

Notification to Municipality OCM-06009

RE:	Notification of adult-use retail dispensary license application		
License Type:	New Establishment		
Previous DBA:			
License Number ((if applicable):	DECEIVED.	
Applicant Name:	Kylie Monagan	RECEIVED	
Phone Number:	310.384.5666	NOV 2 0 2023	
Email Address:	Kyle@Monagan1020@gmail.com	BY COMMUNITY BOARD 8	
This serves as r	Clerk/NYC Community Board: notification that I (name) Kylie Monagan		
-	n & Seventeen LLC, DBA Eastern Atlantic		
to open a(n):	ve, file(d) an application for licensure with the Office of	Cannabis Management	
<u> </u>		tered organization with ensing (or ROD)	
in (county name	New York County . This business, onc	e the license is approved, shall be located	
at:			
Address Line 1:	119 East 60th Street		
Address Line 2:	× × × × × × × × × × × × × × × × × × ×		
City	New York		
Zip code:	10022		
The mailing add	ress is (if different from business location):		
Address Line 1:	1020 Montauk Hwy		
Address Line 2:	Attn Jessica		
City/Town/Villag	e: Water Mill, NY		
State:	Zip code: [11976]		

/As applicable ser	ne of hyginage if different from shous) has Ur	avaround and Pose II C
	me of business if different from above) has Haservices of (attorney or representative)	ayground and Rose, LLC
Name:	Empire Cannabis Consulting, LLC, Richard Washington, Ryan Sakac	S
Address Line 1:	100 Church Street	
Address Line 2:	8th Floor	
City/Town/Village:	New York, NY	
State:	Zip code: 10007	
Telephone with are	ea code: 347-286-4282	
they must respond	or community board would like to express an to this notification within 30 days by emailing m.ny.gov. This expressed opinion must be or	an opinion to
or community boa concerns, or ques Municipalities Mur name here]" in the date of receipt of t	rd to provide their opinion, or if the municipal	<u>Inicipalities@ocm.ny.gov</u> with "Notification to – [Insert municipality or community board ards should be sure to provide proof of the h to request an extension of time for
Print Kylie Mor		