

1 **Business License & Permits Committee**

Item #: 9

2
3 July 23, 2014

4
5 Dennis Rosen
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: El Cocotero Inc.**
12 *228 W 18th Street (7/8)*

13
14 Dear Chairman Rosen:

15
16 Manhattan Community Board 4 (MCB4) recommends denial of a new Restaurant Wine and Beer
17 License for El Cocotero Inc. – 228 W 18th Street (7/8), unless the following stipulations, agreed to by the
18 applicant, are part of the method of operation for this establishment with a capacity of 74 people, with
19 22 tables with 43 seats.

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22 A signed copy of the questionnaire and stipulations are enclosed.

23
24 Sincerely,

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26
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28
Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT <i>El Cocotero Inc.</i>		DOING BUSINESS AS (DBA)	
STREET ADDRESS <i>228 West 18th Street</i>		CROSS STREETS <i>18th Street btwn 7 & 8 Avenues</i>	
OWNER	NAME: <i>Miriam Navarez</i>	<i>Represents</i> ATTORNEY	NAME: <i>Marcel Schwedt, Represen</i> <i>active</i>
	PHONE: <i>(973) 955-8395</i>		PHONE: <i>(212) 361-6164</i>
	FAX: <i>(866) 929-4534</i>		FAX: <i>(866) 929-4534</i>
MANAGER	NAME: <i>MIRIAM Navarez</i>	LANDLORD	NAME: <i>R Humb W 18 LLC</i>
	PHONE: <i>(973) 955-8395</i>		PHONE: <i>312-757-2738</i>
	FAX: <i>(866) 929-4534</i>		FAX:
DESCRIPTION OF BUSINESS			
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): Bar/Arcade		
Method of Operation:	<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade		
License Type:	<input type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer		
APPLICATION TYPE <i>(check one)</i>	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES <input type="radio"/> NO
		What is/was the name of establishment?	<i>El Cocotero</i>
		What is/was the address of the establishment?	<i>228 W. 18th Street</i>
		What were the dates the applicant was involved with this former premise?	
	<input type="radio"/> Transfer	What is the prior license #?	
		What is the expiration date on the prior license?	
		Are you making any alterations or operational changes?	<input type="radio"/> YES <input type="radio"/> NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>	
	<input type="radio"/> Alteration	What is the current license #?	
		What is the expiration date on the current license?	
<i>Please describe the nature of the alterations and attach the plans</i>			

OPERATIONAL ISSUES

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HOURS	Operation	11 AM-10 PM ←				11-11	10-11	12-9
	Music	11-10 ←				11-11	10-11	12-9
	Kitchen	11-10 ←				11-11	10-11	12-9

OCCUPANCY	INDOOR				BAR			OUTSIDE	
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables
	74	48	22	43	0	0	0	0	0

How many floors are there? What is the capacity for each floor? (please respond in space provided)

1-2	3-4	5+
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Ground Floor Only

Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)

YES	<input checked="" type="radio"/> NO	N/A
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Will applicant have bottle service?

YES	<input checked="" type="radio"/> NO	N/A
-----	-------------------------------------	-----

Will you be hosting private parties and promotional events?

YES	<input checked="" type="radio"/> NO	N/A
-----	-------------------------------------	-----

Will outside promoters be used?

YES	<input checked="" type="radio"/> NO	N/A
-----	-------------------------------------	-----

Will the security plan submitted be implemented?

YES	<input checked="" type="radio"/> NO	<input checked="" type="radio"/> N/A
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Will State certified security personnel be used?

YES	NO	<input checked="" type="radio"/> N/A
-----	----	--------------------------------------

Will New York Nightlife Association recommendations and NYPD Best Practices be followed?

YES	NO	<input checked="" type="radio"/> N/A
-----	----	--------------------------------------

Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)

YES	<input checked="" type="radio"/> NO	N/A
-----	-------------------------------------	-----

Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)

YES	NO	<input checked="" type="radio"/> N/A
-----	----	--------------------------------------

If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)

YES	NO	<input checked="" type="radio"/> N/A
-----	----	--------------------------------------

Will applicant provide contact information to neighbors and respond to complaints that arise?

<input checked="" type="radio"/> YES	NO	N/A
--------------------------------------	----	-----

Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?

YES	NO	<input checked="" type="radio"/> N/A
-----	----	--------------------------------------

If you plan to have music, what type(s)?

<input checked="" type="checkbox"/> BACKGROUND	<input type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ
--	-------------------------------------	-----------------------------

pre-recorded

BUILDING DESIGN

Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.

<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	N/A
--------------------------------------	-------------------------------------	-----

Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?

YES	NO	<input checked="" type="radio"/> N/A
-----	----	--------------------------------------

Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)

YES	NO	<input checked="" type="radio"/> N/A
-----	----	--------------------------------------

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="radio"/> N/A
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via sealed food service.	YES	NO	<input checked="" type="radio"/> N/A
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="radio"/> N/A
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	<input checked="" type="radio"/> N/A

LOCATION & ZONING			
Primary Zoning District:	C6-2A		Overlay (if Applicable):
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO	N/A LNO
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input checked="" type="radio"/> YES	NO	N/A
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A
Are your plans filed with DOB?	YES	NO	<input checked="" type="radio"/> N/A
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	Community Board 4	
	# 2		
	# 3		

1 **Business License & Permits Committee**

Item #: 10

2
3 July 23, 2014

4
5 Dennis Rosen
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: MS W.52 LLC**
12 **d/b/a Melt Shop**
13 *305 W 52nd Street (8/9)*

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of a new Restaurant Wine and Beer
18 License for MS W.52 LLC. d/b/a Melt Shop – 305 W 52nd Street (8/9), unless the following stipulations,
19 agreed to by the applicant, are part of the method of operation for this establishment with a capacity of
20 67 people, with 6-7 tables with 40 seats, 1 stand-up bar.

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23 A signed copy of the questionnaire and stipulations are enclosed.

