



CB2 CLC Applicant Questionnaire

Upstate State Collective LLC/Jennifer Tzar

OCMRTL-2023-001155

**66 Jane Street 10014
(AKA 807 Greenwich Street)**

This application will be reviewed by the CB2 CLC on Monday, Jan. 12, 2026

Register to attend the hearing, submit questions/comments:

<https://bit.ly/ask-clc>

	Timestamp	1/12/2026 10:39:06
1.	PROXIMITY Are there any pending or operational Proximity Protected cannabis businesses within 1000-ft the proposed location?	no
2.	RSVP for Jan. 12, 2026 CB2 CLC Hearing Name of all individuals who will present your application to CB2 - as well as the names of all parties that will be in attendance on behalf of this business, their role(s)/relationship to the business (i.e. applicant/self, partner, investor, manager, attorney, consultant, lobbyist...)	Kayla Ferguson
3.	LEGAL BUSINESS NAME The corporate entity (i.e. LLC, Inc, Corp...), for which you have applied for licensure with CCB/OCM, or been granted licensure by the NYS CCB/OCM for which you are submitting this questionnaire. Include previous corporate entity name if it has changed since applying and DBA(s), if applicable.	Upstate State Collective LLC
4.	OCM APPLICATION NUMBER The application number issued to this business by the NYS Office of Cannabis Management at the time of submission to the state: (example: OCMRETL-202X-000XXX, OCMCAURD-202X-000XXX...)	OCMRTL-2023-001155
5.	OCM LICENSE NUMBER & ISSUE DATE If a full license has been issued to this business by the NYS Office of Cannabis Management, please write it below, along with the date of licensure. If unlicensed, write n/a: (example: OCM-RETL-2X-000XXX, OCM-CAURD-2X-000XXX - or n/a)	N/A
6.	PROPOSED PREMISES The address(es), floor(s), zip code and cross-streets of the premises that the business hopes to operate.	66 Jane St, Ground Floor, NY NY 10014. (807 Greenwich St at Jane St)
7.	NYS APPLICATION TYPE Type of NYS cannabis license for which this business is applying/applied.	Adult-Use Retail license (Applied Nov. 2023 Non-CAURD)
8.	BUSINESS CATEGORY/FEATURES Check all that apply.	Retail
9.	OPENING DATE What is your projected opening date?	April 2026
10.	CB2 INTEREST Does any individual, group, advisor, employee, or entity with financial or operational interest in your business have a connection to Community District 2?	Resident, Business Owner
11.	CB2 INTEREST 2: Please share the specifics of the connection to CB2.	Dagmar Soho Business Owner and Resident
12.	NOTICES 1 Have you, or any party with direct or indirect interest in this business, previously submitted a Notification to Municipality OCM-06009 (NTM) Form CB2 for any entity?	No
13.	NOTICES 3 If you answered "yes" to either question above, please share the	n/a

