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February 12, 2025

FedEx

Manhattan Community Board No. 8
505 Park Avenue
Suite 620
New York, New York 10022
Attention: Will Brightbill, District Manager

Re: 945 Madison Restaurant Venture LLC
945 Madison Avenue
New York, New York 10021

Dear Will:

I am proving the statutory Thirty-day notice of intention to file applications for an on-premises liquor license and temporary retail permit for a restaurant with the New York State Liquor Authority for 945 Madison Restaurant Venture LLC.

The space was previously operated by the Whitney Museum of Art with a restaurant liquor license from 1995 to 2016. The space was then operated by The Metropolitan Museum of Art and Tourbillon 75 LLC dba Flora Bar with a restaurant liquor license from 2016 to 2020. 945 Madison Avenue has been operating as a museum since 1966.

Please place the applications on the March 4, 2025 agenda.

Thank you.

Very truly yours,

Jules Vigh

Jules Vigh
Paralegal

Enclosure

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

1. Date Notice Sent: **February 12, 2025**1a. Delivered by: **Fed Ex: 7720 0842 3582**

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 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 ☐ AlterationFor **New** and Temporary Retail Permit 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**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 No. 8****Applicant/Licensee Information:**4. Licensee Serial Number (if applicable): **Pending**Expiration Date (if applicable): **Pending**5. Applicant or Licensee Name: **945 Madison Restaurant Venture LLC**6. Trade Name (if any): **To be determined**7. Street Address of Establishment: **945 Madison Avenue**8. City, Town or Village: **New York**, NY Zip Code: **10021**9. Business Telephone Number of applicant/ Licensee: **Pending**10. Business E-mail of Applicant/Licensee: **gshea@romanandwilliams.com and jules@brpclaw.com**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 required13. Type of Establishment: **Restaurant**☐ 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.): **Acoustic**☐ Patron Dancing ☐ Employee Dancing ☐ Exotic Dancing ☐ Topless Entertainment☐ Video/Arcade Games ☐ Third Party Promoters ☒ Security Personnel*☐ Other (specify): _____***Only for private/ special events.**15. Licensed Outdoor Area: (check all that apply) ☐ None ☒ Patio or Deck ☐ Rooftop ☐ Garden/Grounds ☐ Freestanding Covered Structure
☐ Sidewalk Cafe ☐ Other (specify): _____

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: **Ground floor, cellar and sub-cellar**
17. List the room number(s) the establishment 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 establishments? ☒ Yes ☐ No
19. Will the license holder or a manager be physically present within the establishment during all hours of operation? ☒ Yes ☐ No
20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:
- | | |
|------------|---------------|
| N/A | |
| Name | Serial Number |
21. Does the applicant or licensee own the building in which the establishment is located? ☐ Yes (if YES, SKIP 23-26) ☒ No

Owner of the Building in Which the Licensed Establishment is Located

22. Building Owner's Full Name: **Sotheby's, Inc.**
23. Building Owner's Street Address: **1334 York Avenue**
24. City, Town or Village: **New York** State: **New York** Zip Code: **10021**
25. Business Telephone Number of Building Owner: **646 226 9809**

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: **Donald M. Bernstein, Esq. / Bernstein Redo & Savitsky PC**
27. Representative/Attorney's Street Address: **1177 Avenue of the Americas - 5th Floor**
28. City, Town or Village: **New York** State: **New York** Zip Code: **10036**
29. Business Telephone Number of Representative/Attorney: **212 651 3100**
30. Business E-mail Address of Representative/Attorney: **donald@brpclaw.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: **Robin Standefer** Title: **Managing Member**

Principal Signature: _____

**X**