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

12. Extent of Food-Service: Il-Food-menu; full-kitchen-run-by-a chef/cook Menu meets legal minimum food requirements; food prep area requirements; food prep are	Banky or Community Board	
2. Select the type of Application that will be filled with the Authority for an On-Premises Alcoholic Beverage License: For premises outside the City of New York: O New Application O Removal Octas Change For premises in the City of New York: O New Application O New Application and Temporary Retail Permit Office Premises in the City of New York: O New Application O New Application and Temporary Retail Permit Office Premises in the City of New York: O New Application O New Application and Temporary Retail Permit Office Premises in the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants In the City of New York: O New Applicants Office Premises In the City of New York: O New Applicants In the City of New Applicants In the City of New York: O Compared the Premise Office Premises In the City of New York: O Compared Office Premises In the City of New York: O Compared Office Premises In the City of New York: O Compared Office Premises In the City of New York: O Compared Office Premises In the City of New York: O Compared Office Premises In the City of New York: O Compared Office In the Office Office Office Office Office In the Office In The City Office In the Of	3//DP / /A 2 a 12 Deliver II	
New Application Removal Class Change For premises in the City of New York: O New Application O New Application and Temporary Retail Permit Semporary Retail Permit O Removal Occase Change O Method of Operation O corporate Change O Renewal O Alteration of PhoTW For New and Temporary Retail Permit applicants, answer each question below using all Information known to date for Renewal applicants, attach a complete written description and diagrams depicting the proposed orgonate proposed for Renewal applicants, attach a statement of your current and proposed corporate principals for Carporate Change applicants, attach a statement of your current and proposed orgonate principals for Renewal applicants, attach a statement of your current and proposed orgonate principals for Renewal publicants, attach a statement of your current and proposed orgonate principals for Renewal publicants, attach as tratement of your current and proposed orgonate principals for Class Change applicants, attach a statement of your current and proposed dotresses with the reason(s) for the relocation for Class Change applicants, attach a statement of your current and proposed orgonate principals for Class Change applicants, attach as tratement of your current and proposed orgonate principals for Class Change applicants, attach as tratement of your current and proposed orgonate principals for Class Change applicants, attach as tratement of your current and proposed orgonate principals for Class Change applicants, attach as tratement of your current and proposed orgonate principals for Class Change applicants, attach as tratement of your current and proposed defenses with the reason(s) for the relocation for Class Change applicants, attach as tratement and proposed defenses with the reason(s) for the relocation for Class Change applicants, attach as tratement and proposed defenses with the reason(s) for the relocation for Class Change applicants, attach as tratement and proposed class and principals and principals and principals and principals	2. Select the type of Application that will be filed with the Authority f	
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3. Name of Municipality or Community Board: Menhaffan Community Board: Applicant/Licensee Information: 4. Licensee Serial Number (if applicable): 5. Applicant or Licensee Name: GHD Inc 6. Trade Name (if any): 7. Street Address of Establishment: 208 Avenue A 8. City, Town or Village: Vew Jack 9. Business Telephone Number of applicant/Licensee: (646) 554-5982 10. Business E-mail of Applicant/Licensee: 3 1 V 5 2 i Key bac Q yehoo. Com 11-Type(s) of alcohol sold or to be sold: 12-Extent of Eood-Service: 14. Method of Operation: (check all that apply) 15- Licensee Outdoor Area: Other (specify): 15- Licensee Outdoor Area: None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Switching (Covered Switching) Patio or Deck Rooftop Garden/Grounds Freestanding Covered Switching Covered Swit	Please include all documents as noted above. Failure to do so moure and it is	iges
Applicant/Licensee Information: 4. Licensee Serial Number (If applicable):	This 30-Day Advance Notice is Being Provided to the Clerk of the Following Indisapproval of the application.	
