OFFICE USE ONLY					
Original	○ Amended	Date		-	

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

1. Date Notice was Sent: 02/22/2021					
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 Oclass Change Method of Operation Change					
For <b>New</b> applicants, answer each question below using all information known to date For <b>Renewal</b> applicants, answer all questions For <b>Alteration</b> applicants, attach a complete written description and diagrams depicting the proposed alteration(s) For <b>Corporate Change</b> applicants, attach a list of the current and proposed corporate principals For <b>Removal</b> applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation For <b>Class Change</b> applicants, attach a statement detailing your current license type and your proposed license type For <b>Method of Operation Change</b> applicants, although not required, if you choose to submit, attach an explanation detailing those changes					
Please include all documents as noted above. Failure to do so may result in disapproval of the application.					
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. Licensee Serial Number (if applicable): 1171915 Expiration Date (if applicable): 12/31/2022					
5. Applicant or Licensee Name: 7th Street Sushi Park Inc					
6. Trade Name (if any): Klimat					
7. Street Address of Establishment: 77 East 7th Street					
8. City, Town or Village: New York , NY Zip Code: 10003					
9. Business Telephone Number of Applicant/Licensee: (917) 214-0589					
10. Business E-mail of Applicant/Licensee: klimatlounge@gmail.com					
11. Type(s) of alcohol sold or to be sold:   Beer & Cider   Wine, Beer & Cider   Liquor, Wine, Beer & Cider					
11. Type(s) of alcohol sold of to be sold.					
12. Extent of Food Service:					
12. Extent of Food Service:					
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 food availability food food food food food food food foo					
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)					
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 food availability food food food food food food food foo					
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16. List the floor(s) of the building that	t the establishment is located on: Grour	nd floor and basement			
17. List the room number(s) the establ	lishment is located in within the building, if	appropriate: N/A			
18. Is the premises located within 500	feet of three or more on-premises liquor es	stablishments?			
19. Will the license holder or a manage	er be physically present within the establish	ment during all hours of operation?	<b>⊙</b> Yes <b>○</b> No		
20. If this is a transfer application (an e	existing licensed business is being purchase	d) provide the name and serial number	of the licensee:		
	Name	Serial Nu	mber		
21. Does the applicant or licensee own	n the building in which the establishment is	located?	No		
	Owner of the Building in Which the Li	censed Establishment is Located	3		
22. Building Owner's Full Name:					
23. Building Owner's Street Address:					
24. City, Town or Village:		State:	Zip Code:		
25. Business Telephone Number of Bui	ilding Owner:				
	resentative or Attorney Representing to on for a License to Traffic in Alcohol at me: Kimberly A. Summers				
27. Representative/Attorney's Street A	Address: 555 Fifth Avenue, 14th	ı Floor			
28. City, Town or Village: New Yo	ork	State: NY	Zip Code: 10017		
29. Business Telephone Number of Representative/Attorney: (646) 383-4607					
30. Business E-mail Address of Representative/Attorney: Kimberly@DS-LawOffices.com					
Representations in th the Authority when upon, and that fals	or licensee holder or a principal of the his form are in conformity with represen granting the license. I understand that se representations may result in disapp I affirm - under <b>Penalty of Perjury</b> - tha	ntations made in submitted docume representations made in this form r roval of the application or revocatio	ents relied upon by will also be relied on of the license.		
31. Printed Principal Name: Kimk	berly A. Summers	Title: Attorney for App	olicant		
Principal Signature:	mberly & Summer	8			

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555 5<sup>TH</sup> AVENUE, 14<sup>TH</sup> FLOOR NEW YORK, NEW YORK 10017 TEL: (646) 383-4607

FAX: (646) 606-2388

February 22, 2021

Manhattan Community Board 3 59 East 4th Street New York, NY 10003

RE:

30-Day Advance Notice- Class Change Application

Applicant: 7th Street Sushi Park Inc

Premises: 77 East 7th Street, New York, NY 10003

Serial #: 1171915

Dear Board Members:

I am the attorney for 7th Street Sushi Park Inc d/b/a Klimat. Enclosed is my client's 30-Day Advance Notice of its Application to the State Liquor Authority for an upgrade to a full liquor license.

Should you have any questions or concerns regarding the foregoing, please do not hesitate to call.

Cordially,

DIPASQUALE & SUMMERS, LLP

Kimberly & Summers

Kimberly A. Summers

kimberly@ds-lawoffices.com