	\$
Renovation/Rehabilitation	\$	\$
New Construction	\$	\$
Machinery / Equipment Acquisition	\$	\$
Business / Employee Recruitment Activities	\$	\$
Technology Costs	\$ 4,780.00	\$ 4,780.00
Small Business Development	\$ 11,750.00	\$ 11,750.00
Working Capital (Includes Inventory)	\$ 40,000.00	\$ 10,000.00
Job Training	\$	\$
Other	\$	\$
Total Project Cost	\$ 56,530.00	
	Total LB840 Funds Requested:	\$ 26,530.00

C. FUNDING SOURCES AND EQUITY INJECTION:

If Borrowing, Name of Lender: First State Bank of Nebraska

Loan Amount: \$40,000 Line of Credit Loan Term (Years): _____

Amount Injected Into the Project by Business/Partners/Owners:
\$0

Other Funding Source(s) and Amount(s): _____

C. PROJECT LOCATION:

Within the Crete City Limits?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Within the Crete Two-Mile Jurisdiction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Land Owned by the City of Crete?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Not Located in Crete but for area benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If Not in City Jurisdiction, please explain local benefit:

D. ATTACHMENTS: - Please Include the Attachments that Apply to Your Entity – See *checklist Page 5.*

Please Note: The Information provided pursuant to this Section **Will** be Deemed Confidential and will not be Available for Public Disclosure.

- Business Plan: Brief Description of the Business
- Resumes of all Owners/Co-Owners/Directors/Partners/Stockholders
- For Existing Businesses – Three (3) Yearly Financial Statements
- For Existing Businesses – Current Financial Statements (Less Than Sixty (60) Days Old)
- For Existing Businesses - List of Current Obligations (Include Company Names and Amounts)
- For Start-Up Businesses – Current Business Plan
- For Start-Up Businesses – Three Year Projections
- Tax Returns – Previous Three (3) Years – Personal Tax Returns May be Required for Proprietorship
- Letter from Lending Institution if applicable
- If a Corporation, LLC or Other Legal Entity - Copy of Organizational Documents (Articles, Bylaws)
- Please Note that Other Financial Documents May Be Required

E. APPLICANT SIGNATURE:

I certify that the information contained in this application and all attachments are correct to the best of my knowledge. By signing below, I authorize the City of Crete or their contracted representative to check my credit and the credit of all who are listed within this application. I understand that I must update my credit information if my financial situation changes.

Rebecca L Hansmeyer
Applicant's Signature

4-9-24
Date

United States Citizenship Attestation Form

For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, I attest as follows:

I am a citizen of the United States.

— OR —

I am a qualified alien under the federal Immigration and Nationality Act, my immigration status and alien number are as follows: _____, and I agree to provide a copy of my USCIS documentation upon request.

I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States.

PRINT NAME

Rebecca Lee Hansmeyer

(first, middle, last)

SIGNATURE

Rebecca Lee Hansmeyer

DATE

4-9-24

1/19/2010

DOWNLOAD/SAVE

PRINT



ECONOMIC DEVELOPMENT PROGRAM APPLICATION FOR FUNDS

Please Type or Print Clearly and Answer Each Question *(If Question Does Not Apply – Mark N/A).*

Please Note: The Information Contained in this portion of the document is Public Information and will **NOT** be Considered Confidential.

A. APPLICANT INFORMATION:

Name of Entity Applying for Assistance: Crete Housing and Economic Development Corporation

Business Address: 243 East 13th Street Crete NE 68333
(City) (State) (Zip Code)

Contact Person: Tom Ourada Telephone Number: 4028264312

Fax Number: _____ Email Address: tom.ourada@crete.ne.gov

Federal Tax ID Number: 47-0552817

Type of Entity: Start-Up Buyout Existing

If Existing, Number of Years in Business in Crete: 4

Business Classification: (Please Choose One)

- | | | |
|---|---|---|
| <input type="checkbox"/> Retail | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Research & Development |
| <input type="checkbox"/> Headquarter | <input type="checkbox"/> Telecommunications | <input type="checkbox"/> Tourism |
| <input type="checkbox"/> Warehouse/Distribution | <input type="checkbox"/> Government | <input checked="" type="checkbox"/> Other |

Business Type: (Please Choose One)

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Proprietorship | <input checked="" type="checkbox"/> Corporation | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Governmental Entity | <input type="checkbox"/> Other |

Does the Company have a Parent or Subsidiaries? Yes No

If Yes, Please List Name: _____

Address: _____
(City) (State) (Zip Code)

Ownership Identification: Please List all Officers, Directors, Partners, Owners, Co-owners and Stockholders.

Full Name	Title	Ownership Percentage
David Bauer	Board Member	
Tom Ourada	Board Chair	
Anna Burge	Board Attorney	
Justin Kozicek	Board Member	
Tom Sorensen	Board Member	

Which type of assistance is the entity applying for?