Applicant/Licensee Information: 4. Licensee Serial Number: (if applicable):		
5. Applicant or Licensee Name: GHD Inc 6. Trade Name (if any): // Street Address of Establishment: DB Avenue A 8. City, Town or Village: 9. Business Telephone Number of applicant/ Licensee: GYGS Zi Key Sa(Gychae Comment) 11. Typé(s) of alcohol sold or to be sold: DB Beer & Cider Wine, Beer & Cider Liquor, Wine, Beer & Cider 12. Extent of Ecod Service: Seasonal Establishment: Seasonal Establishment: Dive 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): 15. Licensed Outdoor Area: None Patio or Deck Rooftop Check all that apply) Sidewalk Cafe Other (specify): Freestanding Covered Structure Freestanding Covered Structure Freestanding Covered Structure Other (specify): Freestanding Covered Structure Freestanding Covered Structure Other (specify): Freestanding Covered Structure Other (specify): Freestanding Covered Structure Freestanding Covered Structure Other (specify):	Ennattan Comminity Ra 13	
5. Applicant or Licensee Name: GHD Inc 6. Trade Name (if any): Keybar 7. Street Address of Establishment: DB Avenue A 8. City, Town or Village: Vew John , NY Zip Code: /BOO 9 9. Business Telephone Number of applicant/ Licensee: (646) 554-5982 10. Business E-mail of Applicant/Licensee: 3 y v52; Keybar & yehoo. Com 11: Type(s) of alcohol sold or to be sold: Beer & cider Wine, Beer & Cider 12: Extent of Eood Service: N. Il-Food menu; full-kitchen-run-by-a chef/cook Menu meets legal minimum food requirements; food prep area requilibration of Operation: Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke 14. Method of Operation: Check all that apply) Live Music (give details i.e., rock bands, acoustic, jazz, etc.): Rock Joseph Common Control of Contr		
6. Trade Name (if any): 7. Street Address of Establishment: 308	5. Applicant or Licensee Name:	,
7. Street Address of Establishment:	6. Trade Name (if any):	
8. City, Town or Village: 9. Business Telephone Number of applicant/ Licensee: 9. Business F-mail of Applicant/Licensee: 9. V52 Key bar yehoo. com 11. Type(s) of alcohol sold or to be sold: 9. Beer & Cider Wine, Beer & Cider 12. Extent of Food-Service: 13. Type of Establishment: 14. Method of Operation: Seasonal Establishment	7. Street Address of Establishment	
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9. Business Telephone Number of applicant/Licensee: (646) 554-5982 10. Business E-mail of Applicant/Licensee: 9 V 52 Key bac 6 4 Phos. com 11-Type(s) of alcohol sold or to be sold: Beer & cider Wine, Beer & Cider Liquor, Wine, Beer & Cider 12. Extent of Eood Service: 1 Il-Food menu; full-kitchen-run-by-a chef/cook Menu meets legal minimum food requirements; food prep area requirements: food prep area requirements: Seasonal Establishment: Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke 14. Method of Operation: (check all that apply) Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment Video/Arcade Games Third Party Promoters Security Personnel Other (specify): 15. Licensed Outdoor Area: None Patro or Deck Rooftop Garden/Grounds Freestanding Covered Structure Other (specify):	NY 7in Code:	
10. Business E-mail of Applicant/Licensee: 3	9. Business Telephone Number of applicant Vicences	-11 5 777
11-Type(s) of alcohol sold or to be sold: Beer & cider Wine, Beer & Cider Liquor, W	10. Business E-mail of Applicant // iconess	
12. Extent of Food-Service: Il-Food-menu; full-kitchen-run-by-a chef/cook Menu meets legal minimum food requirements; food prep area requirements; food prep are		
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Seasonal Establishment	12_Extent of Food-Service:	
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Other (specify): 15: Licensed Outdoor Area: None Patio or Deck Rooftop (check all that apply) Sidewalk Cafe Other (specify): Garden/Grounds Freestanding Covered Structure	Topiess Entertainment	et
15: Licensed Outdoor Area: None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure		
(check all that apply) Sidewalk Cafe Other (specific)	15. Licensed Outdoor Area: None	
	(check all that apply) Sidewalk Cafe Other (specify): Garden/Grounds Freestanding Covered Structure Covider Co	ucture

49

	ng that the establishment is located	on: ground floor	bosement	(B)
17. List the room number(s) the	establishment is located in within th	he building, if appropriate:		
18. Is the premises located with	in 500 feet of three or more on-prem	nises liquor establishments? OYes	O No	
19. Will the license holder or a n	nanager be physically present within	the establishment during all hours of opera	ation? O Yes O No	
20. If this is a transfer application	n (an existing licensed business is be	ing purchased) provide the name and serial	number of the licensee:	