24
25 Sincerely,

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT MS W.52, LLC		DOING BUSINESS AS (DBA) MELT SHOP				
STREET ADDRESS 305 W. 52ND STREET		CROSS STREETS 8TH AVENUE				
OWNER	NAME: ANDREW STERN, JOHN RIGOS & SPENCER RUBIN	ATTORNEY	NAME: JAMES DIPASQUALE			
	PHONE: 646-649-9810		PHONE: 646-383-4607			
	FAX: NONE		FAX: 646-606-2388			
MANAGER	NAME: SPENCER RUBIN	LANDLORD	NAME: 305 W52, LLC			
	PHONE: 646-649-9810		PHONE: 516-394-0505			
	FAX: NONE		FAX: NONE			
DESCRIPTION OF BUSINESS						
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization – Members Only) <input type="radio"/> Other (Explain): _____					
Method of Operation:	<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): _____					
License Type:	<input type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer					
APPLICATION TYPE <i>(check one)</i>	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?		YES	NO	
		What is/was the name of establishment?		SEVERAL – SEE ATTACHED		
		What is/was the address of the establishment?		SEE ATTACHED		
		What were the dates the applicant was involved with this former premise?		CURRENT		
	<input type="radio"/> Transfer	What is the prior license #?				
		What is the expiration date on the prior license?				
		Are you making any alterations or operational changes?		YES	NO	
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>				
	<input type="radio"/> Alteration	What is the current license #?				
		What is the expiration date on the current license?				
<i>Please describe the nature of the alterations and attach the plans</i>						

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="radio"/> NO	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="radio"/> N/A
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	YES	NO	<input checked="" type="radio"/> N/A
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="radio"/> N/A
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	<input checked="" type="radio"/> N/A

LOCATION & ZONING

Primary Zoning District:	C6-4	Overlay (If Applicable):	8C
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/> NO	N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO	N/A
Is the 500 Foot Rule or 200 Foot Rule Triggerred? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	<input checked="" type="radio"/> NO	N/A
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	N/A
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	NO	N/A

Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____

NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	
	# 2	
	# 3	

ALL VENTILATION + EXHAUST
SYSTEMS WILL COMPLY
WITH ALL RULES +
REGULATIONS OF THE
DEPARTMENT OF BUILDING.

WILL SUBMIT EVIDENCE OF
WHAT SOUND BARRIERS WILL
BE IMPLEMENTED PRIOR
TO 7/23/14 FULL BOARD
MEETING.

1 **Business License & Permits Committee**

Item #: 11

2

3 July 23, 2014

4

5 Dennis Rosen

6 Chairman

7 New York State Liquor Authority

8 80 S. Swan Street, 9th Floor

9 Albany, New York 12210

10

11 **Re: Bistro 53 LLC.**

12 **d/b/a Room 53**

13 *314 W. 53rd Street (8/9)*

14

15 Dear Chairman Rosen:

16

17 Manhattan Community Board 4 (MCB4) recommends denial of a new Café Wine and Beer License for
18 Bistro 53 LLC. d/b/a Room 53 – 314 W 53rd Street (8/9), unless the following stipulations, agreed to by
19 the applicant, are part of the method of operation for this establishment with a capacity of 74 people,
20 with 15 tables with 46 seats, 1 stand-up bar with 12 seats.

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23 A signed copy of the questionnaire and stipulations are enclosed.

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT		DOING BUSINESS AS (DBA)		
Bistro 53 LLC		Room 53		
STREET ADDRESS		CROSS STREETS		
314 West 53 rd Street (310-318 W. 53 rd St)		Between 8 th + 9 th Avenues		
OWNER	NAME	Abdul Sedki, Stephen Cosh	ATTORNEY	
	PHONE	718-288-0458	NAME	
	PAX	-	PHONE	
			Joseph Levy	
			212-219-1193	
			212-226-7554	
MANAGER	NAME	Abdul Sedki	LANDLORD	
	PHONE	914-673-8014	NAME	
	PAX	-	PHONE	
			Richard Kramisan	
			212-957-9444	
DESCRIPTION OF BUSINESS				
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place <input type="radio"/> Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input checked="" type="radio"/> Other (Explain): Bar/Arcade cafelbar			
Method of Operation:	<input type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input checked="" type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade			
License Type:	<input type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer			
APPLICATION TYPE (check one)	<input type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
		What is/was the name of establishment?	Rowayton Restaurant	
		What is/was the address of the establishment?	89 Rowayton Ave, Rowayton, CT	
		What were the dates the applicant was involved with this former premise?	2006 - Present	
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	<input type="radio"/> YES	<input type="radio"/> NO
		If alterations or operational changes are being made, please attach the plans to this form.		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
Please describe the nature of the alterations and attach the plans				

OPERATIONAL ISSUES									
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	7AM-11PM	7AM-11PM	7AM-11PM	7AM-11PM	7PM-12AM	7AM-12AM	9AM-11PM	
	Music	7AM-11PM	7AM-11PM	7AM-11PM	7AM-11PM	7AM-12am	7AM-12AM	9AM-11PM	
	Kitchen	7AM-10PM	7AM-10PM	7AM-10PM	7AM-10PM	7AM-11PM	7AM-12AM	9AM-10PM	
OCCUPANCY	INDOOR				BAR			OUTSIDE	
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables
	less than 74	less than 74	15	46	0	1	12	N/A	N/A
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	<input checked="" type="radio"/>	N/A		
Will applicant have bottle service?					YES	<input checked="" type="radio"/>	N/A		
Will you be hosting private parties and promotional events?					<input checked="" type="radio"/>	NO	N/A	occasional private parties	
Will outside promoters be used?					YES	<input checked="" type="radio"/>	N/A		
Will the security plan submitted be implemented?					YES	NO	<input checked="" type="radio"/>		
Will State certified security personnel be used?					YES	NO	<input checked="" type="radio"/>		
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					<input checked="" type="radio"/>	NO	N/A		
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					YES	<input checked="" type="radio"/>	N/A		
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	<input checked="" type="radio"/>	N/A		
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	NO	<input checked="" type="radio"/>		
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="radio"/>	NO	N/A		
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					<input checked="" type="radio"/>	NO	N/A		
If you plan to have music, what type(s)?			<input checked="" type="checkbox"/> BACKGROUND	<input checked="" type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ	Plus non-amplified acoustic live music			
BUILDING DESIGN									
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					<input checked="" type="radio"/>	NO	N/A		
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					<input checked="" type="radio"/>	NO	N/A		
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					YES	NO	<input checked="" type="radio"/>		

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="radio"/> NO	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="radio"/> N/A
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	YES	NO	<input checked="" type="radio"/> N/A
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="radio"/> N/A
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	NO	N/A

LOCATION & ZONING			
Primary Zoning District:	R8	Overlay (If Applicable):	C1-5
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	NO	N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO	N/A
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	<input checked="" type="radio"/> NO	N/A
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	N/A
Are your plans filed with DOB?	YES	NO	N/A
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
Adjacent Buildings	<input type="radio"/> Residential <input checked="" type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	West 55 th Street Block Association	
	# 2	West 50 th /51 st street Block Association	
	# 3		

ADDITIONAL INFORMATION: (Applicant Use)

ADDITIONAL NOTES: (Office Use Only)

WILL COMPLY WITH
ALL DEPARTMENT OF BUILDINGS
RULES + REGULATIONS REGARDING
VENTILATION + EXHAUST.

