

BERNSTEIN REDO & SAVITSKY PC
-ATTORNEYS AT LAW-

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

DONALD M. BERNSTEIN
MARTHA M. REDO
BENJAMIN S. SAVITSKY

December 6, 2022

Federal Express
Manhattan Community Board 8
505 Park Avenue, suite 620
New York, NY 10022
Robert Beirne, Community Associate

RECEIVED

DEC 13 2022

BY COMMUNITY BOARD 8

Re: **Surrey Opco, LLC, CHL Surrey Inc. & Casa Tua NYC LLC**
The Surrey Hotel and Casa Tua Restaurant
20 East 76th Street
New York, New York 10021
Standardized 30-Day Notice

Dear Sir or Madam,

We represent Surrey Opco, LLC, CHL Surrey Inc. & Casa Tua NYC LLC. Enclosed please find a Statutory 30-Day Advanced Notice in connection with a new application to be filed with the New York State Liquor Authority for a hotel liquor license at the referenced address.

Please place the applicant on the January Street Life Committee Meeting.

Thank you.

Very truly yours,



Emily Jedda
Licensing Specialist

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: 12/6/2022 1a. Delivered by: Via Federal Express

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:

- 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: Manhattan Community Board 8

Applicant/Licensee Information:

4. Licensee Serial Number (if applicable): Expiration Date (if applicable):

5. Applicant or Licensee Name: Surrey Opco, LLC, CHL Surrey, Inc. & Casa Tua NYC LLC

6. Trade Name (if any): The Surrey Hotel and Casa Tua Restaurant

7. Street Address of Establishment: 20 East 76th Street

8. City, Town or Village: New York, NY Zip Code: 10021

9. Business Telephone Number of applicant/ Licensee: (917) 498-0514

10. Business E-mail of Applicant/Licensee: flesort@casautalife.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: Hotel (requires full on premises restaurant open to the public)

- Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke

14. Method of Operation: Live Music (give details i.e., rock bands, acoustic, jazz, etc.): jazz, acoustic

- 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): DOT Open Restaurants Program

| | | |
|--------------------------------|-------------------------------|------------|
| OFFICE USE ONLY | | |
| <input type="radio"/> Original | <input type="radio"/> Amended | Date _____ |

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

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:

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
| Name | Serial 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:

23. Building Owner's Street Address:

24. City, Town or Village: State: Zip Code:

25. Business Telephone Number of Building Owner:

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:

27. Representative/Attorney's Street Address:

28. City, Town or Village: State: Zip Code:

29. Business Telephone Number of Representative/Attorney:

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

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: Title:

Principal Signature: 