opla-rev03292018	OFFICE USE ONLY							
NEW YORK STATEOF OFFORTWUTZ Authority	Original Amended Date 49							
Standardized <u>NOTICE FORM</u> for Providing <u>30-Day Advance Notice</u> to a <u>Local Municipality or Community Board</u>								
1. Date Notice was Sent: 7,	/14/2021 1a. Delivered by: VIA: Electronic Mail							
2. Select the type of Applica	tion that will be filed with the Authority for an On-Premises Alcoholic Beverage License:							
New Application	O Renewal O Alteration O Corporate Change O Removal O Class Change O Method of Operation Change							
For <b>Renewal</b> applican For <b>Alteration</b> applica For <b>Corporate Chang</b> For <b>Removal</b> applican For <b>Class Change</b> app	answer each question below using all information known to date hts, answer all questions ants, attach a complete written description and diagrams depicting the proposed alteration(s) <b>e</b> applicants, attach a list of the current and proposed corporate principals hts, attach a statement of your current and proposed addresses with the reason(s) for the relocation licants, attach a statement detailing your current license type and your proposed license type <b>tion Change</b> applicants, although not required, if you choose to submit, attach an explanation detailing those changes							
This 30-Day Advance No	tice 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 Infor	mation:							
4. Licensee Serial Number (i	if applicable): Expiration Date (if applicable):							
5. Applicant or Licensee Nar	me: Avenue C Hospitality LLC							
6. Trade Name (if any):	BD							
7. Street Address of Establis	shment: 102 Avenue C							
8. City, Town or Village:	New York , NY Zip Code: 10009							
9. Business Telephone Num	ber of Applicant/Licensee: (201) 310-2281							
10. Business E-mail of Appli	cant/Licensee: Jen@joyface.nyc							
11. Type(s) of alcohol sold o	or to be sold: O Beer & Cider O Wine, Beer & Cider OLiquor, Wine, Beer & Cider							
12. Extent of Food Service:								
Full food menu; full	kitchen run by a chef or cook 🛛 🔘 Menu meets legal minimum food availability requirements; food prep area at minimum							
13. Type of Establishment:	Restaurant (Full kitchen and full menu required)							
14. Method of Operation: (check all that apply)	Seasonal Establishment  Juke Box  Disc Jockey  Recorded Music  Karaoke    Live Music (give details i.e., rock bands, acoustic, jazz, etc.):							
15. Licensed Outdoor Area: (check all that apply)	None  Patio or Deck  Rooftop  Garden/Grounds  Freestanding Covered Structure    Sidewalk Cafe  Sidewalk Cafe  Other (specify):  Temporary DOT seating							

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	OFFIC	E USE ONLY	
Original	Amended	Date	

						2
16. List the floor(s) of the b	uilding that the establishmer	nt is located on:	Cellar and gro	ound floor		
17. List the room number(s)	) the establishment is locate	d in within the bu	ilding, if appropriate	e:		
18. Is the premises located	within 500 feet of three or n	lore on-premises	liquor establishmer	nts? 💽 Yes 🔘 No	)	
19. Will the license holder c	or a manager be physically pr	esent within the	establishment durir	ng all hours of operation?	Yes	O No
20. If this is a transfer applic Avenue C Rest		usiness is being p		6755		e:
21. Does the applicant or lic	Name censee own the building in w	hich the establish	nment is located?	Serial f Yes (if YES, SKIP 23-26	lumber ) <b>()</b> No	
	Owner of the B	uilding in Whic	h the Licensed Es	tablishment is Located		
22. Building Owner's Full Na	ame: Shahram John	Gatan				
23. Building Owner's Street	Address: 265 East 6	6th Street, a	pt 7G			
24. City, Town or Village:	New York		State:	NY	Zip Code:	10065
25. Business Telephone Nur	mber of Building Owner: (	917) 353-030	)1			
26. Representative/Attorne	Application for a License	to Traffic in Alc				
27. Representative/Attorne			he Americas, 5	•		
	New York			NY		10036
<i>,,,</i> 3 L			State:	IN F	Zip Code:	10030
29. Business Telephone Nur	mber of Representative/Atto	, , ,	651-3100			
30. Business E-mail Address	s of Representative/Attorney	: Donald@	brpclaw.com a	nd Emily@brpclaw.o	com	
Representa the Autho upon, an	applicant or licensee hold tions in this form are in co ority when granting the lic d that false representatio signature, I affirm - under	onformity with r ense. I understa ns may result in	representations m and that represent a disapproval of th	ade in submitted docur ations made in this forn e application or revocat	nents relied u n will also be i ion of the lice	pon by relied nse.

31. Printed Principal Name: Jennifer Shorr

Title: Owner



## BERNSTEIN REDO, P.C. -ATTORNEYS AT LAW-

1177 AVENUE OF THE AMERICAS, 5<sup>TH</sup> FL NEW YORK, NEW YORK 10036 TEL (212) 651-3100

> DONALD M. BERNSTEIN MARTHA M. REDO

> > BENJAMIN SAVITSKY

July 14, 2021

Email: echan@cb.nyc.gov Manhattan Community Board 3 59 East 4<sup>th</sup> Street New York, New York 10003

> Re: Avenue C Hospitality LLC 102 Avenue C, New York, New York 10009 Standardized 30-day Notice

Dear Mr. Chan,

Enclosed please find a statutory 30-day advanced notice in connection with a new application to be filed by Avenue C Hospitality LLC with the New York State Liquor Authority for transfer of the on-premises license at the referenced address.

Please place the Licensee on the next SLA and DCA Licensing agenda.

If you have any questions, please contact our office.

Thank you.

Very truly yours,

Emily Jedda

Emily Jedda Licensing Specialist

Enclosure