

THE CITY OF NEW YORK  
 MANHATTAN COMMUNITY BOARD NO. 3  
 59 East 4th Street - New York, NY 10003  
 Phone: (212) 533-5300 - Fax: (212) 533-3659  
 www.cb3manhattan.org - info@cb3manhattan.org

Dominic Pisciotta, Board Chair

Susan Stetzer, District Manager

**Community Board 3 Liquor License Application Questionnaire**

Please complete and return (with requested diagram) to the Community Board office by fax or email. In addition, bring **6 copies (double sided) plus supporting material requested to the meeting**. Failure to complete and return this form on time will result in your item being placed at the end of the agenda. **Application must be complete to be heard, including petitions and all items on check list below. Use N/A for answer if appropriate.**

Conspicuously display the enclosed posters on the outside of your establishment for **7 days** prior to the meeting. Bring a photo with a newspaper showing date as proof of the posting.

Check which you are applying for:  new liquor license  upgrade of an existing liquor license  
 alteration of an existing liquor license  sale of assets of existing liquor licensed business

**If applying for transfer, you must bring letter from current owner confirming that you are buying business.**

Type of license: liquor Is location currently licensed?  Yes  No

If alteration, describe nature of alteration: n/a

Previous or current use of the location: tavern

Corporation and trade name of current/previous license: Bayville Bridge, Inc.

**APPLICANT:**

Name of applicant and all principals: Lead to Gold, Inc.  
Jason Cott, William Hinds, Joaquin Simo, Troy Sidle

Trade name (DBA): Pouring Ribbons

Premises address: 225 Avenue B

Between what streets: 13th Street & 14th Street

**PREMISES:**

Type of building and number of floors: Commercial, 2

Prior use of premises: liquor store, tavern

Any outside area or sidewalk cafe used for the sale or consumption of alcoholic beverages? (includes roof & yard)  Yes  No If Yes, describe and show on diagram: \_\_\_\_\_

Does premises have a valid Certificate of Occupancy and all appropriate permits?  Yes  No

Do you plan to apply for Public Assembly permit?  Yes  No

Zoning designation: mixed use Maximum number of persons that can legally occupy the premises? 99 Number of tables? 10 Number of seats at tables? 50

**BARS:**

How many \*stand-up bars/ bar seats are located on the premises (and how many seats)? one bar, 11 seats

How many service bars? none

Describe all bars (length, shape and location): one 19 foot, ess-shaped bar, located in south east corner

Any food counters?  Yes  No If Yes, describe: \_\_\_\_\_

\* A **stand up bar** is any bar or counter (whether seating or not) over which a member of the public can order, pay for and receive an alcoholic beverage.

**KITCHEN:**

Does premises have a  full kitchen or  food preparation area? (If any, show on diagram) n/a

Is food available for sale?  Yes  No If yes, describe type of food and submit a menu \_\_\_\_\_  
locally sourced sandwiches, crudite, hummus, and desserts

**PROPOSED METHOD OF OPERATION:**

What type of establishment will this be? (i.e.: restaurant, tavern, sports bar, etc.) \_\_\_\_\_  
artisanal cocktail bar

Will any other business besides food or alcohol service be conducted at said premises?  Yes  No

If yes, details: \_\_\_\_\_

What are the proposed days/hours of operation? (Specify days and hours each day) \_\_\_\_\_  
7 days a week, 5 pm to 2 am

Will the business employ a manager?  Yes  No

How many employees? 14

Will there be security personnel?  Yes  No (If Yes, how many?) one or two

Do you  have or  plan to install  French doors,  accordion doors, or  windows?  none of these

Will there be TV's?  Yes  No (If Yes, how many?) \_\_\_\_\_

Will premises have music?  Yes  No

If Yes, what type of music? Explain in detail: pop music at conversational volume

Type of music/entertainment:  Live musician  Live DJ  Juke box  Tapes/CDs (iPod)  
Volume level:  Background (quiet)  Entertainment level

Do you  have or  plan to install sound-proofing? Please describe your sound system: iPod connected to the speakers currently in the establishment, no plans for additional sound-proofing

Will you host  promoted events,  scheduled performances or  any event at which a cover fee is charged?  
no

Do you have plans to manage or address vehicular traffic and crowd control on the sidewalk caused by your establishment?  Yes  No If "Yes" please attach plans.

