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



| 1. Date Notice was Sent: 07/28/2021 1. Determines Alcoholic Reverage License: 2. Select the type of Application that will be filed with the Authority for an Cn-Premises Alcoholic Reverage License: (In 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 Removal applicants, answer each question below using all information known to date For Removal applicants, answer each question below using all information known to date For Removal applicants, answer each question below using all information known to date For Removal applicants, answer each question below using all information known to date For Removal applicants, answer each question below using all information For Class Change applicants, attach a statement of the proposed address with the responsibility of Removal applicants, attach a statement of the proposed corporate principals For Removal applicants, attach a statement of vivor urcrent alcosed type For Method of Operation Change publicants, attach a statement of vivor urcrent alcosed type For Method of Operation For Class Change publicants, attach a statement of vivor urcrent alcosed type and your proposed illomes type For Method of Operation For Class Change For Applicants For Removal applicants, attach a statement of vivor urcrent and proposed operates with the responsibility or Community Board: It is 30-Day Advance Notice is Being Provided to the Clerk of the Following Local Municipality or Community Board: MANHATTAN COMMUNITY BOARD 3 Applicant/Licensee Information: Licensee Serial Number (if applicable): | | | | | | |
|--|---|---|--|---|--|--|
| 2. Select the type of Application that will be filed with the Authomy for an On-Premises Alcoholic Beverage Licenses: O New Application O Renewal O Alteration O Corporate Change O Removal O Class Change O Method of Operation Change For New applicants, answer all questions 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 Operate Change applicants, attach a last of the current and proposed corporate principals For Memoral applicants, attach a statement of your current land proposed discreases 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 changes so to submit, attach an explanation detailing those changes Please include all documents as noted above. Faiture 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: This 30-Day Advance Notice is Being Provided to the Clerk of the Following Local Municipality or Community Board: A papilicant/Licensee Information: Expiration Date (if applicable): S Applicant or Licensee Name: EXPINATION OF VILLO Expiration Date (if applicable): S Applicant or Licensee Name: EXPINATION OF A Provided Applicant/Licensee: File (if applicable): S City, Town or Village: New York S City, Town or Village: New York S City, Town or Village: S | 1. Date Notice was Sent: | 07/28/2021 | 1a Delivered by | Control Maria Day | | |
| O New Applicants O Renewal O Alteration O Corporate Change O Removal O Class Change O 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, answer all questions For Alteration applicants, attach as complete written description and diagrams depicting the proposed alteration(s) For Chargerate Change applicants, attach a statement of your current and proposed composed proposed proposed from the reason(s) for the relocation For Class Change applicants, attach a statement of your current and proposed compose to solumi, attach an explanation detailing those changes For Class Change applicants, attach as statement detailing work control of the proposed alterations For Class Change applicants, attach as tatement of your current license type and your proposed linemse type For Method of Operation Change applicants, although not required, if you choose to solumi, 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: Applicant/Licensee Information: 4. Licensee Serial Number (if applicable): S. Applicant or Licensee Name: DICKY FUN FACTORY LLC 6. Trade Name (if any): KINKYS DESSERT BAR 7. Street Address of Establishment: [81 ORCHARD STREET NORTH STORE 8. City, Town or Village: NEW YORK 9. Business Telephone Number of Applicant/Licensee: O Full food menu; full kitchen run by a chef or cook. O Beer & Cider O Wine, Beer & Cider O Liquor, Wine, Beer & Cider Frestanding Covered Music Patron Dancing Employee Dancing Employee Dancing Frestanding Covered Structure O Cher (specify): Licensee Cutdoor Area: Check all that apply): None Patio or Deek Rooftop Patron Dancing Freestanding Covered Structure | | | | | | |
| For New applicants, answer each question below using all information known to date For Remedal applicants, artach a lact complete written description and diagrams depicting the proposed alteration(s) For Alteration applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation For Removal applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation For Removal applicants, attach a statement default and proposed addresses with the reason(s) for the relocation For Class Change applicants, attach a statement defaulting your current license type and your proposed license type For Method of Operation Change applicants, although not required, if you choose to submin, attach an explanation detailing chose 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: A part of Municipality or Community Board: MANHATTAN COMMUNITY BOARD 3 Applicant/Licensee Information: (a) Licensee Serial Number (if applicable): [Bupiration Date (if ap | New Application | Pennyal O Alternative Oc | or an On-Premises Alco | pholic Beverage License: | | |
