<u> </u>	OFFICE USE ONLY		
Original	○ Amended	Date	

49

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

1. Date Notice Sent: 4/26/2023 1a. Delivered by: CMRRR
2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License: Community Board 3 Man
O Removal Class Change
For premises in the City of New York: MAY 0 1 2023
O New Application O New Application and Temporary Retail Permit O Temporary Retail Permit O Removal
Method of Operation O Corporate Change O Repeated O Attack
For Renewal applicants, answer all questions For Alteration applicants, attach a complete written description and diagrams depicting the proposed alteration(s) For Removal applicants, attach a list of the current and proposed corporate principals For Class Change applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation For Method of Operation Change applicants, although not regulated by
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 Clork of the T. I.
to the cierk of the Following Local Municipality or Com-
3. Name of Municipality or Community Board: Community Board #3 M Applicant/Licensee Information:
4 Ucensea Social Attack
Expiration Date (if applicable):
6. Trade Name (if any): Sushuma: Asian Fusion Inc
Jush umai Asias Es
7. Street Address of Establishment: 12 Steets (teet
NV 70 Co. I.
9. Business Telephone Number of applicant/ censee: /212 727 8808
Systema asientision (e) smail. Com
11=Type(s) of alcohol sold or to be sold:
12. Extent of Eood Service: Full-Food menu; full-kitchen run by a chef/cook O Menu meets legal minimum food requirements; food prep area required
13. Type of Establishment: (Estawant
Seasonal Establishment Juke Box Disalogue
14. Method of Operation: (check all that apply) Live Music (give details i.e., rock-bands, acoustic, jazz, etc.):
La Patron Dancing Employee Dancing
Video/Arcade Games
Other (specify):
15. Licensed Outdoor Area:
(Check all that apply) Sidewalk Cafe Garden/Grounds Garden/Grounds Francisco
Other (specify): COVID SIDEWALK

-	OFFICE USE ONLY	
	Original Amended Date	
		40
	16. List the floor(s) of the building that the establishment is located on:	49
	1100110 200	
	17. List the room number(s) the establishment is located in within the building, if appropriate:	_
	18. Is the premises located within 500 feet of three or more on-premises liquor establishments?	
	19. Will the license holder or a manager be physically present within the establishment during all hours of operation?	
	70 If the stable is the stable	
	20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:	
	Name	_
	21. Does the applicant or licensee own the building in which the establishment is located?	
	, 910	
	Owner of the Building in Wiki-Land	
	Owner of the Building in Which the Licensed Establishment is Located	
	22. Building Owner's Full Name: Chun Yuk Lee	
	23 Building Owner to Company	
	24. City, Town or Village: 1/2 Stenton Street	٦
	State: VV Zin Code: V	4
	25. Business Telephone Number of Building Own	
	(646) 483-7603	7
		-
A THE	Danverstall	
Na article	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	141
	26 Personal dentined in this Notice	<u> </u>
	26. Representative/Attorney's Full Name: Frank-WPalillo	
	27, Representative/Attorney's Street Address: Sixty Broad Street, Suite 3504	
	28. City, Fown or Village: New York	7
	State: New York	4 - 1122
	-29. Business Telephone Number of Representative/Attorney: (212) 227-1640	E 5.00
	20.0]
420022	-30: Business E-mail Address of Representative/Attorney: Fwpalillo@gmail.com	#/ #/
	The state of the s]
	am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license.	V Style
T=====:	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 submitted documents relied upon by	7-7-1-2
7.7.3	the Authority when granting the license. I understand that representations made in submitted documents relied upon by upon; and that false representations may result in disapproval of the applications.	1- 1-1-1-1 1-1-1-1-1-1-1-1-1-1-1-1
2	and the application of revocation of the license	
	By my signature, Laffirm - under Penalty of Perjury - that the representations made in this form are true.	
	The second made in this form are true.	
	31. Printed Principal Name: Se; cheng Me; Title:	_11-72
	Title: President	1
		1
	Principal Signature:	

