

## 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

Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Stipulations for Administrative Approval

		4 Bolace , as a qualified represer	ntative ofChinatown United Food Services LLC	
	ited at		, New York, NY agree to the following stipulations:	
1.	•	erate a full-service restaurant, specifically a (type of open and serving food every night during all hours o	, <u>, , , , , , , , , , , , , , , , , , </u>	
2.	Mon 10 Or	f operation will be: <u>m = 13 am</u> ; Tue <u>10 am = 13 am</u> ; -m = 13 am; Fri 10 am = 13 am; S	; Wed <u>100m-12 am</u> ; at <u>100m-12 am</u> ; Sun_100m-12 am.	
(I u			patrons are to be cleared from business at specified closing hour)	
	•	ot use outdoor space for commercial use.		
4.		•		
5.			ng days:	
	I will clo at 10:00 P.M playing, inclu	ose any front or rear façade doors and windows A. every night or when amplified sound is uding but not limited to DJs, live music and live 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.	
8.	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			
9.	🗵 l will pla	ay ambient recorded background music only.		
10.	I will no coming befo		n or for any physical alterations of any nature without first	
11.	🗵 I will no	ot seek a change in class to a full on-premises liquor	license without first obtaining approval from CB 3.	
12.	X I will no	ot participate in pub crawls or have party buses com-	e to my establishment.	
13.	<b>⊠</b> ∣ will no	ot have unlimited drink specials, including boozy bru	nches, with food.	
14.		ot have a happy hour or drink specials with or withou Please indicate one of	ut time limitations <u>OR</u>	
15.	🗵 I will no	ot have wait lines outside. 🗖 I will have a staff perso	n responsible for ensuring no loitering, noise or crowds outside.	
16.	☑ I will co	onspicuously post this stipulation form beside my liqu	uor license inside of my business.	
	revisit the al	bove-stated method of operation if necessary in ord	below. Any complaints will be addressed immediately. I will der to minimize my establishment's impact on my neighbors.	
Nai	ne: <u> </u>	emy Bolger	Phone Number: (917) 596 -0356	
18.	☐ I will:			
I he	ereby certify t	that the information provided above is truthful and	d accurate based upon my personal belief. の 3 - / 0 - 2 ら	
Sig	ned	· · · · · · · · · · · · · · · · · · ·	Dated	
Sw	orn to this	10th day of March 2029		
		FRANK W. PALLUD Motary Public, Storm of Verk No. 24-0 2005 Qualified in King y Journey Commission Persons (My St. 1822-23	Notary Public	



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**Community Board 3 Liquor License Application Questionnaire** 

Today's Date: <u>Feb 23, 2020</u>				
APPLICANT				
1. Name of applicant and principle(s): Chinatown United Food Services LLC				
2. Premise address: 130 Madison Street				
3. Cross streets: Market Street + Mechanics Alley				
4. Trade name (DBA): The Good				
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? ☐ Yes ☑ No				
8. Type of license: Tavern Wine				
9. Previous or current use of the location: Club (over 10 years ago)				
10. Corporation and trade name of current location: NO VOCOO+ FOC 70 455				
11. Type of building and number of floors: 1 Story Wrick				
12. Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or				
side yard use? Yes No 12a. What is the permitted occupancy indoors and outdoors? 300				
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): $\frac{1}{2}$				
15. How many licensed establishments are within 1 block?				
16. How many On-Premise (OP) liquor licenses are within 500 feet?				
17. Is premise within 200 feet of any school or place of worship?   Yes   No				
PROPOSED METHOD OF OPERATION				
18. Describe your method of operation: 10000 Soccer Field with Tovern				
19. Will any other business besides food or alcohol service be conducted at premise?   ✓ Yes □ No				
20. If yes, please describe what type: 1000 5000				
21. What are the proposed days / hours of operation (specify days / hours each day and hours of outdoor space				
if applicable: 10:00 am - 12:00 am; 7 days per week				
22. Total number of table: 3				
if applicable: 10:00 am - 12:00 am; 7 days per week  22. Total number of table:				
(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.)				

Revised: December 2019

25.	Describe all bars (length, shape, and location): 10000 USA 15+ +100				
	Does premise have a full kitchen? ☐ Yes ☑ No				
27.	What are the hours kitchen will be open? <u>all hours of operation</u>				
	What type of food is available for sale? Fast Casual				
29.	Will a manager or principal always be on site? Yes \( \sin \text{No} \) If yes, which? \( \frac{Paylos}{2000} \)				
	How many employees will there be? $\hat{\partial} - \mathcal{H}$				
	. Do you have or plan to install?   French doors   accordion doors   windows Garage doors				
32.	. Will there be TVs / monitors? ☑Yes ☐ No _ If Yes, how many?				
33.	Will premise have music? ☑ Yes ☐ No 33a. If Yes, what type of music? ☐ Live Music ☐ Jukebox ☐ DJ ☐ Tapes / CDs / iPod				
24					
	4. If other type, please describe:				
	. What will be the music volume?   Background (quiet)   Entertainment level				
	Please describe your sound system: Camputer generated Small Speckers				
3/.	Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? ☐ Yes ☐ No				
38.	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?				
	employee designated to sidewalk + Street				
40.	O. 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?				
	One employee as above				
42.	Do you have sound proofing installed?   Yes   No				
43.	If not, do you plan to install sound-proofing? ☐ Yes ☑ No				
<u>AP</u>	PLICANT HISTORY				
44.	Has this corporation or any principal been licensed previously? ☐ Yes  No If yes, please indicate name				
	of establishment(s):				
45.	Address: 45a. Community Board				
46.	Dates of operation:				
47.	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: Kiki's Restaurant - Manager				
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.

Revised: December 2019