

	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 Sent:	October 24, 2022 1a. Delivered by: Certified Mail/RRR			
Select the type of Ap For premises outside	plication that will be filed with the Authority for an On-Premises Alcoholic Beverage License: the City of New York:			
New Application	Removal Class Change			
For premises in the C	City of New York:			
New Application	New Application and Temporary Retail Permit Temporary Retail Permit Removal			
Class Change	Method of Operation Corporate Change Renewal Alteration			
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				
	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: Community Board 3			
Applicant/Licensee Information:				
4. Licensee Serial Numb				
5. Applicant or Licensee Name: Rice Guys LLC				
6. Trade Name (if any): Chuppa Rustam				
7. Street Address of Establishment: 214 East 9th Street				
8. City, Town or Village:				
9. Business Telephone Number of applicant/ Licensee: 347-761-4434				
10. Business E-mail of Applicant/Licensee: salilmehta@lautnyc.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	ce: Full Food menu; full kitchen run by a chef/cook Menu meets legal minimum food requirements; food prep area required			
13. Type of Establishmer				
	☐ 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.):			
	Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment			
	☐ Video/Arcade Games ☐ Third Party Promoters ☐ Security Personnel			
	Other (specify):			
15. Licensed Outdoor A (check all that app				

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5. List the floor(s) of the building that the establishment is located on: Ground floor entrance, basement operations
7. List the room number(s) the establishment is located in within the building, if appropriate: N/A
s. Is the premises located within 500 feet of three or more on-premises liquor establishments?
). Will the license holder or a manager be physically present within the establishment during all hours of operation? 💮 Yes 🔘 No
). 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
L. Does the applicant or licensee own the building in which the establishment is located?
Owner of the Building in Which the Licensed Establishment is Located
2. Building Owner's Full Name: 214 E 9th Street LLC
3. Building Owner's Street Address: 214 E 9th Street, New York, NY 10003
4. City, Town or Village: New York State: NY Zip Code: 10003
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
6. Representative/Attorney's Full Name: Kathleen E. Negri Sathopoulos, Esq.
7. Representative/Attorney's Street Address: 250 Ashland Place, Ste 18F
8. City, Town or Village: Brooklyn State: New York Zip Code: 11217
9. Business Telephone Number of Representative/Attorney: 718-285-5675
0. Business E-mail Address of Representative/Attorney: negriesg@aol.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. Title: Member
Principal Signature: