Original O Amended Date _

to a Local Municipality or Community Board DEC 0 4
1. Date Notice was Sent: 11 80/8018 1a. Delivered by: Certified moul
2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:
New Application Corporate Change Removal Class Change Method of Operation Change
For New applicants, answer each question below using all information known to date
For Renewal 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 Removal 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: Cammon Hy Board 3
Applicant/Licensee Information:
4. Licensee Serial Number (if applicable): Expiration Date (if applicable):
5. Applicant or Licensee Name: YING MA CDRP
6. Trade Name (if any):
7. Street Address of Establishment: 20 PELL ST.
B. City, Town or Village: NEW YORK IN TO CODE: 10013
9. Business Telephone Number of Applicant/Licensee: 212-406-2746
10. Business E-mail of Applicant/Licensee: 9ida amy & YAHOO. 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: RESTAUCHNT
14. Method of Operation: Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke
(check all that apply) Live Music (give details i.e., rock bands, acoustic, jazz, etc.):
Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment
☐ Video/Arcade Games ☐ Third Party Promoters ☐ Security Personnel
Other (specify):

Other (specify): Sidewalk Cafe

☐ Garden/Grounds

15. Licensed Outdoor Area: None (check all that apply)

Patio or Deck

Rooftop

☐ Freestanding Covered Structure

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6. List the floor(s) of the building t	hat the establishment is located on:	GROUND TLOOK	5
7. Ust the room number(s) the est	ablishment is located in within the build	ing, if appropriate:	
i. Is the premises located within 5	00 feet of three or more on-premises liq	uor establishments? Gres O	No WB
	ager be physically present within the est		
O. If this is a transfer application (a	n existing licensed business is being pur	chased) provide the name and serial nur	noer of the licensee:
	Name	Ser	fal Number
1. Does the applicant or licensee of	own the building in which the establishm	ent is located? Oyes (if YES, SKIP 2:	3-26) (No
	Owner of the Building in Which	the Licensed Establishment is Locat	ed
22. Building Owner's Full Name:	HONG KONG SEATOOD K	ING INC.	
23. Building Owner's Street Addres	20-32 PELL SIR	SET.	
24. City, Town or Village:	HEN YORK	State: NY	Zip Code: 10 c13
Par derit sages as an anales			
Z5. Business Telephone Number of		5969 Inting the Applicant in Connection v	with the
25. Business Telephone Number of R Applica 26. Representative/Attorney's Full	Representative or Attorney Representation for a License to Traffic in Alcohome: Frank W. Palillo	nting the Applicant in Connection who at the Establishment Identified	with the
25. Business Telephone Number of Applica 26. Representative/Attorney's Full 27. Representative/Attorney's Stre	tepresentative or Attorney Representation for a License to Traffic in Alcoholment Frank W. Palillo	nting the Applicant in Connection value at the Establishment Identified at, Suite 3504	vith the in this Notice
25. Business Telephone Number of Applica 26. Representative/Attorney's Full 27. Representative/Attorney's Stre 28. City, Town or Village: New	Representative or Attorney Representation for a License to Traffic in Alcohole Name: Frank W. Palillo Set Address: Sixty Broad Street	nting the Applicant in Connection whol at the Establishment Identified at, Suite 3504 State: New York	with the
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25. Business Telephone Number of Applica 26. Representative/Attorney's Full 27. Representative/Attorney's Stre 28. City, Town or Village: New 29. Business Telephone Number of 30. Business E-mail Address of Representations is the Authority wound, and that	Representative or Attorney Representation for a License to Traffic in Alcohole Name: Frank W. Palillo Set Address: Sixty Broad Street Address: Sixty Broad Street Address: Frank W. Palillo Set Address: Frank W. Palill	riting the Applicant In Connection whol at the Establishment Identified at, Suite 3504 State: New York 227-1640 2gmail.com of the legal entity that holds or is appresentations made in submitted on that representations made in this disapproval of the application or re-	zip Code: 10004 zip Code: 10004 pplying for the license. locuments relied upon by a form will also be relied vocation of the license.

Page 2 of 2