Valerie S. Mason Chair

Will Brightbill District Manager



505 Park Avenue, Suite 620 New York, N.Y. 10022-1106 (212) 758-4340 (212) 758-4616 (Fax) www.cb8m.com – Website info@cb8m.com – E-Mail

## The City of New York Community Board 8 Manhattan

February 28, 2024

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

## RE: <u>Columbus Citizens House Inc dba Columbus Citizens FND 8 East 69th Street (Between</u> <u>Madison and Fifth Avenues) 30 Day Waiver Renewal for Liquor, Wine, Beer and Cider License</u>

Dear Deputy Commissioner Benedetto,

Please be advised that Community Board 8 Manhattan received notice on February 26, 2024 for the abovereferenced 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 March 5, 2024 Street Life Committee meeting, so the public has the opportunity to comment on the application. If the applicant fails to appear at the March 5, 2024 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

Authority     State Liquor     Authority     Original      Amended Date      49						
49 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: 02/05/2024 1a. Delivered by: Certified Mail Return Receipt Requested						
<ol> <li>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:</li> </ol>						
O New Applciation O Removal O Class Change For premises in the City of New York:						
O New Application O New Application and Temporary Retail Permit 💿 Renewal O Alteration O Removal						
O Class Change O Method of Operation O 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: Manhattan Community Board 8						
Applicant/Licensee Information:						
4. Licensee Serial Number (if applicable): 1022463 Expiration Date (if applicable): 02/29/2024						
5. Applicant or Licensee Name: Columbus Citizens House Inc						
6. Trade Name (if any): Columbus Citizens FND						
7. Street Address of Establishment: 8 E 69th Street						
8. City, Town or Village: New York , NY Zip Code: 10021						
9. Business Telephone Number of applicant/ Licensee: (212) 249-9923						
10. Business E-mail of Applicant/Licensee: ccf@columbuscitizens.org						
11. Type(s) of alcohol sold or to be sold: O Beer & cider O Wine, Beer & Cider O Liquor, Wine, Beer & Cider						
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 required						
13. Type of Establishment: Restaurant (full kitchen and full menu required)						
Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke						
(check all that apply)						
Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment						
Video/Arcade Games Third Party Promoters Security Personnel						
Other (specify):						

OFFICE USE ONLY

rev12302021

15. Licensed Outdoor Area: 🔽 None 🔹 Patio or Deck 🔹 Rooftop 🖾 Garden/Grounds 🔹 Freestanding Covered Structure (check all that apply) 🔄 Sidewalk Cafe 🔹 Other (specify):

opla-rev12302021								
	OFFICE USE	EONLY						
	🔿 Original 🔵 Amended 🛛 🛛	Date						
			49					
			-					
16. List the floor(s) of the building that the establishment is located on: Main Floor and Lower Level								
17. List the room number(s) the estable	lishment 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 es	stablishments? 🗿 Yes (Ç No						
19. Will the license holder or a manage	er be physically present within the establish	ment during all hours of operation?	• Yes • No					
20. If this is a transfer application (an e	existing licensed business is being purchase	d) provide the name and corial number o	f the liseness					
			r the licensee:					
L	Name	L						
		Serial Nur	nber					
21. Does the applicant or licensee own	the building in which the establishment is	located? • Yes (if YES, SKIP 23-26)	ONo					
		0	0					
	Owner of the Building in Which the Li							
	Owner of the Building in Which the Lie	censed Establishment is Located						
22. Building Owner's Full Name: Col	lumbus Citizen Foundation							
23. Building Owner's Street Address:	8 East 69th Street							
	o East oath Street							
24. City, Town or Village: New York		State: NY	Zip Code: 10021					
25. Business Telephone Number of Building Owner: (212) 249-9923								

## 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:	Anthony L. Caraball	lo					
27. Representative/Attorney's Street Address: 111 Atlantic Avenue							
28. City, Town or Village: Brooklyn		State: NY	Zip Code: 11201				
29. Business Telephone Number of Representative/Attorney: (718) 875-2929							
30. Business E-mail Address of Representativ	e/Attorney: anthony	@cblservices.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:	Lisa Ackerman		Title: ABC Officer	
Principal Signature:	phion	alen		

February 26, 2024

Manhattan community Board 8 505 Park Avenue, Suite 620 New York, NY 10022 Attn: Robert Beirne

RE: Columbus Citizens House Inc. 8 E 69<sup>th</sup> Street New York, NY 10021 30 Day Waiver Request

Dear Robert,

Hope all is well with you today.

I am requesting a 30-day waiver letter for the submission of my renewal application. The license is nearing its expiration date as of 2/29/2024. This letter would allow us to submit the application to the NYS Liquor Authority without waiting thirty days.

I understand that this will be a one-time waiver for the establishment and that no future 30 Day waivers will be considered for this license.

I or a representative will attend the upcoming Street Life Committee meeting, taking place on March 5, 2024 at 6:30 PM via Zoom to respond to the community.

Thank you for your consideration and have a nice day!

Sincerely,

in alan

Lisa Ackerman Columbus Citizens House Inc. 8 E 69<sup>th</sup> Street New York, NY 10021