

	OFFICE	USE ONLY	
Original	Amended	Date	



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

1. Date Notice was Sent: 02/17/2022 1a. Delivered by: Certified Mail Return Receipt Requested						
2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:						
New Application						
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 No. 3						
Applicant/Licensee Information:						
4. Licensee Serial Number (if applicable): Expiration Date (if applicable):						
5. Applicant or Licensee Name: TAKUMI NYC CORP.						
6. Trade Name (if any): Takumi Omakase						
7. Street Address of Establishment: 181 ESSEX ST						
8. City, Town or Village: NEW YORK , NY Zip Code: 10002						
9. Business Telephone Number of Applicant/Licensee: (646) 886-0206						
10. Business E-mail of Applicant/Licensee:						
11. Type(s) of alcohol sold or to be sold:						
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)						
14. 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.):						
☐ Video/Arcade Games ☐ Third Party Promoters ☐ Security Personnel ☐ Other (specify): ☐ Security Personnel ☐ Other (specify): ☐ Security Personnel ☐ Security Personnel ☐ Other (specify): ☐ Security Personnel ☐ Security						
L5. Licensed Outdoor Area:						
☐ Sidewalk Cafe ☐ Other (specify):						

16. List the floor(s) of the building			
	that the establishment is k	ocated on: FL 1	
17. List the room number(s) the es		within the building, if appropriate: N/A	
		1477	O No.
		t within the establishment during all hours of o	
20. If this is a transfer application (a	an existing licensed busine	ss is being purchased) provide the name and se	rial number of the licensee:
Annual Control of the	Name		Serial Number
1. Does the applicant or licensee of		•	
2. Building Owner's Full Name:	179-181 ESSEX L	ng in Which the Licensed Establishment is	Located
3. Building Owner's Street Address			OADWAY OND ELOOD
	O/O OLIVICIVI	NIAL PROPERTIES NY, 740 BR	
4. City, Town or Village: NEW	TURK	State: NY	Zip Code: 10003
Re	epresentative or Attorn	ey Representing the Applicant in Connect	ion with the
Re Applica	epresentative or Attornition for a License to Tra	ey Representing the Applicant in Connect iffic in Alcohol at the Establishment Identi	ion with the fied in this Notice
Re Applica 5. Representative/Attorney's Full N	epresentative or Attorn tion for a License to Tra	iffic in Alcohol at the Establishment Identi	ion with the ified in this Notice
Representative/Attorney's Full N 7. Representative/Attorney's Stree	epresentative or Attornation for a License to Tra	offic in Alcohol at the Establishment Identi IC SOOSEVELT AVE SUITE 902	ified in this Notice
Representative/Attorney's Full No. Representative/Attorney's Stree 7. Representative/Attorney's Stree 8. City, Town or Village: FLUSI	epresentative or Attornation for a License to Tra Name: HELITAX IN et Address: 136-68 R HING	IC State: NY	ion with the ified in this Notice
Representative/Attorney's Full No. Representative/Attorney's Stree 3. City, Town or Village: FLUSI 3. Business Telephone Number of F	epresentative or Attornation for a License to Tra Name: HELITAX IN et Address: 136-68 R HING Representative/Attorney:	IC State: NY (718) 608-6068	ified in this Notice
Representative/Attorney's Full N Representative/Attorney's Stree City, Town or Village: FLUSI Business Telephone Number of F Business E-mail Address of Representatives	epresentative or Attornation for a License to Tra Name: HELITAX IN et Address: 136-68 R HING Representative/Attorney:	IC State: NY	ified in this Notice
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Representative/Attorney's Full No. Representative/Attorney's Stree B. City, Town or Village: FLUSI B. Business Telephone Number of Formula and the applicant Representations in the Authority when upon, and that fa	epresentative or Attornation for a License to Transame: HELITAX IN et Address: 136-68 R HING Representative/Attorney: AE esentative/Attorney: AE ent or licensee holder or a this form are in conformen granting the license. I alse representations may	State: NY (718) 608-6068 OMIN@HELITAX.COM a principal of the legal entity that holds or nity with representations made in submitte understand that representations made in	is applying for the license. ed documents relied upon by this form will also be relied revocation of the license.

February 17, 2021

Manhattan Community Board No. 3 59 East 4th Street New York, New York 10003

Re:

TAKUMI NYC CORP.

181 ESSEX STREET, NEW YORK, NY 10002 30 Day Advanced Notice for On Premises License

Dear Agent:

We represent the above-referenced entity which intends to file an application with the New York State Liquor Authority for a new On-Premises Liquor license.

Please consider this letter formal notice of our intention to file the application described above and add this matter to the State Liquor Authority Licensing Committee meeting agenda. Please contact our office by phone or e-mail (admin@helitax.com) with any questions concerning this application.

Very truly yours.

HELITÁX INC

Enclosure: 30 Day Advanced Notice