



**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: 7/3/2025 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**

Received

3. Name of Municipality: COMMUNITY BOARD # 3

JUL 07 2025

**Licensee Information**

by Community Board 3, Man.

4. License ID Number: 0370-24-135370 EXP: 12/31/2026
6. License name: MEATH TRAILS INC
7. Trade Name (if any): THE GRAY MARE
8. Street Address of Establishment: 61 2ND AVE
9. City, Town or Village: NEW YORK, NY Zip Code: 10003
10. Business Telephone Number of Applicant/Licensee: (212) 388-0662
11. Business E-mail of Applicant/Licensee: tomobyrne@gmail.com
12. Describe municipal space to be added: SIDEWALK CAFE
- 12a. What date did you apply for a municipal permit? 7/18/24

**Representative or Attorney representing the licensee**

13. Representative/Attorney's Full Name: MICHAEL KELLY
14. Street Address: 136 WAVERLY ROAD
15. City, Town or Village: SCARSDALE State: NY Zip Code: 10583
16. Business Telephone Number of Representative/Attorney: 914-632-6036
17. Business Email Address: KELLYMLK136@GMAIL.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: MICHAEL KELLY Title: REPRESENTATIVE
- Signature: X [Signature]

**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)**