KATHLEEN E. NEGRI STATHOPOULOS

Attorney at Law 250 Ashland Place, Suite 18F Brooklyn, New York 11217 Negriesq@aol.com

718-285-5675

Fax 718-855-4709

CERTIFIED MAIL/RRR

September 12, 2023

Community Board 8 505 Park Avenue, Ste 620 New York, New York 10022 RECEIVED
SEP 27 2023

BY COMMUNITY BOARD 8

Attn.: Will Brightbill, District Manager

Re.: 1568 Gyro LLC d/b/a Yasouvlaki / RW & Temp Application 1715 E. 88th Street New York, N.Y. 10128

Dear Mr. Brightbill:

We write this letter, under the instruction of the New York State Liquor Authority, to notify you of the intention of the aforementioned applicant to apply for a Restaurant Wine License and Temporary Permit for the restaurant located at 1715 E. 88th Street New York, New York. Enclosed please find the Application Notice Form

If you should have any questions or concerns, please do not hesitate to contact us. Thank you.

Sincerely yours,

Kathleen E. Negri Stathopoulos. Kathleen E. Negri Stathopoulos, Esq.



		OFFIC	E USE ONLY	
Ori	ginal 🔘	Amended	Date	

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

1. Date Notice Sent: September 8, 2023 1.a. Delivered by: Certified Mail/RRR 2. Select the type of Application that will be filled 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, arist a complete written description and diagrams depicting the proposed alteration(s) For Corporate Change applicants, attach a statement of your current and proposed adoresses with the reason(s) for the relocation For Removal applicants, attach a statement of your current and proposed acroprorate principals For Method of Operation Change applicants, attach a statement detailing your current license type and your proposed license type For Method of Operation Change applicants, attach a statement detailing your current license type and your proposed license type For Method of Operation Change applicants, attach a statement detailing your current license type and your proposed license type For Method of Operation Change applicants, attach a statement detailing your current license type and your proposed license type For Method of Operation Change applicants, attach a statement detailing your current license type and your proposed license type For Method of Operation Change applicants, attach a statement detailing your current license type and your proposed license type For Method of Operation Change applicants, attach and proposed addresses with the reason(s) for the relocation For Method of Operation Change applicants, attach and proposed addresses with the reason(s) for the relocation For Method of Operation Change For Method of Operation Cha
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igiampilis@gmail.com I. Type(s) of alcohol sold or to be sold: Beer & cider Wine, Beer & Cider Liquor, Wine, Beer & Cider
1. Type(s) of alcohol sold or to be sold:
12. Extent of Food Service: Full Food menu; full kitchen run by a chef/cook O Menu meets legal minimum food requirements; food prep area r
13. Type of Establishment: Restaurant (full kitchen and full menu required)
☐ 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 Structu (check all that apply) ☑ Sidewalk Cafe ☐ Other (specify):

	Original O Am		1
List the floor(s) of the building that	the establishment is locate	ed on: Ground Floor	
	tiek er end to de ende eil lie vyldiste	ababulliba (faranatas, IMA	
List the room number(s) the establ	isnment is located in within	n the building, if appropriate: N/A	
Is the premises located within 500	feet of three or more on-pr	remises liquor establishments?	No
Will the license holder or a manage	er be physically present wit	hin the establishment during all hours of operation	? • Yes • No
If this is a transfer application (an e	existing licensed business is	being purchased) provide the name and serial num	nber of the licensee:
	Name	Ser	ial Number
Does the applicant or licensee own		establishment is located?	
Building Owner's Full Name: 15	68-1572 Third Avenue		
Building Owner's Street Address:	c/o Lighthouse Prop	erties LLC 1185 6th Avenue, 10th Floor	
City, Town or Village: New Yor		State: New York	Zip Code: 10036
Rep	resentative or Attorney	Representing the Applicant in Connection w	vith the
Application	resentative or Attorney on for a License to Traffi	Representing the Applicant in Connection w c in Alcohol at the Establishment Identified in	vith the n this Notice
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Application Representative/Attorney's Full Na	resentative or Attorney on for a License to Traffic me: Kathleen E.	Representing the Applicant in Connection w c in Alcohol at the Establishment Identified in	vith the n this Notice
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