

February 23, 2022

Manhattan Community Board 4 424 W 33rd St Suite #580, New York, NY 10001

Manhattan Community Board 5 450 Seventh Avenue, Suite 2109, New York, NY 10123

Manhattan Community Board 7 250 West 87th Street, New York, NY 10024

Manhattan Community Board 8 505 Park Ave #620, New York, NY 10022

Community Board 10, Manhattan 215 West 125th Street, 4th Floor, New York, NY 10027

Community Board 11 of Manhattan 1664 Park Ave Ground Floor, New York, NY 10035

RE: Standardized Notice Form for Providing 30-Day Advanced Notice for: Legends Boathouse, LLC

Dear Community Board Officers,

We are submitting this Standardized Notice Form for Providing 30-Day Advanced Notice to a Local Municipality or Community Board in support of our new application for an on-premises liquor permit to be located at the Loeb Boathouse with an address of East 72nd Street at Park Drive, New York, NY, 10021 (Secondary Address Central Park Lake).

Please let us know if you have any questions or comments. If you have any questions, please feel free to contact us at (323) 640-4678 or kmonteros@legends.net.

Respectfully,

Daniel E Smith, President

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	OFFIC	E USE ONLY	
Original	Amended	Date	2

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

1. Date Notice Sent:	Feb 23, 2023 1a. Delivered by: Overnight Mail with Trace	king Number/Email
	Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License: de the City of New York:	
New Application	n Removal Class Change	
For premises in the C	e City of New York:	
New Application	n New Application and Temporary Retail Permit Renewal Alteration Remova	I
O Class Change O	Method of Operation	
For Renewal applicar For Alteration applica For Corporate Chang For Removal applicar For Class Change app For Method of Opera Please include all d	corary Retail Permit applicants, answer each question below using all information known to date cants, answer all questions licants, attach a complete written description and diagrams depicting the proposed alteration(s) nge applicants, attach a list of the current and proposed corporate principals cants, attach a statement of your current and proposed addresses with the reason(s) for the relocation pplicants, attach a statement detailing your current license type and your proposed license type caration Change applicants, although not required, if you choose to submit, attach an explanation detail documents as noted above. Failure to do so may result in disapproval of the application cance Notice is Being Provided to the Clerk of the Following Local Municipality or Communications.	ailing those changes n.
	3	
		Q III
Applicant/Licensee		
4. Licensee Serial Numb	nber (if applicable): N/A Expiration Date (if applicable): N/A	4
5. Applicant or Licensee	ee Name: Legends Boathouse, LLC	
6. Trade Name (if any):):	
7. Street Address of Esta	stablishment: East 72nd Street at Park Drive (Central Park Lake)	
8. City, Town or Village:	ge: New York , NY Zip Code: 10021	
9. Business Telephone N	e Number of applicant/ Licensee: 917-282-9421`	
10. Business E-mail of Ap	Applicant/Licensee: dsmith@legends.net	
11. Type(s) of alcohol sol	sold or to be sold: O Beer & cider O Wine, Beer & Cider Liquor, Wine, B	eer & Cider
12. Extent of Food Service	vice: Full Food menu; full kitchen run by a chef/cook O Menu meets legal minimum food require	ements; food prep area required
13. Type of Establishmen	ent: Restaurant	
		Karaoke
Method of Operation (check all that apply)	William Mucic (give details in real bands acquetic intention to 1. Mediana Llanda / Cin	nger-Songwriter
*	Patron Dancing Employee Dancing Exotic Dancing Topless Entertainm	ent
	☐ Video/Arcade Games ☐ Third Party Promoters ☐ Security Personnel	
	Other (specify):	
15. Licensed Outdoor Ar (check all that app		standing Covered Structure

18-164 1230202 I	OFFICE USE		
	Original Amended	Date	4
16. List the floor(s) of the building that	t the establishment is located on: All Fl	oors (only one floors)	
17. List the room number(s) the estab	lishment is located in within the building, if	appropriate: N/A	
18. Is the premises located within 500	feet of three or more on-premises liquor es	stablishments? O Yes 🖔 No	
19. Will the license holder or a manage	er be physically present within the establish	nment during all hours of operation?	Yes O No
20. If this is a transfer application (an e	existing licensed business is being purchase	d) provide the name and serial number of	f the licensee:
	Name	Serial Nu	
21. Does the applicant or licensee owr	n the building in which the establishment is	located?	⊘ ∕No
	Owner of the Building in Which the Li	icensed Establishment is Located	
22. Building Owner's Full Name:	City of New York Department of Pa	arks and Recreation	
23. Building Owner's Street Address:	830 5th Avenue		
24. City, Town or Village: N	ew York	State: New York	Zip Code: 10065
25. Business Telephone Number of Bu	ilding Owner: Alexander Han (Cl	hief of Concession) 213-360-1397	
,	/ lioxalidor Flam (Ol	1101 01 001100001011, 210 000 1001	
Rep Applicatio	resentative or Attorney Representing on for a License to Traffic in Alcohol at	the Applicant in Connection with the Establishment Identified in this	ne Notice
117-15			
26. Representative/Attorney's Full Na	me: Karen Ann Monteros/Richard	d Porteus	
27. Representative/Attorney's Street	Address: 61 Broadway Ste 2400		62
28. City, Town or Village: New Y	ork	State: NY	Zip Code: 10023
29. Business Telephone Number of Re	presentative/Attorney: 323-640-	4678	
30. Business E-mail Address of Represe	entative/Attorney: kmonteros@l	legends.net	
I am the applicant	or licensee holder or a principal of the	legal entity that holds or is applying	for the license.
Representations in the	his form are in conformity with represe	ntations made in submitted docume	nts relied upon by
	granting the license. I understand that se representations may result in disapp		
apon, and that las	se representations may result in disapp	noval of the application of revocation	nor the hornse.
By my signature,	, I affirm - under Penalty of Perjury - tha	at the representations made in this f	orm are true.
31. Printed Principal Name: D	Paniel E Smith	Title: President	
51. Frinced Frincipal Name:	raniel E Offiul	President	
	AllA		