Is this establishment wheel chair accessible?  Yes  No

Has this corporation or any principal been licensed previously?  Yes  No

If yes, please indicate name of establishment: n/a

Address: \_\_\_\_\_ Community Board # \_\_\_\_\_

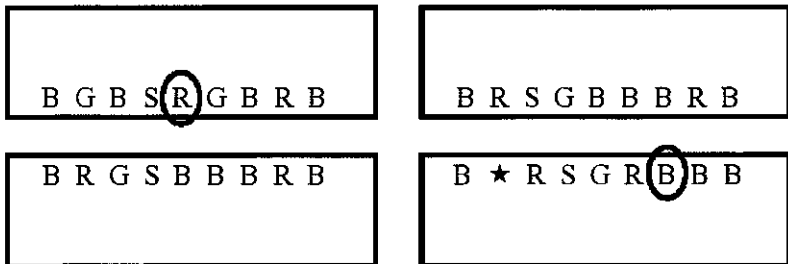
Dates: \_\_\_\_\_

If you answered "Yes" to the above question, please provide a letter from the community board indicating history of complaints or other comments.

Using the diagram below as an example, attach a separate similar diagram that indicates the location (name and address) and total number of establishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. Please indicate whether establishments have On-Premises (OP) licenses by circling the letter on diagram. Please label streets and avenues and identify your location near the middle of the diagram and indicate it with a [★]. Use the letters to indicate Bar, Restaurant, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.

Bar (B)                                      Hotel                                      Restaurant (R)                                      Sidewalk Café (S)  
OP \_\_\_ B/W \_\_\_                                      HL \_\_\_                                      OP \_\_\_ B/W \_\_\_                                      OP \_\_\_ B/W \_\_\_

Example:



How many licensed establishments are within 1 block? three

How many licensed establishments are within 500 feet? thirteen

How many within 500 feet are On-Premises (OP) liquor licenses? eight

If there are block associations or tenant associations in the immediate vicinity of your location, you must contact them. **Please attach proof (copies of letters and poster) that you have advised these groups of your application. Petitions should clearly state the name, address, license for which you are applying, and the hours and method of operation of your establishment at the top of each page.** (Attach additional sheets of paper as necessary). You may contact the Community Board at [info@cb3manhattan.org](mailto:info@cb3manhattan.org) for any contact information that is on file.

#### **INFORMATION REGARDING NEARBY LOCATIONS:**

Premises is within a 500 foot radius of three or more establishments with OP license.  Yes  No

Premises is within 200 feet of any school or place of worship?  Yes  No

If there is a school place of worship within 200 feet of your premises on the same block, submit a block plot diagram or area map showing its location in proximity to your applicant premises (8 1/2" x 11") and indicate the distance and name and address.

Stuy Town

14th St.

<b>Otto's Shrunken Head - B, OP</b>	99 Cent	La Isla - R, BW	Brother's Candy & Grocery - Retail	Avenue B	AlphaBet Café	Aura Cleaners
			Franklin Check Cashing		East Village Fruit & Vegetable	
			<b>Mona's - B, OP</b>		Medilane	
			Amor Bakery		Bee Wine & Liquors - Retail	
			<b>Luca Lounge - B, OP</b>		☆ 2nd Floor	
			Paws and Relax		Subway	
			Unleashed Spa		Vacant	
			Michael's Unisex		<b>Revision - B, OP</b>	
			Compo Deli - Retail		Apartment Building	

13th St.

B-Cup Café	Avenue B	Garden
Rapid Realty NYC		Metropolitan TV Repair
Wood Shop		Raul Candy Store
Apartment Building		Continuum Bike Store
Geova Clothing		
D&Q Computer		
Massage & Bodywork		
<b>B-Side - B, OP</b>		Home Health Care Services
Escuela Cientifica Basilio		
Vamos Sembrar Garden		
Santa Barbara Deli - Retail		