MEET WITH 50/51 BLOCK
ASSOCIATION PRIOR TO
JULY 8, 2014, DLP
MEETING.

1 **Business License & Permits Committee**

Item #: 12

2
3 July 23, 2014

4
5 Dennis Rosen
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: 23rd Street Pizza Corp.**
12 **d/b/a Patsy's Pizzeria**
13 *318 W 23rd Street (8/9)*

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of a transfer of a Restaurant wine and beer
18 license for 23rd Street Pizza Corp. d/b/a Patsy's Pizzeria – 318 W 23rd Street (8/9), unless the following
19 stipulations, agreed to by the applicant, are part of the method of operation for this establishment with a
20 capacity of 100 people, with 21 tables with 84 seats; 1 stand-up bar with 8 seats.

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23 A signed copy of the questionnaire and stipulations are enclosed.

24
25 Sincerely,

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT 23rd Street Pizza Corp.		DOING BUSINESS AS (DBA) Patsy's Pizzeria		
STREET ADDRESS 318 West 23rd Street, New York, NY		CROSS STREETS 23rd Street between 8th and 9th Avenues.		
OWNER	NAME: Joanne Levantis	ATTORNEY:	NAME: Kordas & Marinis, LLP	
	PHONE: 718-626-5900		PHONE: 718-392-8000	
	FAX: 718-626-2346		FAX: 718-482-9000	
MANAGER	NAME: Nick Bouras	LANDLORD	NAME: Chelsea London Co. LLC	
	PHONE: 646-486-7400		PHONE: 646-637-9021	
	FAX: 212-486-2300		FAX: 646-514-5969	
DESCRIPTION OF BUSINESS				
Establishment Type:		<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): Bar/Arcade		
Method of Operation:		<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade		
License Type:		<input type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer		
APPLICATION TYPE (check one)	<input type="radio"/> New	Has applicant owned or managed a similar business?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
		What is/was the name of establishment?		
		What is/was the address of the establishment?		
		What were the dates the applicant was involved with this former premise?		
	<input checked="" type="radio"/> Transfer	What is the prior license #?	1103001	
		What is the expiration date on the prior license?	04/30/2015	
		Are you making any alterations or operational changes?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
<i>Please describe the nature of the alterations and attach the plans</i>				

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	
	Music	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	10 am - 12am	
	Kitchen	12 pm - 11pm	12 pm - 11pm	12 pm - 11pm	12 pm - 11pm	12 pm - 11pm	12 pm - 11pm	12 pm - 11pm	12 pm - 11pm	
OCCUPANCY	INDOOR				BAR			OUTSIDE		
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Sevier Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables	
	100	100	21	84	0	1	8	N/A	N/A	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="radio"/> 1-2	<input type="radio"/> 3-4	<input type="radio"/> 5+	Ground level		
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	<input checked="" type="radio"/> NO	N/A			
Will applicant have bottle service?					YES	<input checked="" type="radio"/> NO	N/A			
Will you be hosting private parties and promotional events?					YES	<input checked="" type="radio"/> NO	N/A			
Will outside promoters be used?					YES	<input checked="" type="radio"/> NO	N/A			
Will the security plan submitted be implemented?					YES	<input checked="" type="radio"/> NO	N/A			
Will State certified security personnel be used?					YES	<input checked="" type="radio"/> NO	N/A			
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					YES	<input checked="" type="radio"/> NO	N/A			
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	Already in operation		
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	<input checked="" type="radio"/> NO	N/A			
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	<input type="radio"/> NO	N/A			
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A			
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					YES	<input checked="" type="radio"/> NO	N/A			
If you plan to have music, what type(s)?			<input checked="" type="radio"/> BACKGROUND	<input type="radio"/> LIVE MUSIC	<input type="radio"/> DJ					
BUILDING DESIGN										
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A			
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A			
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A			

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="radio"/> NO	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="radio"/> N/A
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	YES	NO	<input checked="" type="radio"/> N/A
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="radio"/> N/A
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	<input checked="" type="radio"/> N/A

LOCATION & ZONING			
Primary Zoning District:		Overlay (if Applicable):	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	NO	N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO	N/A
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	<input checked="" type="radio"/> NO	N/A
Is a Public Assembly permit required?	<input checked="" type="radio"/> YES	NO	N/A
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	NO	N/A
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	Manhattan Community Board 4	
	# 2		
	# 3		

1 **Business License & Permits Committee**

Item #: 13

2

3 July 23, 2014

4

5 Dennis Rosen

6 Chairman

7 New York State Liquor Authority

8 80 S. Swan Street, 9th Floor

9 Albany, New York 12210

10

11 **Re: Piki LLC**

12 **d/b/a Goggan**

13 *364 W 46th Street (8/9)*

14

15 Dear Chairman Rosen:

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17 Manhattan Community Board 4 (MCB4) recommends denial of a new On-Premise Liquor License for
18 PikL LLC. d/b/a Goggan – 364 W 46th Street (8/9), unless the following stipulations, agreed to by the
19 applicant, are part of the method of operation for this establishment with a capacity of 45 people, with
20 10 tables with 34 seats, 1 stand-up bar with 6 seats, and a front patio with 1 table and 2 seats.

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23 A signed copy of the questionnaire and stipulations are enclosed.

24

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26 Sincerely,

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT Piki LLC		DOING BUSINESS AS (DBA) Goggan		
STREET ADDRESS 364 W 46th Street		CROSS STREETS 8th Ave & 9th Ave		
OWNER	NAME: Park, Hyunshin	ATTORNEY	NAME: Jae Yu	
	PHONE: (646) 763-0758		PHONE: (718) 445-5050	
	FAX:		FAX: (718) 445-4195	
MANAGER	NAME: Mia Park	LANDLORD	NAME: Musigny LLC	
	PHONE: (646) 763-0758		PHONE: (646) 763-0695	
	FAX:		FAX:	
DESCRIPTION OF BUSINESS				
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place/Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): Bar/Arcade			
Method of Operation:	<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade			
License Type:	<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer			
APPLICATION TYPE <i>(check one)</i>	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
		What is/was the name of establishment?	Aito & Brasche	
		What is/was the address of the establishment?	424 W 33rd Street	
		What were the dates the applicant was involved with this former premise?	02/2008 - 07/2013	
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	<input type="radio"/> YES	<input type="radio"/> NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
<i>Please describe the nature of the alterations and attach the plans</i>				

