

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b> TRS LLC		<b>DOING BUSINESS AS (DBA)</b> Element New York Times Square West	
<b>STREET ADDRESS</b> 309-313 West 39th Street, New York, NY		<b>CROSS STREETS</b> West 39th & West 40th Streets	<b>ZIP CODE</b> 10018
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b> TRS LLC	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Martin P. Mehler
	<b>PHONE:</b>		<b>PHONE:</b> 212-962-4688
	<b>EMAIL:</b>		<b>EMAIL:</b> Mehlerbuscemi@aol.com
<b>MANAGER</b>	<b>NAME:</b> Gerald Yong	<b>LANDLORD</b>	<b>NAME:</b> Lex Times Square LP/c/o Lexington Realty
	<b>PHONE:</b>		<b>PHONE:</b> Advisor
	<b>EMAIL:</b>		<b>EMAIL:</b> N/A
<b>APPLICATION TYPE</b> <i>(Check One)</i>			
<input type="radio"/> New	Has applicant owned or managed a similar business?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input checked="" 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 type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input checked="" 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 type="checkbox"/> NO	NO
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
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)

HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	24 Hours for guests of Hotel 7 days a week							
	Kitchen	24 Hours for guests of Hotel 7 days a week							
	Music								
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	Hotel see attached C of O		18	86	0	0	0
OUTSIDE (Other than sidewalk cafe)	15 rooftop		7	14			
SIDEWALK CAFE	N/A						

How many floors are there? What is the capacity for each floor?	40	
How frequently will the owner(s) be at the establishment?	Management will be there 24/7	
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	NO
Will applicant have bottle or table service for beverage alcohol?	YES	NO
Will you be hosting private; promotional or corporate events?	YES	NO
Will outside promoters be used on a regular basis? If yes please describe.	YES	NO
Will you have a security plan? If, yes please attach.	YES	NO
Will security plan be implemented?	YES	NO
Will State certified security personnel be used?	YES	NO
Will New York Nightlife Association and NYPD Best Practices be followed?	YES	NO
Will applicant be using delivery bicycles? If yes, how many?	YES	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
Where will delivery bicycles be stored during the day when not in use?	N/A	

MS

**LOCATION & ZONING**

Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	NO
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	NO
Are your plans filed with DOB?	YES	NO	N/A

**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	CB4
	# 2	West 36th Block Association
	# 3	Hell's Kitchen Neighborhood Association
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.		July 14, 2005
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 NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES NO

## BUILDING DESIGN

State the name and type of business previously located in the space.		ELEMENT NEW YORK TIMES SQUARE WEST		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	YES	
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	Hotel Lobby	
Will applicant use a storm enclosure?	YES	NO	N/A	
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	YES	
Will the kitchen exhaust system extend to the roof?	YES	NO	YES	
Will the establishment have an illuminated sign?	YES	NO		
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?				
When was the air conditioner installed?				

<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	YES Rooftop
Are the floorplans for the outdoor space(s) included?	YES	NO	YES
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	YES
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	YES
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	YES
Will there be no amplified music, as per the law?	YES	NO	YES
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	YES
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	YES
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	N/A
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

ADDITIONAL STIPULATIONS: (Office Use Only)

- "ADDITIONAL INFORMATION"  
SHEET WILL BE INCLUDED  
AS STIPULATIONS.

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.

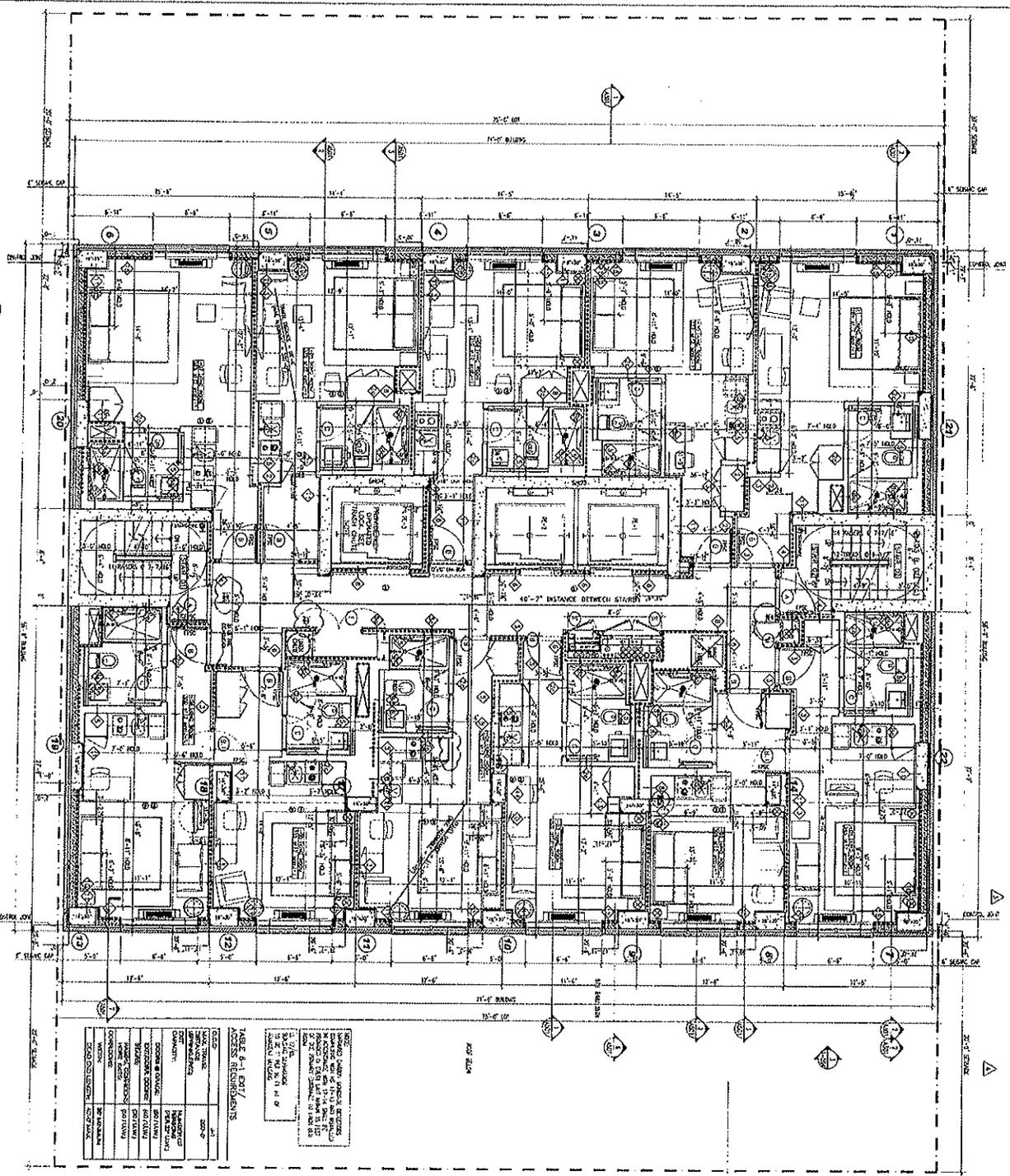
**ADDITIONAL STIPULATIONS: (Office Use Only), *Continued***

