

1 **Business License & Permits Committee**

Item #: 01

2  
3 December \_\_, 2015

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: P62 LLC**  
12 **d/b/a Merchants Biergarten**  
13 Pier 62 @ West 22<sup>nd</sup> Street  
14 Hudson River Park

15  
16 Dear Chairman Bradley:

17  
18 Manhattan Community Board 4 (MCB4) recommends denial of the application for a full on-premise  
19 Liquor/Wine/Beer operating license.

20  
21 The license is for a proposed open air biergarten on Pier 62 in the Hudson River Park with a capacity of  
22 200 patrons plus staff, background amplified and live music, open to midnight seven days of the week.  
23 It would be situated at the western end, the river end, of the pier.

24  
25 According to the SLA's own website, there are seven liquor licenses listing their addresses as Pier 62  
26 (six vessel on-premise licenses: four for Spirit Cruise LLC and one each for Adirondack Sailing  
27 Excursions LLC and Classic Harbor Line LLC; and one on-premise for Wichcraft Chelsea Piers LLC).  
28 Therefore this application is subject to a 500-foot hearing.

29  
30 On November 10, 2015 MCB4's Business License and Permits (BLP) Committee heard in person from  
31 many community residents and organizations. Its meeting followed by a week that of MCB4's  
32 Waterfront Parks and Environment (WPE) Committee which had voted against the biergarten for being  
33 contrary to the public interest for the many planning and recreational reasons expanded upon in its  
34 attached letter. At the BLP meeting, a majority of residents spoke against the granting of a license to the  
35 applicant. In addition, the committee received 40 emails against and 20 emails in favor of the biergarten  
36 in the days before the meeting. The committee also received statements from two current and one  
37 former elected local representative against the application. The Manhattan Borough President and the  
38 City Council Member from Chelsea are on record as opposing the establishment of the biergarten as not  
39 being in the interest of the public.

40  
41 While praising the applicant who operates other establishments in our district, the community expressed  
42 deep concerns about the proposed location: the restaurant would be situated in a family oriented part of  
43 the park, a mere 15 feet away from a children's carousel, near a teenagers' skate rink and a short walk to  
44 a daycare center whose toddlers often use the pier as an open air play area.  
45  
46

1 Further, this restaurant would destroy the possibility of residents and visitors enjoying for free a quiet  
2 environment. This part of the pier is currently used for relaxation with a number of benches positioned  
3 on both sides of two embankments of trees providing both inward seclusion and outward views of the  
4 Hudson and adjacent piers. It is the only part of the pier providing seating with shade. Under the  
5 applicant's proposal, pier users other than their customers would be relegated to the periphery with no  
6 shade and be subjected to the noise and environmental intrusion of the biergarten. Manhattan  
7 Community District 4 has the lowest park acreage per capita in New York City and every inch of park is  
8 needed and cherished.

9  
10 The community also registered concerns about the impact of noise, deliveries and health conditions  
11 created by the proposed biergarten. It was pointed out that music and generator noise will interfere with  
12 the enjoyment of the park, especially since this area is currently quiet. With only portosans for facilities,  
13 residents questioned how the staff will comply with public health requirements of the city's Department  
14 of Health. Finally, since the proposed restaurant is located at the western end of the pier, far from the  
15 nearest public road, all deliveries and pick-ups, including garbage and portosans, will have to be carted  
16 by hand trucks across the whole length of the pier to the park's periphery and thus, community groups  
17 argued, interfering with park users at various locations and hours.

18  
19 In addition there is no community need for another eating and drinking establishment inside the Hudson  
20 River Park in this vicinity which is already well served. Two piers north is a large venue, the Frying Pan  
21 (Pier 66 Maritime, Inc.). Immediately to the east in the pierhead of Chelsea Piers is Wichcraft and going  
22 south in Chelsea Piers towards 18<sup>th</sup> Street are a number of other establishments.

23  
24 The Hudson River Park Trust (HRPT), which leases the space to the applicant, stated that there would  
25 be little revenue generated from the biergarten for the Trust (compared to the existing eating and  
26 drinking establishments on park land). In its view the biergarten is purposed to "activate" what it holds  
27 is an "underutilized" area. The already signed contract between the applicant and HRPT is structured so  
28 that if a license were not granted, the operator's permit to be in the park would be voided with no  
29 penalty to either of the signing parties.

30  
31 MCB4 urges the State Liquor Authority to not grant this license. Given the strongly expressed concerns  
32 of the community about a licensed operation at this location and the unproven need for another eating  
33 and drinking establishment in this section of the Hudson River Park, if the SLA were to approve this  
34 application against the wishes of a majority of community residents and their elected representatives,  
35 MCB4 believes that any license granted for a biergarten at this space must at a minimum incorporate the  
36 following terms into its methods of operation.

- 37  
38
- 39 • Full-time public access to the venue without the necessity of purchasing items for sale.
  - 40 • The construction of permanent bathroom facilities.
  - 41 • The installation of security measures including video surveillance.
  - 42 • Closing hours of 10 pm Sunday through Thursday and 11 pm Friday and Saturday.
  - 43 • No music.
  - 44 • The distribution to the community of contact numbers for the operator and the HRPT available  
45 on a 24-hour basis.
  - 46 • Off-site storage for all furniture and other mobile structures used to provide service at the venue  
during the off-season so that the park retains its unbuilt on quality during these times.

1  
2  
3 Thank you for your attention and cooperation with this application.

4  
5 Sincerely,

6  
7  
8  
9  
Christine Berthet  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

10  
11  
12

DRAFT

1 **Business License & Permits Committee**

Item #: 02

2  
3 December 2, 2015

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Golden Sea Beach**  
12 *300 W. 23<sup>rd</sup> Street (8/9)*

13  
14 Dear Chairman Bradley:

15  
16 Manhattan Community Board 4 (MCB4) recommends **denial** of a transfer On-Premise Liquor License  
17 application for Golden Sea Beach – 300 W. 23<sup>rd</sup> Street (8/9), **unless** the attached stipulations, agreed to  
18 and signed by the applicant, are part of the method of operation for this establishment with a capacity of  
19 74, 11 tables, 50 seats, 1 Service-Only bar and 1 stand-up bar with 5 seats.

20  
21 Sincerely,

22  
23  
24  
Christine Berthet  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

25  
26

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b> Golden Sea Beach Inc.		<b>DOING BUSINESS AS (DBA)</b>		
<b>STREET ADDRESS</b> 300 W 23rd Street, New York		<b>CROSS STREETS</b> 8th Avenue & 9th Avenue		<b>ZIP CODE</b> 10011
<b>OWNER</b> <small>(Attach a list of all the people that will be associated/listed with the license)</small>	<b>NAME:</b> Xuanyan Li	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b>	
	<b>PHONE:</b> 212-727-0888		<b>PHONE:</b>	
	<b>EMAIL:</b>		<b>EMAIL:</b>	
<b>MANAGER</b>	<b>NAME:</b> Sun Tan Lau	<b>LANDLORD</b>	<b>NAME:</b> Charles Washington LP	
	<b>PHONE:</b> 212-727-0888		<b>PHONE:</b> 212-350-2808	
	<b>EMAIL:</b>		<b>EMAIL:</b>	
<b>APPLICATION TYPE (Check One)</b>				
<input type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?		<b>YES</b>	<b>NO</b>
	What is/was the name and address of establishment?			
	What were the dates applicant was involved with this former premise?			
<input checked="" type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?		1255021	
	is applicant making any alterations or operational changes?		<b>YES</b>	<input checked="" type="radio"/> <b>NO</b>
	if alterations or operational changes are being made please describe/list all changes			
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?			
	Please list/describe the nature of all the changes and attach the plans			
<b>METHOD OF OPERATION</b>				
<b>TYPE OF ALCOHOL</b>	<input checked="" type="radio"/> Liquor/Wine/Beer		<input type="radio"/> Beer	<input type="radio"/> Wine & Beer
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment			
	<input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)			
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		<b>YES</b>	<input checked="" type="radio"/> <b>NO</b>	11/06/2015
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		<input checked="" type="radio"/> <b>YES</b>	<b>NO</b>	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<b>YES</b>	<input checked="" type="radio"/> <b>NO</b>	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<input checked="" type="radio"/> <b>YES</b>	<b>NO</b>	

**OPERATIONAL DETAILS (\*Closing time will be when establishment is vacated of all patrons)**

HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	11a-11:30p	11a-11:30p	11a-11:30p	11a-11:30p	11a-12a	11a-12a	11a-11:30p
	Kitchen	11a-11:30p	11a-11:30p	11a-11:30p	11a-11:30p	11a-12a	11a-12a	11a-11:30p
	Music	11a-11:30p	11a-11:30p	11a-11:30p	11a-11:30p	11a-12a	11a-12a	11a-11:30p
If you plan to have music, what type(s)? (Circle all that apply)			<b>BACKGROUND</b>	LIVE MUSIC	DJ	JUKE BOX	KARAOKE	

**OCCUPANCY**

	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 Stand-Up Bar
<b>INSIDE</b>		7450	11	50	1	1	5
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>	N/A						
<b>SIDEWALK CAFÉ</b>	N/A						

How many floors are there? What is the capacity for each floor?	1	
How frequently will the owner(s) be at the establishment?	6 days per week	
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	<input checked="" type="radio"/> NO
Will applicant have bottle or table service for beverage alcohol?	<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO
Will you be hosting private, promotional or corporate events?	YES	<input checked="" type="radio"/> NO
Will outside promoters be used on a regular basis? If yes please describe.	YES	<input checked="" type="radio"/> NO
Will you have a security plan? If, yes please attach.	YES	<input checked="" type="radio"/> NO
Will security plan be implemented?	YES	<input checked="" type="radio"/> NO
Will State certified security personnel be used?	YES	<input checked="" type="radio"/> NO
Will New York Nightlife Association and NYPD Best Practices be followed?	YES	<input checked="" type="radio"/> NO
Will applicant be using delivery bicycles? If yes, how many?	<input checked="" type="radio"/> YES	NO 1-2
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	<input checked="" type="radio"/> YES	NO
Where will delivery bicycles be stored during the day when not in use?	locked on racks on sidewalk	

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/> NO	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO	
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	
Are your plans filed with DOB?	YES	<input checked="" type="radio"/> NO	

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	Pamela Wolff, Dottie Francoure, Pat Cooke	
	# 2	Cheryl Kupper, Merle Lister	
	# 3	Andra Gabrielle, Laura Evans	
	# 4	Eleanor Horowitz, Andra Gabrielle	
	# 5	Phyllis Waisman, Zazel Loven, Lesley Doyel	
Please provide dates when applicant met with the groups listed above.	10/18/2015		
Who was your contact person at each group you met with?	We emailed the application to all associations		
When did applicant post the notice that was provided?	10/22/2015		
Where did applicant post the notice that was provided?	on the front door of restaurant		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	<input checked="" type="radio"/> YES	NO	646-662-3383
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	<input checked="" type="radio"/> YES	NO	

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	Golden Beach Inc. Restaurant		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	Golden Beach Inc.
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input type="radio"/> NO	
Will applicant have a vestibule within the establishment?	YES	<input type="radio"/> NO	
Will applicant use a storm enclosure?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	XFL
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the establishment have any of the following: (circle all that apply)	<input type="radio"/> FRENCH DOORS	<input type="radio"/> GARAGE DOORS	<input type="radio"/> WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
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	<input type="radio"/> NO	
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the establishment have an illuminated sign?	<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	YES, existing, 5/17 XFL
Will the establishment have a canopy extending over the sidewalk?	YES	<input type="radio"/> NO	
Where will the air conditioner be located? What type is it?	Center Air Conditioner		
When was the air conditioner installed?	2011		

**OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFE**

Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	X/L
Are the floorplans for the outdoor space(s) included?	YES	NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	
Will there be no amplified music, as per the law?	YES	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	

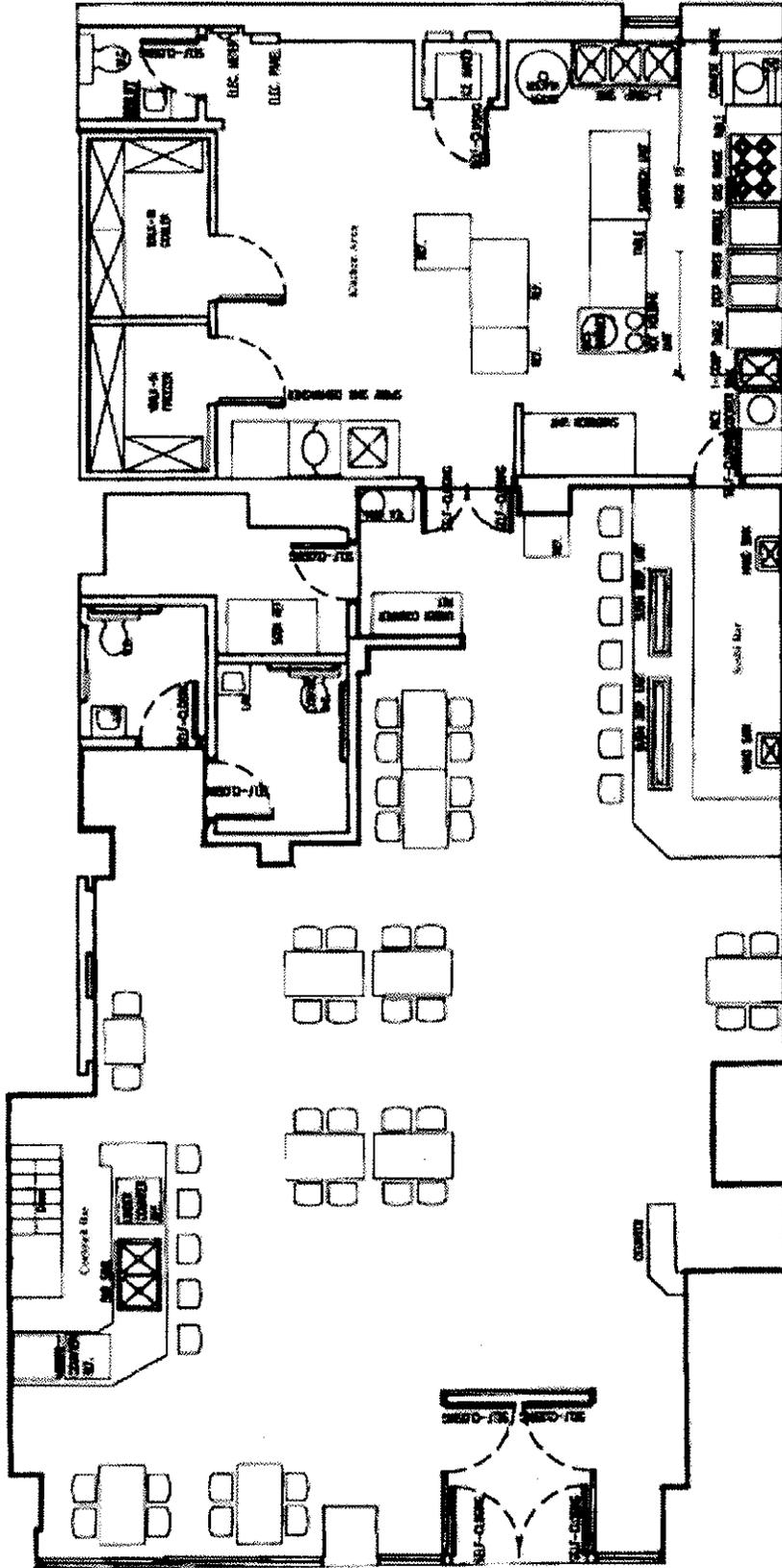
**OUTDOOR ITEMS – SIDEWALK CAFÉ**

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	XYL
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	

**ADDITIONAL STIPULATIONS: (Office Use Only)**

ANY SIGN ENCLAVES  
WILL EXTEND NO  
MORE THAN 18"  
FROM BUILDING LINE.

**To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 - 6 of this application, the stipulations on pages 7 and 8 control.**



FIRST FLOOR PLAN SCALE: 1/4" = 1'-0"

1 **Business License & Permits Committee**

**Item #: 03**

2  
3 December 2, 2015

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Haru Chelsea Corp**  
12 **d/b/a Haru**  
13 *176 8<sup>th</sup> Avenue (18/19)*

14  
15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License  
18 application for Haru Chelsea Corp d/b/a Haru – 176 8<sup>th</sup> Avenue (18/19), **unless** the attached stipulations,  
19 agreed to and signed by the applicant, are part of the method of operation for this establishment with a  
20 capacity of 74, 19 tables, 52 seats and a stand-up bar with 10 seats.

