

11-21-19

City Clerk of Long Beach

Please be advised that the
Knights Pub 970 West Beach St
LB NY 11561 is Renewing our
NYS LIQUOR License Ser# 1306946
Certificate # 863008 Bar/Tavern License

Respectfully Yours
George Gentile Sr
516 770-9068
George Gentile Sr

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

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

1. Date Notice was Sent: Nov 22-2019 1a. Delivered by: _____

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 Removal Class Change Method of Operation Change

For **New** 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

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: CITY OF LONG BEACH NY 11561

Applicant/Licensee Information:

4. Licensee Serial Number (if applicable): 1306946 Expiration Date (if applicable): 1-31-2020

5. Applicant or Licensee Name: KNIGHTS PUB INC KNIGHTS PUB

6. Trade Name (if any): _____

7. Street Address of Establishment: 970 WEST BEECH STREET

8. City, Town or Village: LONG BEACH, NY Zip Code: 11561

9. Business Telephone Number of Applicant/Licensee: 516-770-9068

10. Business E-mail of Applicant/Licensee: MRSENTS@OPTONLINE.NET

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 or cook Menu meets legal minimum food availability requirements; food prep area at minimum

13. Type of Establishment: BAR/TAVERN

14. Method of Operation: (check all that apply)

Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke

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): _____

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

16. List the floor(s) of the building that the establishment is located on: FIRST

17. List the room number(s) the establishment is located in within the building, if appropriate: 0

18. Is the premises located within 500 feet of three or more on-premises liquor establishments? Yes No

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:

_____	_____
Name	Serial Number

21. Does the applicant or licensee own the building in which the establishment 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: Knights Pub

23. Building Owner's Street Address: _____

24. City, Town or Village: _____ State: _____ Zip Code: _____

25. Business Telephone Number of Building Owner: _____

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: GEORGE GENTILESCO SR

27. Representative/Attorney's Street Address: 87 ILLINOIS AVE

28. City, Town or Village: LONG BEACH State: NEW YORK Zip Code: 11561

29. Business Telephone Number of Representative/Attorney: 516-770-9068

30. Business E-mail Address of Representative/Attorney: MR GENTS@OPTONLINE.NET

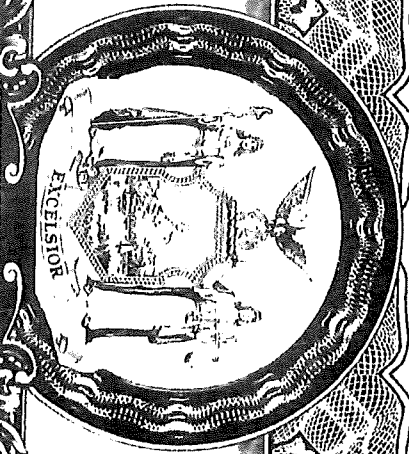
I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations 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: GEORGE GENTILESCO SR Title: MGR.

Principal Signature: George GentileSCO SR

ON-PREMISES LIQUOR LICENSE
SERIAL #: 1306946
COUNTY: MASSAU



EFFECTIVE DATE: 02/06/2018
EXPIRATION DATE: 1/31/2020
CERTIFICATE #: 863008

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGE PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES. IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW

METHOD OF OPERATION

BAR/TAVERN SERVING BEER CIDER WINE AND LIQUOR

Recorded/Juke Box Music

KNIGHTS PUB INC
KNIGHTS PUB
970 W BEECH ST
LONG BEACH NY 11561

FILING FEE \$200.00
LICENSE FEE \$1,792.00

Vincent G. Bradley
Vincent G. Bradley
Chairman

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSEE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SLA FORM 180-033 (10/01)

Certificate No. B0863008

FOLD AND TEAR HERE