

☐ Original

☐ Amended

Date _____

OFFICE USE ONLY

RECEIVED

JUN 3 2025

NY COMMUNITY BOARD 8

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

1. Date Notice Sent:

6/2/25

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:

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 ☐ 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:

CB-8

Applicant/Licensee Information:

4. Licensee Serial Number (if applicable):

1335573

Expiration Date (if applicable):

6/30/25

5. Applicant or Licensee Name:

Paola's Restaurant Group LLC

6. Trade Name (if any):

Paola's

7. Street Address of Establishment:

1361 Lexington Ave

8. City, Town or Village:

NY

, NY Zip Code:

10128

9. Business Telephone Number of applicant/ Licensee:

(212) 794-1890

10. Business E-mail of Applicant/Licensee:

DanielMarracino@me.com

11. Type(s) of alcohol sold or to be sold:

☐ Beer & cider

☐ Wine, Beer & Cider

☒ Liquor, Wine, Beer & Cider

12. 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:

RESTAURANT

☐ Seasonal Establishment ☐ Juke Box ☐ Disc Jockey ☒ Recorded Music ☐ Karaoke

14. 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:

(check all that apply)

☒ None

☐ Patio or Deck

☐ Rooftop

☐ Garden/Grounds

☐ Freestanding Covered Structure

☐ Sidewalk Cafe

☐ Other (specify):

