

Russell Squire  
Chair

Will Brightbill  
District Manager



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**The City of New York  
Community Board 8 Manhattan**

August 2, 2023

Adam Roberts  
Deputy Commissioner  
State Liquor Authority  
80 South Swan Street, Suite 900  
Albany, NY 12210-8002

**RE: Origine LLC., dba JoJo, 160 East 64th Street (Between Third and Lexington Avenues) 30 Day Waiver Renewal Application for for Liquor, Wine, Beer & Cider Permit**

Dear Deputy Commissioner Roberts,

Please be advised that Community Board 8 Manhattan received notice on August 2, 2023, for the above referenced establishment's renewal application of a Liquor, Wine, Beer, and Cider license. A copy of their 30-day advance notice is attached.

We agree to this one-time waiver of the 30-day notice on the condition that the applicant appears at the September 5, 2023, Street Life Committee meeting, so the public has the opportunity to comment on the application. If the applicant fails to appear at the September 5, 2023, Street Life Committee meeting, the waiver will be revoked.

Please advise this office of any action taken regarding this matter.

Sincerely,

*Will Brightbill*

Will Brightbill  
District Manager

## STATEMENT

The undersigned as the managing member of Origine LLC which does business under the name JoJo for the restaurant located at 160 E. 64<sup>th</sup> St., NY, NY does hereby state as follows:

1. JoJo has been licensed by the New York State Liquor Authority (SLA) since 1991 and has always renewed its license on time. The SLA normally sends out a "Renewal Advisory" telling licensees that its license is up for renewal. The SLA did not send the licensee the Renewal Advisory and the licensee did not realize that the license was to expire on July 31, 2023. It immediately sent the 30-day letter to the CB8 July 28, 2023. Without the ability to traffic in alcohol, it severely damages the reputation of the restaurant, which has been known as first-class full-service establishment since it opened. Unless the requested 30-day waiver is issued by CB8 the restaurant may have to curtail its business which will hurt not only the public but the employees that work there.

2. I hereby acknowledge the conditions CB8 requires in order that a 30-day waiver be issued, which are as follows:

30- 1. JoJo understands that there will only be a one-time event and that no future Day Waivers will be considered for this licensee.

2. A representative of JoJo will attend an upcoming Stret Life Committee meeting, taking place on September 5<sup>th</sup>, 2023 at 6:30Pm via Zoom to respond to the community.

Dated: August 2, 2023

  
Jean Georges Vongerichten

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Street and Apt. No., or PO Box No. 505 Park Avenue, Suite 620

City, State, ZIP+4® New York, NY 10022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7022 0410 0002 1715 2602



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

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

1. Date Notice Sent:  1a. Delivered by:

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    Renewal    Alteration    Removal  
 Class Change    Method of Operation    Corporate Change

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:

**Applicant/Licensee Information:**

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

5. Applicant or Licensee Name:

6. Trade Name (if any):

7. Street Address of Establishment:

8. City, Town or Village:  , NY Zip Code:

9. Business Telephone Number of applicant/ Licensee:

10. Business E-mail of Applicant/Licensee:

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:

- 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  
 (check all that apply)    Sidewalk Cafe    Other (specify): \_\_\_\_\_

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: **Ground Floor**

17. List the room number(s) the establishment 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 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:  

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: **166 Associates Inc. c/o Vincent Garrow**

23. Building Owner's Street Address: **15 East 40th Street#304**

24. City, Town or Village: **New York** State: **NY** Zip Code: **10016**

25. Business Telephone Number of Building Owner: **n/a**

**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: **Martin P. Mehler of Mehler & Buscemi,**

27. Representative/Attorney's Street Address: **287 Northern Boulevard, Ste 210**

28. City, Town or Village: **Great Neck** State: **NY** Zip Code: **11021**

29. Business Telephone Number of Representative/Attorney: **212-962-4688**

30. Business E-mail Address of Representative/Attorney: **Mehlerbuscemi@aol.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: **Jean George Vongerichten** Title: **Managing/Member**

Principal Signature: 