OPERATIONAL ISSUES										
		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
HOURS	Operation	11am-12am	11am-12am	11am-12am	11am-12am	11am-12am	11am-12am	11am-12am	11am-12am	
	Music									
	Kitchen	11am-12am	11am-12am	11am-12am	11am-12am	11am-12am	11am-12am	11am-12am	11am-12am	
OCCUPANCY	INDOOR				BAR			OUTSIDE		
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables	
	45	40	10	34	0	1	6	2	1	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					1-2	3-4	5-9	45 persons for 1 st floor		
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	NO	N/A			
Will applicant have bottle service?					YES	NO	N/A			
Will you be hosting private parties and promotional events?					YES	NO	N/A			
Will outside promoters be used?					YES	NO	N/A			
Will the security plan submitted be implemented?					YES	NO	N/A			
Will State certified security personnel be used?					YES	NO	N/A			
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					YES	NO	N/A			
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					YES	NO	N/A			
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	NO	N/A			
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	NO	N/A			
Will applicant provide contact information to neighbors and respond to complaints that arise?					YES	NO	N/A			
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					YES	NO	N/A			
If you plan to have music, what type(s)?			BACKGROUND	LIVE MUSIC	DJ	Background				
BUILDING DESIGN										
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days					YES	NO	N/A			
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					YES	NO	N/A			
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					YES	NO	N/A			

OUTDOOR ITEMS				
Will applicant use the rooftop, rear yard or any outdoor space?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	Patio in front
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A	

LOCATION & ZONING				
Primary Zoning District:		Overlay (If Applicable):		
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	Clinton
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Is a Public Assembly permit required?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A	
Are your plans filed with DOB?	<input type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A	
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	Manhattan Community Board 4		
	# 2			
	# 3			

1 **Business License & Permits Committee**

Item #: 14

2

3 July 23, 2014

4

5 Dennis Rosen

6 Chairman

7 New York State Liquor Authority

8 80 S. Swan Street, 9th Floor

9 Albany, New York 12210

10

11 **Re: Better Being Inc.**

12 **d/b/a Better Being**

13 *537 9th Avenue (39/40)*

14

15 Dear Chairman Rosen:

16

17 Manhattan Community Board 4 (MCB4) recommends denial of a new Restaurant Wine and Beer

18 License for Better Being Inc. d/b/a Better Being – 537 9th Avenue (39/40), unless the following

19 stipulations, agreed to by the applicant, are part of the method of operation for this establishment with a

20 capacity of 74 people, with 10 tables with 24 seats; 1 stand-up bar.

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23 A signed copy of the questionnaire and stipulations are enclosed.

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26 Sincerely,

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT Better Being Inc.		DOING BUSINESS AS (DBA) Better Being		
STREET ADDRESS 537 9 th Avenue		CROSS STREETS Between 39 th & 40 th Streets		
OWNER	NAME: M.K. Washko + Shari Drewett	ATTORNEY	NAME: Joseph Levey	
	PHONE: 212-353-1986		PHONE: 212-219-1193	
	FAX: 212-475-7450		FAX: 212-226-7554	
MANAGER	NAME: M.K. Washko + Shari Drewett	LANDLORD	NAME: Chris Meskouris	
	PHONE: 212-353-1986		PHONE: 516-616-4491	
	FAX: 212-475-7450		FAX: N/A	
DESCRIPTION OF BUSINESS				
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): Bar/Arcade			
Method of Operation:	<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade			
License Type:	<input type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer			
APPLICATION TYPE (check one)	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES <input type="radio"/> NO	
		What is/was the name of establishment?	Better Being Inc. (this applicant)	
		What is/was the address of the establishment?	537 9 th AVE	
		What were the dates the applicant was involved with this former premises?	2012 - Present	
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	<input type="radio"/> YES <input type="radio"/> NO	
		If alterations or operational changes are being made, please attach the plans to this form.		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
Please describe the nature of the alterations and attach the plans				

OPERATIONAL ISSUES									
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	8 AM - 11 PM	8 AM - 11 PM	8 AM - 11 PM	8 AM - 11 PM	8 AM - 11 PM	11 AM - 11 PM	11 AM - 11 PM	
	Music	8 AM - 11 PM	8 AM - 11 PM	8 AM - 11 PM	8 AM - 11 PM	8 AM - 11 PM	11 AM - 11 PM	11 AM - 11 PM	
	Kitchen	8 AM - 11 PM	8 AM - 11 PM	8 AM - 11 PM	8 AM - 11 PM	8 AM - 11 PM	11 AM - 11 PM	11 AM - 11 PM	
OCCUPANCY	INDOOR				BAR			OUTSIDE	
	Capacity (Certificate of Occupancy)	Minimum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Jobs	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables
	less than 74	less than 74	10	24	0	1	0	N/A	N/A
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	less than 74	
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	<input checked="" type="radio"/>	N/A		
Will applicant have bottle service?					YES	<input checked="" type="radio"/>	N/A		
Will you be hosting private parties and promotional events?					<input checked="" type="radio"/>	NO	N/A	occasional private parties	
Will outside promoters be used?					YES	<input checked="" type="radio"/>	N/A		
Will the security plan submitted be implemented?					YES	NO	<input checked="" type="radio"/>		
Will State certified security personnel be used?					YES	NO	<input checked="" type="radio"/>		
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					<input checked="" type="radio"/>	NO	N/A		
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					YES	<input checked="" type="radio"/>	N/A		
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	<input checked="" type="radio"/>	N/A		
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	NO	<input checked="" type="radio"/>		
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="radio"/>	NO	N/A		
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					<input checked="" type="radio"/>	NO	N/A		
If you plan to have music, what type(s)?			<input checked="" type="radio"/> BACKGROUND	<input checked="" type="radio"/> LIVE MUSIC	<input type="radio"/> DJ				
BUILDING DESIGN									
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					<input checked="" type="radio"/>	NO	N/A		
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					YES	NO	<input checked="" type="radio"/>		
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					<input checked="" type="radio"/>	NO	N/A		

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="radio"/> NO	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="radio"/> N/A
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	YES	NO	<input checked="" type="radio"/> N/A
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="radio"/> N/A
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	<input checked="" type="radio"/> N/A

LOCATION & ZONING				
Primary Zoning District:	C1-7A		Overlay (If Applicable):	N/A
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	NO	N/A	Hudson Yards
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	N/A	
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	NO	<input checked="" type="radio"/> N/A	
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	N/A	
Are your plans filed with DOB?	YES	NO	N/A	
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe:			
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe:			
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	Raushenbusch Foundation		
	# 2	Clinton Housing		
	# 3	Mark Fisher Fitness		

ADDITIONAL INFORMATION: (Applicant Use)

ADDITIONAL NOTES: (Office Use Only)

Applicant will keep SIDEWALK
Free & Clear of w/in Property line

2
3 July 23, 2014

4
5 Dennis Rosen
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: Lana Restaurant LLC.**
12 **d/b/a Amarone**
13 *686 9th Avenue (47/48)*

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of a new On-premise liquor license for
18 Lana Restaurant LLC d/b/a Amarone – 686 9th Avenue (47/48), unless the following stipulations, agreed
19 to by the applicant, are part of the method of operation for this establishment with a capacity of 97
20 people, with 80 tables with 29 seats; 1 stand-up bar with 7 seats and a current sidewalk café with 9
21 tables with 18 seats.