21  
22 Sincerely,

23  
24  
25  
Christine Berthet  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

26  
27

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
Haru Chelsea Corp.		Haru	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
176 8th Avenue		18th and 19th Streets	10011
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b>	see attached list of owners	<b>NAME:</b> Lisa M. Miller, Esq. - Skene Law Firm
	<b>PHONE:</b>		<b>PHONE:</b> 732-727-5030
	<b>EMAIL:</b>		<b>EMAIL:</b> Lfarina@skenelawfirm.com
<b>MANAGER</b>	<b>NAME:</b>	tbd	<b>NAME:</b> 176 8th Avenue Partners, LLC
	<b>PHONE:</b>		<b>PHONE:</b> 718-821-0289
	<b>EMAIL:</b>		<b>EMAIL:</b>
<b>ATTORNEY/ REPRESENTATIVE</b>			
<b>LANDLORD</b>			
<b>APPLICATION TYPE</b> <i>(Check One)</i>			
<input checked="" type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
	What is/was the name and address of establishment?		see the attached list
	What were the dates applicant was involved with this former premise?		all listed locations remain open
<input type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?		YES <input type="checkbox"/> NO <input type="checkbox"/>
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?		
	<i>Please list/describe the nature of all the changes and attach the plans:</i>		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization -- Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		YES	NO <input checked="" type="checkbox"/>
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		YES <input checked="" type="checkbox"/>	NO
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		YES	X NO
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		YES <input checked="" type="checkbox"/>	NO
We will file after meeting with CB 4			

Cristina L. Mendoza – Secretary

21500 Biscayne Blvd., Suite 900

Aventura, FL 33180

Phone: 305.702.2889

Seth J. Rose, Vice President of Operations Haru Sushi

355 West 36<sup>th</sup> Street NY, NY 10018

(O): 212-494-0419

(C): 305-720-4829

Steven Shlemon, President

21500 Biscayne Blvd., Suite 900

Aventura, FL 33180

Phone: 305.702.2889

OPERATIONAL DETAILS (* Closing time will be when establishment is vacated of all patrons )									
HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	11:30AM-11PM	11:30AM-midnight	11:30AM-midnight	11:30AM-midnight	11:30AM-midnight	11:30AM-midnight	11:30AM-midnight	11:30AM-11PM
	Kitchen	same	same	same	same	same	same	same	
	Music	same	same	same	same	same	same	same	
If you plan to have music, what type(s)? (Circle all that apply)			X BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE		
OCCUPANCY									
	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 Stand-Up Bar		
INSIDE		74	19	52	0	1	10		
OUTSIDE <i>(Other than sidewalk café)</i>	n/a								
SIDEWALK CAFE	none								
How many floors are there? What is the capacity for each floor?					2 floors - basement and first floor. 74 on first floor. Basement is for staff only.				
How frequently will the owner(s) be at the establishment?					not frequently				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	NO X			
Will applicant have bottle or table service for beverage alcohol?					YES	NO X			
Will you be hosting private; promotional or corporate events?					YES	NO X			
Will outside promoters be used on a regular basis? If yes please describe.					YES	NO X			
Will you have a security plan? If, yes please attach.					YES	NO X			
Will security plan be implemented?					YES	NO X			
Will State certified security personnel be used?					YES	NO X			
Will New York Nightlife Association and NYPD Best Practices be followed?					YES X	NO			
Will applicant be using delivery bicycles? If yes, how many?					YES	NO	to be determined		
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					YES	NO	yes, if used		
Where will delivery bicycles be stored during the day when not in use?					inside restuarant - if used.				

SR

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO X	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	pending
Is a Public Assembly permit required?	YES	NO X	
Are your plans filed with DOB?	YES X	NO	

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	Manhattan Community Board 4	
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.		CB4 meeting set for November 10	
Who was your contact person at each group you met with?		Janine Pretente	
When did applicant post the notice that was provided?		10/15/15	
Where did applicant post the notice that was provided?		outside the proposed premises site	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES X	NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES X	NO

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	unknown		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	not to our knowledge
	X	X	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	change in signage
	X		
Will applicant have a vestibule within the establishment?	YES	NO	
	X	X	
Will applicant use a storm enclosure?	YES	NO	
	X		
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	
	X		
Will applicant comply with the NYC noise code?	YES	NO	
	X		
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		WINDOWS THAT CAN BE OPENED
	X		X
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	
	X		
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	
	X		
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	X	
		NO	
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?	X	NO	
	YES		
Will the kitchen exhaust system extend to the roof?	YES	NO	
	X		
Will the establishment have an illuminated sign?	YES	NO	
	X		
Will the establishment have a canopy extending over the sidewalk?	YES	NO	
	X	X	
Where will the air conditioner be located? What type is it?	packaged AC units on the roof		
When was the air conditioner installed?	unknown		

**OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFE**

Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES X	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO X	
Are the floorplans for the outdoor space(s) included?	YES	NO	no outdoor space will be used
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	
Will there be no amplified music, as per the law?	YES	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	

<b>OUTDOOR ITEMS – SIDEWALK CAFÉ</b> No sidewalk café is planned at this time			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant be applying for a sidewalk café now or in the future?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	possibly in the future
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant mark the perimeter of the café on the sidewalk?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will the sidewalk café not provide standing space for drinking or smoking?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant use umbrellas?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

- APPLICANT WILL NOT  
USE ROSE FORD PARKWAY  
USE & WILL NOT SEEK  
TO DO SO IN THE  
FUTURE.

- ~~THE~~ APPLICANT WILL  
SUBMIT REVISED FLOOR  
PLAN PRIOR 12/1

- THE PRESENT APPLICATION  
DOES NOT BY TEND TO  
ANY SIDEWALK CASE.

- IF ANY SIDEWALK CASE IS SUBMITTED  
IN THE FUTURE, THE ~~HEIGHT OF THE~~  
CASE WILL ~~BE~~ CLOSE NO LATER  
THAN 11:00 AM FR/SAT & 10:00 AM  
ALL OTHER DAYS. THE CASE  
WILL BE NO BIGGER THAN SIX  
TABLES FOR TWO, ALL TABLES TO

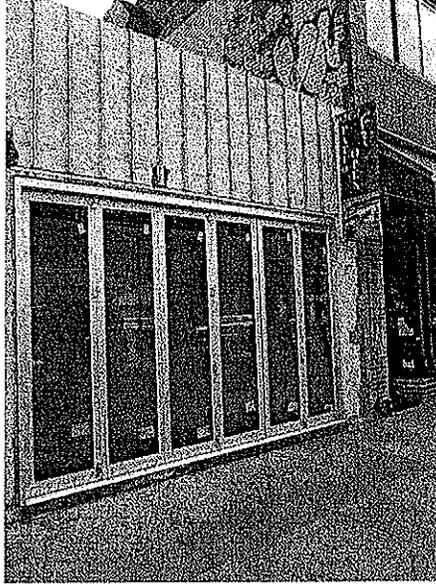
To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 - 6 of this application, the stipulations on pages 7 and 8 control.

BE PLACED NEXT TO  
THE BUILDING & LOCATED  
AS CLOSE TO 8<sup>TH</sup> AVE  
AS POSSIBLE. THERE WILL  
BE NO DRAPES, PLANTS,  
ETC.

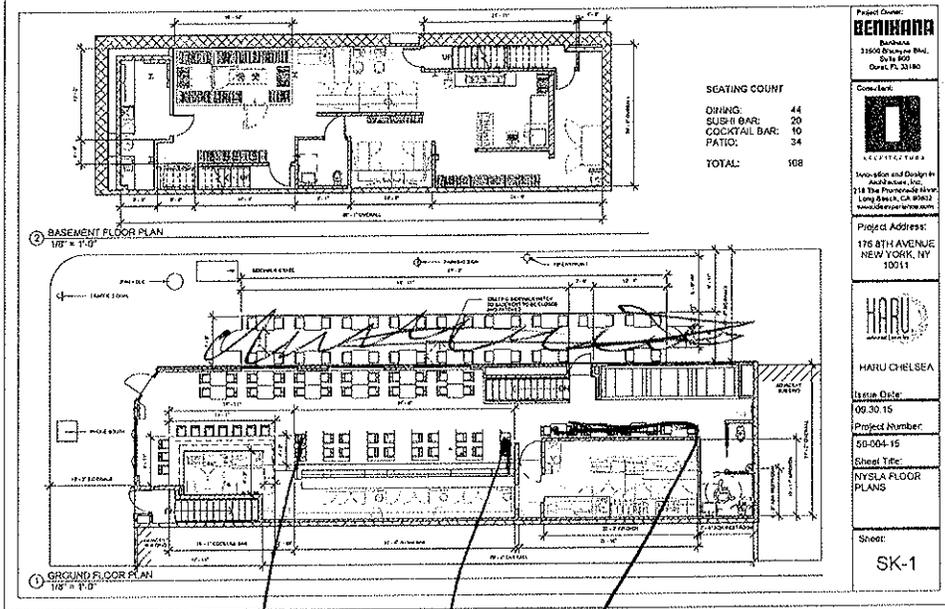
To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 - 6 of this application, the stipulations on pages 7 and 8 control.

**PICTURE OF the CURRENT LOCATION (façade including businesses on each side and two floors above)**

Current photo is below. Premises is undergoing construction at this time.



**FLOOR PLAN – FIRST FLOOR**





1 **Business License & Permits Committee**

Item #: 04

2  
3 December 2, 2015

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: DZGF2, LLC**  
12 **d/b/a Dizengoff**  
13 *75 9<sup>th</sup> Avenue (15/9), Kiosk #3, Food Truck B*

14  
15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License  
18 application DZGF2, LLC d/b/a Dizengoff – 75 9<sup>th</sup> Avenue (15/9), Kiosk #3, Food Truck B, **unless** the  
19 attached stipulations, agreed to and signed by the applicant, are part of the method of operation for this  
20 establishment with a capacity of 27, 6 tables and a stand-up bar 21 seats.

21  
22 Sincerely,

23  
24  
25 Christine Berthet  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

26  
27

# Manhattan Community Board 4

(All Fields Must Be Completed)

# Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
DZGF2, LLC		Dizengoff	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
75 Ninth Avenue, Chelsea Market, Kiosk Area Three, Food Truck B, NY, NY 10011		9th Ave. and 15th St.	10011
<b>OWNER</b> <small>(Attach a list of all the people that will be associated/listed with the license)</small>	<b>NAME:</b> Steven Cook	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Robert D. Skene
	<b>PHONE:</b> 267-973-7703		<b>PHONE:</b> 732-727-5030
	<b>EMAIL:</b> steven@cooknsolo.com		<b>EMAIL:</b> Lfarina@skenelawfirm.com
<b>MANAGER</b>	<b>NAME:</b> Amy Henderson	<b>LANDLORD</b>	<b>NAME:</b> Jamestown Premier Chelsea Market LP
	<b>PHONE:</b> 917-478-2721		<b>PHONE:</b>
	<b>EMAIL:</b> amy@cooknsolo.com		<b>EMAIL:</b>
<b>APPLICATION TYPE (Check One)</b>			
<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input type="radio"/> Transfer	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input type="radio"/> Alteration	What is the current license # and expiration date?		
	<i>Please list/describe the nature of all the changes and attach the plans:</i>		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input checked="" type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization -- Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	will file after Community Board approves
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

OPERATIONAL DETAILS (* Closing time will be when establishment is vacated of all patrons)									
HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	10-10	10-10	10-10	10-10	10-10	10-10	10-10	10-10
	Kitchen	10-10	10-10	10-10	10-10	10-10	10-10	10-10	10-10
	Music	10-10	10-10	10-10	10-10	10-10	10-10	10-10	10-10
If you plan to have music, what type(s)? (Circle all that apply)			X BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE		
OCCUPANCY									
	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 Stand-Up Bar		
INSIDE	27	32	6	0 seats standing	0 tables only	1	21		
OUTSIDE (Other than sidewalk café)	n/a								
SIDEWALK CAFE	n/a								
How many floors are there? What is the capacity for each floor?					1				
How frequently will the owner(s) be at the establishment?					on a regular basis				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	NO			
						X			
Will applicant have bottle or table service for beverage alcohol?					YES	NO			
						X			
Will you be hosting private; promotional or corporate events?					YES	NO			
						X			
Will outside promoters be used on a regular basis? If yes please describe.					YES	NO			
						X			
Will you have a security plan? If, yes please attach.					YES	NO			
						X			
Will security plan be implemented?					YES	NO	*Security will be provided by Chelsea Market and not by applicant.		
					X				
Will State certified security personnel be used?					YES	NO			
					X				
Will New York Nightlife Association and NYPD Best Practices be followed?					YES	NO			
					X				
Will applicant be using delivery bicycles? If yes, how many?					YES	NO			
						X			
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					YES	NO	n/a		
Where will delivery bicycles be stored during the day when not in use?					n/a				

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO X	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	pending
Is a Public Assembly permit required?	YES	NO X	
Are your plans filed with DOB?	YES	NO X	

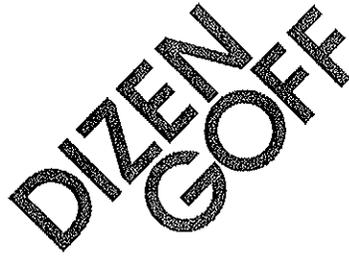
Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	Manhattan Community Board 4	
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.		November 10, 2015 - Community Board 4	
Who was your contact person at each group you met with?			
When did applicant post the notice that was provided?			
Where did applicant post the notice that was provided?			
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES X	NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES X	NO

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	Chelsea Market vendor space		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	unknown
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	n/a
Will applicant have a vestibule within the establishment?	YES	NO <input checked="" type="checkbox"/>	
Will applicant use a storm enclosure?	YES	NO <input checked="" type="checkbox"/>	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	n/a
Will applicant comply with the NYC noise code?	YES <input checked="" type="checkbox"/>	NO	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS NO	GARAGE DOORS NO	WINDOWS THAT CAN BE OPENED NO
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	n/a
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	n/a
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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
Will the kitchen exhaust system extend to the roof?	YES	NO	n/a
Will the establishment have an illuminated sign?	YES	NO	n/a
Will the establishment have a canopy extending over the sidewalk?	YES	NO	n/a
Where will the air conditioner be located? What type is it?	n/a - food truck style operation		
When was the air conditioner installed?	n/a		

OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFE		no outdoor spaces being used	
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES X	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO X	
Are the floorplans for the outdoor space(s) included?	YES	NO	n/a
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	
Will there be no amplified music, as per the law?	YES	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	

<b>OUTDOOR ITEMS – SIDEWALK CAFE</b>			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	





## Dizengoff Chelsea Market - Sample Menu

### **Hummus**

served with housemade pita, chopped salad and Israeli pickles

- Tehina
- Lamb stewed with tomato, allspice, turmeric and coriander
- Slow-roasted tomato with pistachio duqqa
- Fermented cucumbers with carrot-harif
- Soft egg, charred tomato sauce, black pepper potato chips
- Beer-braised brisket, potatoes, cilantro

### **Salatim**

- Beets with tehina
- Twice-cooked eggplant
- Moroccan carrots

### **Rotating Daily Specials (dinner or brunch)**

- Salt-cod and potato borekas
- Green shakshuka with fried eggs and crispy pita
- Malawach with schug and cured egg yolk
- Beef kofta braised with beets
- Lamb belly pancetta with roasted baby turnips

### **Beverages**

- Frozen mint lemonade (with or without bourbon)
- Soft drinks
- Draft beer
- Wine by the glass
- Limited cocktails



1 **Business License & Permits Committee**

Item #: 05

2  
3 December 2, 2015

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Restaurant Associates, LLC**  
12 *75 9<sup>th</sup> Avenue (15/9), Floors: 2<sup>nd</sup>, 4<sup>th</sup>-6<sup>th</sup>, & 8<sup>th</sup>*

13  
14 Dear Chairman Bradley:

15  
16 Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License  
17 application for Restaurant Associates, LLC – 75 9<sup>th</sup> Avenue (15/9) Floors 2<sup>nd</sup>, - 4<sup>th</sup>-6<sup>th</sup> & 8<sup>th</sup>, **unless** the  
18 attached stipulations, agreed to and signed by the applicant, are part of the method of operation for this  
19 establishment with the same hours of operation on every floor (5:30a.m. – 10p.m. Monday – Friday), the  
20 number of bars varies based on function for each floor and a capacity of 74, 38 tables, and 200 seats on  
21 the 8<sup>th</sup> floor.

22  
23 Sincerely,

24  
25  
26 Christine Berthet  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

27  
28

**Manhattan Community Board 4**  
(All Fields Must Be Completed)

Liquor License Stipulations Application

<b>CORPORATION NAME</b> Restaurant Associates, LLC		<b>DOING BUSINESS AS (DBA)</b> N/A			
<b>STREET ADDRESS</b> 75 Ninth Ave., 2nd Floor, New York, NY 10011		<b>CROSS STREETS</b> 9th Ave. & W 15th St.		<b>ZIP CODE</b> 10011	
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b> Please see attached rider.	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Robert D. Skene, Esq.		
	<b>PHONE:</b>		<b>PHONE:</b> 732-727-5030		
	<b>EMAIL:</b>		<b>EMAIL:</b> sskene@skenelawfirm.com		
<b>MANAGER</b>	<b>NAME:</b> TBD	<b>LANDLORD</b>	<b>NAME:</b> Google, Inc.		
	<b>PHONE:</b>		<b>PHONE:</b> 212-565-0000		
	<b>EMAIL:</b>		<b>EMAIL:</b>		
<b>APPLICATION TYPE (Check One)</b>					
<input checked="" type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?		<b>YES</b>	<b>NO</b>	<b>Yes.</b>
	What is/was the name and address of establishment?		Please see attached rider.		
	What were the dates applicant was involved with this former premise?				
<input type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?				
	Is applicant making any alterations or operational changes?		<b>YES</b>	<b>NO</b>	
	If alterations or operational changes are being made, please describe/list all changes.				
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?				
	Please list/describe the nature of all the changes and attach the plans:				
<b>METHOD OF OPERATION</b>					
<b>TYPE OF ALCOHOL</b>	<input checked="" type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer				
<b>ESTABLISHMENT TYPE</b>	<input type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input checked="" type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization - Members Only)				
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		<b>YES</b>	<b>NO</b>	No. Applicant will file 30 days upon providing the CB with the Standardized Notice-- November 20th, 2015.	
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		<b>YES</b>	<b>NO</b>	Yes. Please see attached.	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<b>YES</b>	<b>NO</b>	No.	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<b>YES</b>	<b>NO</b>	Yes.	

