	OFFICE	USE ONLY	
) Original	Amended	Date	

49

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

					4
1. Date Notice was Sent: 02/2	25/2020	1a. Delivered	by: Ove	ernight Mail	with Tracking Number
2. Select the type of Application	that will be filed with the Authority	/ for an On-Premise	s Alcoholic	Beverage Lice	ense:
New Application	tenewal 🔘 Alteration 🔘 Corpo	orate Change 🔘 F	Removal (	Class Chan	ge Method of Operation Change
For <b>Renewal</b> applicants, a For <b>Alteration</b> applicants, For <b>Corporate Change</b> app For <b>Removal</b> applicants, a For <b>Class Change</b> applican	attach a complete written descript plicants, attach a list of the current ttach a statement of your current a its, attach a statement detailing you	tion and diagrams of and proposed corp and proposed addrour ur current license to	depicting the porate prince esses with to ype and you	cipals the reason(s) ur proposed li	for the relocation
This 30-Day Advance Notice	is Being Provided to the Clerk o	of the Following I	Local Mun	icipality or (	Community Board:
3. Name of Municipality or Comr	munity Board: Manhattan	Community	/ Board	No. 3	
Applicant/Licensee Informati	ion:			-	-
4. Licensee Serial Number (if app	ılicable):		Expiration	Date (if appli	cable):
5. Applicant or Licensee Name:	Shiawase Factory LTD				
6. Trade Name (if any): The I	Izakaya				
7. Street Address of Establishmer	nt: 215 East 4th Street				
8. City, Town or Village: New	York		, NY	Zip Code:	10009
9. Business Telephone Number o	f Applicant/Licensee: (646) 524	4-5251			
10. Business E-mail of Applicant/l	Licensee: theizakayanyc@	gmail.com			
11. Type(s) of alcohol sold or to b	pe sold: Beer & Cider	Wine, Beer & C	Cider 🔘	Liquor, Wine	e, Beer & Cider
12. Extent of Food Service:					
Full food menu; full kitch	en run by a chef or cook 🏻 🔘 Men	nu meets legal mini	mum food	availability re	quirements; food prep area at minimum
13. Type of Establishment: Res	staurant (full kitchen and	full menu requ	uired)		
(check all that apply)	Seasonal Establishment Juki Live Music (give details i.e., rock ba Patron Dancing Employee Di Video/Arcade Games Third Other (specify):	ands, acoustic, jazz,	etc.):	Recorded N  Toples	s Entertainment
(check all that apply)	None Patio or Deck I I		rden/Groui	nds 🔲 Fre	eestanding Covered Structure

