



OFFICE USE ONLY
 Original Amended Date **MAR 04 2026**



by Community Board 3, Man

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

1. Date Notice Sent: **March 2, 2026** 1a. Delivered by: **CMRCA**

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:

For premises outside the City of New York:

- New Application
- Removal
- Class Change

For premises in the City of New York: (counties of Kings, New York, Bronx, Queens and Richmond):

- 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

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 Clerk of the Following Local Municipality or Community Board:

3. Name of Municipality or Community Board: **Community Board #3 M**

Applicant/Licensee Information:

4. Licensee License ID (if applicable): _____ Expiration Date (if applicable): _____

5. Applicant or Licensee Name: **Balsamic LLC**

6. Trade Name (if any): **Salma**

7. Street Address of Establishment: **351 East 12th Street**

8. City, Town or Village: **New York**, NY Zip Code: **10003**

9. Business Telephone Number of applicant/Licensee: **(917) 261-4907**

10. Business E-mail of Applicant/Licensee: **salma.eastvillage@gmail.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: Full Food menu; full kitchen run by a chef/cook Menu meets legal minimum food requirements; food prep area required

13. Type of Establishment: **Restaurant**

- 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 Area: None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure

Sidewalk Cafe Other (specify): _____

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<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

16. List the floor(s) of the building that the establishment is located on: ground floor & basement

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 ID number of the licensee:
Name: _____ License ID Number: _____

21. Does the applicant or licensee own the building in which the establishment is located? Yes (if YES, SKIP 23-26) No

Owner of the Building in Which the Licensed Establishment is Located

22. Building Owner's Full Name: 12th & 1st LLC

23. Building Owner's Street Address: 316 East 89th Street

24. City, Town or Village: New York State: Ny Zip Code: 10128

25. Business Telephone Number of Building Owner: (212) 534-3131

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: Frank Palillo

27. Representative/Attorney's Street Address: 60 Broad Street, Suite 3504

28. City, Town or Village: New York State: NY Zip Code: 10004

29. Business Telephone Number of Representative/Attorney: (212) 227-1640

30. Business E-mail Address of Representative/Attorney: fwpalillo@gmail.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.

31. Printed Principal Name: Pierre Doumet Title: Managing Member

Principal Signature: X

Date: 03/02/2021

FRANK W. PALILLO
COUNSELLOR AT LAW

ED / Susan / Clint

SIXTY BROAD STREET
SUITE 3504
NEW YORK, NEW YORK 10004
(212) 227-1640
FAX: (212) 549-1724
E-mail: fwpalillo@gmail.com

03/02/2026

I appeared with this company in May of 2022,
stipulation attached. I agree that it is 4 years ago
and if you want to see this applicant again, its
completely understandable.

Full disclosure, the principal who signed the
stip is not the same principal as on this
application, but he will execute a new stip accepting
all of the conditions of the existing stip.

Whichever way you want to go is fine by me,
just let me know

Regards





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

Paul Rangel, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Stipulations

I, Debbie Eng, as a qualified representative of Balsamic LLC
 located at 351 East 12th Street, New York, NY agree to the following stipulations:

- My license type is: beer & cider wine, beer & cider liquor, wine, beer & cider
- I will operate a full-service restaurant, specifically a (type of restaurant) Lebanese restaurant, or
 I will operate a _____
 with a kitchen open and serving food during all hours of operation OR with less than a full-service kitchen but serving food during all hours of operation OR Other _____
- My hours of operation will be opening no later than 11:30 A.M. all days and closing by 12:00 A.M. Sunday to Wednesday and 2:00 A.M. Thursday to Saturday

(I understand opening is "no later than" specified opening hour, and all patrons are to be cleared from business at specified closing hour.)

- I will not use outdoor space for commercial use (including Open Restaurants) OR
 My sidewalk cafe hours or other outside hours (including Open Restaurants) will be closing by 10:00 P.M. all nights
- I will employ a doorman/security personnel: _____
- I will install soundproofing, _____
- I will close any front or rear façade doors and windows at 10:00 P.M. every night or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances, or during unamplified live performances or televised sports. I will have a closed fixed façade with no open doors or windows except my entrance door will close by 10:00 P.M. or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances, or during unamplified live performances or televised sports.
- I will not have DJs, live music, promoted events, any event at which a cover fee is charged, scheduled performances, more than _____ DJs per _____, more than _____ private parties per _____

- I will play ambient recorded background music only.
 - I will not apply for an alteration to the method of operation or for any physical alterations of any nature without first coming before CB 3.
 - I will not seek a change in class to a full on-premises liquor license without first obtaining approval from CB 3.
 - I will not participate in pub crawls or have party buses come to my establishment.
 - I will not have unlimited drink specials, including boozy brunches, with food.
 - I will not have a happy hour or drink specials with or without time restrictions OR I will have happy hour and it will end by 7:00 P.M.
 - I will not have wait lines outside. I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
 - I will conspicuously post this stipulation form beside my liquor license inside of my business.
 - 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: Debbie Eng Phone Number: (917) 816-8856

★ 18. I will: close all outdoor dining allowed under the temporary Open Restaurants program and any other subsequent uses by 10:00 P.M. all days and not have any speakers or TV monitors.

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

Signed Debbie Eng
 Sworn to this 18th day of May 2023

Dated May 18th 2022

Notary Public
 FRANK W. PALILLO
 Notary Public, State of New York
 No. 24-278-102
 Qualified in Kings County
 Commission Expires 11/18/2023