

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3 59 East 4th Street - New York, NY 10003

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

I,	Fr	rank Prisinzano, as	a qualified represen	tative of	Frankie Grocery Inc		
loca	ted				the following stipulations:		
1.		I will operate a full-service restaurant, sp			cafe		
		Kitchen open and serving food every nig	ht during all hours o	of operation.			
2.		hours of operation will be:	10	Wod II.	12.0.		
	Thu	n <u>11am - 12am</u> ; Tue <u>lla</u> , 1 11am - 12am; Fri <u>lla</u> r	n = 12 am;	at Ilam-	120m; Sun 110m - 12am.		
(I ur					leared from business at specified closing hour)		
3.	X	I will not use outdoor space for comme					
4.		I will operate my sidewalk café no later					
5.		I will employ a doorman/security persor					
6.		I will install soundproofing,					
		I will close any front or rear façade door			e a closed fixed façade with no open doors or		
7.	at 1	L0:00 P.M. every night or when amplified	sound is	windows exce	pt my entrance door will close by 10:00 P.M.		
		ying, including but not limited to DJs, live	music and live	and a second sec	ified sound is playing, including but not limited		
	nor	nmusical performances.		to DJs, live mu	usic and live nonmusical performances.		
8.		will not have 🖾 DJs, 🖾 live music, 🖾 promoted events, 🖾 any event at which a cover fee is charged, 🖾 scheduled					
		formances,	moted events per	, 🗆 more tha	n private parties per,		
•		number of TVs					
		I will play ambient recorded background		• •	- I - I		
10.		I will not apply for an alteration to the m ning before CB 3.	nethod of operation	or for any physic	al alterations of any nature without first		
11.		I will not seek a change in class to a full o	on-premises liquor l	icense without fir	st obtaining approval from CB 3.		
		I will not participate in pub crawls or have					
		I will not have unlimited drink specials, i					
					OR 🗆 I will have happy hour and it will		
_		X I will not have a happy hour or drink specials with or without time limitations <u>OR</u> I will have happy hour and it will end by Please indicate one of the above-					
15.	X	I will not have wait lines outside. 🗆 I wil	l have a staff persor	responsible for e	ensuring no loitering, noise or crowds outside.		
16.	X	I will conspicuously post this stipulation	form beside my liqu	or license inside	of my business.		
17.	X	Residents may contact the manager/ow	ner at the number b	elow. Any comp	laints will be addressed immediately. I will		
	rev	isit the above-stated method of operation			y establishment's impact on my neighbors.		
Nan	ne: _	FRANK PRISINZANO		Phone Num	ber:		
18.		will:			WANNEW YOU		
					X BOOK OF 11 UNTY 03		
Name:							
The	reb	y certify that the information provided a		TARY	Nº 10 Nº 4126 2021		
Sign	ed	Jan 1		- NOT	shiped the state of the state o		
I hereby certify that the information provided above is truthful and accurate based upon race personal bener.							
3000				1010 00	Notary Public		
				4 1			



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Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire

Today's Date: April 27, 2021

APPLICANT

1.	Name of applicant and principle(s): Frankie Grocery Inc.				
2.	Premise address: 23 1st Avenue, New York, NY 10003				
3.	Cross streets: Between 1st Street and 2nd Street				
4.	Trade name (DBA): Frank Grocery				
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:				
	Is location currently licensed? Yes No				
8.	Type of license: Tavern Wine				
9.	Previous or current use of the location: Tattoo Shop				
10.	Corporation and trade name of current location: n/a				
11.	Type of building and number of floors: Mixed use, 7 floors				
12.	Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard use? X Yes No 12a. What is the permitted occupancy indoors and outdoors? 55				
13.	Do you plan to apply for Public Assembly permit? Yes XNo				
14.	What is the zoning designation (check zoning usingnap: http://gis.nyc.gov/doitt/nycitymap/-please give specific zoning				
	designation, such as R8 or C2): R7A				
15.	How many licensed establishmentsare within 1 block? 5				
16.	How many On-Premise (OP) liquor licenses are within 500 feet? 13				
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: cold sandwiches and coffee shop				
19.	Will any other business besidesfoodor alcohol service beconducted at premise? Yes X 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:11am to 12am daily22. Total number of table:23. Total number of seats:10				

24.	How many stand-up bars/ bar seats are located on the premise? (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 alcholic beverage.)					
25.	Describe all bars (length, shape, and location): One L-shaped bar close to the entrance.					
26.	Does premise have a full kitchen? Yes X No					
27.	What are the hours kitchen will be open? 11am-12am					
	What type of food is available for sale? Sandwiches and paninis					
29.	Will a manager or principal always be on site? Yes No If yes, which? Oli Balasa					
30.	How many employees will there be? 2-3					
31.	Do you have or plan to install French doors accordion doors or windows?					
32.	Will there be TVs/monitors? Yes XNo (If Yes, how many?)					
33. W	ill premise have music? X Yes No 33a. If Yes, what type of music? Live Music Juke box DJ Image: Tapes/CDs/iPod					
34.	If other type, please describe:					
35.	What will be the music volume? 🗹 Background (quiet) 📃 Entertainment level					
36.	Please describe your sound system: Basic stereo					
37.	Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? Yes XNo					
	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? No traffic is					
	anticipated based on the method of operation, but there will be a doorman during rush hour to					
	manage customers. Will there be security personnel? Yes X No 40a. If Yes, how many and when?					
	How do you plan to manage noise inside and outside your business so neighbors will not be affected? <u>There is</u> soundproofing installed and the music will be played at ambient level only.					
	APPLICANT HISTORY					
44.	Has this corporation or any principal been licensed previously? XYes No If yes, please indicate name of establishment(s): Lil' Frankie's; Frank Restaurant; Supper					
45.	Address: 19 1st Ave; 88 2nd Ave; 156 E. 2nd St 47. Community Board #3					
46.	46. Dates of operation: 2002 - Present, 1998 - Present; 2002 - Present					
47.	Has any principal had work experience similar to the proposed business? X Yes No <i>If yes</i> , explanation of experience or resume. See #44 above.					
48.	Does any principal have other businesses in this area? Ves No <i>If yes</i> , give trade name and describe type of business: See #44 above. Restaurants.					
49.	Has any principal had SLA reports or action within the past 3 years? \Box Yes \checkmark No <i>If yes</i> , attach list of violations and dates of violations and outcomes.					
COMMUN	NITY OUTREACH					
	e Community Board website to find block associations or tenant associations in the immediate vicinity of your location for					
	putreach. Applicants are encouraged to reach out to community groups.					