O		OFFICE	USE ONL
O Origin	al 🔿	Amended	Dete

Amended

Date



Standardized NOTICE FORM for Providing 30-Day Advance Notice to a Local Municipality or Community Board

					Dodiu	all b
1. Date Notice was Se		August 21, 2018	1a. Deliver	ad bu		*
2. Select the type of A	Application that will be fil	and south at	-u. Delives	εα ργ;	CERTIFIED MAIL	
New Applica	tion O Renewal O	ed with the Authority fo	or an On-Premi	ises Alco	CERTIFIED MAIL oholic Beverage License:	
For New application applicatio	ants, answer each questi plicants, answer all ques pplicants, attach a comp hange applicants, attach plicants, attach a statem e applicants, attach a sta peration Change applica	on below using all infortions lete written description a list of the current and tement detailing your cants, although not required to the Clerk of the	te Change C mation known h and diagrams d proposed col proposed add proposed add current license ired, if you cho he Following	Remove to date to date to depicti rporate tresses we type and pose to see to se	eval O Class Change O Method of Operation	
	,	Manhattan Commu	nity Board 3			
Applicant/Licensee Ir						- a
4. Licensee Serial Numb	er (if applicable): N/A					
Applicant or Licensee		LANCEY LLC		Expirat	tion Date (if applicable): N/A	
6. Trade Name (if any):		CANCEY LLC				
7. Street Address of Estal	(Pending)					
	oilshment: 115 DEL	ANCEY STREET				
8. City, Town or Village:	NEW YORK, NEW	YORK 10002				
9. Business Telephone Nu	mber of Applicant/Licen	see: PENDDIG		, NY	Zip Code: 10002	
10. Business E-mail of App	diam of the					
11. Type(s) of alcohol sold	Order b	a@helbraunlevey.com	m.			
12. Extent of Food Service:		Beer & Cider O W	/ine, Beer & Cid	der (Liquor, Wine, Beer & Cider	
O Full food menu; fu	ll kitchen run by a chef o	manul. A.				
13. Type of Establishment:	beer hall	r cook Menu mee	ets legal minim	um food	d availability requirements; food prep area at m	inimum
14. Method of Operation: (check all that apply)	☐ Patron Dancing ☐ Video/Arcade Game	tails i.e., rock bands, ac	Exotic D	c.): acc	Recorded Music	
(check all that apply)		Rec'd By Co Other (specify): N/A			nds Freestanding Covered Structure	
OF Essey	serving Market	1 Food !	NG 24 20 ex. 74.	118	basert-exp	

opla-rev03292018 OFFICE USE ONLY Original Amended Date 16. List the floor(s) of the building that the establishment is located on: BASEMENT 17. List the room number(s) the establishment is located in within the building, if appropriate: N/A18. Is the premises located within 500 feet of three or more on-premises liquor establishments? O Yes No 19. Will the license holder or a manager be physically present within the establishment during all hours of operation? O No 20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee: N/A Name Serial Number 21. Does the applicant or licensee own the building in which the establishment is located? Yes (if YES, SKIP 23-26) Owner of the Building in Which the Licensed Establishment is Located 22. Building Owner's Full Name: 23. Building Owner's Street Address: 24. City, Town or Village: State: Zip Code: 25. Business Telephone Number of Building Owner: 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: JOSEPH LEVEY C/O HELBRAUN & LEVEY LLP 27. Representative/Attorney's Street Address: 110 WILLIAM STREET, SUITE 1410 28. City, Town or Village: NEW YORK State: NY Zip Code: 10038 29. Business Telephone Number of Representative/Attorney: 212-219-1193 30. Business E-mail Address of Representative/Attorney: c/o dana@helbraunlevey.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: JOSEPH LEVEY ATTORNEY

Principal Signature: