

1 **Business Licenses & Permits Committee**

Item #: 9

2
3 February 5, 2014

4
5 Danielle L. Crawford
6 Special Applications Unit
7 Department of Consumer Affairs
8 42 Broadway, 5th floor
9 New York, NY 10004

10
11 **Re: Rhythms of Cuba LLC**
12 **d/b/a Son Cubano**
13 **544 West 27th Street**

14
15 Dear Ms. Crawford:

16
17 At its January 14, 2014 meeting, the Business Licenses and Permits Committee of Manhattan
18 Community Board 4 voted to **recommend approval of a cabaret license** for the above-named
19 establishment. No one from the community spoke out against the applicant.

20
21 Son Cubano has been operating at this location since 2010 and has no complaints on file.

22
23 At its full board meeting on February 5, 2014, Manhattan Community Board 4 voted to approve
24 this recommendation.

25
26 Sincerely,

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

2
3 February XX, 2014

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

10
11 **Re: Corkbuzz Two, LLC**
12 **d/b/a Corkbuzz Chelsea Market**
13 *75 9th Avenue, Retail Space D (15/16)*

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of an On-Premise Liquor License
18 for Corkbuzz Two, LLC d/b/a Corkbuzz Chelsea Market – 75 9th Avenue, Retail Space D
19 (15/16), unless the following stipulations, agreed to by the applicant, are part of the method of
20 operation for this establishment with a capacity of 74 people, with 8 tables with 24 seats, and 1
21 stand-up bar seating 8.
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23
24 A signed copy of the questionnaire and stipulations are enclosed.

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26 Sincerely,

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT		DOING BUSINESS AS (DBA)	
Corkbuzz Two, LLC		Corkbuzz Chelsea Market	
STREET ADDRESS		CROSS STREETS	
75 Ninth Avenue, Retail Space D		15th & 16th Street	
OWNER	NAME:	Laura Maniec	ATTORNEY
	PHONE:	646-873-6071	
	FAX:	646-403-8038	
MANAGER	NAME:	Laura Maniec	LANDLORD
	PHONE:	646-873-6071	
	FAX:	646-403-8038	
		NAME:	Victor & Bernstein, P.C.
		PHONE:	212-486-6000
		FAX:	212-486-8668
		NAME:	Jamestown LP
		PHONE:	212-652-2111
		FAX:	
DESCRIPTION OF BUSINESS			
Establishment Type:		<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input checked="" type="radio"/> Other (Explain): Bar/Arcade Cafe/Wine Bar	
Method of Operation:		<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input checked="" type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input checked="" type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade	
License Type:		<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer	
APPLICATION TYPE (check one)	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES <input type="radio"/> NO
		What is/was the name of establishment?	Corkbuzz Wine Studio
		What is/was the address of the establishment?	13 West 13th Street, NY, NY
		What were the dates the applicant was involved with this former premise?	11/2011 - present
	<input type="radio"/> Transfer	What is the prior license #?	
		What is the expiration date on the prior license?	
		Are you making any alterations or operational changes?	<input type="radio"/> YES <input type="radio"/> NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>	
	<input type="radio"/> Alteration	What is the current license #?	
		What is the expiration date on the current license?	
<i>Please describe the nature of the alterations and attach the plans</i>			

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	
	Music	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	11AM - 2AM	
	Kitchen	All hours of operation								
OCCUPANCY	INDOOR				BAR			OUTSIDE		
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables	
	74	74	8	24	-0-	1	8	N/A	N/A	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					1-2	3-4	5+	1		
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	NO	N/A	No		
Will applicant have bottle service?					YES	NO	N/A	No		
Will you be hosting private parties and promotional events?					YES	NO	N/A	Yes		
Will outside promoters be used?					YES	NO	N/A	No		
Will the security plan submitted be implemented?					YES	NO	N/A	N/A		
Will State certified security personnel be used?					YES	NO	N/A	No		
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					YES	NO	N/A	No		
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					YES	NO	N/A	No		
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	NO	N/A	No		
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	NO	N/A	N/A		
Will applicant provide contact information to neighbors and respond to complaints that arise?					YES	NO	N/A	Yes		
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					YES	NO	N/A	Yes		
If you plan to have music, what type(s)?			BACKGROUND	LIVE MUSIC	DJ	Recorded - iPod only				
BUILDING DESIGN										
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					YES	NO	N/A	N/A - premises is located inside Chelsea Market		
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	No		
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					YES	NO	N/A	N/A - premises is located inside Chelsea Market		

