

NYC Department of Consumer Affairs

BASIC LICENSE APPLICATION

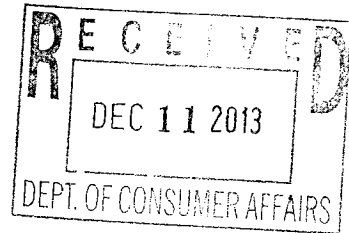
Please print.

2270-2013-ACAB
 25

Section 1 - All applicants

What is your Business's legal structure?

- Sole Proprietor
- Business/General Partnership
- Limited Partnership
- Limited Liability Partnership
- Limited Liability Company
- Corporation
- S-Corporation
- Nonprofit



If your Business's legal structure is Sole Proprietor, complete Sections 1, 2, and 4.

If your Business's legal structure is NOT Sole Proprietor, complete Sections 1, 3, and 4.

Business Information

Legal Name of Business (The Legal Name that you provide must be exactly as filed with the County Clerk or New York State Secretary of State.) BAYONS DOZEN ASSOCIATES, LLC		
Business's Trade or Doing-Business-As (DBA) Name, if applicable (The DBA Name that you provide must be exactly as filed with the County Clerk or New York State Secretary of State.) THE GENERAL FINALE		
Business Address (Building Number, Street Name, Unit, e.g., Floor, Suite) 199 BOWEN, 1 ST FLOOR/CELLAR		
City and State NEW YORK NY	ZIP Code 10002	Borough (check one): <input checked="" type="checkbox"/> 01-Manhattan <input type="checkbox"/> 02-Bronx <input type="checkbox"/> 03-Brooklyn <input type="checkbox"/> 04-Queens <input type="checkbox"/> 05-Staten Island <input type="checkbox"/> 08-Outside NYC
Country USA		
Business Telephone Number (212) 271-7101	Fax Number (212) 242-5272	E-mail MARK@EMMGR.COM
Federal Employer Identification Number (EIN) (Mandatory for corporations, partnerships, and sole proprietors with paid employees) 38-3858080		New York State Sales Tax Identification Number or Certificate of Authority Application Confirmation Number (You must complete this section if "Sales Tax Identification Number" is a requirement on your license application checklist/Business Express Description Page.) The Sales Tax Identification Number is the 9, 10, or 11-digit number on your New York State Department of Taxation and Finance Certificate of Authority. If you have not received your Certificate of Authority, please enter the 6-digit confirmation number you received when you successfully submitted the application for a Certificate of Authority. 383858080- - or - -

LAWYER: Joseph Levey
 Joseph@h elbraunLevey

6. Is there any kind of criminal charge whatsoever pending against this individual?
If YES, please provide a description of the circumstances of the arrest.

YES NO

7. Is there any civil charge (including administrative charge) pending against this individual?

YES NO

If YES, please provide a description of the civil and/or administrative charge.

SCA disciplinary notice received subsequent to initial filing of this Cabaret application. Disciplinary charge to be settled & fully resolved shortly (process already underway)

8. Is there any DCA-issued Notice of Violation, Notice of Hearing, Summons, Padlock Order, or other order now in effect and/or pending against this individual or any business operated by this individual?

YES NO

If YES, please provide a description of the order, including all DCA-imposed obligations to pay fines or restitution that have not been satisfied in full.

9. Has any court rendered a judgment against this individual or any business operated by this individual for activity related to the conduct of a business?

YES NO

If YES, please provide a description of the court judgment.

10. Is there any judgment against this individual or any business operated by this individual that has not been paid in full for 30 days or more?

YES NO

If YES, please provide a description of the judgment.