OPERATIONAL DETAILS (*Closing time will be when establishment is vacated of all patrons)								
HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	5:30am-10am	5:30am-10am	5:30am-10am	5:30am-10am	5:30am-10am		
	Kitchen	N/A						
	Music	N/A						
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE	
OCCUPANCY								
	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 Stand-Up Bar	
INSIDE					varies upon function.			
OUTSIDE (Other than sidewalk café)	N/A							
SIDEWALK CAFÉ	N/A							
How many floors are there? What is the capacity for each floor?					8 floors total, licensing 2nd floor only. Please see attached.			
How frequently will the owner(s) be at the establishment?					Applicant principals oversee all businesses nationwide, however, a manager will be present at all operating hours.			
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	NO	No.	
Will applicant have bottle or table service for beverage alcohol?					YES	NO	NO.	
Will you be hosting private, promotional or corporate events?					YES	NO	Yes. Applicant will host private, corporate events.	
Will outside promoters be used on a regular basis? If yes please describe.					YES	NO	NO.	
Will you have a security plan? If, yes please attach.					YES	NO	Yes. Please see attached.	
Will security plan be implemented?					YES	NO	Yes.	
Will State certified security personnel be used?					YES	NO	Yes.	
Will New York Nightlife Association and NYPD Best Practices be followed?					YES	NO	N/A, corporate catered events only.	
Will applicant be using delivery bicycles? If yes, how many?					YES	NO	No.	
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					YES	NO	N/A	
Where will delivery bicycles be stored during the day when not in use?					N/A			

License	Premises Location	Floor	Hours of operation, Monday-Sunday	If Cafe, Name	Cafe/Kitchen Hours	Maximum occupancy for each floor	Anticipated # of people occupying the premises, including staff	Number of Cafe tables and seats	Catering Tables and seats	Certificate of Operation #	Physical Copy Available
1	75 Ninth Avenue, 2nd Floor	2nd Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	no seats			Varies upon function		
2	75 Ninth Avenue, 4th, 5th and 6th Floors	4th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	TBD			Varies upon function		
		5th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	TBD			Varies upon function		
		6th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	TBD			Varies upon function		
3	75 Ninth Avenue, 8th Floor	8th floor	Monday-Friday, 5:30 am to 10 PM	The Mezz	Monday-Friday, 5:30 am to 10 PM	74?		38 tables/200 seats	Varies upon function		
4	76 Ninth Avenue, 4th and 5th Floors	4th floor	Monday-Friday, 5:30 am to 10 PM	586	Monday-Friday, 5:30 am to 10 PM	220		61 tables/218 seats	Varies upon function	104488635	Yes
		5th Floor	Monday-Friday, 5:30 am to 10 PM	Water Tower	Monday-Friday, 5:30 am to 10 PM	270		40 tables/213 seats	Varies upon function	120345689	
5	76 Ninth Avenue, 8th Floor	8th Floor	Monday-Friday, 5:30 am to 10 PM	Hemispheres/Truck Pit	Monday-Friday, 5:30 am to 10 PM	992		89 tables/374 seats	Varies upon function	104511011	
6	76 Ninth Avenue, 11th Floor	11 th Floor	Monday-Friday, 5:30 am to 10 PM	LaPlace	Monday-Friday, 5:30 am to 10 PM	299		76 Tables/218 Seats	Varies upon function		
7	76 Ninth Avenue, 14th and 15th Floors	14th Floor	Monday-Friday, 5:30 am to 10 PM	Panorama	Monday-Friday, 5:30 am to 10 PM	TBD		42 Tables/224 Seats	Varies upon function		
		15th floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A				Varies upon function		
8	85 Tenth Avenue, 4th Floor	4th floor	Monday-Friday, 5:30 am to 10 PM	The High Line	Monday-Friday, 5:30 am to 10 PM	218		52 Tables/200 Seats	Varies upon function		
9	85 Tenth Avenue, 11th Floor	11th floor	Monday-Friday, 5:30 am to 10 PM	The Box	Monday-Friday, 5:30 am to 10 PM	74?		12 Tables/46 seats	Varies upon function		

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	Yes- West Chelsea
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes.
Is a Public Assembly permit required?	YES	NO	Yes.
Are your plans filed with DOB?	YES	NO	Yes.

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	300 W 15th St. Block Association, Jim Jasper	
	# 2	200 W 16th St. Block Association, Will Rogers	
	# 3	100 W 17th/18th Streets Block Association, Craig Slutzkin & Judy Klein	
	# 4	300 W 18th/19th Streets Block Association, Cheryl Kupper & Laura Evans	
	# 5	Bill Borock	
Please provide dates when applicant met with the groups listed above.	10/28/2015 via e-mail.		
Who was your contact person at each group you met with?	Jim Jasper, Will Rogers, Craig Slutzkin, Judy Klein, Cheryl Kupper & Laura Evans		
When did applicant post the notice that was provided?	9th Avenue from 14th to 18th Streets (both sides of the avenue)		
Where did applicant post the notice that was provided?	10th Avenue from 14th to 18th Streets (both sides of the avenue) 15th Street & 16th Street from 10th Avenue to 8th Avenue		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	YES	NO	Yes, 917-750-5098 Andrew Ziobro
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	NO	Yes.

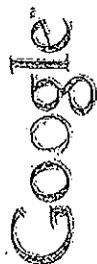
<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	Google corporate office		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	No.
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No.
Will applicant have a vestibule within the establishment?	YES	NO	No.
Will applicant use a storm enclosure?	YES	NO	No.
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	N/A
Will applicant comply with the NYC noise code?	YES	NO	Yes.
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		GARAGE DOORS
	WINDOWS THAT CAN BE OPENED		
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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
Will the kitchen exhaust system extend to the roof?	YES	NO	No.
Will the establishment have an illuminated sign?	YES	NO	No.
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No.
Where will the air conditioner be located? What type is it?	Roof AC.		
When was the air conditioner installed?	Unknown.		

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	No.
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

<b>OUTDOOR ITEMS – SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes.
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	No.
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	No.
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

# FLOOR 2

## NEW YORK EMERGENCY EVACUATION PLAN CHELSEA MARKET - 75 NINTH AVE



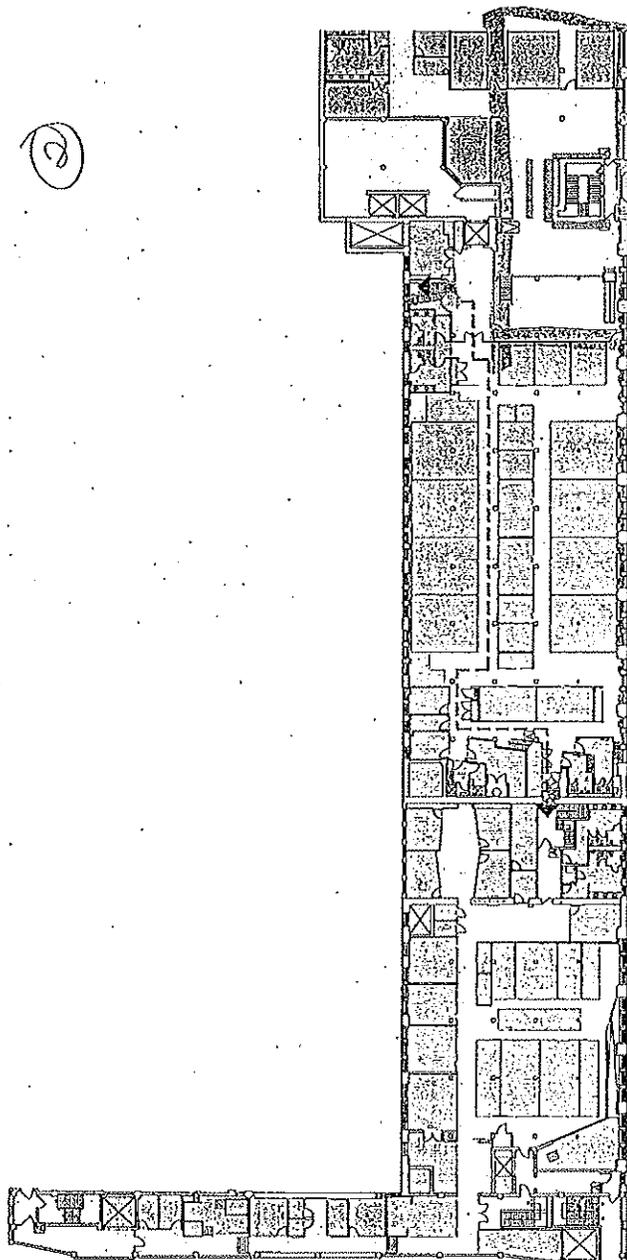
### LEGEND

- AISLE
- EXIT
- PRIMARY EXIT PATH
- SECONDARY EXIT PATH
- ACCESSIBLE EXIT
- YOU ARE HERE
- FIRE ALARM STATION

Fire alarm sound: Horn  
 Visual alarm: Flashing light

### Fire Emergency Procedures:

- 1) Pull fire alarm or call X55555
- 2) Exit building
- 3) Walk to evacuation assembly area
- 4) Follow staff instructions



ALTERNATE ASSEMBLY AREA  
 PRIMARY ASSEMBLY AREA



EMERGENCY DIAL  
**X55555**

**IN CASE OF FIRE USE STAIRS  
 DO NOT USE ELEVATOR**



# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

CORPORATION NAME Restaurant Associates, LLC		DOING BUSINESS AS (DBA) N/A			
STREET ADDRESS 75 Ninth Ave., 4th, 5th & 6th Fls, New York, NY 10011		CROSS STREETS 9th Ave. & W 15th St.		ZIP CODE 10011	
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME: Please see attached rider.	ATTORNEY/ REPRESENTATIVE	NAME: Robert D. Skene, Esq.		
	PHONE:		PHONE: 732-727-5030		
	EMAIL:		EMAIL: sskene@skenelawfirm.com		
MANAGER	NAME: TBD	LANDLORD	NAME: Google, Inc.		
	PHONE:		PHONE: 212-565-0000		
	EMAIL:		EMAIL:		
<b>APPLICATION TYPE</b> (Check One)					
<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?		YES	NO	Yes.
	What is/was the name and address of establishment?		Please see attached rider.		
	What were the dates applicant was involved with this former premise?				
<input type="radio"/> Transfer	What is the prior license # and expiration date?				
	Is applicant making any alterations or operational changes?		YES	NO	
	If alterations or operational changes are being made, please describe/list all changes.				
<input type="radio"/> Alteration	What is the current license # and expiration date?				
	Please list/describe the nature of all the changes and attach the plans:				
<b>METHOD OF OPERATION</b>					
TYPE OF ALCOHOL	<input checked="" type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer				
ESTABLISHMENT TYPE	<input type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input checked="" type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization - Members Only)				
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		YES	NO	No. Applicant will file 30 days upon providing the CB with the Standardized Notice-- November 20th, 2015.	
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		YES	NO	Yes. Please see attached.	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		YES	NO	No.	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		YES	NO	Yes.	

OPERATIONAL DETAILS (*Closing time will be when establishment is vacated of all patrons)									
HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	5:30am-10am	5:30am-10am	5:30am-10am	5:30am-10am	5:30am-10am			
	Kitchen	N/A							
	Music	N/A							
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE		
OCCUPANCY									
	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 Stand-Up Bar		
INSIDE					Varies upon function.				
OUTSIDE (Other than sidewalk café)	N/A								
SIDEWALK CAFÉ	N/A								
How many floors are there? What is the capacity for each floor?					8 floors total, licensing 4th, 5th & 6th floors only. Please see attached.				
How frequently will the owner(s) be at the establishment?					Applicant principals oversee all businesses nationwide, however, a manager will be present at all operating hours.				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	NO	No.		
Will applicant have bottle or table service for beverage alcohol?					YES	NO	No.		
Will you be hosting private, promotional or corporate events?					YES	NO	Yes. Applicant will host private, corporate events.		
Will outside promoters be used on a regular basis? If yes please describe.					YES	NO	No.		
Will you have a security plan? If, yes please attach.					YES	NO	Yes. Please see attached.		
Will security plan be implemented?					YES	NO	Yes.		
Will State certified security personnel be used?					YES	NO	Yes.		
Will New York Nightlife Association and NYPD Best Practices be followed?					YES	NO	N/A, corporate catered events only.		
Will applicant be using delivery bicycles? If yes, how many?					YES	NO	No.		
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					YES	NO	N/A		
Where will delivery bicycles be stored during the day when not in use?					N/A				

License	Premises Location	Floor	Hours of operation, Monday-Sunday	If Cafe, Name	Cafe/Kitchen Hours	Maximum occupancy for each floor	Anticipated # of people occupying the premises, including staff	Number of Cafe tables and seats	Catering Tables and seats	Certificate of Operation #	Physical Copy Available
1	75 Ninth Avenue, 2nd Floor	2nd Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	no seats			Varies upon function		
2	75 Ninth Avenue, 4th, 5th and 6th Floors	4th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	TBD			Varies upon function		
		5th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	TBD			Varies upon function		
		6th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	TBD			Varies upon function		
3	75 Ninth Avenue, 8th Floor	8th floor	Monday-Friday, 5:30 am to 10 PM	The Mezz	Monday-Friday, 5:30 am to 10 PM		74?	38 tables/200 seats	Varies upon function		
4	76 Ninth Avenue, 4th and 5th Floors	4th floor	Monday-Friday, 5:30 am to 10 PM	SBB	Monday-Friday, 5:30 am to 10 PM		220	61 tables/218 seats	Varies upon function	104488635	Yes
		5th Floor	Monday-Friday, 5:30 am to 10 PM	Water Tower	Monday-Friday, 5:30 am to 10 PM		270	40 tables/213 seats	Varies upon function	120345689	
5	76 Ninth Avenue, 8th Floor	8th Floor	Monday-Friday, 5:30 am to 10 PM	Hemispheres/Truck Pit	Monday-Friday, 5:30 am to 10 PM		392	89 tables/374 seats	Varies upon function	104511011	
6	76 Ninth Avenue, 11th Floor	11 th Floor	Monday-Friday, 5:30 am to 10 PM	LaPlace	Monday-Friday, 5:30 am to 10 PM		299	76 Tables/218 Seats	Varies upon function		
7	76 Ninth Avenue, 14th and 15th Floors	14th Floor	Monday-Friday, 5:30 am to 10 PM	Panorama	Monday-Friday, 5:30 am to 10 PM			42 Tables/224 Seats	Varies upon function		
		15th floor	Monday-Friday, 5:30 am to 10 PM		N/A				Varies upon function		
8	85 Tenth Avenue, 4th floor	4th floor	Monday-Friday, 5:30 am to 10 PM	The High Line	Monday-Friday, 5:30 am to 10 PM		218	52 Tables/200 Seats	Varies upon function		
9	85 Tenth Avenue, 11th Floor	11th floor	Monday-Friday, 5:30 am to 10 PM	The Box	Monday-Friday, 5:30 am to 10 PM		74?	12 Tables/46 seats	Varies upon function		

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	Yes- West Chelsea
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes.
Is a Public Assembly permit required?	YES	NO	Yes.
Are your plans filed with DOB?	YES	NO	Yes.

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	300 W 15th St. Block Association, Jim Jasper	
	# 2	200 W 16th St. Block Association, Will Rogers	
	# 3	100 W 17th/18th Streets Block Association, Craig Slutzkin & Judy Klein	
	# 4	300 W 18th/19th Streets Block Association, Cheryl Kupper & Laura Evans	
	# 5	Bill Borock	
Please provide dates when applicant met with the groups listed above.	10/28/2015 via e-mail.		
Who was your contact person at each group you met with?	Jim Jasper, Will Rogers, Craig Slutzkin, Judy Klein, Cheryl Kupper & Laura Evans		
When did applicant post the notice that was provided?			
Where did applicant post the notice that was provided?	<del>9th Avenue from 14th to 18th Streets (both sides of the avenue)</del> 10th Avenue from 14th to 18th Streets (both sides of the avenue) <del>15th Street &amp; 16th Street from 10th Avenue to 8th Avenue</del>		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	YES	NO	Yes, 917-750-5098 Andrew Ziobro
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	NO	Yes.