	corporate entity, OCM number, submission date(s), address(es) of the proposed premises, and any other information that will help us locate the previous submission(s). If not applicable, write N/A.	
14.	WITHDRAWAL Do you wish to, for any reason, withdraw your Notification to Municipality from consideration by CB2 Manhattan? If yes - send us an email as soon as possible:	No • I want to appear before the CLC
15.	YOUR NAME Name(s), email address(es) & phone number(s) of individual(s) completing this questionnaire, and name of the individual granting authorization.	jennifer tzar [REDACTED]
16.	REPRESENTATIVE Name & Contact information of Applicant's Legal Representative and/or Agent for Service of Process (if different than above)	Jennifer Tzar
17.	PRINCIPAL Principal owner's name, email address, home address, and phone number.	Jennifer Tzar
18.	FUTURE OWNERSHIP Have you, or do you have plans to transfer or sell any ownership or voting stake in your business to any individual or entity, now or in the future?	No
19.	FINANCING Provide the full legal name of every person or entity that has, will, or may provide capital to this business in any form including gifts, grants, or loans, whether secured or unsecured, and include any affiliated or related entities acting on their behalf. This includes capital provided currently, previously, or anticipated in the future, regardless of whether any agreement is formalized.	Robin Hood Cannabis (Dagmar Soho Loan)
20.	AGREEMENTS Is this business engaged in a Goods and Services, Franchise, Branding or Management Services Agreement, or in negotiations to engage in such?	Yes
21.	INFO & TERMS	
	If this business is currently engaged in, is preparing to engage in, has executed preliminary agreements or letters of intent for, or has formed any affiliated or related entity for the purpose of engaging in any Goods & Services, Franchise, Branding, Licensing, or Management Services Agreement of any kind, please share the following details: •The legal name of every corporate entity involved (including parent companies, subsidiaries, affiliates, shell entities, disregarded entities, or any new or special-purpose entities formed to facilitate or hold the agreement). •The full legal names and positions of all individuals providing or overseeing such services, either directly or through any entity listed above. *Include any entity or person participating now, in development, in negotiation, or organized in anticipation of such an agreement, whether or not services have commenced or revenue has begun to flow. n/a if not applicable	
	n/z	
22.	Social & Economic Equity Applicant Definitions APPLICANT CATEGORY 1 (check all that apply):	Woman-Owned Business
23.	APPLICANT CATEGORY 2 Please share your priority status according to the Adult-Use Social & Economic Equity Applicant Overview (Please review prior to answering as priority guidelines are specific. Check all that apply):	CDI: Member of a community disproportionately impacted by the enforcement of cannabis prohibition
24.	INTERESTED PARTIES 2 Does any individual or entity with direct or indirect interest in the applicant's license, or financial or operational interest in this license, associated in any way with a cannabis license or business anywhere in the world? If so, please share the name of that business, location of that business, and a description of their role in that business.	Jennifer Tzar, owner of Dagmar Soho and Dagmar Williamsburg
25.	INTERESTED PARTIES 3 If you answered in the affirmative above, are you, in whole or in part, applying here under that individual's or entity's corporate entity, brand, marque, trademark, label, service mark, logo, stamp, emblem, or imprint?	Yes
26.	PROXIMITY STATUS Has the proposed premises been granted Proximity Protection by the OCM for this business?	Yes

	<u>PROXIMITY</u>	
	Please list all in relation to the proposed premises: a) Houses of Worship within a 200 ft. radius within 500 feet:	
27.	b) Schools/school grounds (as defined by Education Law) c) drug treatment facilities d) Social/human service providers e) Shelters/transitional/congregate/temporary/supportive housing f) Harm reduction facilities	g) Addiction treatment offices/facilities h) Community facilities i) Parks j) playgrounds k) private/public plazas
	Within Legal Proximity limits according to OCM guidelines.	
28.	<u>PREMISES CATEGORY</u> What type of building is the proposed retail premises? Please check all that apply.	Predominantly Residential w/ Commercial
29.	<u>PREMISES SIZE</u> a) How many floors/levels of this premises will your business utilize? b) What is the square footage of each floor? c) How will each space be utilized?	1 Flr. 980 sq ft
30.	<u>PROPERTY OWNER & CONTACT</u> Name, Phone Number, Business Address & Email Address of the entity and/or individual that owns the building within which your proposed premises exists. (not the broker, realtor or property management)	Hal Sears, 66 Jane St, ny ny 10014
31.	<u>LANDLORD</u> Provide the full legal name, phone number, business address, and email address of all individual(s), as well as the associated legal entity(ies), who signed the document(s) establishing control over the building in which your proposed premises is located.	Hal Sears, 66 Jane St, ny ny 10014
32.	<u>PREMISES CONTROL</u> Check all existing documents that demonstrate this business's legal or contractual control over the proposed premises.	Commercial lease agreement
33.	<u>PRIOR USE</u> Do any individuals or entities with direct or indirect interest in this business currently operate, or ever operated a business at the proposed premises?	Yes
34.	<u>PRIOR USE</u> If you answered "Yes" or "Maybe" above, please list all previous businesses, the business category, and dates of operation.	Real Estate develop company
35.	<u>PRIOR LICENSURE</u> Have any of the following license/permit types ever been granted for the proposed premises? SLA On-premises, SLA Off-premises, DCWP Tobacco Retail Dealer, DCWP Electronic Cigarette Retail Dealer, OCM Cannabinoid Hemp Retail, Cabaret License, Place of Assembly Certificate of Operation	No
36.	<u>RECENT USE</u> a) What was the name of the previous tenant, and previous use of the proposed premises? b) What type of business was it? c) What dates was it in operation?	Real estate development. I don't know the dates.
37.	<u>INGRESS & EGRESS</u> Please list the addresses for all exits, entrances, and alternate addresses of the proposed premises.	807 Greenwich st NY NY 10014
38.	<u>HOURS OF OPERATION</u> What are the proposed Hours of Operation for this business (each day of the week)?	10am to 10pm
39.	<u>OUTDOOR OPERATIONS</u> Will this business utilize any outdoor space? If so, please describe how it will use the outdoor space, including the roof and sidewalk in front of the proposed premises.	no
40.	<u>SIDEWALK STEWARDSHIP</u> What is the anticipated increase in sidewalk traffic? How will you manage the sidewalk, crowd control, vehicular traffic? Will you use stanchions and ropes?	no, we don't expect any sidewalk issues.
41.	<u>IMPACT</u> Please describe how you plan to prevent noise, loitering and smoking outside your establishment and nearby.	Signage and verbally
42.	<u>STAFF LIST</u> How many people will work at the proposed premises once it is operational? List titles & positions for each individual.	2. One Sales Person and One Inventory Person on at all times.
43.	<u>ADA COMPLIANCE</u>	yes

