

Original

Amended

Date _____

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

1. Date Notice was Sent

November 10, 2023

1a. Delivered by:

Certified Mail Return Receipt Requested

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:

NEW APPLICATION

For **New** applicants, answer each question below using all information known to dateFor **Renewal** applicants, answer all questionsFor **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 principalsFor **Removal** applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocationFor **Class Change** applicants, attach a statement detailing your current license type and your proposed license typeFor **Method of Operation Change** applicants, although not required, if you choose to submit, attach an explanation detailing those changes

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 CB # 8**

Applicant/Licensee Information:

4. Licensee Serial Number (if applicable):

Expiration Date (if applicable):

5. Applicant or Licensee Name: **WEZC HOSPITALITY**6. Trade Name (if any): **Hollybrook Lane**7. Street Address of Establishment: **1712 1st Ave**8. City, Town or Village: **New York**9. Business Telephone Number of Applicant/Licensee: **7607178810**10. Business E-mail of Applicant/Licensee: **wezc@me.com**11. Type(s) of alcohol sold or to be sold: **Liquor, Wine, Beer & Cider**12. Extent of Food Service: **Full Kitchen**13. Type of Establishment: **Restaurant**

(check all that apply)

14. Method of Operation

Seasonal Establishment

Juke Box

X Disc Jockey**X** Recorded Music

Karaoke

X 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:

(check all that apply)

X None

Patio or Deck

Rooftop

Garden/Grounds

Freestanding Covered Structure

Sidewalk Cafe

Other (Specify):

RECEIVED

NOV 15 2023

BY COMMUNITY BOARD 8

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: **First/Ground**
17. List the room number(s) the establishment is located in within the building, if appropriate: **None**
18. Is the premises located within 500 feet of three or more on-premises liquor establishments? **YES**
19. Will the license holder or a manager be physically present within the establishment during all hours of operation? **Yes**
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? **NO** Yes (if YES, SKIP 23-26)

Owner of the Building in Which the Licensed Establishment is Located

22. Building Owner's Full Name: **Solil Management**
23. Building Owner's Street Address: **1185 Sixth Ave 10th Floor**
24. City, Town, or Village: **New York, New York 10036**
25. Business Telephone Number of Building Owner: **2125060479**

**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: **David A. Gabay**
27. Representative/Attorney's Street Address: **127 Knickerbocker Avenue**
28. City, Town or Village: **Bohemia** State: **NY** Zip Code: **11716**
29. Business Telephone Number of Representative/Attorney: **(631) 624-9007**
30. Business E-mail Address of Representative/Attorney: **davidagabay@gmail.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: **Cedric Sanders**

Title: **Owner/Principal**

Principal Signature: **/s/ Cedric Sanders**