	0.55105		
0 0	OFFICE	USE ONLY	
Original	○ Amended	Date	

49

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

1. Date Notice Sent: 4/26/2023 1a. Delivered by: CMRRR
2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License: New Application 1. P.
O New Application Removal O Class Change
For premises in the City of New York:
O New Application O New Assistance
New Application New Application and Temporary Retail Permit
For New and Tompesson D. M. S. Corporate Change ORenewal O Alteration Change hours Train
Class Change Method of Operation O Corporate Change ORenewal O Alteration For New and Temporary Retail Permit applicants, answer each question below using all information known to date For Alteration applicants, attach a complete written description and diagrams depicting the proposed alteration(s) I Am - YAM TWS-Set For Removal O Alteration For Corporate Change applicants, attach a list of the current and proposed corporate principals
For Class Change applicants, attach a list of the current and proposed corporate principals For Class Change applicants, attach a statement of your current and proposed addresses with the second applicants.
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 discourse.
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 Clork of the application.
o the clerk of the Following Local Municipality or Communication
Community Board H3 M
Applicant/Licensee Information:
4. Licensee Serial Number (if applicable): 1305476 Expiration Date (if applicable):
5. Applicant or Licensee Name:
TOTAL TUSING LAN
TSTROMAI ASIEN TUSION IN
11d Stepton (treet
NV 7in Code
3. business relephone Number of applicant/ Licensee:
10:0
10. Business E-mail of Applicant/Licensee: 5vs-humaiasianfision@gmoil. Com
Wine, Beer & Cider Liquor, Wine, Beer & Cider
12 Extent of Ecod Service: Full-Food-menu; full-kitchen-run-by-a chef/cook O Menu meets legal minimum food requirements; food prep area required
13. Type of Establishment: [[[Estawrant
Seasonal Establishment Ulula P
14. Method of Operation: (check all that apply) Live Music (give details i.e., rock-bands, acoustic, jazz, etc.):
La Patron Dancing
Video/Arcade Games
☐ Video/Arcade Games ☐ Third Party Promoters ☐ Security Personnel ☐ Other (specify):
(check all that apply) Sidewalk Cafe Rooftop Garden/Grounds Sidewalk Cafe
(steck an triat apply) Sidewalk Cafe Other (specify): Garden/Grounds Freestanding Covered Structure

300	Original O Amended	Date	
em ⁶ 0			49
16. List the floor(s) of the building tha	t the establishment is located on:	ground floor	
17. List the room number(s) the estab	lishment is located in within the buildir	ng, if appropriate:	beseivent
18. Is the premises located within 500	feet of three or more on-premises liqu	or establishments? Yes ©	No
		blishment during all hours of operation?	
20. If this is a transfer application (an	existing licensed business is being nurch	nased) provide the name and serial num	O Yes O No
	and a party	naseu, provide the name and serial num	per of the licensee:
	Name	Soria	Number
21. Does the applicant or licensee own	n the building in which the establishmer	nt is located? : • Yes (if YES, SKIP 23-;	/
	Owner of the Building in Which th	e Licensed Establishment is Located	1
22. Building Owner's Full Name:	Chun Yuk	Lee	
23. Building Owner's Street Address:	112 Stenton		
24. City, Town or Village:	ew yout	State:	
25. Business Telephone Number of Buil	Iding Owner:	183-7603	Zip Code: /0002
26. Representative/Attorney's Full Nam	e: Frank-W. Palillo	ng the Applicant in Connection wit at the Establishment Identified in t	h the his Notice
27.Representative/Attorney's Street Ac	January Cult	3504	
28-City, Town or Village: New York	produce and the control of the contr	State: New York	Zip Code: 10004
29. Business Telephone Number of Repr	esentative/Attorney: (212) 227-1	640	10004
-30. Business E-mail Address of Represen	and the second second		
	- wpaino@gina	n.com	-
the Authority when go upon, and that false	ranting the license. I understand the representations may result in disa	he legal entity that holds or is apply sentations made in submitted docunat representations made in this for pproval of the application or revocations made in the the representations made in the second control of the second	ments relied upon by ———————————————————————————————————
24 Detail 10 : 177	e; cheng Mei	Title: Preside	let -
Principal Signature:	Shri	9	71