



# BRONX COMMUNITY BOARD No. 10

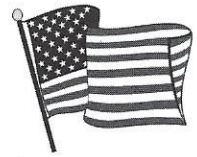
3165 East Tremont Avenue • Bronx, New York 10461

Tel: (718) 892-1161 • Fax: (718) 863-6860

E-mail: [bx10@cb.nyc.gov](mailto:bx10@cb.nyc.gov)

[Facebook.com/BronxCommunityBoard10](https://www.facebook.com/BronxCommunityBoard10)

Website: [www.nyc.gov/bronxcb10](http://www.nyc.gov/bronxcb10)



**Peter J. Sullivan**  
Chairperson

**Matthew Cruz**  
District Manager

**Ruben Diaz, Jr.**  
Borough President

## Community Notification for Liquor License Establishments

Date:

The purpose of this community notification created by Bronx Community Board #10 is to notify you of:

a **new** food and drinking establishment that will be seeking CB #10's approval for a New York State Liquor Authority (NYSLA) liquor license or an **existing** establishment that is seeking a change in its method of operation

*This community notification will be carried by the owner, manager or his/her representative of the establishment and will be submitted to Bronx Community Board #10. To be sure, this petition's purpose is to notify you of the new establishment's forthcoming arrival, change in operation or its request for a sidewalk café. By no means does a respondent's signature constitute an approval or denial. It is simply for notification purposes.*

**Name and address of establishment:**

\_\_\_\_\_

**Please indicate the type of license such as full-liquor or beer-wine:**

\_\_\_\_\_

**If seeking a liquor license, the business will be a:** (please circle) Bar    Restaurant

Other:

\_\_\_\_\_

**Please disclose your current method of operation:**

\_\_\_\_\_

**If changing the method of operation, please disclose what changes are being added to the license:**

---

**Please list the days and hours of operation for your new establishment:**

---

***NOTE: Signatures should be from residents across the street from, adjacent to and behind the establishment. Please contact the Board Office with any questions, issues and meetings dates at (718) 892-1161.***

RESIDENT NAME	RESIDENT ADDRESS	RESIDENT SIGNATURE

RESIDENT NAME	RESIDENT ADDRESS	RESIDENT SIGNATURE