

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: July 2018

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire

Please bring the following items to the meeting:

NOTE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED.	
Photographs of the inside and outside of the premise.	
Schematics, floor plans or architectural drawings of the inside of the premise.	
 A proposed food and or drink menu. Petition in support of proposed business or change in business with signatures from 	
Petition in support of proposed business or change in business with signatures from residential tenants at location and in buildings adjacent to, across the street from and behind	
proposed location. Petition must give proposed hours and method of operation. For example:	
restaurant, sports bar, combination restaurant/bar. (petition provided)	
11 1	
Notice of proposed business to block or tenant association if one exists. Fou can find community groups and contact information on the CB 3 website:	
http://www.nyc.gov/html/manch3/html/communitygroups/community_group_listings.shtm	<u>ıl</u>
Proof of conspicuous posting of notices at the site for 7 days prior to the meeting (please	
include newspaper with date in photo or a timestamped photo).	
Check which you are applying for:	
■ new liquor license □ alteration of an existing liquor license □ corporate change	
Remova 1	
Check if either of these apply:	
□ sale of assets □ upgrade (change of class) of an existing liquor license	
Today's Date: 12/23/18	
Today's Date:	
If applying for sale of assets, you must bring letter from current owner confirming that you	
are buying business or have the seller come with you to the meeting.	
Is location currently licensed? Yes No Type of license:	
Is location currently licensed? • Tes • No Type of feetise.	
If alteration, describe nature of alteration: Previous or current use of the location: CloThing Stole	_
Previous or current use of the location:	
Corporation and trade name of current license:	
Corporation and trade name of eartene needs.	
APPLICANT:	
IXI Occhard ST	
Premise address: 101 Octobro STEPPTS	
Premise address: 181 Orchard ST Cross streets: East Houston & Stanton Streets	- (\c
Name of applicant and all principals: John Cotillo Tr & John Cotillo	_ 51.
Pub 138 INC	
1 - 0 1 175/	
Trade name (DBA):	
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PREMISE:	attached 1 story building
Type of building and number of floors:	
Will any outside area or sidewalk cafe be (includes roof & yard) □ Yes □ No If Yes	e used for the sale or consumption of alcoholic beverages? s, describe and show on diagram:
Does premise have a valid Certificate of	Occupancy and all appropriate permits, including for any
Dack or side yard use? Yes No Wha	at is maximum NUMBER of people permitted? <u>しい</u> y permit? ロ Yes Mo
Do you plan to apply for Public Assembl	y permit? Tyes No
What is the zoning designation (check \boldsymbol{z}	oning using map: http://gis.nyc.gov/doitt/nycitymap/ -
please give specific zoning designation,	such as R8 or C2):
PROPOSED METHOD OF OPERATION:	
Will any other business besides food or	alcohol service be conducted at premise? 🗖 Yes 🗖 No
If yes, please describe what type:	
What are the proposed days/hours of o outdoor space) 2 Pm To	peration? (Specify days and hours each day and hours of 4am, 7 days a week
Number of tables?	Total number of seats? 20
How many stand-up bars/ bar seats are	elocated on the premise? 1 17
(A stand up bar is any bar or counter (whether with seating or not) over which a patron can order,
pay for and receive an alcoholic bevera	ge) Dota what 20 walet
Describe all bars (length, shape and local	ation): Rectangular, 20 in lenght
Does premise have a full kitchen TYes	
Does it have a food preparation area?	⊢Yes □ No (If any, show on diagram)
Is food available for sale? Yes No	If yes, describe type of food and submit a menu
What are the hours kitchen will be open	n? Food available at all hours
Will a manager or principal always be o	on site? Yes • No If yes, which?
How many employees will there be?	8
Do you have or plan to install T French	doors □ accordion doors or □ windows?

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Will there be TVs/monitors? ✓ Yes ☐ No (If Yes, how many?)
Will premise have music? ♥ Yes ■ No
If Yes, what type of music? Live musician DJ 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: TPob
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?
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 I No (If Yes, how many and when)
Will there be security personnel? The Yes I No (If Yes, how many and when)
How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans. The Licensed Security Goard will be wontering OCTIVITY OUTSIDE The Location Do you have sound proofing installed? Tyes 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
Has this corporation or any principal been licensed previously? Pres No If yes, please indicate name of establishment: Local, 138 GGy's SPOTTED OW Address: 138 Ludlow ST 132 Ludlow ST ZII Ave A Community Board # 3 3 Dates of operation: 2011 - Present 2006 - Present 2015 - Pre-Sent
Address: 138 Walow ST 132 Walow ST ZII Ave A Community Board # 5/3/3
Dates of operation: 2016 - Present 2006 - Present 2015 - Present
Has any principal had work experience similar to the proposed business? ☐ Yes ☐ No If Yes, please
attach explanation of experience or resume.
Does any principal have other businesses in this area? Yes No If Yes, please give trade name
and describe type of business <u>See above</u>
Has any principal had SLA reports or action within the past 3 years? Test Yes You 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 avenues and identify your location. Use letters to indicate Bar , Restaurant , etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.

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LOC	CATION:
Hov	v many licensed establishments are within 1 block?
Hov	w many On-Premise (OP) liquor licenses are within 500 feet?
	remise within 200 feet of any school or place of worship? Yes
coi	MMUNITY OUTREACH:
Plea imr out lice	ase see the Community Board website to find block associations or tenant associations in the nediate vicinity of your location for community outreach. Applicants are encouraged to reach to community groups. Also use provided petitions, which clearly state the name, address, use for which you are applying, and the hours and method of operation of your establishment at top of each page. (Attach additional sheets of paper as necessary).
me	are including the following questions to be able to prepare stipulations and have the eting be faster and more efficient. Please answer per your business plan; do not plan to gotiate at the meeting.
1.	☐ I will operate a full-service restaurant, specifically a (type of restaurant), with a kitchen open and serving food during all hours of operation OR ☐ 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.	□ I will not have ☑ DJs, ☑ live music, ☑ promoted events, ☑ any event at which a cover fee is charged, ☑ scheduled performances, □ more than DJs / promoted events per, □ more than private parties per
4.	I will play ambient recorded background music only. + Toke box
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.	will not participate in pub crawls or have party buses come to my establishment.
8.	■ I will not have a happy hour or drink specials with or without time restrictions <u>OR</u> ■ 1 will have happy hour and it will end by
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

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addressed immediately. I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

13 ft 0 CC nard STORACE BATH Rooms 000000000000 0 0

LOCAL 138

SNACKS CRISPY CHICKEN FINGERS

\$8

PRETZEL BITES

\$8

CRISPY HAM & CHEDDAR ROLL

\$8

MAINS

STEAK & CHEESE CHIMICHANGA

\$8

MACARONI & CHEESE

\$10

CHICKEN & CHEESE BEAN BURRITO

\$10

FOUR CHEESE PERSONAL PIZZA

\$10

SODA: COKE, DIET COKE, SPRITE, GINGER ALE \$2