	ADA Compliance Guides for Small Business Owners Is your business ADA compliant? If not, what is your plan to bring it into compliance?	
44.	ADVERTISING How will you advertise your business?	Word of mouth and Google
45.	EVENTS Will you close for private events? What type of events? How many times per year?	no
46.	ON-SITE CONSUMPTION Does this business hope to offer on-site consumption once regulations allow?	No
47.	CONSUMPTION FACILITY a) In what part of the proposed premises will the consumption site be located? b) What is the capacity and square-footage of the consumption area?	N/A
48.	DELIVERY Will this business offer delivery?	Maybe
49.	FACADE Will you be, or have you made, any changes to the building façade?	Up to the Historical Board rules
50.	LANDMARKS/SPECIAL DISTRICT Is the proposed premises a landmark building, or within a historical or special district?	Yes
51.	ZONING COMPLIANCE If the proposed premises or area holds any special status, what are the regulations governing its use? What considerations have been taken to comply with zoning laws and standards specific to this property or area?	Signage and store front rules
52.	OUTDOOR SPACE Whether or not this business will utilize outdoor space, does the proposed premises allow access to any?	No
53.	SOUND ATTENUATION Will this business play music, or have any amplified sounds from computers, monitors, televisions or speakers audible to neighboring residents, businesses or the exterior of the store?	No
54.	COMMUNITY ENGAGEMENT Please describe your community outreach efforts.	Speaking to neighbors and the Jane St Block association where we had a meeting in the space with local residents on Jan 6
55.	CO-TENANTS & NEIGHBORS If your business is located in or near any residential buildings, please describe your outreach efforts to residents:	Calling and Emailing neighbor
56.	PUBLIC BENEFIT How will this business be of benefit to the surrounding community?	Supplying product, making a beautiful store environment with custom cabinetry that is meant to blend in with the local historical environment.
57.	HEALTH & SAFETY What measures will be implemented to avoid the type of criminal activity commonly attracted by cannabis businesses, and to prevent spillover crime in the surrounding community?	Security Cameras and Panic Buttons
58.	EXPERIENCE Has the proposed premises or any individual or entity with direct or indirect interest in this business ever owned, leased, operated, managed or been employed by a shop selling cannabis, hemp, CBD, tobacco products, vapes, or ancillary paraphernalia - whether it was licensed or unlicensed?	Yes
59.	EXPERIENCE A Please share the d/b/a, corporate entity, and address of the above-referenced business(es). If there is more than one, please list all.	Dagmar Cannabis Soho, Dagmar Cannabis Williamsburg
60.	INCORPORATION Please provide proof that you, and the related corporate entity are authorized to conduct business in NYS (State Dept. Letter, Articles	<i>SUBMITTED</i> <i>[Silver and Spindle LLC - Certificate of Publication(68409675.1)]</i>

