

LAW OFFICE OF  
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**Bruno V. Gioffre, Jr.**  
Admitted in NY, CT & FL

August 19, 2025

***Via Priority Mail***

Village Clerk  
Village of Middleburgh  
309 Main Street  
Middleburgh, NY, 12122

Re: Notice to Municipality of Application for a On-Premises Liquor License  
for Yellow Dog Tavern LLC - 329 Main Street, Middleburgh NY 12122

Village Clerk:

On behalf of our client, Yellow Dog Tavern LLC, we hereby notify you pursuant to Alcohol Beverage Control Law, Sections 64, Subdivision 2a and 99D, that our client intends to file an application for an On-Premises Liquor License to operate a restaurant located at 329 Main Street, Middleburgh, NY 12122. Enclosed herewith is the SLA Standardized Notice Form for your review.

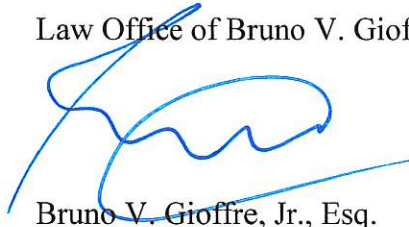
Our client is hoping to open this restaurant as soon as possible.

Accordingly, we respectfully request that the Village of Middleburgh, waive the statutory thirty (30) day waiting period to allow our client to file its application for an On-Premises Liquor License and Temporary Retail Permit as soon as possible to avoid any delays in obtaining its Temporary Retail Permit to sell alcohol. Please advise the undersigned of the Village of Middleburgh's position at your earliest convenience.

Thank you for your consideration. Should you have any questions, please do not hesitate to call.

Very truly yours,

Law Office of Bruno V. Gioffre, Jr., PLLC



Bruno V. Gioffre, Jr., Esq.

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

1. Date Notice Sent: **August 19, 2025**      1a. Delivered by: **Overnight Mail, Tracking Number and Pro**

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

For premises outside the City of New York:

☒ New Application    ☐ Removal    ☐ Class Change

For premises in the City of New York:

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

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

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: **Middleburgh Village Clerk**

### Applicant/Licensee Information:

4. Licensee Serial Number (if applicable): **New Application**      Expiration Date (if applicable): **New Application**

5. Applicant or Licensee Name: **Yellow Dog Tavern LLC**

6. Trade Name (if any):

7. Street Address of Establishment: **329 Main Street**

8. City, Town or Village: **Middleburgh**, NY      Zip Code: **12122**

9. Business Telephone Number of applicant/ Licensee: **631-433-2388**

10. Business E-mail of Applicant/Licensee: **Yellowdogtavern@yahoo.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: **Restaurant (full kitchen and full menu required)**

☐ 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.): **Small Bands**

☐ 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):

☐ Original☐ Amended

Date \_\_\_\_\_

16. List the floor(s) of the building that the establishment is located on: **1st Floor**
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
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: **Sara Masterson**
23. Building Owner's Street Address: **177 Amelia Lane**
24. City, Town or Village: **Middleburgh** State: **New York** Zip Code: **12122**
25. Business Telephone Number of Building Owner: **518-527-7433**

**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: **Bruno V. Gioffre, Jr.**
27. Representative/Attorney's Street Address: **111 S Ridge Street, Suite 303**
28. City, Town or Village: **Rye Brook** State: **New York** Zip Code: **10573**
29. Business Telephone Number of Representative/Attorney: **914-481-8900**
30. Business E-mail Address of Representative/Attorney: **bruno@bgioffrelaw.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: **Joseph Bilello** Title: **LLC Member**

Principal Signature: 



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08/19/2025

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STE 303  
111 S RIDGE ST  
RYE BROOK NY 10573-2838

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VILLAGE OF MIDDLEBURGH  
VILLAGE CLERK  
309 MAIN ST  
MIDDLEBURGH NY 12122

USPS TRACKING #



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Cut on dotted line.

