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	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:	9/19/2024	1a. Delivered by:	Via Federal	Express
	plication that will be filed with the Autho the City of New York:	rity for an On-Premises A	dcoholic Beverage L	icense:
	O Removal O Class Change			Received
For premises in the (SEP 2 3 2024
O New Application	New Application and Temporary Ret	tail Permit O Tempora	ry Retail Permit	Rentovalpmmunity segra 3, Man
O Class Change C	Method of Operation Corporate	Change ORenewal	Alteration	- Y or some an intelligence
For Renewal applicated For Alteration application for Corporate Change For Removal application Class Change application Method of Operation Please include all of Corporation for Class include all of Corporation for Method of Operation for Method	rary Retail Permit applicants, answer eachts, answer all questions ants, attach a complete written descriptive applicants, attach a list of the current ants, attach a statement of your current allicants, attach a statement detailing you atlon Change applicants, although not relocuments as noted above. Failure	on and diagrams depictir and proposed corporate nd proposed addresses v ir current license type and quired, if you choose to s to do so may result in	ng the proposed alte principals vith the reason(s) fo d your proposed lice submit, attach an ex disapproval of th	eration(s) or the relocation ense type splanation detailing those changes ne 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: Manhattan Community Board 3				
Applicant/Licensee	Information:			
4. Licensee Serial Numb	er (if applicable):	Ехр	iration Date (if appl	icable):
5. Applicant or Licensee Name: Casa Thirteen LLC				
6. Trade Name (if any):	TBD			
7. Street Address of Esta	ablishment: 1 Delancey Street			
8. City, Town or Village:			, NY Zip Code:	10002
9. Business Telephone N	umber of applicant/ Licensee:	(310) 923-8133		
10. Business E-mail of App	plicant/Licensee: dexter.mabuta	as@gmail.com		
11. Type(s) of alcohol solo	d or to be sold:	Wine, Beer & Cide	er b Lie	quor, Wine, Beer & Cider
12. Extent of Food Service	e: Ofull Food menu; full kitchen run by	a chef/cook O Menu m	neets legal minimun	n food requirements; food prep area require
13. Type of Establishment	Full service restaurant			
14. Method of Operation: (check all that apply)			:	
			ncing Toples Security Personnel	ss Entertainment
	Other (specify):	,	, - seemy raisonna	
15. Licensed Outdoor Are	Patio or Deck	Rooftop Ga	orden/Grounds	Freestanding Covered Structure

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16. List the floor(s) of the building that the establishment is located on: Ground and cellar
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? 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
21. Does the applicant or licensee own the building in which the establishment is located? C Yes (if YES, SKIP 23-26)
Owner of the Building in Which the Licensed Establishment is Located
22. Building Owner's Full Name: Lucky Bowery Realty Corp.
23. Building Owner's Street Address: 1-7 Delancey Street #201
24. City, Town or Village: New York State: NY Zip Code: 10002
25. Business Telephone Number of Building Owner: (212) 343-7040
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: Donald M. Bernstein c/o Bernstein Redo & Savitsky P.C.
27. Representative/Attorney's Street Address: 1177 Avenue of the Americas, 5th floor
28. City, Town or Village: New York State: NY Zip Code: 10036
29. Business Telephone Number of Representative/Attorney: (212) 651-3100
30. Business E-mail Address of Representative/Attorney: Donald@brpclaw.com and Emily@brpclaw.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 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.
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Principal Signature: