State Liquor Authority

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: November 18, 2021 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				
For New applicants, answer each question 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 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 For Method of Operation Change applicants, although not required, if you choose to submit, attach an explanation detailing those changes				
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): Expiration Date (if applicable):				
5. Applicant or Licensee Name: KID BROTHER LLC				
6. Trade Name (if any): PENDING				
7. Street Address of Establishment: 124 E 14TH STREET				
8. City, Town or Village: NEW YORK, NEW YORK 10003 , NY Zip Code: 10003				
9. Business Telephone Number of Applicant/Licensee: PENDING				
10. Business E-mail of Applicant/Licensee: bella.vinci@helbraunlevey.com				
11. Type(s) of alcohol sold or to be sold: Beer & Cider Wine, Beer & Cider Liquor, Wine, Beer & Cider				
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				
14. Method of Operation: (check all that apply) Seasonal Establishment				
Other (specify): N/A				
15. Licensed Outdoor Area: None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure (check all that apply)				
☐ Sidewalk Cafe ☐ Other (specify): N/A Rec'd By Community Board 3, Mar				

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	Original Amende	d Date		4
16. List the floor(s) of the building that	the establishment is located on:	GROUND FLOOR ONLY		
17. List the room number(s) the establ	ishment is located in within the b	ouilding, if appropriate: (N/A)		
18. Is the premises located within 500	feet of three or more on-premise	es liquor establishments?	Yes O No	
19. Will the license holder or a manage	er be physically present within the	e establishment during all hours	of operation?	
20. If this is a transfer application (an e	xisting licensed business is being	purchased) provide the name ar	nd serial number of the licensee:	
(N/A)		(N/A)		
	Name		Serial Number	
21. Does the applicant or licensee own	the building in which the establis	shment is located? Yes (if	YES, SKIP 23-26) 😵 No	
	Owner of the Building in Whi	ch the Licensed Establishme	nt is Located	
22. Building Owner's Full Name: KE	RRY DEITRICK		- 10	
23. Building Owner's Street Address:	80 5TH AVENUE, SUITE 1	818		
24. City, Town or Village: NEW YOR	RK	State: NY	Zip Code: 10011	
25. Business Telephone Number of Buil	ding Owner: 1 (929) 359-278	31		
Repre Application	esentative or Attorney Repre n for a License to Traffic in Alc	senting the Applicant in Control of the Control of the Establishment Id	nection with the dentified in this Notice	
26. Representative/Attorney's Full Nam	e: JOSEPH LEVEY C/O H	ELBRAUN & LEVEY LLP		
27. Representative/Attorney's Street Ac	ddress: 40 FULTON FLOOR	R 28		
28. City, Town or Village: NEW YOR	K	State: NY	Zip Code: 10038	
29. Business Telephone Number of Rep	resentative/Attorney: 212-21	9-1193		
30. Business E-mail Address of Represer	ntative/Attorney: c/o bella.vi	nci@helbraunlevey.com		
Representations in this the Authority when g upon, and that false	s form are in conformity with i ranting the license. I understa	representations made in subrand that representations made and that representations made and isapproval of the application	is or is applying for the license. mitted documents relied upon by de in this form will also be relied on or revocation of the license. s made in this form are true.	

31. Printed Principal Name:	JOSEPH LEVEY	Title:	ATTORNEY	
Princinal Signature	Jely)			

HELBRAUN | LEVEY

November 18, 2021

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

RE: KID BROTHER LLC
124 E 14TH STREET
NEW YORK, NEW YORK 10003

Dear Susan Stetzer

I am writing to you on behalf of my client in the subject of this letter. These applicants will be occupying space at the above address where they intend to operate restaurant within a food hall.

Our client's intention is to apply to the New York State Liquor Authority for a/an beer and wine license.

As you are aware, part of the licensing process requires that the Local Municipality or 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 notification information and/or documentation requirements to Bella Vinci in our Licensing Department, at the address indicated in my letterhead below, or to bella.vinci@helbraunlevey.com

Sincerely,

bseph R. Levey