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	Google corporate office		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	No.
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No.
Will applicant have a vestibule within the establishment?	YES	NO	No.
Will applicant use a storm enclosure?	YES	NO	No.
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	N/A
Will applicant comply with the NYC noise code?	YES	NO	Yes.
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		GARAGE DOORS
	WINDOWS THAT CAN BE OPENED		
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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
Will the kitchen exhaust system extend to the roof?	YES	NO	No.
Will the establishment have an illuminated sign?	YES	NO	No.
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No.
Where will the air conditioner be located? What type is it?	Roof- AC		
When was the air conditioner installed?	Unknown.		

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	No.
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

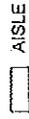
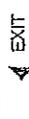
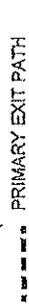
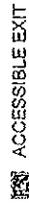
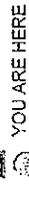
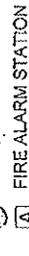
<b>OUTDOOR ITEMS – SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes.
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	No.
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	No.
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

# NEW YORK EMERGENCY EVACUATION PLAN

75 NINTH AVE, CHELSEA MARKET

# FLOOR 4

## LEGEND

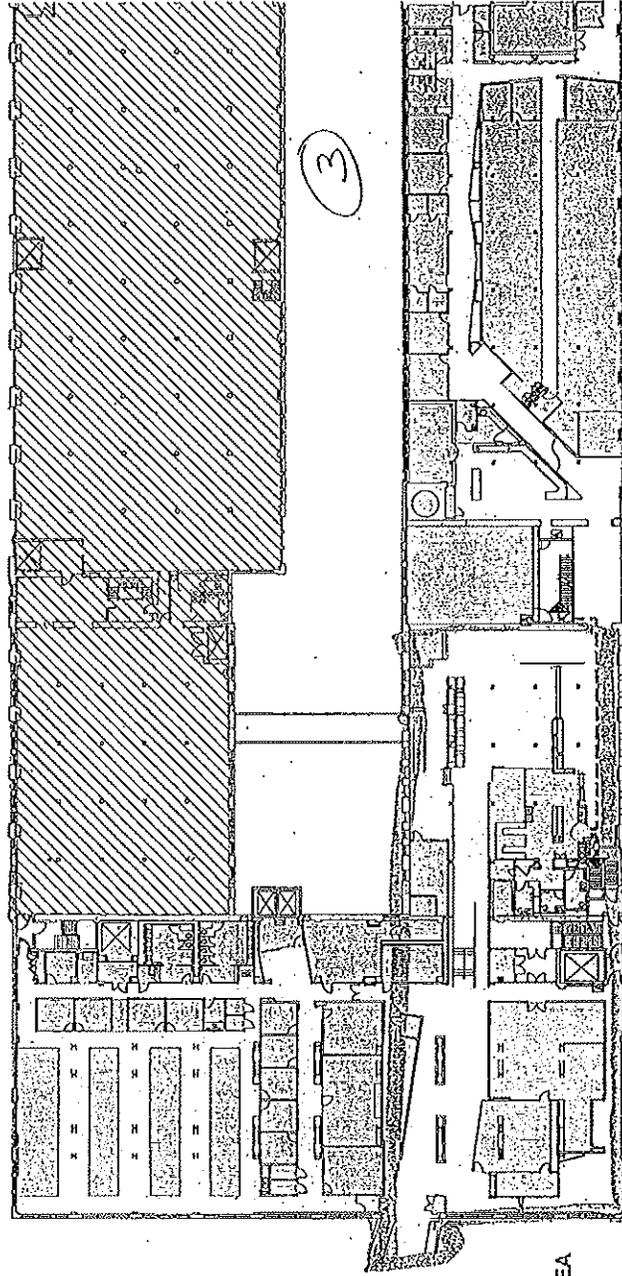
-  AISLE
-  EXIT
-  PRIMARY EXIT PATH
-  SECONDARY EXIT PATH
-  ACCESSIBLE EXIT
-  YOU ARE HERE
-  FIRE ALARM STATION

Fire alarm sound: Horn

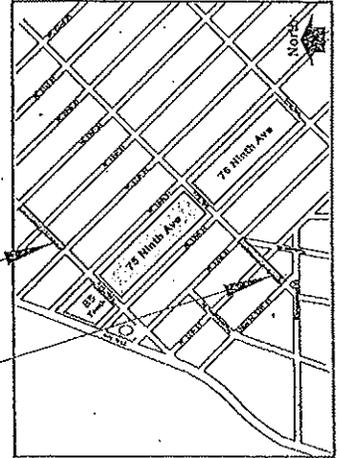
Visual alarm: Flashing light

## Fire Emergency Procedures:

- 1) Pull fire alarm or call +1-650-253-5555
- 2) Exit building
- 3) Walk to evacuation assembly area
- 4) Follow staff instructions



ALTERNATE ASSEMBLY AREA  
PRIMARY ASSEMBLY AREA



**IN CASE OF FIRE USE STAIRS  
DO NOT USE ELEVATOR**

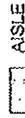
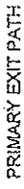
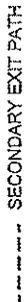
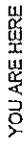
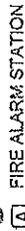
**EMERGENCY DIAL  
+1-650-253-5555**

# NEW YORK EMERGENCY EVACUATION PLAN

## 75 NINTH AVE, CHELSEA MARKET

# FLOOR 4

**LEGEND**

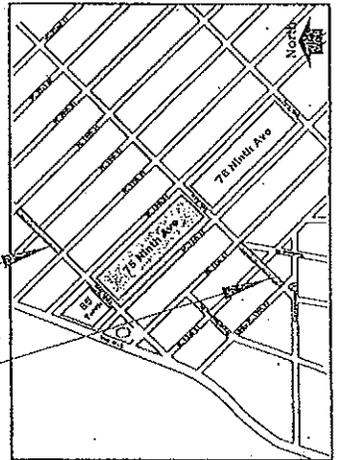
-  AISLE
-  EXIT
-  PRIMARY EXIT PATH
-  SECONDARY EXIT PATH
-  ACCESSIBLE EXIT
-  YOU ARE HERE
-  FIRE ALARM STATION

Fire alarm sound: Horn  
 Visual alarm: Flashing light

**Fire Emergency Procedures:**

- 1) Pull fire alarm or call +1-650-253-5555
- 2) Exit building
- 3) Walk to evacuation assembly area.
- 4) Follow staff instructions

ALTERNATE ASSEMBLY AREA  
 PRIMARY ASSEMBLY AREA



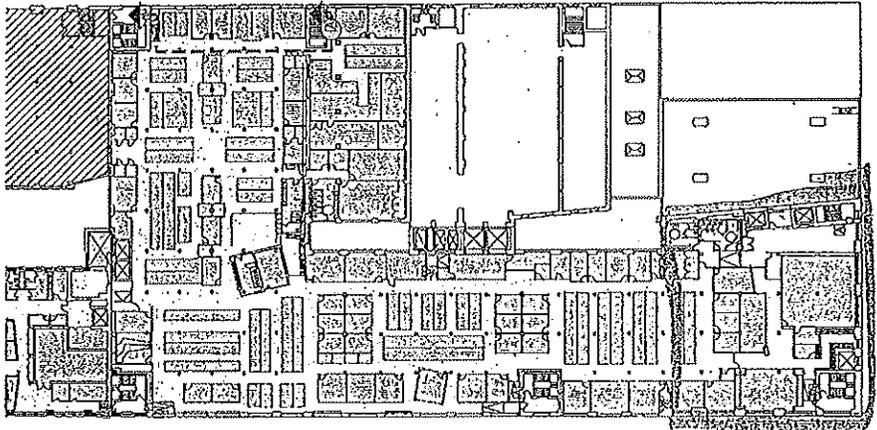
**EMERGENCY DIAL**  
 +1-650-253-5555

**IN CASE OF FIRE USE STAIRS**  
**DO NOT USE ELEVATOR**



3

Cabern





# NEW YORK EMERGENCY EVACUATION PLAN 75 NINTH AVE, CHELSEA MARKET

## FLOOR 5

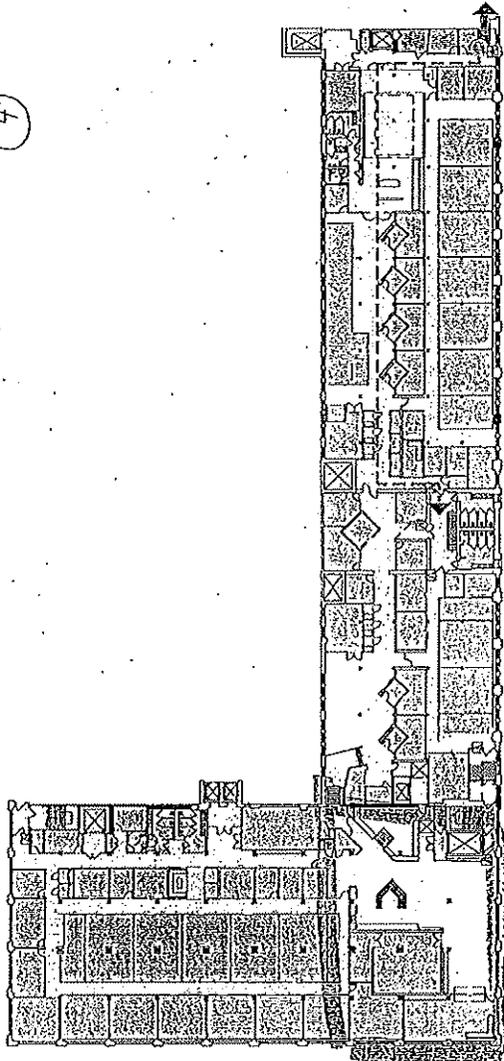
### LEGEND

- AISLE
- EXIT
- PRIMARY EXIT PATH
- SECONDARY EXIT PATH
- ACCESSIBLE EXIT
- YOU ARE HERE
- FIRE ALARM STATION

Fire alarm sound: Horn  
 Visual alarm: Flashing light

- Fire Emergency Procedures:
- 1) Pull fire alarm or call X55555
  - 2) Exit building
  - 3) Walk to evacuation assembly area
  - 4) Follow staff instructions

4



ALTERNATE ASSEMBLY AREA  
 PRIMARY ASSEMBLY AREA



EMERGENCY DIAL  
 X55555

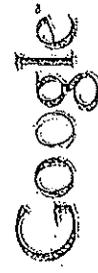
IN CASE OF FIRE USE STAIRS  
 DO NOT USE ELEVATOR



# NEW YORK EMERGENCY EVACUATION PLAN

CHELSEA MARKET - 75 NINTH AVE

# FLOOR 6

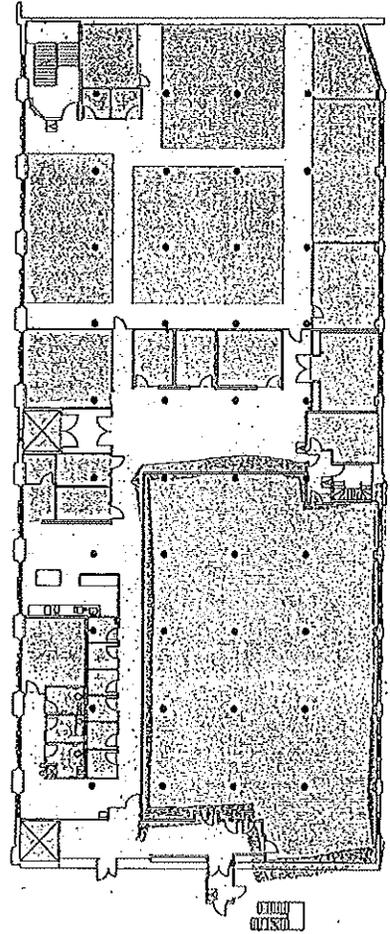


**LEGEND**

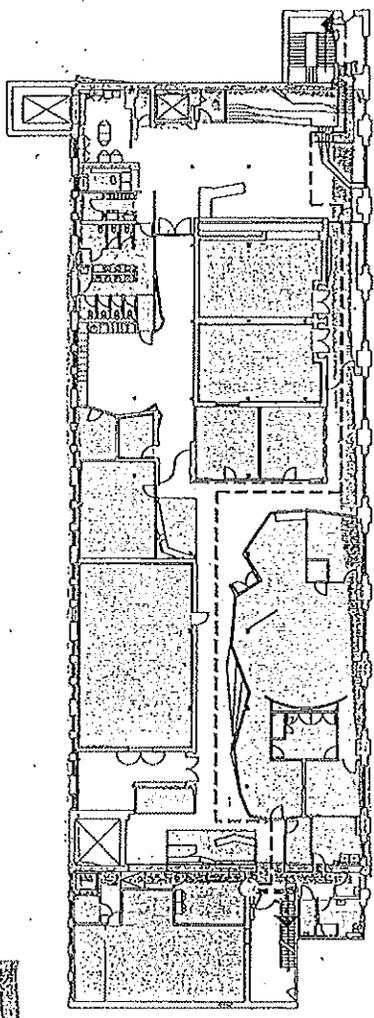
- AISLE
- EXIT
- PRIMARY EXIT PATH
- SECONDARY EXIT PATH
- ACCESSIBLE EXIT
- YOU ARE HERE
- FIRE ALARM STATION

Fire alarm sound: Horn  
 Visual alarm: Flashing light

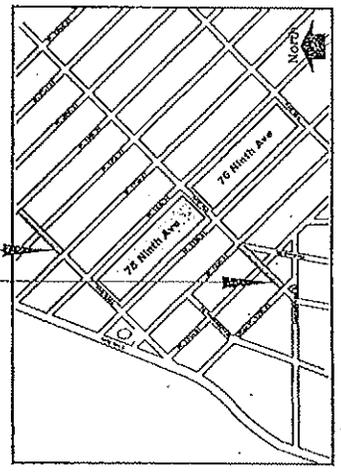
- Fire Emergency Procedures:
- 1) Pull fire alarm or call +1-650-253-5555
  - 2) Exit building
  - 3) Walk to evacuation assembly area
  - 4) Follow staff instructions



*Carrying*



ALTERNATE ASSEMBLY AREA  
 PRIMARY ASSEMBLY AREA



**EMERGENCY DIAL  
 +1-650-253-5555**

**IN CASE OF FIRE USE STAIRS  
 DO NOT USE ELEVATOR**

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b> Restaurant Associates, LLC		<b>DOING BUSINESS AS (DBA)</b> N/A	
<b>STREET ADDRESS</b> 75 Ninth Ave., 8th Floor, New York, NY 10011		<b>CROSS STREETS</b> 9th Ave. & W 15th St.	<b>ZIP CODE</b> 10011
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b> Please see attached rider.	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Robert D. Skene, Esq.
	<b>PHONE:</b>		<b>PHONE:</b> 732-727-5030
	<b>EMAIL:</b>		<b>EMAIL:</b> sskene@skenelawfirm.com
<b>MANAGER</b>	<b>NAME:</b> TBD	<b>LANDLORD</b>	<b>NAME:</b> Google, Inc.
	<b>PHONE:</b>		<b>PHONE:</b> 212-565-0000
	<b>EMAIL:</b>		<b>EMAIL:</b>

### APPLICATION TYPE (Check One)

<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	YES	NO	Yes.
	What is/was the name and address of establishment?	Please see attached rider.		
	What were the dates applicant was involved with this former premise?			
<input type="radio"/> Transfer	What is the prior license # and expiration date?			
	Is applicant making any alterations or operational changes?	YES	NO	
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>			
<input type="radio"/> Alteration	What is the current license # and expiration date?			
	<i>Please list/describe the nature of all the changes and attach the plans:</i>			

### METHOD OF OPERATION

<b>TYPE OF ALCOHOL</b>	<input checked="" type="radio"/> Liquor/Wine/Beer	<input type="radio"/> Beer	<input type="radio"/> Wine & Beer			
<b>ESTABLISHMENT TYPE</b>	<input type="radio"/> Restaurant	<input type="radio"/> Cabaret	<input type="radio"/> Night Club	<input type="radio"/> Hotel	<input type="radio"/> Bar/Tavern	<input checked="" type="radio"/> Catering Establishment
	<input type="radio"/> Adult Entertainment	<input type="radio"/> Wine Bar	<input type="radio"/> Dance Club	<input type="radio"/> Sports Bar	<input type="radio"/> Club (Fraternal Organization - Members Only)	

Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	NO	No. Applicant will file 30 days upon providing the CB with the Standardized Notice-- November 20th, 2015.
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	YES	NO	Yes. Please see attached.
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	NO	No.
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	YES	NO	Yes.

**OPERATIONAL DETAILS (\*Closing time will be when establishment is vacated of all patrons)**

HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	5:30 AM-10:00 PM						
	Kitchen	5:30 AM-10:00 PM						
	Music	N/A						

If you plan to have music, what type(s)? (Circle all that apply)	BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE
---	------------	------------	----	----------	---------

**OCCUPANCY**

	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 Stand-Up Bar
INSIDE		74	38	200	Varies upon function.		
OUTSIDE <i>(Other than sidewalk café)</i>	N/A						
SIDEWALK CAFÉ	N/A						

How many floors are there? What is the capacity for each floor? 8 floors total, licensing 8th floor only. Please see attached.

How frequently will the owner(s) be at the establishment? Applicant principals oversee all businesses nationwide, however, a manager will be present at all operating hours.

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing? YES NO No.

Will applicant have bottle or table service for beverage alcohol? YES NO No.

