	OFFICE	USE ONLY	
Original	Amended	Date	

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

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1. Date Notice was Sent: 02	/03/2020 1a. Delivered by: Certified Mail Return Receipt Requested				
2. Select the type of Applicatio	on 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 Renewal applicants, For Alteration applicant For Corporate Change a For Removal applicants, For Class Change applica	swer each question below using all information known to date , answer all questions is, attach a complete written description and diagrams depicting the proposed alteration(s) applicants, attach a list of the current and proposed corporate principals , attach a statement of your current and proposed addresses with the reason(s) for the relocation ants, attach a statement detailing your current license type and your proposed license type on Change applicants, although not required, if you choose to submit, attach an explanation detailing those changes				
This 30-Day Advance Notice	e is Being Provided to the Clerk of the Following Local Municipality or Community Board:				
3. Name of Municipality or Cor	MANHATTAN COMMUNITY BOARD 3				
Applicant/Licensee Informa	ation:				
4. Licensee Serial Number (if a	pplicable): Expiration Date (if applicable):				
5. Applicant or Licensee Name:	9TH STREET UNDERGROUND LLC LLC				
6. Trade Name (if any):					
7. Street Address of Establishm	nent: 141 CHRYSTIE STREET				
8. City, Town or Village: NEV	W YORK , NY Zip Code: 10003				
9. Business Telephone Number	of Applicant/Licensee: (412) 401–9105				
10. Business E-mail of Applican	t/Licensee: STEPHEN@THEDROSTE.COM				
11. Type(s) of alcohol sold or to	be sold:				
12. Extent of Food Service:					
Full food menu; full kito	chen run by a chef or cook O Menu meets legal minimum food availability requirements; food prep area at minimum				
13. Type of Establishment: Ba	ar/Tavern				
(check all that apply)	Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke				
	Live Music (give details i.e., rock bands, acoustic, jazz, etc.):				
<u> </u>	Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment				
	☐ Video/Arcade Games ☐ Third Party Promoters ☐ Security Personnel				
	Other (specify):				
5. Licensed Outdoor Area: (check all that apply)	None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure				
	Sidewalk Cafe Other (specify):				
	0 2020				

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	Origin	inal O Amend	PFFICE USE ONLY ed Date		T ** 🐠
- The second	P)		2010		
16. List the floor(s) of the bu	ullding that the establis	thomas falling t	BASEMENT/GRO		
12 12	e catabila	intiferit is located on	BASEMENT/GRO	UND FLOO	RIZND ELIPOOFT
17. List the room number(s)	the establishment is io	cated in within the	building, if appropriate		TOUR TEMOUP I
18. Is the premises located w	vithin 500 feet of three	0.00	i. a sypromici [M/	A	
10 1000 -1 11	in the same	or more on-premis	es liquor establishments?	O Yes O	No
19. Will the license holder or	a manager be physical	ly present within th	e establishment during all ho	NITE of amount 2	
20. If this is a transfer applica	Ition (an existing license	de leurine de la company	14	or obstation t	O Yes O No
20. If this is a transfer applica	SALES INCOMES	20. Ousiness is Deing	purchased) provide the nam	e and serial numb	er of the licensee;
1/.	Name				
21. Does the applicant or licer	nsee own the building i	n which the establish			Number
		The establis	oment is located? OYes	(If YES, SKIP 23-26	ONO
,	Ourse of al.	- Ph. 18 to			
23.2.44		a Building in Whic	h the Licensed Establishn	nent is Located	
22. Building Owner's Full Name		REALTY LLC			
23. Building Owner's Street Ad		t STREET			
74.61	2010 013	ISTREET			
24. City, Town or Vinage: BR	ROOKLYN		State: NY		7 3m C-4- [
25. Business Telephone Numbe	of Building Owner:				Zip Code: 11204
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, 4,4 °		ū.			
4. Arrest	Representative or i	Attorney Represe	nting the Applicant in Cor		
ubbi		to Traffic in Alcol	nting the Applicant in Cor hol at the Establishment I	dentified in this	ne i Notice
26. Representative/Automey's Fu		L. WEISS			
27. Representative/httorney's St	beta and the second stands				
**		EAST 59TH S	STREET - 23RD FLO	OOR	
28. City, Town or Village: NEV	V YORK		State: NY		
29. Business Telephone Number o	of Representative Asses	DECEMBER OF THE PROPERTY OF TH			Zip Code: 10022
			21-0828		
O. Business E-mail Address of Be-	presentative/Attorney;	SLWEISSA	TTORNEY@AOL.C	ONA.	
		The section of the se		OlM	
I am the applica	ant or licensee holide	er or a principal se	43-1-1		
Representations in	n this form are in con	formity with repr	the legal entity that holds esentations made in subm hat representations made	or is applying fo	or the license.
WE RULIDITY WE	100 Orantina sh _ #		11 20 011 20 011	III. LED OOLIMEN	the continued residence to
about and that	loise representations	s may result in disc	hat representations made approval of the application	n of fevoration (l also be relied
iny signatui	re; I affirm - under Pr	enalty of Penalty	41		or the nicense.
. 1			that the representations	made in this for	m are true.
SI	EPHEN PIRSC	HE \	Title: MEME	BER	
:*	1		11		
Principal Signature:	17		///	.4.40	
		PW	d	13/2026	