22. Building Owner's Full Name: Cactus 4  23. Building Owner's Street Address: 66 Ma  24. City, Town or Village: Tuckahoe  25. Business Telephone Number of Building Own  Representative Application for a Lie  26. Representative/Attorney's Full Name: Ro	s located in within the building ree or more on-premises liquo ically present within the establensed business is being purchating in which the establishment of the Building in Which the LLC arbledale Road	g, if appropriate:  or establishments?	© No ion?
17. List the room number(s) the establishment is  18. Is the premises located within 500 feet of the  19. Will the license holder or a manager be phys  20. If this is a transfer application (an existing lice  Name  21. Does the applicant or licensee own the buildi  Owner of  22. Building Owner's Full Name: Cactus 4  23. Building Owner's Street Address: 66 Ma  24. City, Town or Village: Tuckahoe  25. Business Telephone Number of Building Own  Representative  Application for a Licensee  26. Representative/Attorney's Full Name: Ro  27. Representative/Attorney's Street Address:  28. City, Town or Village: New York  29. Business Telephone Number of Representative  29. Business Telephone Number of Representative	s located in within the building ree or more on-premises liquo ically present within the establensed business is being purchating in which the establishment of the Building in Which the LLC arbledale Road	g, if appropriate:  or establishments?	© No ion?
19. Will the license holder or a manager be phys 20. If this is a transfer application (an existing lice Name 21. Does the applicant or licensee own the buildi  Owner of 22. Building Owner's Full Name: Cactus 4 23. Building Owner's Street Address: 66 Ma 24. City, Town or Village: Tuckahoe 25. Business Telephone Number of Building Own  Representative Application for a Licensee 26. Representative/Attorney's Full Name: Ro 27. Representative/Attorney's Street Address: 28. City, Town or Village: New York 29. Business Telephone Number of Representative 29. Business Telephone Number of Representative	ensed business is being purchating in which the establishment of the Building in Which the LLC arbledale Road	olishment during all hours of operat ased) provide the name and serial r S it is located?	ion?
Name  21. Does the applicant or licensee own the building Owner of Cactus 4  22. Building Owner's Full Name: Cactus 4  23. Building Owner's Street Address: 66 Ma  24. City, Town or Village: Tuckahoe  25. Business Telephone Number of Building Own  Representative Application for a Lie  26. Representative/Attorney's Full Name: Ro  27. Representative/Attorney's Street Address:  28. City, Town or Village: New York  29. Business Telephone Number of Representative	ensed business is being purchal ing in which the establishment f the Building in Which the LLC arbledale Road her: (914) 961-0200	sed) provide the name and serial n  S  It is located?	erial Number  23-26)   No  No
Owner of Cactus 4  23. Building Owner's Full Name: Cactus 4  23. Building Owner's Street Address: 66 Ma  24. City, Town or Village: Tuckahoe  25. Business Telephone Number of Building Own  Representative Application for a Lie  26. Representative/Attorney's Full Name: Ro  27. Representative/Attorney's Street Address: Repres	ing in which the establishment  f the Building in Which the  LLC  arbledale Road  ner: (914) 961-0200	S  It is located?	erial Number  23-26)   No  nated
Owner of Cactus 4  23. Building Owner's Full Name: Cactus 4  24. City, Town or Village: Tuckahoe  25. Business Telephone Number of Building Owner's Application for a Lie  26. Representative/Attorney's Full Name: Ro  27. Representative/Attorney's Street Address:  28. City, Town or Village: New York  29. Business Telephone Number of Representative  29. Business Telephone Number of Representative	ing in which the establishment  f the Building in Which the  LLC  arbledale Road  ner: (914) 961-0200	S  It is located?	erial Number 23-26)
Owner of Cactus 4  22. Building Owner's Full Name: Cactus 4  23. Building Owner's Street Address: 66 Ma  24. City, Town or Village: Tuckahoe  25. Business Telephone Number of Building Own  Representative Application for a Lie  26. Representative/Attorney's Full Name: Ro  27. Representative/Attorney's Street Address:  28. City, Town or Village: New York  29. Business Telephone Number of Representative	ing in which the establishment  f the Building in Which the  LLC  arbledale Road  ner: (914) 961-0200	t is located?	23-26) <b>©</b> No
22. Building Owner's Full Name: Cactus 4 23. Building Owner's Street Address: 66 Ma 24. City, Town or Village: Tuckahoe 25. Business Telephone Number of Building Own  Representative Application for a Lie 26. Representative/Attorney's Full Name: Ro 27. Representative/Attorney's Street Address: 28. City, Town or Village: New York 29. Business Telephone Number of Representative	LLC arbledale Road her: (914) 961-0200		
23. Building Owner's Street Address: 66 Ma 24. City, Town or Village: Tuckahoe 25. Business Telephone Number of Building Own  Representative Application for a Lie 26. Representative/Attorney's Full Name: Ro 27. Representative/Attorney's Street Address: 28. City, Town or Village: New York 29. Business Telephone Number of Representative	arbledale Road ner: (914) 961-0200	State: NY	Zip Code: 10707
Representative Attorney's Full Name: Roz. Representative/Attorney's Street Address: Representative/Attorney's Representative/Attorney's Representative/Attorney's Representative/Attorney's Representa	ner: (914) 961-0200	State: NY	Zip Code: 10707
Representative Application for a Lie 26. Representative/Attorney's Full Name: Ro 27. Representative/Attorney's Street Address: Representative/Attorney's Representat		State: NY	Zip Code: 10707
Representative Application for a Lie Application for a Lie 26. Representative/Attorney's Full Name: Ro 27. Representative/Attorney's Street Address: Representative/Attorney's Street Address: Representative York Representative Street New York			
7. Representative/Attorney's Street Address:  8. City, Town or Village: New York  9. Business Telephone Number of Representation	cense to Traffic in Alcohol a	ng the Applicant in Connection at the Establishment Identified	in this Notice
8. City, Town or Village: New York  9. Business Telephone Number of Representation	X.	esetsky and Bookman,	P.C.
9. Business Telephone Number of Representation	325 Broadway - Suit		
		State: NY	Zip Code: 10007
A Rusiness F-mail Address of D	ve/Attorney: (212) 513	3-1988	
A Dusiness E-mail Address of Representative/A	ttorney: rbookman@p	ob.law	
Representations in this form a the Authority when granting upon, and that false represe	are in conformity with repre the license. Lunderstand the entations may result in disa	the legal entity that holds or is apesentations made in submitted dhat representations made in this approval of the application or revitations made.	ocuments relied upon by form will also be relied ocation of the license.
1. Printed Principal Name: Yunal	under Penalty of Perjury -		=()

Principal Signature: