



THE CITY OF NEW YORK  
MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003

Phone (212) 533-5300

www.cb3manhattan.org - mn03@cb.nyc.gov

Andrea Gordillo, Board Chair

Susan Stetzer, District Manager

April 21, 2025

New York State Liquor Authority  
80 South Swan Street, Suite 900  
Albany, New York 12210-8002

Re: The Headless Widow LLC d/b/a Headless Widow Application for alteration  
to add municipal space with stipulations: Sidewalk Cafe  
99 1<sup>st</sup> Avenue  
New York, NY 10003

Dear New York State Liquor Authority,

**Community Board 3, Manhattan has no objection to the alteration of The Headless Widow LLC d/b/a Headless Widow at 99 1<sup>st</sup> Avenue, for adding municipal space as long as the agreed upon attached stipulations are added to the license.**

1. Will close all outdoor seating by 10 pm.
2. All outdoor dining patrons will be seated at tables.
3. Will not have music, amplified sound, or TVs outdoors as per Open Dining Guidelines, and will remove all outdoor speakers.
4. For sidewalk seating, business will comply with DOT guidelines. Will have no more than 14 tables and 28 chairs.
- ~~5. For roadbed seating, will comply with DOT guidelines. Will have 7 tables and 14 chairs.~~
6. Will have a staff person responsible for ensuring no loitering, noise or crowds outside.
7. Will conspicuously post this stipulation form beside liquor license inside of business.
8. Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. Will revisit the above-stated method of operation if necessary in order to minimize establishment's impact on neighbors.

Sincerely,

Andrea Gordillo, Chair

Clint Smeltzer, Chair

Cc: Kimberly A. Summers, applicant's representative

APR 15 2025 30

Liquor  
Authority

**Standardized NOTICE FORM for Providing Notice to a Local Municipality  
for Adding or Removing Contiguous and/or Non-Contiguous Municipal Space**

1. Date Notice Was Sent: 04/11/2025 1a. Delivered by: Certified mail, return receipt requested
2. This form must be submitted to the clerk or Local Municipality when filing to alter contiguous and/or non-contiguous municipal space

**This Notice is Being Provided to the Clerk of the following Local Municipality**

3. Name of Municipality: Manhattan Community Board 3

**Licensee Information**

4. License ID Number: 0340-23-137059
6. License name: The Headless Widow LLC
7. Trade Name (if any): Headless Widow
8. Street Address of Establishment: 99 1st Avenue
9. City, Town or Village: New York, NY Zip Code: 10003
10. Business Telephone Number of Applicant/Licensee: (917) 409-0446
11. Business E-mail of Applicant/Licensee: azracanovic123@gmail.com
12. Describe municipal space to be added: Sidewalk Cafe
- 12a. What date did you apply for a municipal permit? 8/1/24

**Representative or Attorney representing the licensee**

13. Representative/Attorney's Full Name: Kimberly A. Summers c/o DiPasquale & Summers LLP
14. Street Address: 555 Fifth Avenue, 14th Floor
15. City, Town or Village: New York State: NY Zip Code: 10017
16. Business Telephone Number of Representative/Attorney: 646-383-4607
17. Business Email Address: Kimberly@DS-LawOffices.com

I am the licensee that is applying for the permit and I certify that I know the contents of the above application and the statements and answers therein; that the same are true to my knowledge; that I have been authorized, by order of the Board of Directors of said licensee to make the statements and answers in this application on behalf of said licensee with the same force and effect as if said licensee made such statements and answers itself.

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

18. Printed Name: Kimberly A. Summers Title: Attorney for Applicant

Signature: X Kimberly A. Summers

**The above captioned on-premises licensee is applying for an alteration to their existing license with the State Liquor Authority to sell alcoholic beverages on municipal space.**

**Please forward any concerns regarding the issuance of the alteration to the attention of  
The New York State Liquor Authority by e-mail [community@sla.ny.gov](mailto:community@sla.ny.gov)**



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Community Board 3 Open Dining Stipulations for Administrative Approval

I, Edin Canovic, as a qualified representative of The Headless Widow LLC,  
located at 99 1st Avenue, New York, NY agree to the following stipulations:

☒ Application for Sidewalk Café ☐ Application for Curbside Dining

1. I will close all outdoor seating by 10 pm.
2. All outdoor dining patrons will be seated at tables.
3. I will not have music, amplified sound, or TVs outdoors as per Open Dining Guidelines, and I will remove all outdoor speakers.
4. For sidewalk seating, I will comply with DOT guidelines. I will have no more than 14 tables and 28 chairs.
5. For roadbed seating, I will comply with DOT guidelines. I will have no more than \_\_\_\_\_ tables and \_\_\_\_\_ chairs.
6. I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
7. I will conspicuously post this stipulation form beside my liquor license inside of my business.
8. Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Edin Canovic Phone Number: (516) 884-7835

9. ☐ I will: \_\_\_\_\_

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed

Sworn to this

9TH

day of

April 2025

Dated

4/9/2025

Maira E Gonzalez  
Notary Public

MAIRA E GONZALEZ  
Notary Public, State of New Jersey  
My Commission Expires Apr 15, 2028