opla-rev 01/22/16 OFFICE USE ONLY 49 Original Original Amended Date		
Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a		
Corportunity Authority Local Municipality or Community Board		
(Page 1 of 2 of Form)		
1. Date Notice Was Sent: 12/11/2020 1a. Delivered by: Certified Mail		
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		
For New applicants, answer each question below using all information known to date. For Renewal applicants, set forth your approved Method of Operation only. 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.		
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: MANHATTAN COMMUNITY BOARD 3		
Applicant/Licensee Information		
4. License Serial Number, if Applicable: Pending Expiration Date, if Applicable: N/A		
5. Applicant or Licensee Name: PIZZAIOLO NAPOLETANO, LLC		
6. Trade Name (if any): UNA PIZZA NAPOLETANA		
7. Street Address of Establishment: 175 ORCHARD STREET		
8. City, Town or Village: NEW YORK ,NY Zip Code : 10002		
9. Business Telephone Number of Applicant/Licensee: Pending		
10. Business Fax Number of Applicant/Licensee: N/A		
11. Business E-mail of Applicant/Licensee: C/O HEATHER@HELBRAUNLEVEY.COM		
12. Type(s) of Alcohol sold or to be sold: 🛛 🗌 Beer & Cider 📄 Wine, Beer & Cider 🔲 Liquor, Wine, Beer & Cider		
13. Extent of Food Service: Full food menu; Full Kitchen run by a chef or cook Food prep area at minimum		
14. Type of Establishment: RESTAURANT		
15. 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.): N/A Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment Video/Arcade Games Third Party Promoters Security Personnel Other (specify): N/A		
16. Licensed Outdoor Area: (Check all that apply) None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure Sidewalk Cafe Other (specify): N/A		

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	OTICE FORM for Providing <u>30-Day Advanced Notice</u> to a Local Municipality or Community Board (Page 2 of 2 of Form)	
17. List the floor(s) of the building that the establishment is located	d on: GROUND FLOOR	
18. List the room number(s) the establishment is located in within building, if appropriate:	the N/A	
19. Is the premises located within 500 feet of three or more on-pre	emises liquor establishments?	
20. Will the license holder or a manager be physically present with	in the establishment during all hours of operation? OYes ONo	
21. If this is a transfer application (an existing licensed business is h	being purchased) provide the name and serial number of the licensee.	
N/A		
22. Does the applicant or licensee own the building in which the es	stablishment is located? 🔿 Yes (If Yes SKIP 23-26) 💿 No	
	he Licensed Establishment is Located	
23. Building Owner's Full Name: SAS MANAGEMENT		
24. Building Owner's Street Address: 175 ORCHARD STREE	T	
25. City, Town or Village: NEW YORK	State: NY Zip Code :	
26. Business Telephone Number of Building Owner: 917 335 4979		
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		
27. Representative/Attorney's Full Name: JOSEPH LEVEY		
28. Street Address: 110 WILLIAM STREET, SUITE 1410)	
29. City, Town or Village: NEW YORK	State: NY Zip Code : 10038	
30. Business Telephone Number of Representative/Attorney: 212	-219-1193	
31. Business Email Address : C/O HEATHER@HELBRAUNLEV	EY.COM	
in this form are in conformity with representations made granting the license. I understand that representations made i may result in disapproval of the ap	egal entity that holds or is applying for the license. Representations in submitted documents relied upon by the Authority when in this form will also be relied upon, and that false representations pplication or revocation of the license. y - that the representations made in this form are true.	
32. Printed Name: JOSEPH LEVEY	Title ATTORNEY	
Signature: X		
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HELBRAUN || LEVEY

December 11, 2020

Ms. Susan Stetzer District Manager Manhattan Community Board No. 3 59 East 4th Street New York, NY 10003

> RE: Pizzaiolo Napoletano, LLC Una Pizza Napoletana 175 Orchard Street New York, NY 10002

To Whom It May Concern:

I am writing to you on behalf of my client, 7 Washington Lane Corp, located at the address above. They will be submitting a new application to the NY State Liquor Authority for the above On Premises liquor license.

As a note, this is a new entity that is owned by part of the same individuals who previously operated in the space as Una Pizza Napoletana. The overall name, concept, and method of operation is not changing. The previous business had a beer and wine license, and this is an application for full liquor.

As you are aware, part of the licensing process requires that the local Community Board be notified to be given an opportunity to comment on the application. Please consider this letter notification of our intent to apply to the New York State Liquor Authority for the above referenced license.

Please forward any meeting <u>Heather@helbraunlevey.com</u>. If you need any further information, please contact me at 212-219-1193.

Sincerely, Joseph R. Levey

helbraunlevey.com 110 William Street, Suite 1410 New York, NY 10038 212-219-1193