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

LOCATION & ZONING				
Primary Zoning District:	M1-5		Overlay (If Applicable):	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	N/A	Yes - West Chelsea
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	N/A	Yes
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	NO	N/A	Yes -- 500' rule
Is a Public Assembly permit required?	YES	NO	N/A	No
Are your plans filed with DOB?	YES	NO	N/A	To be filed
Building Type	<input type="radio"/> Residential <input checked="" type="radio"/> Commercial <input type="radio"/> Mixed Use <input type="radio"/> Other, describe:			
Adjacent Buildings	<input checked="" type="radio"/> Residential <input checked="" type="radio"/> Commercial <input type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	West 17/18/19 Street Block Association		
	# 2	300 West 15th Street Block Association		
	# 3	200 West 15th Street Association		

1 **Business License & Permits Committee**

Item #: 11

2
3 February XX, 2014

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

10
11 **Re: West 46th Street Venture LLC**
12 **d/b/a Metropolitan West**
13 *639 W. 46th Street (11/12)*

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of an On-Premise Liquor License
18 for West 46th Street Venture LLC d/b/a Metropolitan West – 639 W. 46th Street (11/12), unless
19 the following stipulations, agreed to by the applicant, are part of the method of operation for this
20 establishment with a capacity of 1,424 people, with 132 tables with 1,320 seats, and 6 stand-up
21 bars.

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

25
26 Sincerely,

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT West 46th Street Venture LLC		DOING BUSINESS AS (DBA) Metropolitan West		
STREET ADDRESS 639 West 46th Street / New York, NY 10036		CROSS STREETS 11th Avenue and 12th Avenue		
OWNER	NAME: Alan Boss	ATTORNEY	NAME: Donald M. Bernstein, Esq.	
	PHONE: 212 463 0200		PHONE: 212 486 6000	
	FAX: N/A		FAX: 212 486 8668	
MANAGER	NAME: To be determined	LANDLORD	NAME: 639 West 46th Street LLC c/o MKF Group	
	PHONE: N/A		PHONE: 212 588 8886	
	FAX: N/A		FAX: N/A	
DESCRIPTION OF BUSINESS				
Establishment Type:		<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Restaurant <input checked="" type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization -- Members Only) <input type="radio"/> Other (Explain): Bar/Arcade		
Method of Operation:		<input type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input checked="" type="radio"/> Other (Explain): Bar/Arcade Catering Establishment for private events		
License Type:		<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
APPLICATION TYPE <i>(check one)</i>	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	YES <input type="checkbox"/>	
		What is/was the name of establishment?	Metropolitan Art and Antiques Pavilion Ltd.	
		What is/was the address of the establishment?	Metropolitan Pavilion 110 W 19th St/ NY, NY 10011	
		What were the dates the applicant was involved with this former premise?	1991 - present	
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		If alterations or operational changes are being made, please attach the plans to this form.		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
Please describe the nature of the alterations and attach the plans				

OPERATIONAL ISSUES										
* HOURS *shows latest and earliest hours for an event		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	7AM -12AM	7AM -12AM	7AM -12AM	7AM -12PM	7AM -2AM	7AM - 2AM	7AM -12AM		
	Music	7AM -12AM	7AM -12AM	7AM -12AM	7AM -12PM	7AM -2AM	7AM - 2AM	7AM -12AM		
	Kitchen	6AM -11PM	6AM -11PM	6AM -11PM	6AM -11PM	6AM -11PM	6AM - 1AM	6AM - 12M		
OCCUPANCY	INDOOR				BAR			OUTSIDE		
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Maximum Number of Tables	Maximum Number of Seats	Number of Service Only Bars	Maximum Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables	
	1,424	1,400	132	1,320	0	6	0	0	0	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					1-2		1st floor = 712 2nd floor = 712			
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes, there will be dancing for private events only. A cabaret license is not required.		
Will applicant have bottle service?					<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	No		
Will you be hosting private parties and promotional events?					YES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes -private parties only		
Will outside promoters be used?					<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	No		
Will the security plan submitted be implemented?					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/A	N/A - security cameras		
Will State certified security personnel be used?					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/A	N/A		
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/A	N/A		
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	No		
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	No		
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/A	N/A		
Will applicant provide contact information to neighbors and respond to complaints that arise?					YES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes		
Will you inform the Community Board office of your job openings and/or provide a hypertext link to your jobs webpage?					YES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes		
If you plan to have music, what type(s)?			BACKGROUND	LIVE MUSIC	<input checked="" type="checkbox"/>	Background / Live Music				
BUILDING DESIGN										
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					YES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes		
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					YES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes -see enclosed sound report and sound description		
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/A	N/A		