22
23
24 A signed copy of the questionnaire and stipulations are enclosed.

25
26 Sincerely,

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30
Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT		DOING BUSINESS AS (DBA)	
Lana Restaurant LLC		Amarone	
STREET ADDRESS		CROSS STREETS	
686 Ninth Ave, NY, NY		B/n 47 th & 48 th Streets	
OWNER	NAME: Antonio Spiridigliozzi Giovanni Apicella	ATTORNEY	NAME: Frank W. Palillo
	PHONE: (212) 245-6060		PHONE: 212-227-1640
	FAX:		FAX: 212-349-1724
MANAGER	NAME: Same as above	LANDLORD	NAME: 686 Realty Corp
	PHONE:		PHONE: 212-625-6600
	FAX:		FAX:
DESCRIPTION OF BUSINESS			
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): Bar/Arcade		
Method of Operation:	<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade		
License Type:	<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
APPLICATION TYPE (check one)	<input checked="" type="radio"/> Acq	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES <input type="radio"/> NO
		What is/was the name of establishment?	Seta Rest Corp
		What is/was the address of the establishment?	686 Ninth Ave
		What were the dates the applicant was involved with this former premise?	1996 - Present
	<input checked="" type="radio"/> Transfer	What is the prior license #?	1027943
		What is the expiration date on the prior license?	5-31-16
		Are you making any alterations or operational changes?	<input type="radio"/> YES <input checked="" type="radio"/> NO
		If alterations or operational changes are being made, please attach the plans to this form.	
	<input type="radio"/> Alteration	What is the current license #?	
		What is the expiration date on the current license?	
Please describe the nature of the alterations and attach the plans			

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	12 pm 12 am	12 pm 12 am	12 pm 12 am	12 pm 12 am	12 pm 12 am	12 pm 12 am	12 pm 12 am	12 pm 12 am	
	Music	↓	Same as above			↓	↓	↓	↓	
	Kitchen	↓	Same as above			↓	↓	↓	↓	
OCCUPANCY	INDOOR				BAR			OUTSIDE		
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables	
	97	97	80	29	0	1	7	18	9	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="radio"/> 1-2	<input type="radio"/> 3-4	<input type="radio"/> 5+	ground floor 65mt		
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	<input checked="" type="radio"/> NO	N/A			
Will applicant have bottle service?					YES	<input checked="" type="radio"/> NO	N/A			
Will you be hosting private parties and promotional events?					<input checked="" type="radio"/> YES	NO	N/A	occasionally		
Will outside promoters be used?					YES	<input checked="" type="radio"/> NO	N/A			
Will the security plan submitted be implemented?					YES	<input checked="" type="radio"/> NO	<input checked="" type="radio"/> N/A			
Will State certified security personnel be used?					YES	NO	<input checked="" type="radio"/> N/A			
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					YES	NO	<input checked="" type="radio"/> N/A			
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					YES	<input checked="" type="radio"/> NO	N/A			
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	NO	<input checked="" type="radio"/> N/A	currently exists		
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					<input checked="" type="radio"/> YES	NO	N/A	9 18		
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="radio"/> YES	NO	N/A			
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					<input checked="" type="radio"/> YES	NO	N/A			
If you plan to have music, what type(s)?					<input checked="" type="radio"/> BACKGROUND	<input type="radio"/> LIVE MUSIC	<input type="radio"/> DJ			
BUILDING DESIGN										
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					<input checked="" type="radio"/> YES	NO	N/A			
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					YES	NO	<input checked="" type="radio"/> N/A			
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					<input checked="" type="radio"/> YES	NO	N/A			

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	<input checked="" type="radio"/> YES		N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	Sidewalk cafe hours
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via sealed food service.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A

LOCATION & ZONING			
Primary Zoning District:	C1-5/R8		Overlay (If Applicable):
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	<input checked="" type="radio"/> N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A
Is the 500 Foot Rule or 200 Foot Rule Triggerred? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A 500'
Is a Public Assembly permit required?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A
Are your plans filed with DOB?	<input type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A currently exists
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	CB # 4	
	# 2		
	# 3		

1 **Business License & Permits Committee**

Item #: 16

2

3 July 23, 2014

4

5 Dennis Rosen

6 Chairman

7 New York State Liquor Authority

8 80 S. Swan Street, 9th Floor

9 Albany, New York 12210

10

11 **Re: 688 10th Avenue Restaurant Corp.**

12 **d/b/a Havana Social**

13 *688 10th Avenue (48/49)*

14

15 Dear Chairman Rosen:

16

17 Manhattan Community Board 4 (MCB4) recommends denial of alteration for an On-Premise Liquor
18 License for 688 10th Avenue Restaurant Corp. d/b/a Havana Social – 688 10th Avenue (48/49), unless
19 the following stipulations, agreed to by the applicant, are part of the method of operation for this
20 establishment with a capacity of 60 people, with 16 tables with 45 seats, 1 stand-up bar with 14 seats.

21

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23 A signed copy of the questionnaire and stipulations are enclosed.

24

25 Sincerely,

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT 688 10th Ave Restaurant Corp.		DOING BUSINESS AS (DBA) Havana Social		
STREET ADDRESS 688 10th Avenue		CROSS STREETS 48th Street and 49th Street		
OWNER	NAME: Thomas Vicari	ATTORNEY	NAME: Rosa M. Sanchez	
	PHONE: 917.699.7126		PHONE: 646.619.1166	
	FAX: 212.243.9428		FAX: 646.365.8233	
MANAGER	NAME: Edward Rodriguez	LANDLORD	NAME: ENW Realty LLC	
	PHONE: 917.838.4695		PHONE: 718.658.1300	
	FAX: 212.243.9428		FAX: 718.739.1426	
DESCRIPTION OF BUSINESS				
Establishment Type:		<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization – Members Only) <input type="radio"/> Other (Explain): Bar/Arcade		
Method of Operation:		<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade		
License Type:		<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
APPLICATION TYPE <i>(check one)</i>	<input type="radio"/> New	Has applicant owned or managed a similar business?	YES	NO
		What is/was the name of establishment?		
		What is/was the address of the establishment?		
		What were the dates the applicant was involved with this former premise?		
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	YES	NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input checked="" type="radio"/> Alteration	What is the current license #?	1272574	
		What is the expiration date on the current license?	8/31/2015	
<i>Please describe the nature of the alterations and attach the plans</i>				
<small>Please note that this application is to extend the hours of operation</small>				

