			OFFIC	E USE ONLY	
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## Standardized NOTICE FORM for Providing 30-Day Advance Notice to a Local Municipality or Community Board

1. Date Notice was Sent: 06/21/18  1a. Delivered by: Certified Mail Return Receipt Requested	1							
2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License;								
New Application								
For New applicants, answer each question below using all information known to date For Ranewal applicants, answer all questions For Alteration applicants, attach a complete written description and diagrams depicting the proposed alteration(s) For Corporate Change applicants, attach a list of the current and proposed corporate principals For Ramoval applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation For Class Change applicants, attach a statement detailing your current license type and your proposed license type For Method of Operation Change applicants, although not required, if you choose to submit, attach an explanation detailing those changes								
This 30-Day Advance Notice is Being Provided to the Clerk of the Following Local Municipality or Community Board:								
3. Name of Municipality or Community Board: Manhattan Community Board No. 3								
Applicant/Licensee Information:								
4. Licensee Serial Number (if applicable): N/A Expiration Date (if applicable): N/A								
5. Applicant or Licensee Name: 31 Orchard St Realty Inc.								
6. Trade Name (if any): Juke Bar								
7. Street Address of Establishment: 301 East 12th Street								
8. City, Town or Village: New York , NY Zip Code: 10003								
9. Business Telephone Number of Applicant/Licensee: (914) 907-3094								
10. Business E-mail of Applicant/Licensee: genebantrin@aol.com								
11. Type(s) of alcohol sold or to be sold: O Beer & Cider O Wine, Beer & Cider O Liquor, Wine, Beer & Cider								
12. Extent of Food Service:								
O Full food menu; full kitchen run by a chef or cook 📵 Menu meets legal minimum food availability requirements; food prep area at minimum								
13. Type of Establishment: Bar/Tavern								
14. Method of Operation:  (check all that apply)  Seasonal Establishment ☐ Juke Box ☐ Disc Jockey ☐ Recorded Music ☐ Karaoke ☐ Live Music (give details i.e., rock bands, acoustic, jazz, etc.): Jazz								
Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment								
☐ Video/Arcade Games ☐ Third Party Promoters ☑ Security Personnel								
Other (specify):								
Reo'd By Community B								
5. Licensed Outdoor Area: None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure								
Sidewalk Cafe Other (specify):								

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	OFFICE USE Original Amended	ONLY Date	26				
16. List the floor(s) of the building that	the establishment is located on: Basel	ment					
17. List the room number(s) the estable	ishment is located in within the building, if	appropriate: n/a					
18. Is the premises located within 500	feet of three or more on-premises liquor e	stablishments?	No				
19. Will the license holder or a manager be physically present within the establishment during all hours of operation?							
20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:  MADDSG LLC  1270118							
	Name	Serial	Number				
21. Does the applicant or licensee own	the building in which the establishment is	located? Yes (if YES, SKIP 23-2	6)				
Owner of the Building in Which the Licensed Establishment is Located							
22. Building Owner's Full Name: 301 REALTY ASSOCIATES, L.P. c/o ATKINS & BRESKIN CO.							
23. Building Owner's Street Address:	133 Norfolk Street						
4. City, Town or Village: New Yor	k	State: New York	Zip Code: 10002				

Representative or Attorney Representing the Applicant in Connection with the Application for a License to Traffic in Alcohol at the Establishment Identified in this Notice

26. Representative/Attorney's Full Name: Michael Paleudis

25. Business Telephone Number of Building Owner: (212) 677-8603

27. Representative/Attorney's Street Address: 100 Canal Pointe Boulevard, Suite 210

28. City, Town or Village: Princeton

State: NJ

Zip Code: 08540

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29. Business Telephone Number of Representative/Attorney: (212) 835-6768

30. Business E-mail Address of Representative/Attorney: mjp@paleudislaw.com

I am the applicant or licensee holder or 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.

31. Printed Principal Name: Eugene Lennon Title: President

Principal Signature: