

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

Alysha Lewis-Coleman, Board Chair

Revised: March 2015

Susan Stetzer, District Manager

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Community Board 3 Liquor License Application Questionnaire

Please bring the following items to the meeting:

NO'	TE: ALL ITEMS MUST BE	SUBMITTED FOR APPLICATION TO BE CO	ONSIDERED.
X		e and outside of the premise.	
X		or architectural drawings of the inside of the	premise.
X	A proposed food and or o		
Ø		oposed business or change in business with	
		cation and in buildings adjacent to, across th	
		ion must give proposed hours and method o	
121		ombination restaurant/bar. (petition provid	
Ø		ness to block or tenant association if one existention if one existent information on the CB 3 website:	sts. You can find
		nl/mancb3/html/communitygroups/comm	unity group listings show!
X			
 Photographs of proof of conspicuous posting of meeting with newspaper showing date. If applicant has been or is licensed anywhere in City, letter from applicable community bo 			
	indicating history of com	aplaints and other comments.	nousie community source
	· ·	-	
	ck which you are applying		
X n	ew liquor license	alteration of an existing liquor license	corporate change
a.	1 (0 () 1 () 1		
	ck if either of these apply: ale of assets		T. 1.
LI S	are or assets	☐ upgrade (change of class) of an existing	iiquor iicense
hoT	ay's Date: March 14, 20	18	
If ar	plying for sale of assets	s, you must bring letter from current own	er confirming that you
		the seller come with you to the meeting.	
Is lo	cation currently licensed?	? □ Yes 図 No Type of license:	
		of alteration:	and the state of t
Prev	vious or current use of the	location: Storage for restaurant	
Corp	oration and trade name o	of current license: Hippo Holdings, LLC / C	heeky Sandwiches / The Jetty
•			
	LICANT:		
		reet (aka 34 Allen Street)	
Cros	s streets: Hester Street (Street) and Canal Street (South)	
Nam	e of applicant and all prin	ncipals: DIN YATES	_
	. I P		
Тгэс	le name (DBA): Cheeky S	Sandwiches	
11al	ic name (DDA).		

PREMISE:				
Type of building and number of floors: Mix-Use				
Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages? (includes roof & yard) □ Yes ☒ No If Yes, describe and show on diagram:				
Do you plan to apply for Public Assembly	permit? □ Yes ☒ No			
What is the zoning designation (check zon	ning using map: http://gis.nyc.gov/doitt/nycitymap/			
please give specific zoning designation, st C-7 (According to NYC - BIS)	nch as R8 or C2):			
	cohol service be conducted at premise? 🗖 Yes 🛛 No			
	eration? (Specify days and hours each day and hours of c; Alcoholic Beverages will be served until 4AM			
Number of tables? 5	Total number of seats? 45			
How many stand-up bars/ bar seats are lo	ocated on the premise? 2 Stand ups, 20 People			
	nether with seating or not) over which a patron can order,			
pay for and receive an alcoholic beverage				
	on): 1 18x24 bar (Kitchen Counter) 1 6x24 both rectangular			
Does premise have a full kitchen 🗷 Yes 🗖				
Does it have a food preparation area?	- · ·			
Is food available for sale? Yes No If y	res, describe type of food and submit a menu			
What are the hours kitchen will be open?	All hours of operations			
Will a manager or principal always be on	site? 🗷 Yes 🗖 No If yes, which?			
How many employees will there be? 11				
Do you have or plan to install 🗖 French d				
Will there be TVs/monitors? □ Yes 🛛 No	(If Yes, how many?)			
Will premise have music? X Ves 7 No				