Will you be hosting private, promotional or corporate events? YES NO Yes. Applicant will host private, corporate events.

Will outside promoters be used on a regular basis? If yes please describe. YES NO No.

Will you have a security plan? If, yes please attach. YES NO Yes. Please see attached.

Will security plan be implemented? YES NO Yes.

Will State certified security personnel be used? YES NO Yes.

Will New York Nightlife Association and NYPD Best Practices be followed? YES NO N/A, corporate catered events only.

Will applicant be using delivery bicycles? If yes, how many? YES NO No.

Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law? YES NO N/A

Where will delivery bicycles be stored during the day when not in use? N/A

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	Yes. West Chelsea.
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes.
Is a Public Assembly permit required?	YES	NO	Yes.
Are your plans filed with DOB?	YES	NO	Yes.

Community Notification/Relations				
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	300 W 15th St. Block Association, Jim Jasper		
	# 2	200 W 16th St. Block Association, Will Rogers		
	# 3	100 W 17th/18th Streets Block Association, Craig Slutzkin & Judy Klein		
	# 4	300 W 18th/19th Streets Block Association, Cheryl Kupper & Laura Evans		
	# 5	Bill Borock		
Please provide dates when applicant met with the groups listed above.		10/28/2015 via e-mail.		
Who was your contact person at each group you met with?		Jim Jasper, Will Rogers, Craig Slutzkin, Judy Klein, Cheryl Kupper & Laura Evans		
When did applicant post the notice that was provided?				
Where did applicant post the notice that was provided?		8th Avenue from 14th to 18th Streets (both sides of the avenue) 10th Avenue from 14th to 18th Streets (both sides of the avenue) 15th Street & 16th Street from 10th Avenue to 8th Avenue		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES	NO	Yes, 917-750-5098 Andrew Ziobro
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES	NO	Yes.

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	Google corporate office		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	No.
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No.
Will applicant have a vestibule within the establishment?	YES	NO	No.
Will applicant use a storm enclosure?	YES	NO	No.
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	N/A
Will applicant comply with the NYC noise code?	YES	NO	Yes.
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		GARAGE DOORS
	WINDOWS THAT CAN BE OPENED		
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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
Will the kitchen exhaust system extend to the roof?	YES	NO	No.
Will the establishment have an illuminated sign?	YES	NO	No.
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No.
Where will the air conditioner be located? What type is it?	Central Air- located on roof.		
When was the air conditioner installed?	Unknown.		

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	No.
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

<b>OUTDOOR ITEMS – SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes.
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	No.
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	No.
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

## **RIDER TO LIQUOR LICENSE STIPULATION APPLICATION SECURITY PLAN**

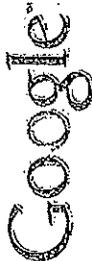
Security is available 24 hours per day. The applicant will host private, corporate events only. As such, all guests will be Google employees and their registered guests. All guests will be chaperoned to catered areas. All guests will gain building access with their Google badges. Servers will be trained in the responsible service of alcoholic beverages. All patrons will be ID'd and monitored for intoxication. Servers will refuse service to any such patrons.

# NEW YORK EMERGENCY EVACUATION PLAN

75 NINTH AVE, CHELSEA MARKET

# FLOOR 8

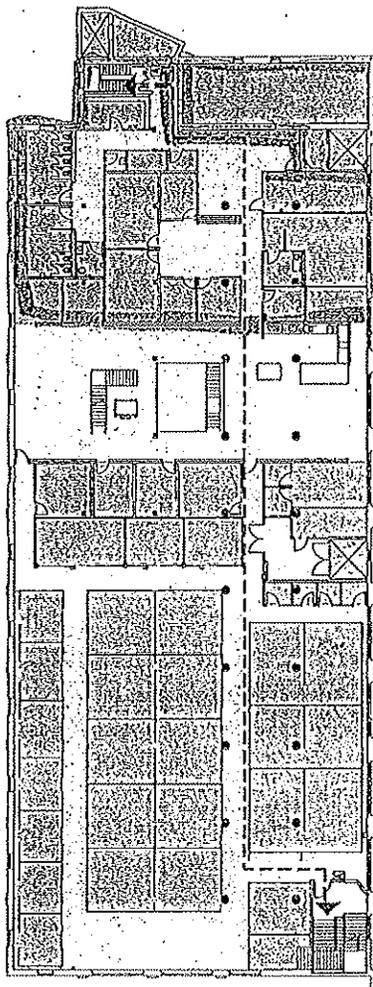
5



- LEGEND**
- AISLE
  - EXIT
  - PRIMARY EXIT PATH
  - SECONDARY EXIT PATH
  - ACCESSIBLE EXIT
  - YOU ARE HERE
  - FIRE ALARM STATION

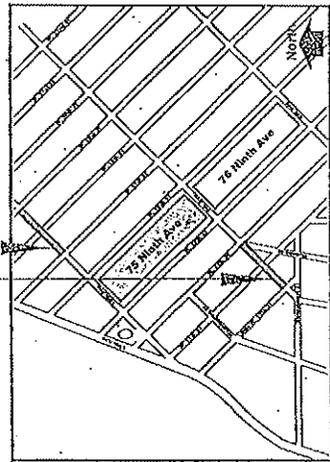
Fire alarm sound: Horn  
 Visual alarm: Flashing light

- Fire Emergency Procedures:**
- 1) Pull fire alarm or call +1-650-253-5555
  - 2) Exit building
  - 3) Walk to evacuation assembly area.
  - 4) Follow staff instructions



*Cabing*  
*Kitchen*

ALTERNATE ASSEMBLY AREA  
 PRIMARY ASSEMBLY AREA



**EMERGENCY DIAL**  
 +1-650-253-5555

**IN CASE OF FIRE USE STAIRS**  
**DO NOT USE ELEVATOR**



1 **Business License & Permits Committee**

Item #: 06

2  
3 December 2, 2015

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Restaurant Associates, LLC**  
12 *76 9<sup>th</sup> Avenue (15/9), Floors: 4<sup>th</sup>-5<sup>th</sup>, 8<sup>th</sup>, 11<sup>th</sup>, & 14<sup>th</sup>-15<sup>th</sup>*

13  
14 Dear Chairman Bradley:

15  
16 Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License  
17 application for Restaurant Associates, LLC – 76 9<sup>th</sup> Avenue (15/9) Floors 4<sup>th</sup>-5<sup>th</sup>, 8<sup>th</sup>, 11<sup>th</sup>, & 14<sup>th</sup>-15<sup>th</sup>,  
18 **unless** the attached stipulations, agreed to and signed by the applicant, are part of the method of  
19 operation for this establishment with the same hours of operation on every floor (5:30a.m.-10p.m.  
20 Monday – Friday), and the number of bars varies based on function for each floor.  
21 A capacity of 220, 61 tables and 218 seats on the 4<sup>th</sup> Floor and a capacity of 270, 40 tables and 213 seats  
22 on the 5<sup>th</sup> Floor  
23 A capacity of 392, 89 tables and 374 seats on the 8<sup>th</sup> Floor  
24 A capacity of 299, 76 tables and 218 seats on the 11<sup>th</sup> Floor  
25 42 Tables, and 224 seats on the 14<sup>th</sup>-15<sup>th</sup> Floors

26  
27 Sincerely,

28  
29  
30  
Christine Berthet  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

31  
32

**Manhattan Community Board 4**  
(All Fields Must Be Completed)

Liquor License Stipulations Application

<b>CORPORATION NAME</b> Restaurant Associates, LLC		<b>DOING BUSINESS AS (DBA)</b> N/A	
<b>STREET ADDRESS</b> 76 Ninth Ave., 4th and 5th Fls, New York, NY 10011		<b>CROSS STREETS</b> W 15th St. and 9th Ave.	<b>ZIP CODE</b> 10011
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b> Please see attached rider.	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Robert D. Skene, Esq.
	<b>PHONE:</b>		<b>PHONE:</b> 732-727-5030
	<b>EMAIL:</b>		<b>EMAIL:</b> sskene@skenelawfirm.com
<b>MANAGER</b>	<b>NAME:</b> TBD	<b>LANDLORD</b>	<b>NAME:</b> Google, Inc.
	<b>PHONE:</b>		<b>PHONE:</b> 212-565-0000
	<b>EMAIL:</b>		<b>EMAIL:</b>

**APPLICATION TYPE (Check One)**

<input checked="" type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> Yes.
	What is/was the name and address of establishment?	Please see attached rider.		
	What were the dates applicant was involved with this former premise?			
<input type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?			
	Is applicant making any alterations or operational changes?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>			
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?			
	<i>Please list/describe the nature of all the changes and attach the plans:</i>			

**METHOD OF OPERATION**

<b>TYPE OF ALCOHOL</b>	<input checked="" type="radio"/> Liquor/Wine/Beer	<input type="radio"/> Beer	<input type="radio"/> Wine & Beer
<b>ESTABLISHMENT TYPE</b>	<input type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input checked="" type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization - Members Only)		

Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	No. Applicant will file 30 days upon providing the CB with the Standardized Notice-- November 20th, 2015.
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Yes. Please see attached.
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	No.
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Yes.

**OPERATIONAL DETAILS (\*Closing time will be when establishment is vacated of all patrons)**

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>HOURS*</b> <i>(Indoor Only)</i>	Operation	5:30 AM-10:00 PM						
	Kitchen	5:30 AM-10:00 PM						
	Music	N/A						
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE	

**OCCUPANCY**

	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 Stand-Up Bar
4th floor <b>INSIDE</b> 5th Floor		220 270	61 40	218 213	varies upon function. varies upon function.		
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>	N/A						
<b>SIDEWALK CAFE</b>	N/A						

How many floors are there? What is the capacity for each floor? 17 floors total. However, applicant is only licensing floors 4 and 5. Please see attached.

How frequently will the owner(s) be at the establishment? Applicant principals oversee all businesses nationwide, however, a manager will be present at all operating hours.

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing? YES NO No.

Will applicant have bottle or table service for beverage alcohol? YES NO No.

Will you be hosting private, promotional or corporate events? YES NO Yes. Applicant will host private, corporate events.

Will outside promoters be used on a regular basis? If yes please describe. YES NO No.

Will you have a security plan? If, yes please attach. YES NO Yes. Please see attached.

Will security plan be implemented? YES NO Yes.

Will State certified security personnel be used? YES NO Yes.

Will New York Nightlife Association and NYPD Best Practices be followed? YES NO N/A, corporate catered events only.

Will applicant be using delivery bicycles? If yes, how many? YES NO No.

Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law? YES NO N/A

Where will delivery bicycles be stored during the day when not in use? N/A

License	Premises Location	Floor	Hours of operation, Monday-Sunday to 10 PM	Hours of operation, Sunday to 10 PM	If Cafe, Name	Cafe/Kitchen Hours	Maximum occupancy for each floor	Anticipated # of people occupying the premises, including staff	Number of Cafe tables and seats	Catering Tables and seats	Certificate of Operation #	Physical Copy Available
1	75 Ninth Avenue, 2nd Floor	2nd Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	N/A	no seats			Varies upon function.		
2	75 Ninth Avenue, 4th, 5th and 6th Floors	4th Floor 5th Floor 6th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	N/A	TBD			Varies upon function		
3	75 Ninth Avenue, 8th Floor	8th floor	Monday-Friday, 5:30 am to 10 PM	The Mezz	Monday-Friday, 5:30 am to 10 PM	74?	38 tables/200 seats			Varies upon function		
4	76 Ninth Avenue, 4th and 5th Floors	4th floor 5th Floor	Monday-Friday, 5:30 am to 10 PM	588 Water Tower	Monday-Friday, 5:30 am to 10 PM	220 270	61 tables/218 seats 40 tables/213 seats			Varies upon function Varies upon function	104488635 120345689	Yes
5	76 Ninth Avenue, 8th Floor	8th Floor	Monday-Friday, 5:30 am to 10 PM	Hemispheres/Truck Pit	Monday-Friday, 5:30 am to 10 PM	392	89 tables/374 seats			Varies upon function	104511011	
6	76 Ninth Avenue, 11th Floor	11 th Floor	Monday-Friday, 5:30 am to 10 PM	LaPlace	Monday-Friday, 5:30 am to 10 PM	299	76 Tables/218 Seats			Varies upon function		
7	76 Ninth Avenue, 14th and 15th Floors	14th Floor 15th floor	Monday-Friday, 5:30 am to 10 PM	Panorama	Monday-Friday, 5:30 am to 10 PM	TBD	42 Tables/224 Seats			Varies upon function Varies upon function		
8	85 Tenth Avenue, 4th Floor	4th floor	Monday-Friday, 5:30 am to 10 PM	The High Line	Monday-Friday, 5:30 am to 10 PM	218	52 Tables/200 Seats			Varies upon function		
9	85 Tenth Avenue, 11th Floor	11th floor	Monday-Friday, 5:30 am to 10 PM	The Box	Monday-Friday, 5:30 am to 10 PM	74?	12 Tables/46 seats			Varies upon function		

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	Yes- West Chelsea.
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes.
Is a Public Assembly permit required?	YES	NO	Yes.
Are your plans filed with DOB?	YES	NO	Yes.

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	300 W 15th St. Block Association, Jim Jasper	
	# 2	200 W 16th St. Block Association, Will Rogers	
	# 3	100 W 17th/18th Streets Block Association, Craig Slutzkin & Judy Klein	
	# 4	300 W 18th/19th Streets Block Association, Cheryl Kupper & Laura Evans	
	# 5	Bill Borock	
Please provide dates when applicant met with the groups listed above.	10/28/2015 via e-mail.		
Who was your contact person at each group you met with?	Jim Jasper, Will Rogers, Craig Slutzkin, Judy Klein, Cheryl Kupper & Laura Evans		
When did applicant post the notice that was provided?			
Where did applicant post the notice that was provided?	<del>9th Avenue from 14th to 18th Streets (both sides of the avenue)</del> 10th Avenue from 14th to 18th Streets (both sides of the avenue) 15th Street & 16th Street from 10th Avenue to 8th Avenue		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	YES	NO	Yes, 917-750-5098 Andrew Zlobro
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	NO	Yes.

<b>BUILDING DESIGN</b>				
State the name and type of business previously located in the space.	Google corporate office			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	No.	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No.	
Will applicant have a vestibule within the establishment?	YES	NO	No.	
Will applicant use a storm enclosure?	YES	NO	No.	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	N/A	
Will applicant comply with the NYC noise code?	YES	NO	Yes.	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		GARAGE DOORS	WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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	
Will the kitchen exhaust system extend to the roof?	YES	NO	No.	
Will the establishment have an illuminated sign?	YES	NO	No.	
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No.	
Where will the air conditioner be located? What type is it?	Central Air- On roof.			
When was the air conditioner installed?	UNKNOWN.			

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	No.
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

<b>OUTDOOR ITEMS – SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes.
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	No.
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	No.
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

**RIDER TO LIQUOR LICENSE STIPULATION APPLICATION  
SECURITY PLAN**

Security is available 24 hours per day. The applicant will host private, corporate events only. As such, all guests will be Google employees and their registered guests. All guests will be chaperoned to catered areas. All guests will gain building access with their Google badges. Servers will be trained in the responsible service of alcoholic beverages. All patrons will be ID'd and monitored for intoxication. Servers will refuse service to any such patrons.