	Name		Could Number	
21. Does the applicant or licens	ee own the building in which the esta	ablishment is located?	IP 23-26) ONo	
	Owner of the Building in V	Which the Licensed Establishment is Lo	cated	
22. Building Owner's Full Name	Jeny K	ahen		
23. Building Owner's Street Add	of free can part that that there is not been that the			AT NO.
24. City, Town or Village:	Luk	State:	ZIp Code:	
25. Business Telephone Numbe	e of Pull-ling Change	ka matak manasa sa 1900 paga atau terdapat dan sa 1900 paga atau terdapat dan sa 1900 paga atau terdapat dan s Manasa menganggan pada pada pada pada pada pada pada pa		
Арр		epresenting the Applicant in Connectic Alcohol at the Establishment identifie	on with the ed in this Notice	
	Full Name: Frank W. Palillo		on with the ed in this Notice	
App 26. Representative/Attorney's 27. Representative/Attorney's	Full Name: Frank W. Palillo	eet, Suite 3504		
26. Representative/Attorney's 27. Representative/Attorney's 28. City, Town or Village: Nev	Full Name: Frank W. Palillo Street Address: Sixty Broad Street W York		on with the ed in this Notice Zip Code: 10004	
26. Representative/Attorney's 27. Representative/Attorney's 28. City, Town or Village: Nev 29. Business Telephone Number	Full Name: Frank W. Palillo Street Address: Sixty Broad Street W York r of Representative/Attorney: (21	eet, Suite 3504 State: New York 12) 227-1640		
App 26. Representative/Attorney's 27. Representative/Attorney's 28. City, Town or Village: Nev	Full Name: Frank W. Palillo Street Address: Sixty Broad Street W York r of Representative/Attorney: (21	eet, Suite 3504 State: New York		
Appr 26. Representative/Attorney's 27. Representative/Attorney's 28. City, Town or Village: Nev 29. Business Telephone Number 30. Business E-mail Address of R	Full Name: Frank W. Palillo Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Fwpalillogressentative/Attorney: Fwpalill	eet, Suite 3504 State: New York 12) 227-1640 lo@gmail.com	Zlp Code: 10004	
26. Representative/Attorney's 27. Representative/Attorney's 28. City, Town or Village: Nev 29. Business Telephone Number 30. Business E-mail Address of Representation Representation the Authority	Full Name: Frank W. Palillo Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Sixty Broad Street Address: (21 To f Representative/Attorney: Fwpalille The first of Ilcensee holder or a print in this form are in conformity with the granting the license: I under	eet, Suite 3504 State: New York 12) 227-1640 lo@gmall.com ncipal of the legal entity that holds or is with representations made in submittee erstand that representations made in the contractions are contracted as the contraction of the contr	applying for the license. I documents relied upon by this form will also be relied	
26. Representative/Attorney's 27. Representative/Attorney's 28. City. Town or Village: New 29. Business Telephone Number 30. Business E-mail Address of Representation the Authority upon, and the	Full Name: Frank W. Palillo Street Address: Sixty Broad Street Address: Fwpalille Street Address: Fwpalil	eet, Suite 3504 State: New York 12) 227-1640 lo@gmall.com ncipal of the legal entity that holds or is with representations made in submitted erstand that representations made in tuit in disapproval of the application or	applying for the license. I documents relied upon by this form will also be relied revocation of the license.	
26. Representative/Attorney's 27. Representative/Attorney's 28. City. Town or Village: New 29. Business Telephone Number 30. Business E-mail Address of Representation the Authority upon, and the	Full Name: Frank W. Palillo Street Address: Sixty Broad Street Address: Fwpalille Street Address: Fwpalil	eet, Suite 3504 State: New York 12) 227-1640 lo@gmall.com ncipal of the legal entity that holds or is with representations made in submittee erstand that representations made in the contractions are contracted as the contraction of the contr	applying for the license. I documents relied upon by this form will also be relied revocation of the license.	
26. Representative/Attorney's 27. Representative/Attorney's 28. City, Town or Village: New 29. Business Telephone Number 30. Business E-mail Address of Representation the Authority upon, and the	Full Name: Frank W. Palillo Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Value Proposition (21) Street Address: Sixty Broad Street Address: Fwpallil Street Address: Fwpallil Street Address: Sixty Broad Street Address: Fwpallil Street Address: Fwpall	eet, Suite 3504 State: New York 12) 227-1640 lo@gmall.com ncipal of the legal entity that holds or is with representations made in submittee erstand that representations made in tuit in disapproval of the application or Perjury - that the representations made	applying for the license. I documents relied upon by this form will also be relied revocation of the license.	
App 26. Representative/Attorney's 27. Representative/Attorney's 28. City, Town or Village: Nev 29. Business Telephone Number 30. Business E-mail Address of R am the app Representation the Authority upon, and th By my signs	Full Name: Frank W. Palillo Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Sixty Broad Street Address: Value Proposition (21) Street Address: Sixty Broad Street Address: Fwpallil Street Address: Fwpallil Street Address: Sixty Broad Street Address: Fwpallil Street Address: Fwpall	eet, Suite 3504 State: New York [2) 227-1640 lo@gmall.com ncipal of the legal entity that holds or is with representations made in submittee erstand that representations made in tuit in disapproval of the application or Perjury - that the representations made	applying for the license. I documents relied upon by this form will also be relied revocation of the license. It is in this form are true.	