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

LOCATION & ZONING				
Primary Zoning District:	M2-3	Overlay (If Applicable):	N/A	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES*	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes *Updating Certificate of Occupancy for Use Group and Occupancy
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes
Is a Public Assembly permit required?	YES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes
Are your plans filed with DOB?	YES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes
Building Type	<input type="radio"/> Residential <input checked="" type="radio"/> Commercial <input type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
Adjacent Buildings	<input type="radio"/> Residential <input checked="" type="radio"/> Commercial <input type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	Manhattan Community Board No. 4		
	# 2	West 46th Street Block Association		
	# 3			

ADDITIONAL STIPULATIONS: (Office Use Only)

- Applicant will provide security plan + traffic study prior to full board meeting on 2/5/14.

2
3 February XX, 2014

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

10
11 **Re: Chelsea 7 Corporation**
12 **d/b/a Splosh**
13 *155 8th Avenue (16/17)*

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends **denial** of an On-Premise Liquor License
18 for Chelsea 7 Corporation d/b/a Splosh for multiple reasons. This establishment falls within the
19 500 foot rule as there are over a dozen OP liquor licenses within 500 feet of this address and
20 granting a license to this applicant would most decidedly **not** serve the public interest. As
21 outlined below, the applicant has already demonstrated consistent and repeated disregard for the
22 law and community interests. There has been extensive and unanimous community opposition to
23 this application, with the community legitimately concerned about the potential for increased
24 noise, crime, and disruption that will accompany a business that combines an all-day/late-night
25 liquor license with a store selling sex-related merchandise.

26
27 The applicant presently operates what it refers to as a “sexy boutique” at this address, selling items such
28 as sex toys, novelties, and accessories. While continuing that business, the applicant seeks to open what it
29 describes as a “white-cloth, full-service” restaurant in the front portion of the ground floor (otherwise
30 occupied by the “sexy boutique”) and on the second floor. As the applicant’s letter to MCB4 itself
31 acknowledges, “there are numerous restaurants currently operating on this block.” The applicant’s
32 proposed restaurant thus will add nothing new and not already available in the immediate vicinity of this
33 address.

34
35 Far from advancing the public interest, the grant of a liquor license to the applicant would be seriously
36 detrimental to the public interest.

37
38 First, the applicant has already demonstrated a willingness to repeatedly act contrary to the law and the
39 interests of the community. In connection with construction work at this address and as reflected on its
40 website, the NYC Department of Buildings (DOB) in October and November 2013 issued two stop work
41 orders because of construction work without the necessary permits. Most troublingly, construction work
42 continued on the site **despite the stop work orders**, forcing the DOB to assess a penalty (a \$5,000 fine) for
43 violation of those orders. Community members reported to MCB4 that construction work was regularly
44 done at night and that construction debris was illegally deposited in front of neighboring buildings,
45 resulting in sanitation department citations to innocent neighbors. Noise complaints about the
46 construction were met with complete indifference. Such consistent disregard of the law and the interests

1 of the community raise serious concerns about how the applicant would operate if granted a liquor
2 license.

3
4 Second, the local community believes that a liquor license at this address would be very detrimental to
5 the community and has spoken unanimously in opposition. Over 20 people appeared in opposition at
6 MCB4 meetings. Multiple written statements of opposition were submitted to MCB4, which also
7 received a petition with over 125 signatories in opposition. MCB4 has received nothing in support of
8 this application, and no one (other than the applicant) spoke in favor of it. Community members fear
9 that granting an all-day/late-night liquor license -- 8 a.m. to 4 a.m., seven days a week -- to an
10 establishment that will operate in conjunction with a sex-oriented 24/7 business is a "time bomb" of
11 potential problems. This applicant is located in a residential area -- residential units abut both sides of
12 this address -- and liquor combined with the ongoing sex-oriented business can only caused increased
13 disruption including music and patron noise and additional street noise and congestion. Community
14 members report that there is a prostitution problem in this neighborhood, which they believe can be
15 traced to similar sex-oriented establishments in the area, and fear that granting a liquor license to this
16 applicant will increase the prevalence of prostitution and other crime in the neighborhood.