- Grant
 Loan Guarantee If so, Lender? _____
 Other

Explain: _____

What is the general purpose of the request (must be an allowed LB840/Economic Dev. Plan Project)?

- New Development
 New Business Startup
 Building Renovation
 Public Works
 Professional/Employee Recruitment
 Promotion/Tourism
 Job Training
 Working Capital
 Low - Moderate Income Housing
 Workforce Housing
 Technology
 Plan Management
 Technical Assistance
 Equity Investment

Does the business qualify to receive any incentives from the State of Nebraska? Yes No DK

Has the business applied for any incentives from the State of Nebraska? Yes No

If yes, please explain: Applied for and received Rural Workforce Development Funds

Employee Information: (FTE = Full-Time Equivalent = 2,080 Hours/Per Year)

Number of Existing Full-Time Equivalent Employees: 0

Number of Full-Time Equivalent Positions to Be Created: 0

Will all of the Full-Time Equivalent Positions be Physically Located within the City of Crete, their Two- Mile Extraterritorial Jurisdiction or on Land Held in the Name of the City of Crete?

- Yes No

If no, please explain: No FTE's will be created.

Does the Company Employ Any Seasonal Employees? Yes No

If Yes, How Many: _____

(Seasonal employees must work for at least three continuous months and the position must reoccur annually)

B. PROJECT INFORMATION:

Please provide a Brief Project Summary Description:

Our non-profit corporation has previously applied for and received LB840 funds in the amount of \$250,000 for workforce housing. We did leverage that funding to receive a 100% matching grant of \$250,000 for Rural Workforce Housing from the Nebraska Department of Economic Development. With two other donations, we had \$580,000 in funds available. With that, we constructed two residences that satisfied our initial rural workforce housing grant obligation. We are currently funding construction of two more of these units. The route that we have taken is to provide builders with these funds interest free to start with, and have had successes. But now we have had to pay tax and audit expenses which are eating into our available funding. As a result, we are asking for an additional \$20,000 to replenish our account. Our intent going forward is to start to charge a nominal interest and to use the paid back \$580,000 to apply for another \$580,000 from NDED to reach \$1,160,000 to make an even larger impact on affordable workforce housing.

Use of Funds	Total Project Cost	Econ Dev Funds Requested
Land or Building Acquisition	\$ 560,000.00	\$ 20,000.00
Renovation/Rehabilitation	\$	\$
New Construction	\$	\$
Machinery / Equipment Acquisition	\$	\$
Business / Employee Recruitment Activities	\$	\$
Technology Costs	\$	\$
Small Business Development	\$	\$
Working Capital (Includes Inventory)	\$	\$
Job Training	\$	\$
Other	\$	\$
Total Project Cost	\$ 560,000.00	
	Total LB840 Funds Requested:	\$ 20,000.00

C. FUNDING SOURCES AND EQUITY INJECTION:

If Borrowing, Name of Lender: _____

Loan Amount: _____ Loan Term (Years): _____

Amount Injected Into the Project by Business/Partners/Owners:

Other Funding Source(s) and Amount(s): NDED \$250,000, Prior LB840, \$250,000, Pinnacle 25,000

C. PROJECT LOCATION:

- | | | |
|--|---|--|
| Within the Crete City Limits? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Within the Crete Two-Mile Jurisdiction? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Land Owned by the City of Crete? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Not Located in Crete but for area benefit? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If Not in City Jurisdiction, please explain local benefit:

D. ATTACHMENTS: - Please Include the Attachments that Apply to Your Entity – See *checklist Page 5.*

Please Note: The Information provided pursuant to this Section **Will** be Deemed Confidential and will not be Available for Public Disclosure.

- Business Plan: Brief Description of the Business
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- For Start-Up Businesses – Current Business Plan
- For Start-Up Businesses – Three Year Projections
- Tax Returns – Previous Three (3) Years – Personal Tax Returns May be Required for Proprietorship
- Letter from Lending Institution if applicable
- If a Corporation, LLC or Other Legal Entity - Copy of Organizational Documents (Articles, Bylaws)
- Please Note that Other Financial Documents May Be Required

E. APPLICANT SIGNATURE:

I certify that the information contained in this application and all attachments are correct to the best of my knowledge. By signing below, I authorize the City of Crete or their contracted representative to check my credit and the credit of all who are listed within this application. I understand that I must update my credit information if my financial situation changes.


 Applicant's Signature

5-1-2024
 Date

United States Citizenship Attestation Form

For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, I attest as follows:

I am a citizen of the United States.

— OR —

I am a qualified alien under the federal Immigration and Nationality Act, my immigration status and alien number are as follows: _____, and I agree to provide a copy of my USCIS documentation upon request.

I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States.

PRINT NAME

Tom F. Ourada

(first, middle, last)

SIGNATURE



DATE

4-30-2024

1/19/2010

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PRINT