

08/20/2024

Standardized NOTICE FORM for Providing Notice to a Local Municipality for Adding or Removing Contiguous and/or Non-Contiguous Municipal Space

Page 4 of 4

Print Form

1. Date Notice Was Sent:	4/10/2025	1a. Delivered by:	CERTIFIED MA	AIL	
2. This form must be submitted to the clerk or Local Municipality when filing for a Sunday On-Premises Sales Permit					
This Notice is Being Provided to the Clerk of the following Local Municipality					
3. Name of Municipality:	. Name of Municipality: COMMUNITY BOARD 8				
Licensee Information					
4. License Serial Number:	0240-23-141267 5.		5. Permit Date(s)	: 2-28-2027	
6. License name:	AT IS OWNED BY ELI ZABAR INC				
7. Trade Name (if any): EAT					
8. Street Address of Establishment: 1064 MADISON AVE					
9. City, Town or Village:	IEW YORK			NY Zip Code: 10028	
10. Business Telephone Number of Applicant/Licensee: 917-613-4414					
11. Business E-mail of Applicant/Licensee: EZDSF@ELIZABAR.NET					
12. Describe municipal space to be added: SIDEWALK AND ROADWAY RECEIVED					
12a. What date did you apply for a municipal permit? 7/31/2024 APR 14 2025					
Dennecontative or Attaconor consecuting the licenses					
13. Representative/Attorne	y's Full Name: MICHA	EL KELLY		BY COMMUNITY BOARD 8	
14. Street Address:	136 WAVERLY RO	AD			
15 City Town on Mileson	SCARSDALE		State: NY	7: 6 1 10500	
15. City, Town or Village:	SCARSDALE		State: NY	Zip Code: 10583	
16. Business Telephone Number of Representative/Attorney: 914-632-6036					
17. Business Email Address : KELLYMLK136@GMAIL.COM					
I am the licensee that is applying for the permit and I certify that I know the contents of the above application and the statements and answers therein; that the same are true to my knowledge; that I have been authorized, by order of the Board of Directors of said licensee to make the statements and answers in this application on behalf of said licensee with the same force and effect as if said licensee made such statements and answers itself. By my signature, I affirm - under Penalty of Perjury - that the representations made in this form are true.					
18. Printed Name: MICH	B. Printed Name: MICHAEL KELLY			REPRESENTATIVE	
Signature: X	(MK)				
The above captioned on-premises licensee is applying for an alteration to their existing license with the State Liquor Authority to sell alcoholic beverages on municipal space.					
Please forward any concerns regarding the issuance of the alteration to the attention of The New York State Liquor Authority by e-mail community@sla.ny.gov					