	of Organization/Incorporation)	
61.	CAP TABLE Current capitalization table.	SUBMITTED & ATTACHED [“Dagmar West Village 100 percent owner: Jennifer Tzar CEO”]
62.	EMPLOYEE MANUAL Please upload the security, operating, and safety procedures guideline for workers.	SUBMITTED [Updated Employee Handbook (Dagmar SoHo) April 2025]
63.	PREMISES CAPACITY/AUTHORIZED USE Please upload a Certificate of Occupancy &/or Letter of No Objection showing legal capacity and authorized use of the proposed premises.	SUBMITTED & ATTACHED [9/30/65 Cof O]
64.	SECURITY Please upload the security plan for this business.	SUBMITTED & ATTACHED [“Dagmar West Village Security Plan Work in Progress. Cameras and Panic buttons connected directly to police Station”]
65.	PREMISES CONTROL DOCS Please upload the full documentation proving control over the proposed premises. (e.g. lease, deed, Letter of Intent...)	SUBMITTED (UNSIGNED) [“LEASE (this “Lease”) dated as of December ___, 2025 (the “Effective Date”), between JANE AND GREENWICH LLC (“Landlord”), a New York limited liability company, having an office at XXXXXXXXXX Laguna Niguel, California 92677, and UPSTATE STATE COLLECTIVE LLC (“Tenant”), a New York limited liability company, having an address at 66 Jane Street, New York, New York 10014....”
66.	SITE PLAN AND/OR FLOOR PLAN For the proposed premises.	
		<p>SUBMITTED - 11/03/2025 OCM EMAIL TO MARCEL HOOKS - ATTACHED</p> <p>[“Dear applicant, this message serves as a notification that the New York State office of Cannabis management (the Office) has reviewed the proposed location address reference above, as submitted in your application and the location currently meets the distance and proximity requirement set for in the Cannabis Law and its associated regulations.</p> <p>Approval to commence operations will be based upon your satisfactory completion of your application. This approval will be provided, in writing, from the Office after it is determined that you have met all operating requirements, including the delivery of any notification municipality in accordance with Section 76 of the Cannabis law, any other municipality approvals as required by Cannabis law and associated regulations, and the submission of any additional supporting documentation requested by the Office.</p> <p>The office will be following up on the next steps on how to complete your adult use retail dispensary application in the New York Business Express (NYBE) portal. Please expect further communication from the office shortly....”]</p> <p>SUBMITTED - 11/03/2025 OCM EMAIL TO MARCEL HOOKS - ATTACHED</p> <p>[“Dear applicant, this message serves as a notification that the New York State office of Cannabis management (the Office) has reviewed the proposed location address reference above, as submitted in your application and the location currently meets the distance and proximity requirement set for in the Cannabis Law and its associated regulations.</p> <p>Approval to commence operations will be based upon your satisfactory completion of your application. This approval will be provided, in writing, from the Office after it is determined that you have met all operating requirements, including the delivery of any notification municipality in accordance with Section 76 of the Cannabis law, any other municipality approvals as required by Cannabis law and associated regulations, and the submission of any additional supporting documentation requested by the Office.</p> <p>The office will be following up on the next steps on how to complete your adult use retail dispensary application in the New York Business Express (NYBE) portal. Please expect further communication from the office shortly....”]</p>
67.	APPLICATION CONFIRMATION and/or CERTIFICATE OF LICENSURE FROM THE OCM The confirmation received from the state upon submission, and if applicable, the official Certificate of Licensure issued to this business by the OCM.	SUBMITTED - 11/03/2025 OCM EMAIL TO MARCEL HOOKS (duplicate) - ATTACHED (see above)
68.	INTERIOR & EXTERIOR PHOTOS Current photos of the inside and outside of the entire proposed premises.	SUBMITTED - ATTACHED
69.	PRODUCT MENU & PRICE LIST What cannabis, and other non-cannabis products will this business sell?	SUBMITTED - PRODUCT LIST - ATTACHED [“Cannabis Products for Dagmar West

