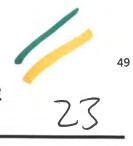
OFFICE USE ONLY				
Original	Amended	Date		



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

1. Date Notice Sent:	1/13/2025 1a. Deli	Overnight with Tracking Number & Proof of Delivery (FedEx)		
Select the type of Appl For premises outside the	lication that will be filed with the Authority for an On- he City of New York:			
	Removal Class Change	JAN 1 4 2025		
For premises in the Cit		By Community Books 3. Man.		
New Application	New Application and Temporary Retail Permit 🔘	Temporary Retail Permit		
O Class Change O	Method of Operation O Corporate Change	Renewal O Alteration		
For Renewal applicants For Alteration applican For Corporate Change For Removal applicants For Class Change applic	nts, attach a complete written description and diagram applicants, attach a list of the current and proposed as, attach a statement of your current and proposed a cants, attach a statement detailing your current licen	ns depicting the proposed alteration(s) corporate principals ddresses with the reason(s) for the relocation		
	ocuments as noted above. Failure to do so may			
This 30-Day Advance Notice is Being Provided to the Clerk of the Following Local Municipality or Community Board:				
3. Name of Municipality o	or Community Board: Manhattan Community B	oard 3		
Applicant/Licensee In	nformation:			
4. Licensee Serial Number	r (if applicable):	Expiration Date (if applicable):		
5. Applicant or Licensee Name: Baja and Humans, LLC				
6. Trade Name (if any):				
7. Street Address of Establ	lishment: 195 Avenue A a/k/a 441 East 12tl	Street		
8. City, Town or Village:	New York	, NY Zip Code: 10009		
9. Business Telephone Nur	mber of applicant/ Licensee: 714-743-82	27		
10. Business E-mail of Applicant/Licensee: c.a.krakowski@gmail.com				
11. Type(s) of alcohol sold o	or to be sold:	seer & Cider Diquor, Wine, Beer & Cider		
12. Extent of Food Service:	O Full Food menu; full kitchen run by a chef/cook	Menu meets legal minimum food requirements; food prep area require		
13. Type of Establishment:	Bar/Tavern			
	Seasonal Establishment Juke Box	Disc Jockey X Recorded Music		
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 Promot			
	Other (specify):			
15. Licensed Outdoor Area: (check all that apply)	Take to Face of Deck Li Rooitop	Garden/Grounds Freestanding Covered Structure side seating within property line		

Original Amend	ed Date				
	49				
16. List the floor(s) of the building that the establishment is located on: Portion of ground floor and basement					
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? O Yes No n/a - Tavern Wine license application					
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:					
Boris & Horton East Village LLC	0267-22-113563				
Name	Serial Number				
21. Does the applicant or licensee own the building in which the estab	lishment 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: DAVID 441 LLC and 441 EAST 12 RICATTO LLC					
23. Building Owner's Street Address: c/o East Village Property Management LLC, 441 East 12th Street					
24. City, Town or Village: New York	State: New York Zip Code: 10009				
25. Business Telephone Number of Building Owner: 212-505-246	2				
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: Martha M. Redo, Bernstein Redo & Savitsky P.C.					
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: martha@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: Carol Krakowski Title: Member					
Principal Signature: X Carol Krakowsk	źi				

OFFICE USE ONLY