# NEW YORK EMERGENCY EVACUATION PLAN

76 NINTH AVE

## FLOOR 4

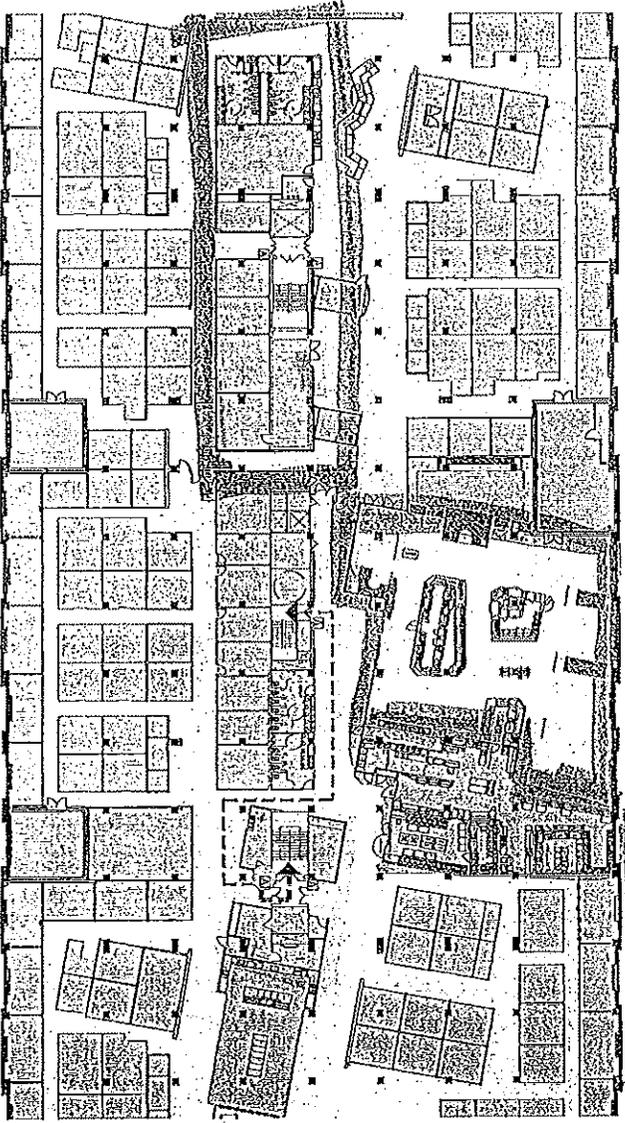
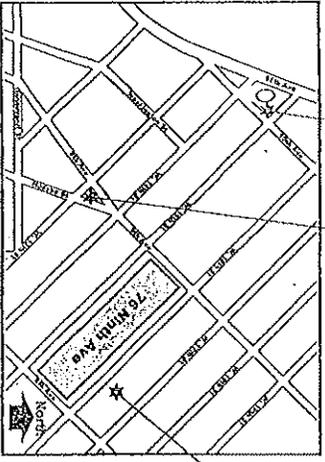
### LEGEND

- AISLE
- EXIT
- PRIMARY EXIT PATH
- SECONDARY EXIT PATH
- ACCESSIBLE EXIT
- YOU ARE HERE
- FIRE ALARM STATION

Fire alarm sound: Horn  
 Visual alarm: Flashing light

- Fire Emergency Procedures:**
- 1) Pull fire alarm or call X555555
  - 2) Exit building
  - 3) Walk to evacuation assembly area
  - 4) Follow staff instructions

### EVACUATION ASSEMBLY AREAS



EMERGENCY DIAL  
 X555555

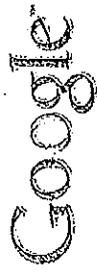
IN CASE OF FIRE USE STAIRS  
 DO NOT USE ELEVATOR



# NEW YORK EMERGENCY EVACUATION PLAN

## FLOOR 5

76 NINTH AVE



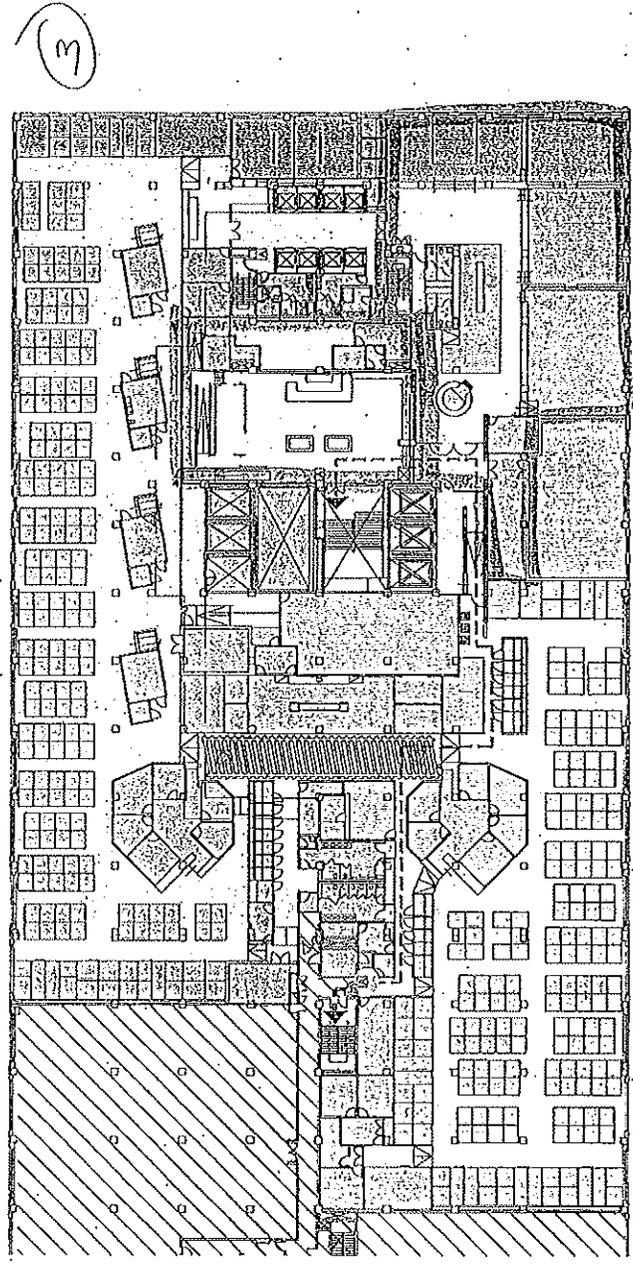
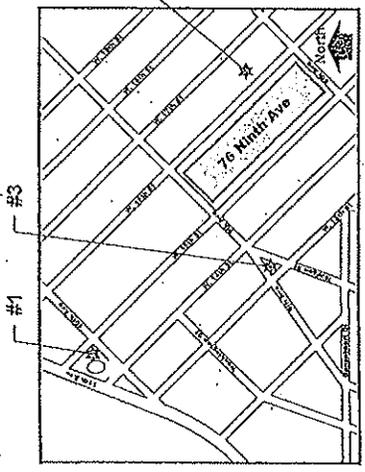
**LEGEND**

- AISLE
- EXIT
- PRIMARY EXIT PATH
- SECONDARY EXIT PATH
- ACCESSIBLE EXIT
- YOU ARE HERE
- FIRE ALARM STATION

Fire alarm sound: Horn  
 Visual alarm: Flashing light

- Fire Emergency Procedures:
- 1) Pull fire alarm or call x55555
  - 2) Exit building
  - 3) Walk to evacuation assembly area
  - 4) Follow staff instructions

**EVACUATION ASSEMBLY AREAS**



*Library*  
*Kitchen*



**IN CASE OF FIRE USE STAIRS  
 DO NOT USE ELEVATOR**

**EMERGENCY DIAL  
 X55555**

# Manhattan Community Board 4

(All Fields Must Be Completed)

CORPORATION NAME Restaurant Associates, LLC		DOING BUSINESS AS (DBA) N/A	
STREET ADDRESS 76 Ninth Ave., 8th Floor, New York, NY 10011		CROSS STREETS W 15th St. and 9th Ave.	ZIP CODE 10011
OWNER <i>(Attach a list of all the people that will be associated with the license)</i>	NAME: Please see attached rider.	ATTORNEY/ REPRESENTATIVE	NAME: Robert D. Skene, Esq.
	PHONE:		PHONE: 732-727-5030
	EMAIL:		EMAIL: sskene@skenelawfirm.com
MANAGER	NAME: TBD	LANDLORD	NAME: Google, Inc.
	PHONE:		PHONE: 212-565-0000
	EMAIL:		EMAIL:

**APPLICATION TYPE (Check One)**

<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	YES	NO	Yes.
	What is/was the name and address of establishment?	Please see attached rider.		
	What were the dates applicant was involved with this former premise?			
<input type="radio"/> Transfer	What is the prior license # and expiration date?	YES	NO	
	Is applicant making any alterations or operational changes?			
	If alterations or operational changes are being made, please describe all changes.			
<input type="radio"/> Alteration	What is the current license # and expiration date?			
	Please list/describe the nature of all the changes and attach the plans:			

**METHOD OF OPERATION**

TYPE OF ALCOHOL	<input checked="" type="radio"/> Liquor/Wine/Beer	<input type="radio"/> Beer	<input type="radio"/> Wine & Beer
ESTABLISHMENT TYPE	<input type="radio"/> Restaurant	<input type="radio"/> Cabaret	<input type="radio"/> Night Club
	<input type="radio"/> Adult Entertainment	<input type="radio"/> Wine Bar	<input type="radio"/> Dance Club
	<input type="radio"/> Hotel	<input type="radio"/> Bar/Tavern	<input checked="" type="radio"/> Catering Establishment
	<input type="radio"/> Sports Bar	<input type="radio"/> Club (Fraternal Organization - Members Only)	
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	NO	No. Applicant will file 30 days upon providing the CB with the Standardized Notice-- November 20th, 2015.
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	YES	NO	Yes. Please see attached.
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	NO	No.
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	YES	NO	Yes.

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons)

HOURS*		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	5:30 AM-10:00 PM						
	<i>(Indoor Only)</i> Kitchen	5:30 AM-10:00 PM						
	Music	N/A						
If you plan to have music, what type(s)? (Circle all that apply)		BACKGROUND		LIVE MUSIC	DJ	JUKE BOX	KARAOKE	

**OCCUPANCY**

	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 Stand-Up Bar
<b>INSIDE</b>		392	89	374	Varies upon function.		
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>	N/A						
<b>SIDEWALK CAFÉ</b>	N/A						

How many floors are there? What is the capacity for each floor? 17 floors total. However, applicant is only licensing floor 8. Please see attached.

How frequently will the owner(s) be at the establishment? Applicant principals oversee all businesses nationwide, however, a manager will be present at all operating hours.

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing? YES NO No.

Will applicant have bottle or table service for beverage alcohol? YES NO No.

Will you be hosting private, promotional or corporate events? YES NO Yes. Applicant will host private, corporate events.

Will outside promoters be used on a regular basis? If yes please describe. YES NO No.

Will you have a security plan? If, yes please attach. YES NO Yes. Please see attached.

Will security plan be implemented? YES NO Yes.

Will State certified security personnel be used? YES NO Yes.

Will New York Nightlife Association and NYPD Best Practices be followed? YES NO N/A, corporate catered events only.

Will applicant be using delivery bicycles? If yes, how many? YES NO No.

Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law? YES NO N/A

Where will delivery bicycles be stored during the day when not in use? N/A

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	Yes- West Chelsea.
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes.
Is a Public Assembly permit required?	YES	NO	Yes.
Are your plans filed with DOB?	YES	NO	Yes.

Community Notification/Relations				
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	300 W 15th St. Block Association, Jim Jasper		
	# 2	200 W 16th St. Block Association, Will Rogers		
	# 3	100 W 17th/18th Streets Block Association, Craig Slutzkin & Judy Klein		
	# 4	300 W 18th/19th Streets Block Association, Cheryl Kupper & Laura Evans		
	# 5	Bill Borock		
Please provide dates when applicant met with the groups listed above.		10/28/2015 via e-mail.		
Who was your contact person at each group you met with?		Jim Jasper, Will Rogers, Craig Slutzkin, Judy Klein, Cheryl Kupper & Laura Evans		
When did applicant post the notice that was provided?				
Where did applicant post the notice that was provided?		<del>9th Avenue from 14th to 18th Streets (both sides of the avenue)</del> 10th Avenue from 14th to 18th Streets (both sides of the avenue) 15th Street & 16th Street from 10th Avenue to 8th Avenue		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES	NO	Yes, 917-750-5098 Andrew Ziobro
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES	NO	Yes.

<b>BUILDING DESIGN</b>				
State the name and type of business previously located in the space.	Google corporate office			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	No.	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No.	
Will applicant have a vestibule within the establishment?	YES	NO	No.	
Will applicant use a storm enclosure?	YES	NO	No.	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	N/A	
Will applicant comply with the NYC noise code?	YES	NO	Yes.	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		GARAGE DOORS	WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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	
Will the kitchen exhaust system extend to the roof?	YES	NO	No.	
Will the establishment have an illuminated sign?	YES	NO	No.	
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No.	
Where will the air conditioner be located? What type is it?	Central Air - located on roof			
When was the air conditioner installed?	unknown.			

<b>OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFE</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	No.
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

<b>OUTDOOR ITEMS -- SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes.
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	No.
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	No.
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

**RIDER TO LIQUOR LICENSE STIPULATION APPLICATION  
SECURITY PLAN**

Security is available 24 hours per day. The applicant will host private, corporate events only. As such, all guests will be Google employees and their registered guests. All guests will be chaperoned to catered areas. All guests will gain building access with their Google badges. Servers will be trained in the responsible service of alcoholic beverages. All patrons will be ID'd and monitored for intoxication. Servers will refuse service to any such patrons.

# FLOOR 8

## NEW YORK EMERGENCY EVACUATION PLAN 76 NINTH AVE



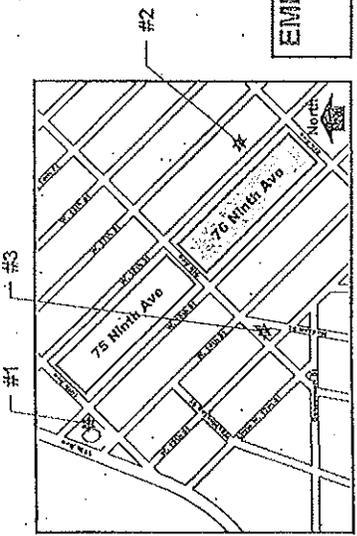
### LEGEND

- AISLE
- ◀ EXIT
- ▬ PRIMARY EXIT PATH
- - - SECONDARY EXIT PATH
- ♿ ACCESSIBLE EXIT
- Ⓜ YOU ARE HERE
- Ⓜ FIRE ALARM STATION

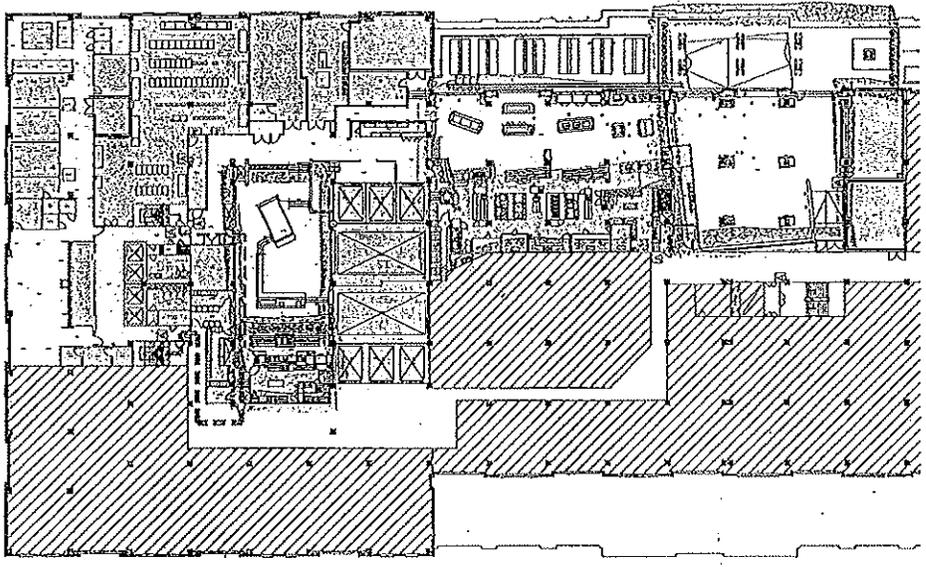
Fire alarm sound: Horn  
 Visual alarm: Flashing light

- Fire Emergency Procedures:
- 1) Pull fire alarm or call x55555
  - 2) Exit building
  - 3) Walk to evacuation assembly area
  - 4) Follow staff instructions

### EVACUATION ASSEMBLY AREAS



EMERGENCY DIAL  
 X55555



Entrance  
 Exit



**IN CASE OF FIRE USE STAIRS  
 DO NOT USE ELEVATOR**

**Manhattan Community Board 4**  
(All Fields Must Be Completed)

Liquor License Stipulations Application

<b>CORPORATION NAME</b> Restaurant Associates, LLC		<b>DOING BUSINESS AS (DBA)</b> N/A			
<b>STREET ADDRESS</b> 76 Ninth Ave., 11th Floor, New York, NY 10011		<b>CROSS STREETS</b> W 15th St. and 9th Ave.		<b>ZIP CODE</b> 10011	
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b> Please see attached rider.	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Robert D. Skene, Esq.		
	<b>PHONE:</b>		<b>PHONE:</b> 732-727-5030		
	<b>EMAIL:</b>		<b>EMAIL:</b> sskene@skenelawfirm.com		
<b>MANAGER</b>	<b>NAME:</b> TBD	<b>LANDLORD</b>	<b>NAME:</b> Google, Inc.		
	<b>PHONE:</b>		<b>PHONE:</b> 212-565-0000		
	<b>EMAIL:</b>		<b>EMAIL:</b>		
<b>APPLICATION TYPE (Check One)</b>					
<input checked="" type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?		<b>YES</b>	<b>NO</b>	Yes.
	What is/was the name and address of establishment?		Please see attached rider.		
	What were the dates applicant was involved with this former premise?				
<input type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?				
	Is applicant making any alterations or operational changes?		<b>YES</b>	<b>NO</b>	
	If alterations or operational changes are being made, please describe/list all changes.				
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?				
	Please list/describe the nature of all the changes and attach the plans:				
<b>METHOD OF OPERATION</b>					
<b>TYPE OF ALCOHOL</b>	<input checked="" type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer				
<b>ESTABLISHMENT TYPE</b>	<input type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input checked="" type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization - Members Only)				
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		<b>YES</b>	<b>NO</b>	No. Applicant will file 30 days upon providing the CB with the Standardized Notice-- November 20th, 2015.	
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		<b>YES</b>	<b>NO</b>	Yes. Please see attached.	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<b>YES</b>	<b>NO</b>	No.	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<b>YES</b>	<b>NO</b>	Yes.	