		Village: Pre Rolls, Flower, Vapes, Gummies, Tinctures, Cannabis related Paraphernalia, Non Related Cannabis Home Goods”
70.	LETTERS OF SUPPORT Such documents must include verifiable the names, addresses, phone numbers and/or email addresses of all signatories for verification.	NONE SUBMITTED
71.	BUSINESS PLAN / DECK Or, any other documentation that might assist the CLC in learning more about the business.	NONE SUBMITTED
72.	PCA Statement If there are active or pending Proximity Protected cannabis businesses within 1000 ft of the proposed premises, have you submitted the required PCA Statement to CB2?	N/A
73.	PREVIOUS EMPLOYMENT What is the principal applicant/licensee's current and/or prior profession or business? Please provide the name of the last two employers or businesses, and an overview of the applicant's previous business experience.	CEO of Dagmar Cannabis
74.	SHARED SPACE Does the proposed premises allow any access to the premises of neighboring businesses or residential areas of the building?	No
75.	DELIVERY METHOD If you answered "Yes" above, and intend to offer delivery, please share how it will be implemented, and catchment area you plan to serve.	No plans at the moment and likely never will.
76.	NOTICES 2 Have you, or any party with direct or indirect interest in this business, previously submitted a Notification to Municipality OCM-06009 (NTM) Form to any other NYS municipality or NYC Community Board for any entity?	No
77.	CURRENT USE Is there a business of any kind currently operating at your proposed premises?	No
78.	INTERESTED PARTIES 1 Full name of every individual with financial interest in this business, and percentage of ownership for each person that has membership rights in the application or license in accordance with the provisions of any articles of incorporation, bylaws, limited liability corporation agreements, partnership agreements or operating agreements.	Jennifer Tzar
79.	CHANGES <u>If yes, please describe the changes in detail:</u> For example: Installation of new signage or awning, Replacement of windows or doors, Painting or cladding changes, Structural modifications affecting the appearance.... Include materials, colors, dimensions, and style changes if relevant, as planning authorities often need this level of detail.	Signage
80.	AGREEMENTS: Please upload any existing or proposed Goods and Services Agreements, Franchise Agreements, Branding Agreements, or Management Services Agreements relating to the operation of the proposed premises, whether executed, in draft, or under consideration. If more than one applies, please upload all relevant documents.	NONE SUBMITTED
81.	Does or will any party with whom this business has, or may have in the future, an agreement granting direct or indirect approval or control over pricing, vendors, promotions, staffing, inventory, or store layout as a condition of that agreement?	No
82.	What type of agreement is this business engaged in?	N/A

83.	Was Proximity Protection granted prior to the OCM issuing guidance to correct the process by which it had been assessing adult-use retail dispensary location distance requirements relative to schools?	N/A
84.	Did you receive correspondence from the OCM notifying you that your proposed location does not comply with Cannabis Law § 72 (6)?	No
85.	DESIGN & CONSTRUCTION If applicable, please upload a document containing links to all Landmarks Preservation (LPC) applications and approvals Please upload all Department of Buildings (DOB) permits for any and all completed, in progress, and/or future changes to the interior and exterior of the proposed premises.	<i>NONE SUBMITTED</i>



DEPARTMENT OF BUILDINGS

BOROUGH OF ~~MANHATTAN~~ ~~THE CITY OF NEW YORK~~, THE CITY OF NEW YORK
 Date ~~October 25th, 1965~~ No. ~~62237~~

CERTIFICATE OF OCCUPANCY

NO CHANGES OF USE OR OCCUPANCY NOT CONSISTENT WITH THIS CERTIFICATE SHALL BE MADE UNLESS FIRST APPROVED BY THE BOROUGH SUPERINTENDENT

This certificate supersedes C. O. No. ~~XXXX~~
 THIS CERTIFIES that the ~~new~~ altered ~~XXXX~~ building premises located at ~~66 Jane Street 807 ON GREENWICH ST.~~ Block 625 Lot 5

