



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 Sent: 5/5/2025 1a. Delivered by: Overnight (FedEx) with Tracking Number and Proof of Delivery

RECEIVED

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

MAY 06 2025

For premises outside the City of New York:

☒ New Application ☐ Removal ☐ Class Change

For premises in the City of New York: (counties of Kings, New York, Bronx, Queens and Richmond):

☐ New Application ☐ New Application and Temporary Retail Permit ☐ Temporary Retail Permit

☐ Class Change ☐ Method of Operation ☐ Corporate Change ☐ Renewal ☐ Alteration

VILLAGE OF GREENPORT
CLERK'S DEPARTMENT

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: Village of Greenport

Applicant/Licensee Information:

4. Licensee License ID (if applicable): _____ Expiration Date (if applicable): _____

5. Applicant or Licensee Name: HF Hotel Owner LLC and OLS Hotels & Resorts LLC

6. Trade Name (if any): The Harbor Front Inn

7. Street Address of Establishment: 209 Front Street

8. City, Town or Village: Greenport, NY Zip Code: 11944

9. Business Telephone Number of applicant/ Licensee: 631-477-0707

10. Business E-mail of Applicant/Licensee: info@theharborfrontinn.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: Hotel with Cafe

☐ 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: ☐ None ☐ Patio or Deck ☐ Rooftop ☐ Garden/Grounds ☐ Freestanding Covered Structure
(check all that apply) ☐ Sidewalk Cafe ☒ Other (specify): Pool deck

16. List the floor(s) of the building that the establishment is located on: Entire hotel - 3 floors plus cellar

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? ☒ Yes ☐ No
*not applicable, application is wine/beer/cider

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 ID number of the licensee:

n/a	n/a
Name	License ID 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:

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: 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

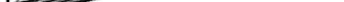
29. Business Telephone Number of Representative/Attorney: 212-651-3100

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: Erik Warner Title: Managing Member

Principal Signature: 

Date: May 2, 2025

BERNSTEIN REDO & SAVITSKY P.C.
-ATTORNEYS AT LAW-

1177 AVENUE OF THE AMERICAS, 5TH FL
NEW YORK, NEW YORK 10036
TEL (212) 651-3100

DONALD M. BERNSTEIN
MARTHA M. REDO
BENJAMIN S. SAVITSKY

May 5, 2025

RECEIVED

VIA FEDEX

Village of Greenport
236 Third Street
Greenport, NY 11944

MAY 06 2025
VILLAGE OF GREENPORT
CLERK'S DEPARTMENT

Attn: Candace Hall, Village Clerk

Re: HF Hotel Owner LLC
d/b/a The Harbor Front Inn
209 Front Street
Greenport, NY 11944

Dear Ms. Hall:

We represent HF Hotel Owner LLC and The Harbor Front Inn. Enclosed is the statutory 30-Day Advanced Notice of our client's intention to file an application with the New York State Liquor Authority ("SLA") for a Hotel Wine License and Temporary Retail Permit for the property.

We are requesting a waiver of the 30-days' notice period so that the SLA may act on the application as soon as it has been filed. If you are able to grant a waiver, kindly email the waiver to me at martha@brpclaw.com.

If you have any questions or require additional information, please contact this office.

Thank you.

Very truly yours,
Signed by:
Martha M. Redo
2718267BC275413
Martha M. Redo

Enclosure