OPERATIONAL DETAILS (*Closing time will be when establishment is vacated of all patrons)									
HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM			
	Kitchen	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM			
	Music	N/A							
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE		
OCCUPANCY									
	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 Stand-Up Bar		
INSIDE		299	76	218	Varies upon function.				
OUTSIDE <i>(Other than sidewalk café)</i>	N/A								
SIDEWALK CAFÉ	N/A								
How many floors are there? What is the capacity for each floor?					17 floors total. However, applicant is only licensing floor 11. Please see attached.				
How frequently will the owner(s) be at the establishment?					Applicant principals oversee all businesses nationwide, however, a manager will be present at all operating hours.				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	NO	No.		
Will applicant have bottle or table service for beverage alcohol?					YES	NO	No.		
Will you be hosting private, promotional or corporate events?					YES	NO	Yes. Applicant will host private, corporate events.		
Will outside promoters be used on a regular basis? If yes please describe.					YES	NO	No.		
Will you have a security plan? If, yes please attach.					YES	NO	Yes. Please see attached.		
Will security plan be implemented?					YES	NO	Yes.		
Will State certified security personnel be used?					YES	NO	Yes.		
Will New York Nightlife Association and NYPD Best Practices be followed?					YES	NO	N/A, corporate catered events only.		
Will applicant be using delivery bicycles? If yes, how many?					YES	NO	No.		
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					YES	NO	N/A		
Where will delivery bicycles be stored during the day when not in use?					N/A				

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	Yes, West Chelsea.
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes.
Is a Public Assembly permit required?	YES	NO	Yes.
Are your plans filed with DOB?	YES	NO	Yes.

Community Notification/Relations				
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	300 W 15th St. Block Association, Jim Jasper		
	# 2	200 W 16th St. Block Association, Will Rogers		
	# 3	100 W 17th/18th Streets Block Association, Craig Slutzkin & Judy Klein		
	# 4	300 W 18th/19th Streets Block Association, Cheryl Kupper & Laura Evans		
	# 5	Bill Borock		
Please provide dates when applicant met with the groups listed above.		10/28/2015 via e-mail.		
Who was your contact person at each group you met with?		Jim Jasper, Will Rogers, Craig Slutzkin, Judy Klein, Cheryl Kupper & Laura Evans		
When did applicant post the notice that was provided?				
Where did applicant post the notice that was provided?		<del>9th Avenue from 14th to 18th Streets (both sides of the avenue)</del> 10th Avenue from 14th to 18th Streets (both sides of the avenue) 15th Street & 16th Street from 10th Avenue to 8th Avenue		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES	NO	Yes, 917-750-5098 Andrew Ziobro
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES	NO	Yes.

BUILDING DESIGN				
State the name and type of business previously located in the space.	Google corporate office			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	No.	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No.	
Will applicant have a vestibule within the establishment?	YES	NO	No.	
Will applicant use a storm enclosure?	YES	NO	No.	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	N/A	
Will applicant comply with the NYC noise code?	YES	NO	Yes.	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		GARAGE DOORS	WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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	
Will the kitchen exhaust system extend to the roof?	YES	NO	No.	
Will the establishment have an illuminated sign?	YES	NO	No.	
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No.	
Where will the air conditioner be located? What type is it?	Central air located on roof.			
When was the air conditioner installed?	UNKNOWN			

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFE</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	No.
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

<b>OUTDOOR ITEMS – SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes.
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	No.
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	No.
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

**RIDER TO LIQUOR LICENSE STIPULATION APPLICATION  
SECURITY PLAN**

Security is available 24 hours per day. The applicant will host private, corporate events only. As such, all guests will be Google employees and their registered guests. All guests will be chaperoned to catered areas. All guests will gain building access with their Google badges. Servers will be trained in the responsible service of alcoholic beverages. All patrons will be ID'd and monitored for intoxication. Servers will refuse service to any such patrons.

# FLOOR 11

## NEW YORK EMERGENCY EVACUATION PLAN

76 NINTH AVE

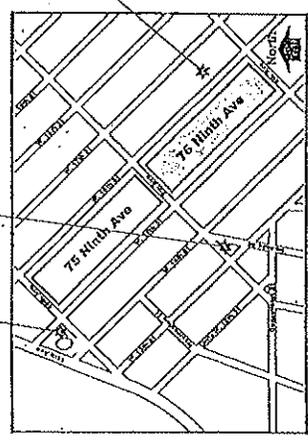


- LEGEND**
- AISLE
  - EXIT
  - PRIMARY EXIT PATH
  - SECONDARY EXIT PATH
  - ACCESSIBLE EXIT
  - YOU ARE HERE
  - FIRE ALARM STATION

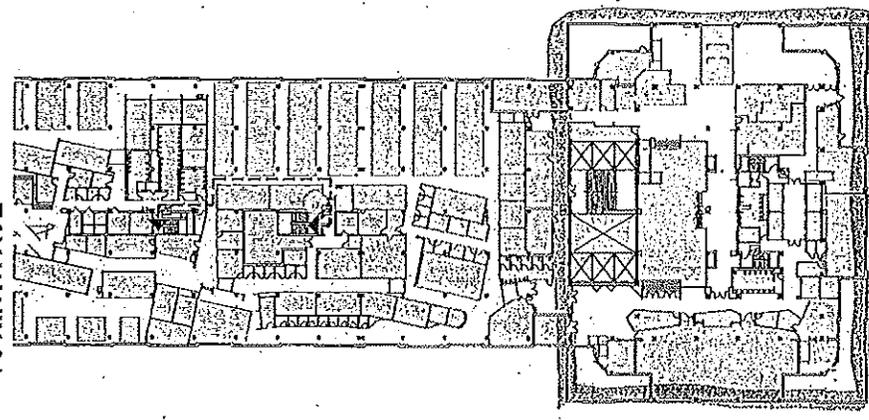
Fire alarm sound: Horn  
 Visual alarm: Flashing light

- Fire Emergency Procedures:**
- 1) Pull fire alarm or call x55555
  - 2) Exit building
  - 3) Walk to evacuation assembly area
  - 4) Follow staff instructions

**EVACUATION ASSEMBLY AREAS**



EMERGENCY DIAL  
**x55555**



**IN CASE OF FIRE USE STAIRS  
 DO NOT USE ELEVATOR**



# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
Restaurant Associates, LLC		N/A	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
76 Ninth Ave., 14th & 15th Fls, New York, NY 10011		W 15th St. and 9th Ave.	10011
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b> Please see attached rider.	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Robert D. Skene, Esq.
	<b>PHONE:</b>		<b>PHONE:</b> 732-727-5030
	<b>EMAIL:</b>		<b>EMAIL:</b> sskene@skenelawfirm.com
<b>MANAGER</b>	<b>NAME:</b> TBD	<b>LANDLORD</b>	<b>NAME:</b> Google, Inc.
	<b>PHONE:</b>		<b>PHONE:</b> 212-565-0000
	<b>EMAIL:</b>		<b>EMAIL:</b>
<b>APPLICATION TYPE (Check One)</b>			
<input checked="" type="checkbox"/> <b>New</b>	Has applicant owned or managed a similar business?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	What is/was the name and address of establishment?	Please see attached rider.	
	What were the dates applicant was involved with this former premise?		
<input type="checkbox"/> <b>Transfer</b>	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="checkbox"/> <b>Alteration</b>	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input checked="" type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization - Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	No. Applicant will file 30 days upon providing the CB with the Standardized Notice-- November 20th, 2015.
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Yes. Please see attached.
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	No.
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Yes.

**OPERATIONAL DETAILS: (\*Closing time will be when establishment is vacated of all patrons)**

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>HOURS*</b> <i>(Indoor Only)</i>	<b>Operation</b>	5:30 AM-10:00 PM						
	<b>Kitchen</b> 14th floor.	5:30 AM-10:00 PM						
	<b>Music</b>	N/A						

If you plan to have music, what type(s)? (Circle all that apply)	BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE
---	------------	------------	----	----------	---------

**OCCUPANCY**

	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 Stand-Up Bar
<b>INSIDE</b>			42	224	Varies upon function		
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>	N/A						
<b>SIDEWALK CAFÉ</b>	N/A						

How many floors are there? What is the capacity for each floor? 17 floors total. However, applicant is only licensing floors 14 and 15. Please see attached.

How frequently will the owner(s) be at the establishment? Applicant principals oversee all businesses nationwide, however, a manager will be present at all operating hours.

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing? YES NO No.

Will applicant have bottle or table service for beverage alcohol? YES NO No.

Will you be hosting private, promotional or corporate events? YES NO Yes. Applicant will host private, corporate events.

Will outside promoters be used on a regular basis? If yes please describe. YES NO No.

Will you have a security plan? If, yes please attach. YES NO Yes. Please see attached.

Will security plan be implemented? YES NO Yes.

Will State certified security personnel be used? YES NO Yes.

Will New York Nightlife Association and NYPD Best Practices be followed? YES NO N/A, corporate catered events only.

Will applicant be using delivery bicycles? If yes, how many? YES NO No.

Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law? YES NO N/A

Where will delivery bicycles be stored during the day when not in use? N/A

License	Premises Location	Floor	Hours of operation, Monday-Sunday	If Cafe, Name	Cafe/Kitchen Hours	Maximum occupancy for each floor	Anticipated # of people occupying the premises, including staff	Number of Cafe tables and seats	Catering Tables	Certificate of Operation #	Physical Copy Available
1	75 Ninth Avenue, 2nd Floor	2nd Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	no seats			Varies upon function		
2	75 Ninth Avenue, 4th, 5th and 6th Floors	4th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	TBD			Varies upon function		
		5th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	TBD			Varies upon function		
		6th Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	TBD			Varies upon function		
3	75 Ninth Avenue, 8th Floor	8th Floor	Monday-Friday, 5:30 am to 10 PM	The Mezz	Monday-Friday, 5:30 am to 10 PM		74?	38 tables/200 seats	Varies upon function		
4	75 Ninth Avenue, 4th and 5th Floors	4th floor	Monday-Friday, 5:30 am to 10 PM	588	Monday-Friday, 5:30 am to 10 PM		220	61 tables/218 seats	Varies upon function	104488635	Yes
		5th Floor	Monday-Friday, 5:30 am to 10 PM	Water Tower	Monday-Friday, 5:30 am to 10 PM		270	40 tables/213 seats	Varies upon function	120345689	
5	75 Ninth Avenue, 8th Floor	8th Floor	Monday-Friday, 5:30 am to 10 PM	Hemispheres/Truck Pit	Monday-Friday, 5:30 am to 10 PM		392	89 tables/374 seats	Varies upon function		104511011
6	75 Ninth Avenue, 11th Floor	11 th Floor	Monday-Friday, 5:30 am to 10 PM	LaPlace	Monday-Friday, 5:30 am to 10 PM		299	76 Tables/218 Seats	Varies upon function		
7	75 Ninth Avenue, 14th and 15th Floors	14th Floor	Monday-Friday, 5:30 am to 10 PM	Penorama	Monday-Friday, 5:30 am to 10 PM	TBD		42 Tables/224 Seats	Varies upon function		
		15th floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A				Varies upon function		
8	85 Tenth Avenue, 4th Floor	4th floor	Monday-Friday, 5:30 am to 10 PM	The High Line	Monday-Friday, 5:30 am to 10 PM		218	52 Tables/200 Seats	Varies upon function		
9	85 Tenth Avenue, 11th Floor	11th floor	Monday-Friday, 5:30 am to 10 PM	The Box	Monday-Friday, 5:30 am to 10 PM		74?	13 Tables/46 seats	Varies upon function		

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	Yes, West Chelsea.
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes.
Is a Public Assembly permit required?	YES	NO	Yes.
Are your plans filed with DOB?	YES	NO	Yes.

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	300 W 15th St. Block Association, Jim Jasper	
	# 2	200 W 16th St. Block Association, Will Rogers	
	# 3	100 W 17th/18th Streets Block Association, Craig Slutzkin & Judy Klein	
	# 4	300 W 18th/19th Streets Block Association, Cheryl Kupper & Laura Evans	
	# 5	Bill Borock	
Please provide dates when applicant met with the groups listed above.	10/28/2015 via e-mail.		
Who was your contact person at each group you met with?	Jim Jasper, Will Rogers, Craig Slutzkin, Judy Klein, Cheryl Kupper & Laura Evans		
When did applicant post the notice that was provided?			
Where did applicant post the notice that was provided?	9th Avenue from 14th to 18th Streets (both sides of the avenue) 10th Avenue from 14th to 18th Streets (both sides of the avenue) 15th Street & 16th Street from 10th Avenue to 8th Avenue		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	YES	NO	Yes, 917-750-5098 Andrew Ziobro
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	NO	Yes.

BUILDING DESIGN			
State the name and type of business previously located in the space.	Google corporate office		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	No.
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No.
Will applicant have a vestibule within the establishment?	YES	NO	No.
Will applicant use a storm enclosure?	YES	NO	No.
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	N/A
Will applicant comply with the NYC noise code?	YES	NO	Yes.
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS	GARAGE DOORS	WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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
Will the kitchen exhaust system extend to the roof?	YES	NO	No.
Will the establishment have an illuminated sign?	YES	NO	No.
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No.
Where will the air conditioner be located? What type is it?	central air located on roof.		
When was the air conditioner installed?	unknown		

OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFE			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	No.
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

OUTDOOR ITEMS – SIDEWALK CAFE			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes.
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	No.
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	No.
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

**RIDER TO LIQUOR LICENSE STIPULATION APPLICATION  
SECURITY PLAN**

Security is available 24 hours per day. The applicant will host private, corporate events only. As such, all guests will be Google employees and their registered guests. All guests will be chaperoned to catered areas. All guests will gain building access with their Google badges. Servers will be trained in the responsible service of alcoholic beverages. All patrons will be ID'd and monitored for intoxication. Servers will refuse service to any such patrons.



1 **Business License & Permits Committee**

Item #: 07

2  
3 December 2, 2015

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Restaurant Associates, LLC**  
12 *85 10<sup>th</sup> Avenue (15/10), Floors: 4<sup>th</sup> & 11<sup>th</sup>*

13  
14 Dear Chairman Bradley:

15  
16 Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License  
17 application for Restaurant Associates, LLC – 85 10<sup>th</sup> Avenue (15/10) Floors 4 & 11, **unless** the attached  
18 stipulations, agreed to and signed by the applicant, are part of the method of operation for this  
19 establishment with the same hours of operation on both floors (5:30a.m.-10p.m. Monday – Friday), and  
20 the number of bars varies based on function for both floors.  
21 52 Tables and 200 seats on the 4<sup>th</sup> Floor  
22 A Capacity of 74, 12 Tables, and 46 seats on the 11<sup>th</sup> Floor

23  
24 Sincerely,

25  
26  
27 Christine Berthet  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

28  
29

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
Restaurant Associates, LLC		N/A	
STREET ADDRESS		CROSS STREETS	ZIP CODE
85 Tenth Ave., 4th Floor, New York, NY 10011		W 15th St. and 10th Ave.	10011
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME: Please see attached rider.	ATTORNEY/ REPRESENTATIVE	NAME: Robert D. Skene, Esq.
	PHONE:		PHONE: 732-727-5030
	EMAIL:		EMAIL: sskene@skenelawfirm.com
MANAGER	NAME: TBD	LANDLORD	NAME: Google, Inc.
	PHONE:		PHONE: 212-565-0000
	EMAIL:		EMAIL:
<b>APPLICATION TYPE (Check One)</b>			
<input checked="" type="checkbox"/> New	Has applicant owned or managed a similar business?	YES	NO
	What is/was the name and address of establishment?	Please see attached rider.	
	What were the dates applicant was involved with this former premise?		
<input type="checkbox"/> Transfer	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?	YES	NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="checkbox"/> Alteration	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
<b>METHOD OF OPERATION</b>			
TYPE OF ALCOHOL	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer		
ESTABLISHMENT TYPE	<input type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input checked="" type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization - Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	NO	No. Applicant will file 30 days upon providing the CB with the Standardized Notice-- November 20th, 2015.
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	YES	NO	Yes. Please see attached.
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	NO	No.
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	YES	NO	Yes.

**OPERATIONAL DETAILS (\*Closing time will be when establishment is vacated of all patrons)**

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>HOURS*</b> <i>(Indoor Only)</i>	Operation	5:30 AM-10:00 PM						
	Kitchen	5:30 AM-10:00 PM						
	Music	N/A						
If you plan to have music, what type(s)? <i>(Circle all that apply)</i>			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE	

**OCCUPANCY**

	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 Stand-Up Bar
<b>INSIDE</b>			52	200	varies upon function.		
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>	N/A						
<b>SIDEWALK CAFÉ</b>	N/A						

How many floors are there? What is the capacity for each floor? 11 floors total. However, applicant is only licensing floor 4. Please see attached.

How frequently will the owner(s) be at the establishment? Applicant principals oversee all businesses nationwide, however, a manager will be present at all operating hours.

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing? 

YES	NO	No.
-----	----	-----

Will applicant have bottle or table service for beverage alcohol? 

YES	NO	No
-----	----	----

Will you be hosting private; promotional or corporate events? 

YES	NO	Yes. Applicant will host private, corporate events
-----	----	--

Will outside promoters be used on a regular basis? If yes please describe. 

YES	NO	No
-----	----	----

Will you have a security plan? If, yes please attach. 