OPERATIONAL ISSUES									
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	9 a.m. - 1 a.m.	9a.m. - 1 a.m.	9 a.m. - 1 a.m.	9 a.m. - 1 a.m.	9 a.m. - 4 a.m.	9 a.m. - 4 a.m.	9 a.m. - 12 a.m.	
	Music	9 a.m. - 1 a.m.	9 a.m. - 1 a.m.	9 a.m. - 1 a.m.	9 a.m. - 1 a.m.	9 a.m. - 4 a.m.	9 a.m. - 4 a.m.	9 a.m. - 12 a.m.	
	Kitchen	9 a.m. - 12 a.m.	9 a.m. - 12 a.m.	9 a.m. - 12 a.m.	9 a.m. - 12 a.m.	9 a.m. - 3 a.m.	9 a.m. - 3 a.m.	9 a.m. - 11 p.m.	
OCCUPANCY	INDOOR				BAR			OUTSIDE	
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables
	60	60	16	45	0	1	14	0	0
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="checkbox"/>	3-4	5+		
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	<input checked="" type="checkbox"/>	N/A		
Will applicant have bottle service?					YES	<input checked="" type="checkbox"/>	N/A		
Will you be hosting private parties and promotional events?					YES	<input checked="" type="checkbox"/>	N/A		
Will outside promoters be used?					YES	<input checked="" type="checkbox"/>	N/A		
Will the security plan submitted be implemented?					YES	<input checked="" type="checkbox"/>	N/A		
Will State certified security personnel be used?					YES	<input checked="" type="checkbox"/>	N/A		
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					<input checked="" type="checkbox"/>	NO	N/A		
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					<input checked="" type="checkbox"/>	NO	N/A		
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	<input checked="" type="checkbox"/>	N/A		
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	NO	<input checked="" type="checkbox"/>		
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="checkbox"/>	NO	N/A		
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					<input checked="" type="checkbox"/>	NO	N/A		
If you plan to have music, what type(s)?			<input checked="" type="checkbox"/> BACKGROUND	<input type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ				
BUILDING DESIGN									
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					<input checked="" type="checkbox"/>	NO	N/A		
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					<input checked="" type="checkbox"/>	NO	N/A		
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					<input checked="" type="checkbox"/>	NO	N/A		

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="checkbox"/>	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="checkbox"/>
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	YES	NO	<input checked="" type="checkbox"/>
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	<input checked="" type="checkbox"/>
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="checkbox"/>
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="checkbox"/>
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	<input checked="" type="checkbox"/>

LOCATION & ZONING			
Primary Zoning District:	R8	Overlay (If Applicable):	C2-5
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="checkbox"/>	NO	N/A Clinton
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="checkbox"/>	NO	N/A
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input checked="" type="checkbox"/>	NO	N/A 500' Rule
Is a Public Assembly permit required?	YES	<input checked="" type="checkbox"/>	N/A
Are your plans filed with DOB?	YES	NO	<input checked="" type="checkbox"/>
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="checkbox"/> Mixed Use <input type="radio"/> Other, describe:		
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="checkbox"/> Mixed Use <input type="radio"/> Other, describe: _____		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	The West 47th/48th Street Block Association	
	# 2		
	# 3		

1 **Business License & Permits Committee**

Item #: 17

2

3 July 23, 2014

4

5 Dennis Rosen

6 Chairman

7 New York State Liquor Authority

8 80 S. Swan Street, 9th Floor

9 Albany, New York 12210

10

11 **Re: Amoronde LLC**

12 **d/b/a Crispin's Hell's Kitchen**

13 *764 Tenth Avenue (52)*

14

15 Dear Chairman Rosen:

16

17 Manhattan Community Board 4 (MCB4) recommends denial of alteration for a Restaurant Wine and
18 Beer License for Amoronde LLC d/b/a Crispin's Hell's Kitchen – 764 10th Avenue (52), unless the
19 following stipulations, agreed to by the applicant, are part of the method of operation for this
20 establishment with a capacity of 83 people, with 11 tables with 74 seats, 1 service-only bar with 6 seats.

21

22

23 A signed copy of the questionnaire and stipulations are enclosed.

24

25 Sincerely,

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29

Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT Amoronde LLC		DOING BUSINESS AS (DBA) Crispin's Hell's Kitchen		
STREET ADDRESS 764 10th Avenue		CROSS STREETS 52nd Street and 10th Avenue		
OWNER	NAME: Robert A. Taylor	ATTORNEY	NAME: David A. Kaminsky	
	PHONE: (917) 370-6186		PHONE: (212) 571-1227	
	FAX: (212) 757-2294		FAX: (212) 571-7004	
MANAGER	NAME: Robert A. Taylor	LANDLORD	NAME: Sonel Ramirez	
	PHONE: (917) 370-6186		PHONE: (212) 757-2276	
	FAX: (212) 757-2294		FAX: (212) 757-2294	
DESCRIPTION OF BUSINESS				
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): Bar/Arcade			
Method of Operation:	<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade			
License Type:	<input type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer			
APPLICATION TYPE (check one)	<input type="radio"/> New	Has applicant owned or managed a similar business?	YES	NO
		What is/was the name of establishment?		
		What is/was the address of the establishment?		
		What were the dates the applicant was involved with this former premise?		
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	YES	NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input checked="" type="radio"/> Alteration	What is the current license #?	1271028	
		What is the expiration date on the current license?	5/31/2015	
Please describe the nature of the alterations and attach the plans		Please see attached		

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	
	Music	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	
	Kitchen	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	12pm - 2am	
OCCUPANCY	INDOOR				BAR			OUTSIDE		
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables	
		83	11	74	1	0	6	0	0	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="checkbox"/>	3-4	4-5	One floor. Capacity 74 seats.		
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	<input checked="" type="checkbox"/>	N/A	No		
Will applicant have bottle service?					<input checked="" type="checkbox"/>	NO	N/A			
Will you be hosting private parties and promotional events?					YES	<input checked="" type="checkbox"/>	N/A			
Will outside promoters be used?					YES	<input checked="" type="checkbox"/>	N/A			
Will the security plan submitted be implemented?					YES	NO	<input checked="" type="checkbox"/>			
Will State certified security personnel be used?					YES	NO	<input checked="" type="checkbox"/>			
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					YES	NO	<input checked="" type="checkbox"/>			
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					<input checked="" type="checkbox"/>	NO	N/A	Applicant will be using delivery bikes. Applicant has applied to DOT for bicycle rack.		
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					<input checked="" type="checkbox"/>	NO	N/A	In the future		
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	NO	<input checked="" type="checkbox"/>	N/A		
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="checkbox"/>	NO	N/A			
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					<input checked="" type="checkbox"/>	NO	N/A			
If you plan to have music, what type(s)?			<input checked="" type="checkbox"/> BACKGROUND	<input checked="" type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ					
BUILDING DESIGN										
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					<input checked="" type="checkbox"/>	NO	N/A			
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					<input checked="" type="checkbox"/>	NO	N/A			
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					<input checked="" type="checkbox"/>	NO	N/A			

