



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____



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

1. Date Notice Sent:  1a. Delivered by:

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:

For premises outside the City of New York:

- New Application    Removal    Class Change

For premises in the City of New York:

- New Application    New Application and Temporary Retail Permit    Renewal    Alteration    Removal  
 Class Change    Method of Operation    Corporate Change

For **New** and Temporary Retail Permit 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

**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:

**Applicant/Licensee Information:**

4. Licensee Serial Number (if applicable):  Expiration Date (if applicable):

5. Applicant or Licensee Name:

6. Trade Name (if any):

7. Street Address of Establishment:

8. City, Town or Village:  , NY Zip Code:

9. Business Telephone Number of applicant/ Licensee:

10. Business E-mail of Applicant/Licensee:

11. Type(s) of alcohol sold or to be sold:    Beer & cider    Wine, Beer & Cider    Liquor, Wine, Beer & Cider

Rec'd By Community Board 3, Man

12. Extent of Food Service:    Full Food menu; full kitchen run by a chef/cook    Menu meets legal minimum food requirements; food prep area required

13. Type of Establishment:   
 Seasonal Establishment    Juke Box    Disc Jockey    Recorded Music    Karaoke

MAY 27 2022

14. 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):

15. Licensed Outdoor Area:    None    Patio or Deck    Rooftop    Garden/Grounds    Freestanding Covered Structure  
(check all that apply)    Sidewalk Cafe    Other (specify): \_\_\_\_\_

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16. List the floor(s) of the building that the establishment is located on: ground floor and basement

17. List the room number(s) the establishment is located in within the building, if appropriate: ground floor and basement

18. Is the premises located within 500 feet of three or more on-premises liquor establishments?  Yes  No

19. Will the license holder or a manager be physically present within the establishment during all hours of operation?  Yes  No

20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:  

Name	Serial Number
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21. Does the applicant or licensee own the building in which the establishment is located?  Yes (if YES, SKIP 23-26)  No

**Owner of the Building in Which the Licensed Establishment is Located**

22. Building Owner's Full Name: 150 E Broadway NY LLC

23. Building Owner's Street Address: 41 Madison Avenue, 31st floor

24. City, Town or Village: New York State: N.Y. Zip Code: 10010

25. Business Telephone Number of Building Owner: 646 202-2592

**Representative or Attorney Representing the Applicant in Connection with the Application for a License to Traffic in Alcohol at the Establishment Identified in this Notice**

26. Representative/Attorney's Full Name: Bruce Fenton, Esq.

27. Representative/Attorney's Street Address: 48 Wall Street, Suite 1100

28. City, Town or Village: New York State: N.Y. Zip Code: 10005

29. Business Telephone Number of Representative/Attorney: 646 338-4841

30. Business E-mail Address of Representative/Attorney: bfentonlaw@yahoo.com

I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under Penalty of Perjury - that the representations made in this form are true.

31. Printed Principal Name: Jonathan Daniel Title: Member

Principal Signature: 

# BRUCE FENTON

ATTORNEY AT LAW

PO Box 50  
Bayville, N.J. 08721  
Tel.: (646) 338-4841  
bfentonlaw@yahoo.com

May 24, 2022

Certified return receipt  
Community Board 3 – New York  
59 East 4<sup>th</sup> Street  
New York, N.Y. 10003

re: Pak Chee LLC d/b/a Chakra  
317 East 5<sup>th</sup> Street, New York, N.Y.  
Restaurant wine license application

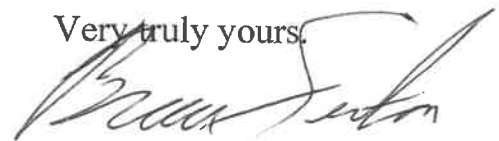
Dear Sir or Madam,

Please be advised that I represent the above named limited Liability company in regard to their application for a restaurant wine license and a temporary permit.

Pursuant to the directive of the State Liquor Authority I am attaching the community board notice form.

Thank you for your cooperation.

Very truly yours,



Bruce Fenton

BF/sn  
enclos.