That the zoning lot and premises above referred to are situated, bounded and described as follows:
 BEGINNING at a point on the ~~South~~ side of ~~Jane St.~~
 distant ~~0.20~~ feet east from the corner formed by the intersection of
 Jane St. and ~~GREENWICH ST.~~
 running thence ~~South 18.3~~ feet; thence ~~east 50.0~~ feet;
 thence ~~north 22.6~~ feet; thence ~~west 50.9~~ feet;
 running thence _____ feet; thence _____ feet;

to the point or place of beginning, conforms substantially to the approved plans and specifications, and to the requirements of the Building Code, the Zoning Resolution and all other laws and ordinances, and of the rules of the Board of Standards and Appeals, applicable to a building of its class and kind at the time the permit was issued; and

CERTIFIES FURTHER that, any provisions of Section 646F of the New York Charter have been complied with as certified by a report of the Fire Commissioner to the Borough Superintendent. CLASS ~~J, N.F.P.~~
 P.B. or Alt. No.— ~~1023/63~~ Construction classification—
 Occupancy classification— ~~Residence & Commercial~~ height ~~4~~ stories, ~~48~~ feet.
 Date of completion— ~~9/30/63~~ Located in ~~E6~~ Zoning District.
 at time of issuance of permit. ~~321/65~~

This certificate is issued subject to the limitations hereinafter specified and to the following resolutions of the Board of Standards and Appeals: } (Calendar numbers to be inserted here)
 and The City Planning Commission:

PERMISSIBLE USE AND OCCUPANCY

Off-Street Parking Spaces _____
 Off-Street Loading Berths _____

STORY	LIVE LOADS Lbs. per Sq. Ft.	PERSONS ACCOMMODATED	USE
CELLAR	On ground		BOILER room and storage.
1st story	100	30	Store
2 & 3 STYS.	40 each		One (1) apt.
4th story	40		One (1) apt.
			FUEL OIL permit No.195204.

OFFICE COPY—DEPARTMENT OF BUILDINGS

[Signature]
 Borough Superintendent

Dagmar West Village

100 percent owner:

Jennifer Tzar

CEO

----- Forwarded message -----

From: <noreply@ocm.ny.gov>
Date: Mon, Nov 3, 2025, 3:21 PM
Subject: Adult-Use Retail Application Location Viable
To: <[\[REDACTED\]](mailto:)>

New York State
Office of Cannabis Management
Application #: OCMFRET-2023-001155
Business Entity/Legal Name: Upstate State Collective LLC
License Type: Adult-Use Retail Dispensary License
Date: 11/03/2025
Proposed Address: [66 Jane St New York, NY 10014](#)

Dear Applicant,

This message serves as notification that the New York State Office of Cannabis Management (the Office) has reviewed the proposed location address referenced above, as submitted in your application and the location currently meets the distance and proximity requirements set forth in the Cannabis Law and its associated regulations.

Approval to commence operations will be based upon your satisfactory completion of your application. This approval will be provided, in writing, from the Office after it is determined that you have met all operating requirements, including the delivery of any notification to the municipality in accordance with Section 76 of the Cannabis Law, any other municipality approvals as required by Cannabis Law and associated regulations, and the submission of any additional supporting documentation requested by the Office.

The Office will be following up on the next steps on how to complete your Adult-Use Retail Dispensary application in the New York Business Express (NYBE) portal. Please expect further communication from the Office shortly. If you need assistance or have any questions, please contact the Adult-use Cannabis Program by phone at 1-888-OCM-5151 (1-888-626-5151) or by e-mail at AULicensing@ocm.ny.gov

Sincerely,
Licensing Services
Office of Cannabis Management
Website: <https://cannabis.ny.gov>
E-mail: AULicensing@ocm.ny.gov
Phone: 1-888-OCM-5151 (1-888-626-5151)

Dagmar West Village

Security Plan Work in Progress.

Cameras and Panic buttons connected directly to police Station

Cannabis Products for Dagmar West Village

Pre Rolls

Flower

Vapes

Gummies

Tinctures

Cannabis related Paraphernalia



Non Related Cannabis Home Goods|