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="checkbox"/>	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="checkbox"/>
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	YES	NO	<input checked="" type="checkbox"/>
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	<input checked="" type="checkbox"/>
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="checkbox"/>
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="checkbox"/>
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	<input checked="" type="checkbox"/>

LOCATION & ZONING			
Primary Zoning District:	R8	Overlay (if Applicable):	C2-5
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="checkbox"/>	NO	N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	<input checked="" type="checkbox"/>	N/A
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	<input checked="" type="checkbox"/>	N/A
Is a Public Assembly permit required?	<input checked="" type="checkbox"/>	NO	N/A
Are your plans filed with DOB?	<input checked="" type="checkbox"/>	NO	N/A
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="checkbox"/> Mixed Use <input type="radio"/> Other, describe: _____		
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="checkbox"/> Mixed Use <input type="radio"/> Other, describe: _____		
NOTIFICATION:	# 1	Manhattan Community Board 4	
What organizations / community groups have you notified regarding your application?	# 2		
	# 3		

ADDITIONAL INFORMATION: (Applicant Use)

ADDITIONAL NOTES: (Office Use Only)

- ALL DOORS & WINDOWS
WILL BE CLOSED WHENEVER
ANY MUSIC OR AMPLIFIED
SOUND IS PLAYED AND
WILL BE CLOSED NO LATER
THAN 10:00 P.M. ON SUNDAYS
THURSDAYS AND
11 P.M. ON FRIDAYS & SATURDAYS.

⇒ NO STAIR ENCLOSURE
ON 5TH FLOOR.

- WILL MONITOR TO ENSURE
THAT NO PATRONS CONGREGATE,
WAIT, OR SMOKE ON
5TH FLOOR.

ADDITIONAL STIPULATIONS: (Office Use Only)

- SIGN ENCLOSURE ON TENNE AVENUE
WILL NOT PROTECT MORE
THAN 18" FROM STORE FRONT.
- WILL MEET WITH
JO-51 HC PLUM, APPROXIMATELY
PRIOR TO 7/23/14

1 **Business License & Permits Committee**

Item #: 18

2

3 July 23, 2014

4

5 Dennis Rosen

6 Chairman

7 New York State Liquor Authority

8 80 S. Swan Street, 9th Floor

9 Albany, New York 12210

10

11 **Re: Kashkaval Kitchen LLC.**

12 **d/b/a Kashkaval Garden**

13 *852 9th Avenue (55/56)*

14

15 Dear Chairman Rosen:

16

17 Manhattan Community Board 4 (MCB4) recommends denial of alteration for an On-Premise Liquor
18 License for Kashkaval Kitchen LLC d/b/a Kahkaval Garden – 852 9th Avenue (55/56), unless the
19 following stipulations, agreed to by the applicant, are part of the method of operation for this
20 establishment with a capacity of 74 people, with 12 tables with 35 seats; 1 stand-up bar with 10 seats
21 and enclosed rear yard with 8 tables 20 seats.

22

23

24 A signed copy of the questionnaire and stipulations are enclosed.

25

26 Sincerely,

27

28

29

30

Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

31

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT		DOING BUSINESS AS (DBA)	
Kashkaval Kitchen LLC		Kashkaval Garden	
STREET ADDRESS		CROSS STREETS	
852 9 th Avenue		W 55 th & 56 th Street	
OWNER	NAME:	D. Assaf & C. Damuels	ATTORNEY
	PHONE:	917-945-0118	NAME:
	FAX:	646-381-9766	PHONE:
MANAGER	NAME:		LANDLORD
	PHONE:		NAME:
	FAX:		PHONE:
			FAX:
			NAME:
			PHONE:
			FAX:

DESCRIPTION OF BUSINESS

Establishment Type:

Bar/Tavern
 Bed & Breakfast
 Eating Place Beer
 Cabaret
 Night Club
 Hotel
 Restaurant

Catering Establishment
 Club (Fraternal Organization – Members Only)

Other (Explain): Bar/Arcade

Method of Operation:

Restaurant
 Dance Club
 Sports Bar
 Adult Entertainment
 Wine Bar
 Pizzeria
 Cafe

Other (Explain): Bar/Arcade

License Type:

On-Premise
 Wine
 Beer
 Wine & Beer

APPLICATION TYPE (check one)	<input type="radio"/> New	Has applicant owned or managed a similar business?	YES	NO
		What is/was the name of establishment?		
		What is/was the address of the establishment?		
		What were the dates the applicant was involved with this former premise?		
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	YES	NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input checked="" type="radio"/> Alteration	What is the current license #?	1266444	
		What is the expiration date on the current license?	12/31/14	
Please describe the nature of the alterations and attach the plans: Alteration to include 2002 enclosure and additional interior seating				

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	11am – 2am	11am – 2am	11am – 2am	11am – 3am	11am – 3am	11am – 3am	11am – 3am	11am – 12am	
	Music	11am – 2am	11am – 2am	11am – 2am	11am – 3am	11am – 3am	11am – 3am	11am – 3am	11am – 12am	
	Kitchen	11am – 1am	11am – 1am	11am – 1am	11am – 2am	11am – 2am	11am – 3am	11am – 3am	11am – 11pm	
OCCUPANCY	INDOOR				BAR			OUTSIDE		
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables	
	74	70	12	35	0	1	10	20	8	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="radio"/> 1-2	<input type="radio"/> 3-4	<input type="radio"/> 5+			
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	<input checked="" type="radio"/> NO	N/A			
Will applicant have bottle service?					YES	<input checked="" type="radio"/> NO	N/A			
Will you be hosting private parties and promotional events?					YES	<input checked="" type="radio"/> NO	N/A			
Will outside promoters be used?					YES	<input checked="" type="radio"/> NO	N/A			
Will the security plan submitted be implemented?					YES	NO	<input checked="" type="radio"/> N/A			
Will State certified security personnel be used?					YES	NO	<input checked="" type="radio"/> N/A			
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					<input checked="" type="radio"/> YES	NO	N/A			
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					YES	<input checked="" type="radio"/> NO	N/A			
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					<input checked="" type="radio"/> YES	NO	N/A			
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	NO	<input checked="" type="radio"/> N/A			
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="radio"/> YES	NO	N/A			
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					<input checked="" type="radio"/> YES	NO	N/A			
If you plan to have music, what type(s)?					<input checked="" type="radio"/> BACKGROUND	<input type="radio"/> LIVE MUSIC	<input type="radio"/> DJ			
BUILDING DESIGN										
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					<input checked="" type="radio"/> YES	NO	N/A			
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					<input checked="" type="radio"/> YES	NO	N/A	As necessary		
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					<input checked="" type="radio"/> YES	NO	N/A			

