



RE: Notification of adult-use retail dispensary license application

License Type: New Establishment

Previous DBA:

License Number (if applicable):

Applicant Name: BELAYET HOSSAIN *Approved By Community Board 3, Man*

Phone Number: 347-863-3131

Email Address: HSSNBCT @ GMAIL . COM

OCT 27 2023

Dear Municipal Clerk/NYC Community Board:

This serves as notification that I (name) BELAYET HOSSAIN
of (dba) HORNBILL INC

intend to, or have, file(u) an application for licensure with the Office of Cannabis Management
to open a(n):

- retail dispensary premises (new or additional) registered organization with dispensing (or ROD)
- microbusiness

in (county name) NEW YORK. This business, once the license is approved, shall be located at:

Address Line 1: 2 SAINT MARKS PLACE

Address Line 2:

City: NEW YORK

Zip code: 10003

The mailing address is (if different from business location):

Address Line 1:

Address Line 2:

City/Town/Village:

State:

Zip code:

(As applicable, name of business if different from above) has retained the legal services of (attorney or representative) _____

Name: _____

Address Line 1: _____

Address Line 2: _____


City/Town/Village: _____

State: Zip code: _____

Telephone with area code: _____

If the municipality or community board would like to express an opinion to the Cannabis Control Board, they must respond to this notification within 30 days by emailing an opinion to municipalities@ocm.ny.gov. This expressed opinion must be on official municipality or community board letterhead.

If the municipality or community board would like to request a one-time 30 day extension for the municipality or community board to provide their opinion, or if the municipality or community board has any comments, concerns, or questions, they must reach out to the Office at municipalities@ocm.ny.gov with "Notification to Municipalities Municipality Opinion 30 Day Extension Request – [Insert municipality or community board name here]" in the subject line. Municipalities or community boards should be sure to provide proof of the date of receipt of the Notification to Municipalities that they wish to request an extension of time for submitting a municipality opinion. Any request that does not include such information will be rejected as incomplete.

Signed  _____

Today's date: 10-26-2023

Print BELAYET HOSSAIN