If Yes, what type of music? ☑ Live musician ☐ DJ ☐ Juke box ☑ Tapes/CDs/iPod				
If other type, please describe				
What will be the music volume? ■ Background (quiet) ■ Entertainment level				
Please describe your sound system: Small Wireless Speakers				
Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? If Yes, what type of events or performances are proposed and how often? Once a month we plant the proposed of the prop				
on having gallery events where on occasion have a musician perform.				
How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. (Please do not answer "we do not anticipate congestion.")				
Will there be security personnel? Yes □ No (If Yes, how many and when) Sun - Monday (1-2 security) Thur - Saturday (3 security)				
How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans. The ceiling of the ground floor is insulated and is reinforced with steel and concrete The doors as well will be closed and insulated.				
Do you have sound proofing installed? ■ Yes ■ No				
If not, do you plan to install sound-proofing? □ Yes □ No				
APPLICANT HISTORY:				
Has this corporation or any principal been licensed previously? Yes No				
If yes, please indicate name of establishment: Cheeky Sandwiches				
Address: 35 Orchard Street, NY, NY 10002 Community Board # CB - 3				
Dates of operation: Dec 14, 2009 - Current				
If you answered "Yes" to the above question, please provide a letter from the community				
board indicating history of complaints or other comments.				
Has any principal had work experience similar to the proposed business? ☑ Yes ☐ No If Yes, please				
attach explanation of experience or resume. Please see attached				
Does any principal have other businesses in this area? 🗖 Yes 🗷 No If Yes, please give trade name				
and describe type of business				
Has any principal had SLA reports or action within the past 3 years? ☐ Yes ☒ No If Yes, attach list				
of violations and dates of violations and outcomes, if any.				
Attach a separate 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-Premise (OP) licenses. Please label streets and				

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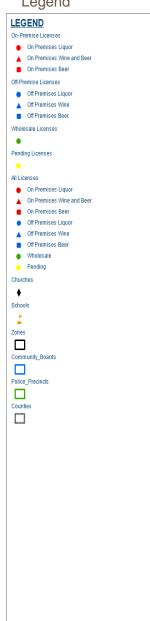
avenues and identify your location. Use letters to indicate ${\bf B}$ ar, ${\bf R}$ estaurant, etc. The diagram must

be submitted with the questionnaire to the Community Board before the meeting.

LO	CATION:				
How many licensed establishments are within 1 block?					
Но	How many On-Premise (OP) liquor licenses are within 500 feet?				
ls j	premise within 200 feet of any school or place of worship? 🗖 Yes 🗷 No				
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. Also use provided petitions, which 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).					
We are including the following questions to be able to prepare stipulations and have the meeting be faster and more efficient. Please answer per your business plan; do not plan to negotiate at the meeting.					
1.	☑ I will operate a full-service restaurant, specifically a (type of restaurant) Quick Service Restaurant Quick Service Restaurant, with a kitchen open and serving food during all hours of operation <u>OR</u> ☐ I have less than full-service kitchen but will serve food all hours of operation.				
2.	☑ I will close any front or rear façade doors and windows at 10:00 P.M. every night or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances.				
3.	\square I will not have \square DJs, \square live music, \square promoted events, \square any event at which a cover fee is charged, \square scheduled performances, \square more than $\underline{13}$ DJs / promoted events per $\underline{\underline{Year}}$, \square more than $\underline{\underline{13}}$ private parties per $\underline{\underline{Year}}$, but will not be closed for business to the public.				
4.	☐ I will play ambient recorded background music only.				
5.	☑ I will not apply for an alteration to the method of operation or for any physical alterations of any nature without first coming before CB 3.				
6.	☑ I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3.				
7.	☑ I will not participate in pub crawls or have party buses come to my establishment.				
8.	\square I will not have a happy hour or drink specials with or without time restrictions \underline{OR} \square I will have happy hour and it will end by $\underline{^{8PM}}$.				
9.	☐ I will not have wait lines outside. ☑ I will have a staff person responsible for ensuring no loitering, noise or crowds outside.				
10.	🗷 Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.				

36 Allen Street (aka 34 Allen Street)

Legend





Disclaimer: The NYS Liquor Authority is not responsible for the accuracy of maps or data obtained from third party sources.