| For Alteredual applicants, araswer all questions. For Alterdan applicants, attach a complete written description and diagrams depicting the proposed alteration(s) For Corporate Change applicants, attach a last of the current and proposed consorate principals For Removal 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 englination 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: 1. Name of Municipality or Community Board: MANHATTAN COMMUNITY BOARD 3 Applicant/Licensee Information: 4. Licensee Serial Number (if applicable): Expiration Date (if applicable): Expiration Date (if applicable): S. Applicant or Licensee Name: DICKY FUN FACTORY LLC 6. Trade Name (if any): KINKYS DESSERT BAR 7. Street Address of Establishment: 181 ORCHARD STREET NORTH STORE 6. City, Town or Village: NEW YORK 9. Business Telephone Number of Applicant/Licensee: Buffysnyo@gmail.com 11. Type(s) of alcohol solid or to be sold: 9 Beer & Cider 9 Wine, Beer & Cider 9 Wine, Beer & Cider 10 Juquor, Wine, Beer & Cider 11. Type(s) of alcohol solid or to be sold: 12. Extent of Food Service: 9 Full food menur, full kitchen run by a chef or cook 13. Menu meets legal minimum food availability requirements; food prep area at minimum 14. Licensed Outdoor Area: 15. City Recorded Music 16. City Recorded Music 17. Seasonal Establishment 181 Orchards and provided to the Cook of the Policy Promoters 181 Type(s) of alcohol solid or to be sold: 181 Type(s) of alcohol solid or to be sold: 181 Type(s) of alcohol solid or to be sold: 181 Type(s) of alcohol solid or to be sold: 181 Type(s) of alcohol solid or to be sold: 181 Type(s) of alcohol solid or to be sold: 182 Type of Establis | For New applicant | s, answer each question below using all infor- | te Change Remove | val Class Change Method of Operation Change | | |
| 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): 5. Applicant or Licensee Name: DICKY FUN FACTORY LLC 6. Trade Name (if any): KINKYS DESSERT BAR 7. Street Address of Establishment: 181 ORCHARD STREET NORTH STORE 8. City, Town or Village: NEW YORK 9. Business Telephone Number of Applicant/Licensee: (1917) 915-0674 10. Business E-mail of Applicant/Licensee: (1917) 915-0674 (2017) 915-0674 (3018) Page 10. Disconsee: (2018) Page 2. Cider | For Alteration app For Corporate Cha For Removal applic For Class Change a | cants, answer all questions licants, attach a complete written description nge applicants, attach a list of the current and cants, attach a statement of your current and pplicants, attach a statement detailing your or | n and diagrams depict of proposed corporate of proposed addresses | ing the proposed alteration(s) principals with the reason(s) for the relocation | | |
| Applicant/Licensee Information: 4. Licensee Serial Number (if applicable): | Please in | nclude all documents as noted above. § | ailure to do so may | cosult in disapproval of the application | | |
| Applicant/Licensee Information: 4. Licensee Serial Number (if applicable): | This 30-Day Advance N | lotice is Being Provided to the Clerk of t | the Following Local | Municipality or Community Board- | | |
| Applicant/Licensee Information: 4. Licensee Serial Number (if applicable): | | | | | | |
| 5. Applicant or Licensee Name: DICKY FUN FACTORY LLC 6. Trade Name (if any): KINKYS DESSERT BAR 7. Street Address of Establishment: 181 ORCHARD STREET NORTH STORE 8. City, Town or Village: NEW YORK | Applicant/Licensee Info | | | | | |
| 6. Trade Name (if any): KINKYS DESSERT BAR 7. Street Address of Establishment: 181 ORCHARD STREET NORTH STORE 8. City, Town or Village: NEW YORK | 4. Licensee Serial Number | (if applicable): | Expira | ation Date (if applicable): | | |
| 7. Street Address of Establishment: | 5. Applicant or Licensee N | ame: DICKY FUN FACTORY LLC | | | | |
| 3. City, Town or Village: NEW YORK , NY Zip Code: 10002 9. Business Telephone Number of Applicant/Licensee: (917) 915-0674 10. Business E-mail of Applicant/Licensee: (1917) 915-0674 11. Type(s) of alcohol sold or to be sold: | 6. Trade Name (if any): | KINKYS DESSERT BAR | | | | |
| 3. City, Town or Village: NEW YORK | 7. Street Address of Establ | ishment: 181 ORCHARD STREE | T NORTH STOR | RE. | | |
| Business E-mail of Applicant/Licensee: [917] 915-0674 10. Business E-mail of Applicant/Licensee: [fluffysnyc@gmail.com 11. Type(s) of alcohol sold or to be sold: | 3. City, Town or Village: | | | | | |
| Business E-mail of Applicant/Licensee: | 9. Business Telephone Nur | nber of Applicant/Licensee: (917) 915-0 | | | | |
| 1. Type(s) of alcohol sold or to be sold: | | | | | | |
| 2. Extent of Food Service: O Full food menu; full kitchen run by a chef or cook Menu meets legal minimum food availability requirements; food prep area at minimum 3. Type of Establishment: Bar/Tavern 4. Method of Operation: (check all that apply) 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): Licensed Outdoor Area: (check all that apply) | .1. Type(s) of alcohol sold | | | Liquor, Wine, Beer & Cider | | |
| 3. Type of Establishment: Bar/Tavem 4. Method of Operation: (check all that apply) Seasonal Establishment | 2. Extent of Food Service: | | | | | |
| 3. Type of Establishment: Bar/Tavem 4. Method of Operation: (check all that apply) 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): Licensed Outdoor Area: (check all that apply) | O Full food menu; ful | l kitchen run by a chef or cook | neets legal minimum fi | ood availability requirements; food area area at minimum | | |
| (check all that apply) Live Music (give details i.e., rock bands, acoustic, jazz, etc.): Patron Dancing | 3. Type of Establishment: | Bar/Tavern | | y The blick at minimum | | |
| (check all that apply) Live Music (give details i.e., rock bands, acoustic, jazz, etc.): Patron Dancing | | Seasonal Establishment Juke Bo | X Disc lockey | Donardad Maria | | |
| Patron Dancing | (check all that apply) | Necoude Music | | | | |
| Usideo/Arcade Games ☐ Third Party Promoters ☐ Security Personnel ☐ Other (specify): ☐ ☐ Control | | | | no Parlane Calenthian a 4 | | |
| Other (specify): Licensed Outdoor Area: None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure | | T Viden/Arrade Games T Thirt P | | | | |
| (check all that apply) Garden/Grounds Freestanding Covered Structure | | | , | scoricy i ersonner | | |
| Normal Control of the | . Licensed Outdoor Area: (check all that apply) | ✓ None ☐ Patio or Deck ☐ Roofi | top Garden/Gr | rounds Freestanding Covered Structure | | |
| | | ☐ Sidewalk Cafe ☐ Other (specify): | | | | |

Principal Signature:

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