YES	NO	Yes. Please see attached.
-----	----	---------------------------

Will security plan be implemented? 

YES	NO	Yes.
-----	----	------

Will State certified security personnel be used? 

YES	NO	Yes
-----	----	-----

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

YES	NO	N/A, corporate catered events only.
-----	----	-------------------------------------

Will applicant be using delivery bicycles? If yes, how many? 

YES	NO	No.
-----	----	-----

Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law? 

YES	NO	N/A
-----	----	-----

Where will delivery bicycles be stored during the day when not in use? N/A

License	Premises Location	Floor	Hours of operation, Monday-Sunday	If Cafe, Name	Cafe/Kitchen Hours	Maximum occupancy for each floor	Anticipated # of people occupying the premises, including staff	Number of Catering Tables and seats	Certificate of Operation #	Physical Copy Available
1	75 Ninth Avenue, 2nd Floor	2nd Floor	Monday-Friday, 5:30 am to 10 PM	N/A	N/A	no seats		Varies upon function		
2	75 Ninth Avenue, 4th, 5th and 6th Floors	4th Floor 5th Floor 6th Floor	Monday-Friday, 5:30 am to 10 PM Monday-Friday, 5:30 am to 10 PM Monday-Friday, 5:30 am to 10 PM	N/A N/A N/A	N/A N/A N/A	TBD TBD TBD		Varies upon function Varies upon function Varies upon function		
3	75 Ninth Avenue, 8th Floor	8th floor	Monday-Friday, 5:30 am to 10 PM	The Mezz	Monday-Friday, 5:30 am to 10 PM	74?		38 tables/200 seats Varies upon function		
4	76 Ninth Avenue, 4th and 5th Floors	4th floor 5th Floor	Monday-Friday, 5:30 am to 10 PM Monday-Friday, 5:30 am to 10 PM	588 Water Tower	Monday-Friday, 5:30 am to 10 PM Monday-Friday, 5:30 am to 10 PM	220		61 tables/218 seats Varies upon function	104488635	Yes
5	76 Ninth Avenue, 8th Floor	8th Floor	Monday-Friday, 5:30 am to 10 PM	Hemispheres/Truck Pit	Monday-Friday, 5:30 am to 10 PM	392		40 tables/213 seats Varies upon function	120945689	
6	76 Ninth Avenue, 11th Floor	11th Floor	Monday-Friday, 5:30 am to 10 PM	LaPlace	Monday-Friday, 5:30 am to 10 PM	299		89 tables/374 seats Varies upon function	104511011	
7	76 Ninth Avenue, 14th and 15th Floors	14th Floor 15th floor	Monday-Friday, 5:30 am to 10 PM Monday-Friday, 5:30 am to 10 PM	Penorama	Monday-Friday, 5:30 am to 10 PM N/A	TBD		76 Tables/218 Seats 42 Tables/224 Seats Varies upon function Varies upon function		
8	85 Tenth Avenue, 4th Floor	4th floor	Monday-Friday, 5:30 am to 10 PM	The High Line	Monday-Friday, 5:30 am to 10 PM	218		52 Tables/200 Seats Varies upon function		
9	85 Tenth Avenue, 11th Floor	11th floor	Monday-Friday, 5:30 am to 10 PM	The Box	Monday-Friday, 5:30 am to 10 PM	74?		12 Tables/46 seats Varies upon function		

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	Yes- West Chelsea
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes.
Is a Public Assembly permit required?	YES	NO	Yes
Are your plans filed with DOB?	YES	NO	Yes

Community Notification/Relations				
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	300 W 15th St. Block Association, Jim Jasper		
	# 2	200 W 16th St. Block Association, Will Rogers		
	# 3	100 W 17th/18th Streets Block Association, Craig Stutzkin & Judy Klein		
	# 4	300 W 18th/19th Streets Block Association, Cheryl Kupper & Laura Evans		
	# 5	Bill Borock		
Please provide dates when applicant met with the groups listed above.		10/28/2015 via e-mail.		
Who was your contact person at each group you met with?		Jim Jasper, Will Rogers, Craig Stutzkin, Judy Klein, Cheryl Kupper & Laura Evans		
When did applicant post the notice that was provided?				
Where did applicant post the notice that was provided?		01h Avenue from 14th to 18th Streets (both sides of the avenue) 10th Avenue from 14th to 18th Streets (both sides of the avenue) 15th Street & 16th Street from 10th Avenue to 8th Avenue		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES	NO	Yes, 917-750-5098 Andrew Zlobro
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES	NO	Yes.

<b>BUILDING DESIGN</b>				
State the name and type of business previously located in the space.	Google corporate office			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	No.	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No.	
Will applicant have a vestibule within the establishment?	YES	NO	No.	
Will applicant use a storm enclosure?	YES	NO	No.	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	N/A	
Will applicant comply with the NYC noise code?	YES	NO	Yes.	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		GARAGE DOORS	WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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	
Will the kitchen exhaust system extend to the roof?	YES	NO	No.	
Will the establishment have an illuminated sign?	YES	NO	No.	
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No.	
Where will the air conditioner be located? What type is it?	Central Air, located on roof.			
When was the air conditioner installed?	Unknown.			

<b>OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFE</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	No.
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

OUTDOOR ITEMS – SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes.
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	No.
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	No.
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

**RIDER TO LIQUOR LICENSE STIPULATION APPLICATION  
SECURITY PLAN**

Security is available 24 hours per day. The applicant will host private, corporate events only. As such, all guests will be Google employees and their registered guests. All guests will be chaperoned to catered areas. All guests will gain building access with their Google badges. Servers will be trained in the responsible service of alcoholic beverages. All patrons will be ID'd and monitored for intoxication. Servers will refuse service to any such patrons.

# NEW YORK EMERGENCY EVACUATION PLAN

85 TENTH AVE

# FLOOR 4

①

### LEGEND

— AISLE

◀ EXIT

— PRIMARY EXIT PATH

--- SECONDARY EXIT PATH

◻ ACCESSIBLE EXIT

● YOU ARE HERE

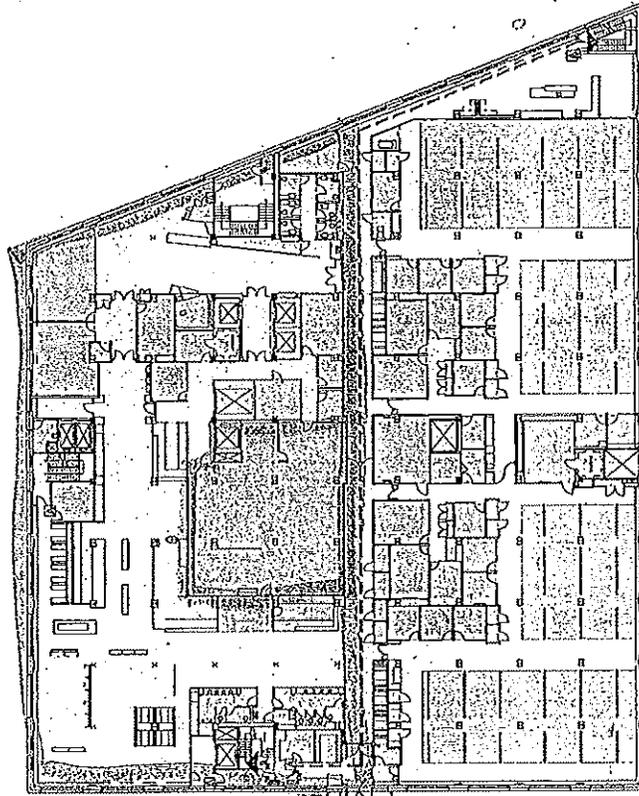
Ⓐ FIRE ALARM STATION

Fire alarm sound: Horn

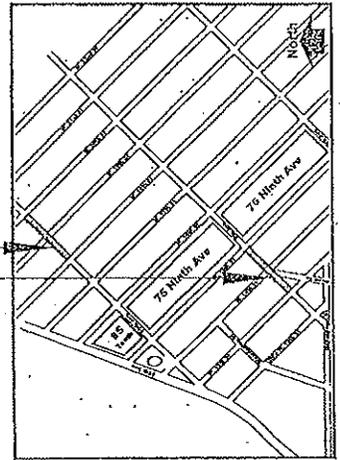
Visual alarm: Flashing light

### Fire Emergency Procedures:

- 1) Pull fire alarm or call +1-650-253-5555
- 2) Exit building
- 3) Walk to evacuation assembly area
- 4) Follow staff instructions



PRIMARY ASSEMBLY AREA  
ALTERNATE ASSEMBLY AREA



**IN CASE OF FIRE USE STAIRS  
DO NOT USE ELEVATOR**

**EMERGENCY DIAL  
+1-650-253-5555**

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

CORPORATION NAME Restaurant Associates, LLC		DOING BUSINESS AS (DBA) N/A.		
STREET ADDRESS 85 Tenth Ave., 11th Floor, New York, NY 10011		CROSS STREETS W 15th St. and 10th Ave.	ZIP CODE 10011	
OWNER <i>(Attach a list of all the people that will be associated with the license)</i>	NAME: Please see attached rider.	ATTORNEY/ REPRESENTATIVE	NAME: Robert D. Skene, Esq.	
	PHONE:		PHONE: 732-727-5030	
	EMAIL:		EMAIL: sskene@skenelawfirm.com	
MANAGER	NAME: TBD	LANDLORD	NAME: Google, Inc.	
	PHONE:		PHONE: 212-565-0000	
	EMAIL:		EMAIL:	
<b>APPLICATION TYPE</b> <i>(Check One)</i>				
<input checked="" type="checkbox"/> New	Has applicant owned or managed a similar business?	YES	NO	Yes.
	What is/was the name and address of establishment?	Please see attached rider.		
	What were the dates applicant was involved with this former premise?			
<input type="checkbox"/> Transfer	What is the prior license # and expiration date?			
	Is applicant making any alterations or operational changes?	YES	NO	
	If alterations or operational changes are being made, please describe/list all changes.			
<input type="checkbox"/> Alteration	What is the current license # and expiration date?			
	Please list/describe the nature of all the changes and attach the plans:			
<b>METHOD OF OPERATION</b>				
TYPE OF ALCOHOL	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer			
ESTABLISHMENT TYPE	<input type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input checked="" type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization - Members Only)			
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	NO	No. Applicant will file 30 days upon providing the CB with the Standardized Notice-- November 20th, 2015.	
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	YES	NO	Yes. Please see attached.	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	NO	No.	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	YES	NO	Yes.	

OPERATIONAL DETAILS (*Closing time will be when establishment is vacated of all patrons)									
HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	Closed	Closed
	Kitchen	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	5:30 AM-10:00 PM	Closed	Closed
	Music	N/A							
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE		
OCCUPANCY									
	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 Stand-Up Bar		
INSIDE		74	12	46	varies upon function				
OUTSIDE <i>(Other than sidewalk café)</i>	N/A								
SIDEWALK CAFÉ	N/A								
How many floors are there? What is the capacity for each floor?					11 floors total. However, applicant is only licensing floor 11. Please see attached.				
How frequently will the owner(s) be at the establishment?					Applicant principals oversee all businesses nationwide, however, a manager will be present at all operating hours.				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	NO	No.		
Will applicant have bottle or table service for beverage alcohol?					YES	NO	No		
Will you be hosting private; promotional or corporate events?					YES	NO	Yes. Applicant will host private, corporate events		
Will outside promoters be used on a regular basis? If yes please describe.					YES	NO	No		
Will you have a security plan? If, yes please attach.					YES	NO	Yes. Please see attached.		
Will security plan be implemented?					YES	NO	Yes.		
Will State certified security personnel be used?					YES	NO	Yes		
Will New York Nightlife Association and NYPD Best Practices be followed?					YES	NO	N/A, corporate catered events only.		
Will applicant be using delivery bicycles? If yes; how many?					YES	NO	No.		
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					YES	NO	N/A		
Where will delivery bicycles be stored during the day when not in use?					N/A				

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	Yes- West Chelsea
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes.
Is a Public Assembly permit required?	YES	NO	Yes
Are your plans filed with DOB?	YES	NO	Yes

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	300 W 15th St. Block Association, Jim Jasper	
	# 2	200 W 16th St. Block Association, Will Rogers	
	# 3	100 W 17th/18th Streets Block Association, Craig Slutzkin & Judy Klein	
	# 4	300 W 18th/19th Streets Block Association, Cheryl Kupper & Laura Evans	
	# 5	Bill Borock	
Please provide dates when applicant met with the groups listed above.	10/28/2015 via e-mail.		
Who was your contact person at each group you met with?	Jim Jasper, Will Rogers, Craig Slutzkin, Judy Klein, Cheryl Kupper & Laura Evans		
When did applicant post the notice that was provided?			
Where did applicant post the notice that was provided?	9th Avenue from 14th to 18th Streets (both sides of the avenue) 10th Avenue from 14th to 18th Streets (both sides of the avenue) 15th Street & 16th Street from 10th Avenue to 8th Avenue		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	YES	NO	Yes, 917-750-5098 Andrew Ziobro
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	NO	Yes.

<b>BUILDING DESIGN</b>				
State the name and type of business previously located in the space.	Google corporate office			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	No.	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No.	
Will applicant have a vestibule within the establishment?	YES	NO	No.	
Will applicant use a storm enclosure?	YES	NO	No.	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	N/A	
Will applicant comply with the NYC noise code?	YES	NO	Yes.	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		GARAGE DOORS	WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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	
Will the kitchen exhaust system extend to the roof?	YES	NO	No.	
Will the establishment have an illuminated sign?	YES	NO	No.	
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No.	
Where will the air conditioner be located? What type is it?	Central Air, on roof.			
When was the air conditioner installed?	Unknown.			

<b>OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFE</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	No.
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

OUTDOOR ITEMS – SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes.
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	No.
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	No.
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

**RIDER TO LIQUOR LICENSE STIPULATION APPLICATION  
SECURITY PLAN**

Security is available 24 hours per day. The applicant will host private, corporate events only. As such, all guests will be Google employees and their registered guests. All guests will be chaperoned to catered areas. All guests will gain building access with their Google badges. Servers will be trained in the responsible service of alcoholic beverages. All patrons will be ID'd and monitored for intoxication. Servers will refuse service to any such patrons.

# FLOOR 11

## NEW YORK EMERGENCY EVACUATION PLAN 85 TENTH AVE



**LEGEND**

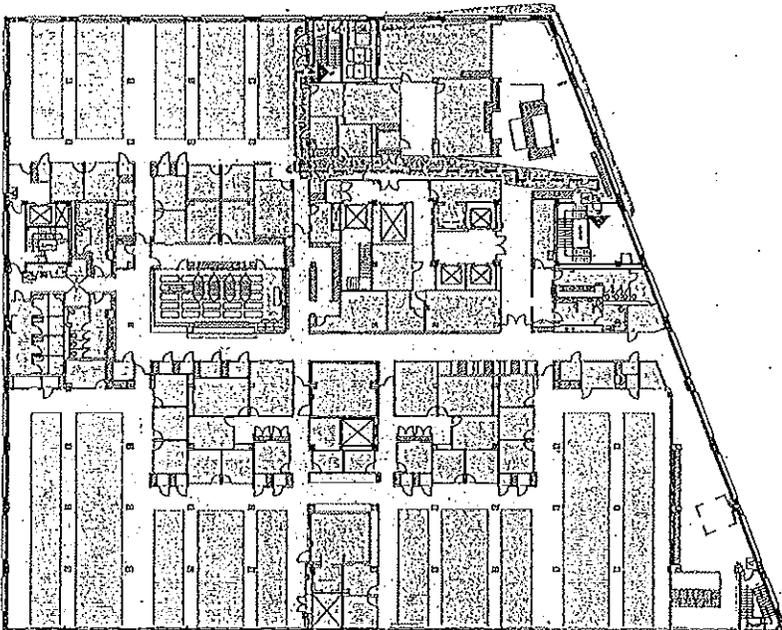
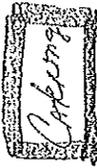
- AISLE
- EXIT
- PRIMARY EXIT PATH
- SECONDARY EXIT PATH
- ACCESSIBLE EXIT
- YOU ARE HERE
- FIRE ALARM STATION

Fire alarm sound: Horn

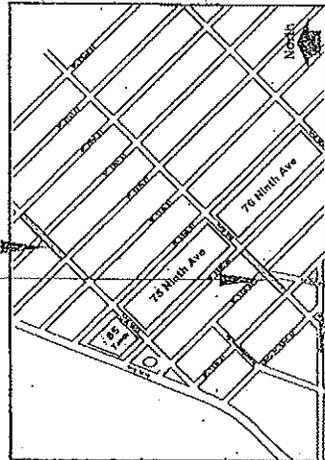
Visual alarm: Flashing light

**Fire Emergency Procedures:**

- 1) Pull fire alarm or call +1-650-253-5555
- 2) Exit building
- 3) Walk to evacuation assembly area
- 4) Follow staff instructions



PRIMARY ASSEMBLY AREA  
ALTERNATE ASSEMBLY AREA



**IN CASE OF FIRE USE STAIRS  
DO NOT USE ELEVATOR**

**EMERGENCY DIAL  
+1-650-253-5555**

North

