

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



1. Date Notice was Sent: 8/20/2019 1a. Delivered by: Certified Mail Return Receipt Requested

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: CB 3

Applicant/Licensee Information:

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

5. Applicant or Licensee Name: Omar Walters

6. Trade Name (if any): Omar's Kitchen

7. Street Address of Establishment: 29 Clinton Street

8. City, Town or Village: New York, NY Zip Code: 10002

9. Business Telephone Number of Applicant/Licensee: 914-619-0618

10. Business E-mail of Applicant/Licensee: omarskitchenusa@gmail.com

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: Restaurant (full kitchen and full menu required)

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 Bo.

15. Licensed Outdoor Area: (check all that apply)
 None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure
 Sidewalk Cafe Other (specify): _____

AUG 22 2019

