



OFFICE USE ONLY		
<input checked="" type="radio"/> Original	<input type="radio"/> Amended	Date <u>6/4/14</u>

**Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a Local Municipality or Community Board**  
(Page 2 of 2 of Form)

State of New York  
Executive Department  
Division of Alcoholic Beverage Control  
State Liquor Authority

16. List the floor(s) of the building that the establishment is located on: Basement, Grand 2<sup>nd</sup>, Roof
17. List the room number(s) the establishment is located in within the building, if appropriate: 4
18. Is the premises located with 500 feet of three or more on-premises liquor establishments?  Yes  No
19. Will the license holder or a manger be physically present within the establishment during all hours of operation?  Yes  No
20. Does the applicant or licensee own the building in which the establishment is located? ("X" One)  Yes (If Yes SKIP 21-24)  No

**Owner of the Building in Which the Licensed Establishment is Located**

21. Building Owner's Full Name: Nadco Hotel, LLC d/o Gratsky
22. Building Owner's Street Address: 347 Fifth Ave, 3<sup>rd</sup> Floor
23. City, Town or Village: New York State: NY Zip Code: 10016

**Attorney Representing the Applicant in Connection with the Applicant's License Application Noted as Above for the Establishment Identified in this Notice**

25. Attorney's Full Name: Frank W. Palillo
26. Attorney's Street Address: 299 Broadway Suite 1820
27. City, Town or Village: New York State: New York Zip Code: 10007
28. Business Telephone Number of Attorney: (212) 227-1640
29. Business Email Address of Attorney: fwpalillo@gmail.com

I am the applicant or hold the license or am a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

30. Printed Name: Nicholas Moinian Title: Manager

Signature: X Nicholas Moinian