

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003 Phone (212) 533-5300

www.cb3manhattan.org - info@cb3manhattan.org

Jamie I	Rogers, Board Chair	Susan Stetzer, District Manager
	Community Board 3 Liquor License Stipu	llations for Administrative Approval
· — — —	at 40 Bowery	tative of 88 Lan Zhou Handmade Noodle & Dumpling In, New York, NY agree to the following stipulations:
located a		
1. ⊠ ⊠	I will operate a full-service restaurant, specifically a (type of Kitchen open and serving food every night during all hours of	restaurant) <u>RSIAN 1000 RESUMPTIN</u> ,
	hours of operation will be:	
-		Wed 1/am ~12am ;
Thu	1/am ~12am ; Tue 1/am ~ 12am ; 1(am ~12am ; Fri 1/am ~12am ; Sa	at //am 1/2am; Sun //am 1/2am.
		atrons are to be cleared from business at specified closing hour)
	I will not use outdoor space for commercial use.	· -
	I will operate my sidewalk café no later than	
	I will employ a doorman/security personnel on the following	g days:
6. 🗆	I will install soundproofing,	
7. 🗵 at 1 play	I will close any front or rear façade doors and windows 0:00 P.M. every night or when amplified sound is ring, including but not limited to DJs, live music and live musical performances.	☐ I will have a closed fixed façade with no open doors or windows except my entrance door will close by 10:00 P.M. or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances.
	ll not have 図 DJs, 図 live music, 図 promoted events, 図 any formances, ☐ more than DJs/ promoted events per	
9. 🗵	I will play ambient recorded background music only.	
	I will not apply for an alteration to the method of operation ning before CB 3.	or for any physical alterations of any nature without first
11. 🛮	I will not seek a change in class to a full on-premise liquor lic	cense without first obtaining approval from CB 3.
12. 🗵	I will not participate in pub crawls or have party buses come	e to my establishment.
13. 🗵	I will not have unlimited drink specials, including boozy brur	nches, with food.
	I will not have a happy hour or drink specials with or withou by	t time limitations $\underline{\mathit{OR}} \; \square$ I will have happy hour and it will
15. 🗵	I will not have wait lines outside. \Box I will have a staff person	n responsible for ensuring no loitering, noise or crowds outside.
16. 🗵	I will conspicuously post this stipulation form beside my liqu	or license inside of my business.
	Residents may contact the manager/owner at the number be sit the above-stated method of operation if necessary in order than a supervisor of the state of the sta	
18. 🗆 I		
NO CON	certify that the information provided above is truthful and \mathcal{S}	accurate based upon my personal belief.
Signed	(04)	Dated
worn to	this (pth day of September 2017	6//
		Motary Public LING FUNG CHEUNG

Notary Public, State of New York No. 01CH6133227 Qualified in Kings County Commission Expires Sept. 12, 20 2/



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Community Board 3 Liquor License Application Questionnaire

	Today's Date:	
	<u>APPLICANT</u>	
1.	Name of applicant and principle(s):	
	Premise address:	
	Cross streets:	
	Trade name (DBA):	
5.	Check which you are applying to: New liquor licence Alteration of an existing license Sale of assets	
6.	If alteration, describe nature of alteration:	
7.	Is location currently licensed? Yes No	
8.	Type of license:	
9.	Previous or current use of the location:	
10.	Corporation and trade name of current location:	
11.	Type of building and number of floors:	
12.	Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yause? Yes No 12a. What is the permitted occupancy indoors and outdoors?	
13.	Do you plan to apply for Public Assembly permit? Yes No	
14.	What is the zoning designation (check zoning usingmap: http://gis.nyc.gov/doitt/nycitymap/ -please give specific zoning usingmap:	oning
	designation, such as R8 or C2):	_
15.	How many licensed establishments are within 1 block?	
	How many On-Premise (OP) liquor licenses are within 500 feet?	
	Is premise within 200 feet of any school or place of worship? Yes No	
	PROPOSED METHOD OF OPERATION	
18.	Describe your method of operation:	
19.	Will any other business besides food or alcohol service beconducted at premise? Yes No	
20.	If yes, please describe what type:	
21.	What are the proposed days/hours of operation (specify days/hours each day and hours of outdoor space if application application of table: 23. Total number of seats:	

24.	How many stand-up bars/ bar seats are located on the premise?(A stand up bar is any bar					
25	or counter, whether with seating or not, over which a patron can order, pay for, and receive an alcholic beverage.)					
	Describe all bars (length, shape, and location):					
	Does premise have a full kitchen? Yes No					
	What are the hours kitchen will be open?					
28.	What type of food is available for sale?					
29.	. Will a manager or principal always be on site? Yes No If yes, which?					
30.	How many employees will there be?					
31.	Do you have or plan to install French doors accordion doors or windows?					
32.	Will there be TVs/monitors? Yes No (If Yes, how many?)					
33. W	7ill premise have music? Yes No 33a. If Yes, what type of music? Live Music Juke bo	Σ				
	DJ Tapes/CDs/iPo	эd				
34.	If other type, please describe:					
35.	. What will be the music volume? Background (quiet) Entertainment level					
36.	6. Please describe your sound system:					
37.						
38.	3. If Yes, what type of events or performances are proposed and how often?					
	9. How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?					
	Will there be security personnel? Yes No 40a. If Yes, how many and when?					
41.	How do you plan to manage noise inside and outside your business so neighbors will not be affected?	-				
42. D	o you have sound proofing installed? Yes No 43. If not, do you plan to install sound-proofing? Yes No					
	APPLICANT HISTORY					
44.	. Has this corporation or any principal been licensed previously? Yes No <i>If yes</i> , please indicate name of establishment(s):					
45.	• Address: 47. Community Board #					
46.	Dates of operation:					
	. Has any principal had work experience similar to the proposed business? Yes No <i>If yes</i> , explanation of experience or resume.					
48.	Does any principal have other businesses in this area? Yes No <i>If yes</i> , give trade name and describe type of business:					
49.	Has any principal had SLA reports or action within the past 3 years? Yes No <i>If yes</i> , attach list of violations and dates of violations and outcomes.					

COMMUNITY OUTREACH

Please see the Community Board website to find block associations or tenant associations in the immediate vicinity of your location for community outreach. Applicants are encouraged to reach out to community groups.