OUTDOOR ITEMS				
Will applicant use the rooftop, rear yard or any outdoor space?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	Enclosed backyard
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	<input type="radio"/> YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A	We hope to be able to keep it open later since it is enclosed & soundproof.
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	As it will be enclosed, Smoking is not permitted
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	

LOCATION & ZONING

Primary Zoning District:	<u>R-8</u>	Overlay (If Applicable):	<u>C-1-5</u>
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input type="radio"/> YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A
Is a Public Assembly permit required?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A
Building Type	<input type="radio"/> Residential <input checked="" type="radio"/> Commercial <input type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe:		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	<u>See attached</u>	
	# 2		
	# 3		

ADDITIONAL INFORMATION: (Applicant Use)

ADDITIONAL NOTES: (Office Use Only)

- BACKYARD WILL BE AN ENCLOSED STRUCTURE BUILT IN ACCORDANCE WITH ACCREDITATION REPORT DATED 5/13/17.
- ALL DOORS & WINDOWS IN BACKYARD STRUCTURE WILL BE CLOSED AT ALL TIMES. APPLICANT CAN PERFORM ~~TEST~~ TEST WITH WINDOWS OPEN ~~WHEN~~ WHEN NEAR TO NEIGHBORS & CD4 AND WITH AGREEMENT OF NEIGHBORS.
- NO PATRONS OR STAFF WILL BE PERMITTED IN REMAINING OUTSIDE PERMETER AT ANY TIME.

ADDITIONAL STIPULATIONS: (Office Use Only)

- EXCESSIVE BACKYARD WILL
BE ~~EXCLUDED~~ + VACATED
BY 11 PM ON SUNDAY, TUESDAY
THURSDAY + MONDAY ON
FRIDAYS + SATURDAYS.
- IF APPLICANT REQUIRES
AGREEMENT WITH NEIGHBORS
FOR LUMBER STORAGE OR TO
OPEN WINDOWS IN BACKYARD
ENCLOSURE, APPLICANT MUST
RE-APPLY FOR ALTERNATIVE.

2
3 July __, 2014

4
5 Ana Reyneso
6 Assistant Director of Licensing
7 Department of Consumer Affairs
8 42 Broadway
9 New York, NY 10004

10
11 **Re: LDV 23, LLC**
12 **d/b/a Barchetta**
13 **Sidewalk Café License 3965-2014-ASWC**
14 **461 West 23rd Street (9/10)**
15

16 Dear Ms. Reyneso:

17
18 Manhattan Community Board 4 (MCB4) recommends denial of an unenclosed sidewalk café permit
19 for LDV 23, LLC d/b/a Barchetta unless the following stipulations are agreed to by the applicant:

- 20
21 • The sidewalk café will be closed and vacated no later than 9:00 p.m. daily;
22
23 • The sidewalk café will be limited to 8 seats/2 tables, positioned as indicated on the plans in the
24 applicant's DCA revised filing dated May 16, 2014; and
25
26 • No planters, dividers, or any other barriers will be used in the sidewalk café.
27

28 MCB4 understands that a scheduled DCA hearing in May 2014 regarding this applicant was cancelled
29 when questions were raised regarding whether applicable zoning permitted a sidewalk café at this
30 location. To the best of our knowledge, there has been no official determination regarding that zoning
31 issue as of this date. MCB4's recommendation is conditioned on a determination that zoning permits
32 the proposed sidewalk café.
33

34 As reflected in its prior letter to the DCA dated May 16, 2014, regarding an earlier version of this
35 applicant's filing, MCB4 has serious concerns about a sidewalk café at this location. This establishment
36 is located in a residential building, London Terrace, on a predominantly-residential block, and the
37 sidewalk café would be situated directly below residential apartments. A number of residents of the
38 building that houses the applicant and their neighbors in adjacent buildings have presented to MCB4, in
39 both written submissions and/or appearances at MCB4 meetings, their objections and concerns
40 regarding this sidewalk café. These objections include the increased noise, trash, and assumed crowding
41 that they believe will result from a sidewalk café. Residents inform us that the applicant previously has
42 shown disregard for the residential community, including significant construction work outside
43 permitted hours and the failure to adequately remove its trash from the sidewalk in front of the
44 establishment -- a lack of concern that residents believe is a reflection of how the sidewalk café will be
45 operated. Community members also point out that they believe the sidewalk at this location is already
46 overly crowded with pedestrians. A major entrance to the High Line is situated across Tenth Avenue
47 from this location, and many of the daily visitors to the High Line utilize the sidewalk on which the café

1 would be located. The proposed sidewalk café is immediately adjacent to vents from the building's
2 laundry room, making this a seemingly undesirable location for outdoor dining.
3

4 The applicant has attempted to work with MCB4 and the community to address these concerns. The
5 applicant has twice revised its plans for the sidewalk café, reducing the number of seats/tables and the
6 operating hours. The applicant has also submitted petition signatures in support of the sidewalk café.
7

8 Most recently, the applicant has reduced the size of the proposed sidewalk café to 8 seats/2 tables and
9 has agreed to close and vacate the café no later than 9:00 p.m. nightly. The applicant also has pointed
10 out that these two tables will be located immediately adjacent to an existing fenced garden and that the
11 tables of its sidewalk café will not extend any further onto the sidewalk than this fenced garden already
12 extends.
13

14 Given the applicant's agreement to stipulate to a sidewalk café consisting of 8 seats/2 tables only, the
15 9:00 p.m. nightly closing time, and the placement of the seats/tables immediately adjacent to the existing
16 fenced garden, MCB4 does not oppose this limited sidewalk café. MCB4 stresses, however, that the
17 applicant's stipulations are essential to the position taken here by MCB4. Any deviation from those
18 stipulations (including changes to the permitted placement of seats/tables or the addition of any planters,
19 dividers, barriers, or other sidewalk obstructions) would raise serious concerns with MCB4.
20

21 Sincerely,
22
23

Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

24