

OFFICE USE ONLY

☐ Original☐ Amended

Date \_\_\_\_\_

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

1. Date Notice Sent: 01/10/20241a. Delivered by: Email

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 ChangeFor 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, 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: Manhattan Community Board 8**Applicant/Licensee Information:**

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

5. Applicant or Licensee Name: Mikado 800 Inc.

6. Trade Name (if any): \_\_\_\_\_

7. Street Address of Establishment: 800 Lexington Avenue8. City, Town or Village: New York, NY Zip Code: 100659. Business Telephone Number of applicant/ Licensee: (917)4324412

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 & Cider12. 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 ☐ Karaoke14. 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): \_\_\_\_\_

22. Building Owner's Full Name: David Rosenberg

23. Building Owner's Street Address: 800 Lexington Avenue

24. City, Town or Village: New York State: NY Zip Code: 10065

25. Business Telephone Number of Building Owner:

26. Representative/Attorney's Full Name: James Wang

27. Representative/Attorney's Street Address: 146-14 24th Avenue

28. City, Town or Village: Whitestone State: NY Zip Code: 11357

29. Business Telephone Number of Representative/Attorney: (212)219-3070

30. Business E-mail Address of Representative/Attorney: j.y.wang.ny@gmail.com

By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

31. Printed Principal Name: Guimin Lin Title: president

Principal Signature: *Guimin Lin*