

OFFICE USE ONLY		
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State of New York
 Executive Department
 Division of Alcoholic Beverage Control
 State Liquor Authority

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

(Page 1 of 2 of Form)

email: feliciahpark@yahoo.com

1. Date Notice was Sent: (mm/dd/yyyy) 01 20 2015

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License

New Application Renewal Alteration Corporate Change

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 3

Applicant/Licensee Information

4. License Serial Number, if not New Application: _____ Expiration Date, if not New Application: _____

5. Applicant or Licensee Name: HKOOK CORP

6. Trade Name (if any): _____

7. Street Address of Establishment: 324 E 6th Street

8. City, Town or Village: New York, NY Zip Code: 10003

9. Business Telephone Number of Applicant/Licensee: 347-628-8588

10. Business Fax Number of Applicant/Licensee: _____

11. Business E-mail of Applicant/Licensee: KOOKRESTAURANT@YAYOU.COM

For New applicants, provide description below using all information known to date.
For Alteration applicants, attach complete description and diagram of proposed alteration(s).
For Current Licensees, set forth approved Method of Operation only.
Do Not Use This Form to Change Your Method of Operation.

12. Type(s) of Alcohol sold or to be sold: ("X" One) Beer Only Wine & Beer Only Liquor, Wine & Beer

13. Extent of Food Service: ("X" One) Restaurant (Sale of food primarily; Full food menu; Kitchen run by chef) Tavern/Cocktail Lounge/Adult Venue/Bar (Alcohol sales primarily; Meets legal minimum food availability requirements)

14. Type of Establishment: ("X" all that apply)

Recorded Music Live Music Disc Jockey Juke Box Karaoke Bar Stage Shows

Patron Dancing (small scale) Cabaret, Night Club (Large Scale Dance Club) Catering Facility

Capacity of 600 or more patrons Topless Entertainment Restaurant Hotel

Recreational Facility (Sports Facility/Vessel) Club (e.g. Golf Club/Fraternal Org.) Bed & Breakfast

Seasonal Establishment

15. Licensed Outdoor Area: ("X" all that apply)

None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure

Sidewalk Cafe Other (specify): _____

