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NEW YORK STATE	Liquor Authority
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ALIG 06 2025 Standardized NOTICE FORM for Providing Notice to a Local Municipality y Commuter, Adding or Removing Contiguous and/or Non-Contiguous Municipal Space

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1. Date Notice Was Sent:	07/28/2025	1a. Delivered by:	CERTIF	IED MAIL,	RETURN RECEIPT REQUIRED	
2. This form must be subr	mitted to the clerk or Local M	Municipality when fili	ng for a Su	nday On-Prei	mises Sales Permit	
This i	Notice is Being Provided to	o the Clerk of the fol	lowing Lo	cal Municipa	ality	
3. Name of Municipality:	COMMUNITY BOAR	D 8				
		Licensee Inform	ation			
4. License Serial Number:	0340-23-131527		5. Permit Date(s): 04/01/2025			
6. License name:	1483 FIRST AVENUE RESTAURANT INC.					
7. Trade Name (if any):	MARUZZELLA					
8. Street Address of Estab	olishment: 1483 1ST AVE	ENUE				
9. City, Town or Village:	NEW YORK			,NY	Zip Code : 10075	
10. Business Telephone N	lumber of Applicant/License	ee: (212)988-8877				
11. Business E-mail of App	plicant/Licensee: MA	ARUZZELLA1483@	/AHOO.C	OM		
12. Describe municipal sp	pace to be added: SIDEW	ALK CAFE				
12a. What date did you ap	oply for a municipal permit?	1/8/25				
Rep	resentative or Attorney re	presenting the licer	see			
13. Representative/Attori	ney's Full Name: MICHAE	EL KELLY				
14. Street Address:	136 WAVERLY ROAD					
15. City, Town or Village:	SCARSDALE		State: [NY	Zip Code : 10583	
16. Business Telephone N	Number of Representative/A	attorney: 914 632 6	036			
17. Business Email Addre	ss : KELLYMLK136@GM	MAIL.COM				
I am the licensee that is answers therein; that the to make the statements	applying for the permit and e same are true to my knowl and answers in this applicat su	d I certify that I know the ledge; that I have bee tion on behalf of said uch statements and a	n authorize icensee w nswers itse	ed, by order o ith the same i elf.	ve application and the statements and of the Board of Directors of said license force and effect as if said licensee made	
	gnature, I affirm - under Pen	halty of Perjury - that				
18. Printed Name: MICH	IAEL NELLT	 	litle	AUTHORI	ZED REPRESENTATIVE	
Signature: X		>				
	otioned on-premises licens rity to sell alcoholic bevera			n to their ex	isting license with the State	
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	d any concerns regarding t State Liquor Authority by				tion of	

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Print Form