

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3 59 East 4th Street - New York, NY 10003 Phone (212) 533-5300

www.cb3manhattan.org - mn03@cb.nyc.gov

¢	Ch	aoying Chen			ative of	
loca	ated	at	214 1st Avenue		New York, NY agree to	the following stipulations:
1			full-service restaurant, speci rd serving food every eight o			+
	Moi Moi Thu	hours of operation n <u>11AM-12A</u> 11AM-12A	M Tue HAM-I M Fr. 11AM-I	2AM ;	Wed 11AM-12AM	; Sun IIAM-12AM
						om business at specified closing hou
	_		utdoor space for commercia			B in the second s
			y sidewalk cafe no later than			
	I will employ a doorman/security personnel on the following days:					
6		i will install sou				
	 I will close any front or rear façade doors and windows at 10:00 P.M. every hight or when amplified sound is playing, including but not limited to DIs, live music and live nonmusical performances. I will have a closed fixed façade with no open doors of windows except my entrance door will close by 10:00 P.M. or when amplified sound is playing, including but not limit to DIs, live music and live to DIs, live music and live to DIs, live music and live nonmusical performances. 					
i.	i will not have X2 Dis, X2 live music, X2 promoted events, X2 any event at which a cover fee is charged. X2 scheduled performances, I more than Dis/ promoted events per I more than private parties per					
λ.	080	I will play ambre	ent recorded background mu	usic only		
10.		I will not apply t ning before CB 3.		iod of operation o	for any physical alteration	ons of any nature without first
11.	I will not seek a change in class to a full on-premises liquor license without first obtaining approval from CB 3.					
12		I will not partici	pate in pub crawls or have p	arty buses come to	my establishment.	£
13.	\$14	I will not have u	unlimited drink specials, inclu	ding hoozy brunct	es, with food.	
14	El enc	I will not have a f by	happy hour or drink specials -Please indicat	e one of t	he above ⋅	II have happy hour and it will
15	00	Fwill not have a	vait lines outside. 🛛 I will hav	ve a staff person n	esponsible for ensuring n	o loitering, noise or crowds outside.
16	DX3	Ewell conspicuos	usly post this stipulation form	n beside my fiquor	license inside of my busi	ness.
17	IX) rev	Residents may a	contact the manager/owner a ited method of operation if n	at the number bei	aw. Any complaints will to printmize my establish	be addressed immediately. I will ment's impact on my neighbors.
Nar					Phone Number:	And
18.		wtill				A DECK THE CALL OF THE OWNER OWNER OF THE OWNER
he	reby	certify that the	Information provided above	is truthful and ac	Curate based upon my p	ersonal Vellet.

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Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire

Today's Date: 10/30/2020

APPLICANT

- 1. Name of applicant and principle(s): Koko Sushi Corp
- 2. Premise address: 214 1st Avenue, New York, NY 10009
- 3. Cross streets: E 12th and 13th Street
- 4. Trade name (DBA): Koko Sushi
- 5. Check which you are applying to: 🗵 New liquor license 🗆 Alteration of an existing license 🗆 Sale of assets
- 6. If alteration, describe nature of alteration: _____
- 7. Is location currently licensed? \Box Yes \boxtimes No
- 8. Type of license: _____
- 9. Previous or current use of the location: Restaurant
- 10. Corporation and trade name of current location: _
- 11. Type of building and number of floors: Multi Unit
- 13. Do you plan to apply for Public Assembly permit?

 Yes
 No
- 14. What is the zoning designation (check zoning using map: http://gis.nyc.gov/doitt/nycitymap/ please give specific zoning designation, such as R8 or C2): R7A; C1-5
- 15. How many licensed establishments are within 1 block? 10
- 16. How many On-Premise (OP) liquor licenses are within 500 feet? 22
- 17. Is premise within 200 feet of any school or place of worship? \Box Yes \boxtimes No

PROPOSED METHOD OF OPERATION

- 18. Describe your method of operation: <u>Restaurant</u>
- 19. Will any other business besides food or alcohol service be conducted 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 applicable: <u>11AM-12AM seven days a week</u>
- 22. Total number of table: <u>14</u> 23. Total number of seats: <u>45</u>
- 24. How many stand-up bars / bar seats are located on the premise? 0
 (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 beverage.)

25.	Describe all bars (length, shape, and location):					
26.	Does premise have a full kitchen? 🛛 Yes 🗖 No					
27.	What are the hours kitchen will be open? <u>11AM-12AM seven days a week</u>					
	What type of food is available for sale? Japanese Food					
29.	Will a manager or principal always be on site? 🛛 Yes 🗆 No 🛛 If yes, which? Chaoying Chen					
	How many employees will there be? <u>8</u>					
31.	Do you have or plan to install? \Box French doors \Box accordion doors \Box windows $ { m N/A}$					
32.	Will there be TVs / monitors? 🛛 Yes 🗆 No If Yes, how many? <u>3</u>					
33.	Will premise have music?					
~ 4	DJ 🖾 Tapes / CDs / iPod					
	If other type, please describe:					
	. What will be the music volume? 🗵 Background (quiet) 🗖 Entertainment level					
	Please describe your sound system: CD Plyer					
37.	Will you host any promoted events, scheduled performances or any event at which a cover fee is charged?					
20	□ Yes ⊠ No					
	If Yes, what type of events or performances are proposed and how often?					
39.	How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?					
40.	Will there be security personnel? Yes X 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.	Do you have sound proofing installed? 🛛 Yes 🗖 No					
43.	If not, do you plan to install sound-proofing? 🗆 Yes 🗖 No					
<u>API</u>	PLICANT HISTORY					
44.	Has this corporation or any principal been licensed previously? ☑ Yes □ No If yes, please indicate name of establishment(s): JIMMY'S SUSHI BUFFET INC					
45.	Address: 141 1st Avenue, New York, NY 10003 45a. Community Board 3					
	Dates of operation: 06/05/2015					
	Has any principal had work experience similar to the proposed business? 🛛 Yes 🗖 No 🛛 If yes, explanation					
	of experience or resume.					

- 48. Does any principal have other business in the area? ⊠ Yes □ No If yes, give trade name and describe type of business: Kikoo Sushi
- 49. 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.

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.

ATTENTION RESIDENTS & NEIGHBORS

Koko Sushi Corp.

Company/DBA Name and Contact Number for Questions

plans to open a

Restaurant

(Please choose) Bar/Restaurant/Club and indicate if there will be a Sidewalk Café or Backyard Garden

at the following location

214 1st Avenue, New York, NY 10009

Building Number and Street Name (Address)

This establishment is seeking a license to serve

Beer & Wine

Beer & Wine or Beer

Jimmy Chen; (929)285-6666

Applicant Contact Information

Contact the Applicant or COMMUNITY BOARD 3 With any questions or concerns. mn03@cb.nyc.gov - www.cb3manhattan.org