

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

1. Date Notice was Sent:  1a. Delivered by:

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:

- New Application
- Renewal
- Alteration
- 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:

### Applicant/Licensee Information:

4. Licensee Serial Number (if applicable):  Expiration Date (if applicable):

5. Applicant or Licensee Name:

6. Trade Name (if any):

7. Street Address of Establishment:

8. City, Town or Village:  , NY Zip Code:

9. Business Telephone Number of Applicant/Licensee:

10. Business E-mail of Applicant/Licensee:

11. Type(s) of alcohol sold or to be sold:  Beer & Cider  Wine, Beer & Cider  Liquor, Wine, Beer & Cider

12. Extent of Food Service:

- 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:

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.):

Patron Dancing  Employee Dancing  Exotic Dancing  Topless Entertainment

Video/Arcade Games  Third Party Promoters  Security Personnel

Other (specify):

Rec'd By Community Board 3, Man

15. Licensed Outdoor Area: (check all that apply)

None  Patio or Deck  Rooftop  Garden/Grounds  Freestanding Covered Structure

Sidewalk Cafe  Other (specify):

OFFICE USE ONLY

Original     Amended    Date \_\_\_\_\_

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16. List the floor(s) of the building that the establishment is located on: STREET LEVEL

17. List the room number(s) the establishment is located in within the building, if appropriate: \_\_\_\_\_

18. Is the premises located within 500 feet of three or more on-premises liquor establishments?     Yes     No

19. Will the license holder or a manager be physically present within the establishment during all hours of operation?     Yes     No

20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:  
Name: \_\_\_\_\_ Serial Number: \_\_\_\_\_

21. Does the applicant or licensee own the building in which the establishment is located?     Yes (if YES, SKIP 23-26)     No

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

22. Building Owner's Full Name: YGL REALTY CORP.

23. Building Owner's Street Address: 41 ESSEX STREET

24. City, Town or Village: NEW YORK    State: NY    Zip Code: 10002

25. Business Telephone Number of Building Owner: (718) 915-3699

**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: DJIE ZI YING, STEFANIE

27. Representative/Attorney's Street Address: 251 16 STREET, 4A

28. City, Town or Village: Brooklyn    State: NY    Zip Code: 11215

29. Business Telephone Number of Representative/Attorney: (917) 417-8670

30. Business E-mail Address of Representative/Attorney: STEFANIEDJIE@GMAIL.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: DJIE ZI YING, STEFANIE    Title: CHIEF EXECUTIVE MEMBER

Principal Signature: 