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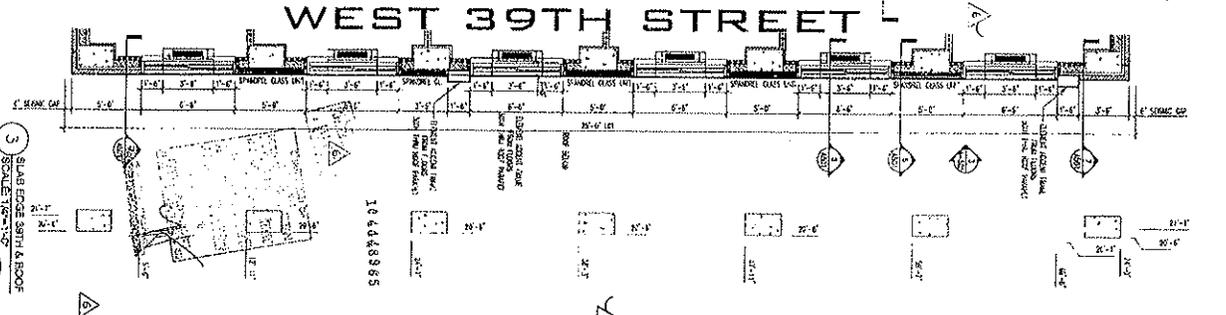




1 TYPICAL PLAN - FLOORS 22-25TH ST. 35-37th & 38th  
SCALE: 1/4"=1'-0"



2 PARTIAL PLAN @ 28TH FLOOR  
SCALE: 1/4"=1'-0"



3 SLAB EDGE @ 28TH & 30TH  
SCALE: 1/4"=1'-0"



TABLE 6-1 (a) / ACCESS REQUIREMENTS

ACCESS	REQUIREMENTS
GENERAL	...
...	...

NOTED: THESE ACCESS REQUIREMENTS ARE BASED ON THE ASSUMPTION THAT THE BUILDING IS TO BE OCCUPIED BY THE GENERAL PUBLIC. IF THE BUILDING IS TO BE OCCUPIED BY A SPECIAL GROUP, THE ACCESS REQUIREMENTS SHOULD BE REVISED TO REFLECT THE SPECIAL GROUP'S NEEDS.

WEST 39TH STREET

**ADGA** ARCHITECTURAL DESIGN GROUP  
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NEW YORK, NY 10018  
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WWW.ADGA.COM

**element**  
ARCHITECTS  
100 WEST 39TH STREET  
NEW YORK, NY 10018  
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NO.	DATE	DESCRIPTION
1	01/15/10	...
2	02/10/10	...
3	03/15/10	...
4	04/10/10	...
5	05/15/10	...
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97	01/15/18	...
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100	04/10/18	...



Element New York Times Square West  
311 West 39<sup>th</sup> Street, New York, NY

Additional Information

Hours of Operation

Breakfast:

6 am -9 am - Mon – Friday

7am – 10 am - Weekends

Afternoon receptions: 3pm – 10pm

Roof: Closed and vacated at 11pm

Restore pantry: The pantry will be supervised at all times. Beer sold in the pantry is kept in a cooler which is also closely supervised. It will be locked at night at 11pm and beer cannot be purchased after 11pm. Food is available 24 hours. It can be eaten in the lounges or in the guest rooms and can be cooked in the guest rooms. (Guest rooms have small kitchenettes)

Rooftop Terrace The rooftop terrace is vacated and locked after 11pm. It is accessible only by elevator. Card key access will be put in place when the hotel opens making the rooftop terrace accessible only to hotel guests. Hotel guests may take food or drink to the rooftop terrace but there is no service or sale of food, drink or alcohol on the roof.

Wine and Beer Storage All wine and beer will be stored in locked coolers in the kitchen and in the pantry. Any overstock wine and beer will be stored in a locked rolling cage kept in the general manager's office on the sub-basement level. The office will be locked at all times when not in use by the general manager. The general manager and engineer are the only persons with access to this office.