17
18 Third, the applicant has no expertise in running a restaurant or bar. The only business experience the
19 applicant identified to MCB4 was running a second sex-oriented boutique. The applicant submitted
20 nothing indicating that it had thought about such issues as security, crowd control, or venting and other
21 logistics of using the second floor as a restaurant. The applicant's responses to our questions were
22 unsatisfactory and well below the level we expect from well-prepared, conscientious operators.

23
24 Fourth, there appear to be unanswered questions regarding whether the address' Certificate of
25 Occupancy (C of O) permits the contemplated use. The applicant submitted no C of O, and the only C
26 of O on the DOB's website states that the use of the second floor -- where the applicant seeks to operate
27 this restaurant -- is for "storage and offices," with the number of "persons accommodated" listed as 5
28 persons.

29
30 Thank you for your attention and cooperation with this application.

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32 Sincerely,

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Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

47 of the community raise serious concerns about how the applicant would operate if granted a liquor
48 license.

49

50 Second, the local community believes that a liquor license at this address would be very detrimental to the
51 community and has spoken unanimously in opposition. Over 20 people appeared in opposition at MCB4
52 meetings. Multiple written statements of opposition were submitted to MCB4, which also received a
53 petition with over 125 signatories in opposition. MCB4 has received nothing in support of this
54 application, and no one (other than the applicant) spoke in favor of it. Community members fear that
55 granting an all-day/late-night liquor license -- 8 a.m. to 4 a.m., seven days a week -- to an establishment
56 that will operate in conjunction with a sex-oriented 24/7 business is a "time bomb" of potential problems.
57 This applicant is located in a residential area -- residential units abut both sides of this address -- and
58 liquor combined with the ongoing sex-oriented business can only caused increased disruption including
59 music and patron noise and additional street noise and congestion. Community members report that there
60 is a prostitution problem in this neighborhood, which they believe can be traced to similar sex-oriented
61 establishments in the area, and fear that granting a liquor license to this applicant will increase the
62 prevalence of prostitution and other crime in the neighborhood.

63

64 Third, the applicant has no expertise in running a restaurant or bar. The only business experience the
65 applicant identified to MCB4 was running a second sex-oriented boutique. The applicant submitted
66 nothing indicating that it had thought about such issues as security, crowd control, or venting and other
67 logistics of using the second floor as a restaurant. The applicant's responses to our questions were
68 unsatisfactory and well below the level we expect from well-prepared, conscientious operators.

69

70 Fourth, there appear to be unanswered questions regarding whether the address' Certificate of Occupancy
71 (C of O) permits the contemplated use. The applicant submitted no C of O, and the only C of O on the
72 DOB's website states that the use of the second floor -- where the applicant seeks to operate this
73 restaurant -- is for "storage and offices," with the number of "persons accommodated" listed as 5 persons.

74

75 Thank you for your attention and cooperation with this application.

76

77 Sincerely,

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79

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81

Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

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1 **Business License & Permits Committee**

Item #: 13

2
3 February XX, 2014

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

10
11 **Re: Tintol BBQ LLC**
12 **d/b/a Clubhouse BBQ**
13 *362 W. 53rd Street (8/9)*

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of an On-Premise Liquor License
18 for Tintol BBQ LLC d/b/a Clubhouse BBQ – 362 W. 53rd Street (8/9), unless the following
19 stipulations, agreed to by the applicant, are part of the method of operation for this establishment
20 with a capacity of 99 people, with 25 tables with 94 seats, 1 stand-up bar seating 15, and 8
21 outdoor tables seating 32 within building property line.

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

25
26 Sincerely,

27
28
29
30
Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT		DOING BUSINESS AS (DBA)		
Tintol BBQ LLC		Clubhouse BBQ		
STREET ADDRESS		CROSS STREETS		
362 W 53rd Street		Eighth and Ninth Avenues		
OWNER	NAME:	Jose Meirelles	ATTORNEY	
	PHONE:	(917) 796-9306	NAME:	
	FAX:	(212) 922-1939	PHONE:	
MANAGER	NAME:	Pending	PHONE:	
	PHONE:		FAX:	
	FAX:		LANDLORD	
		NAME:	362 West 53rd Street LLC	
		PHONE:	(201) 681-5799	
		FAX:	(201) 567 9896	
DESCRIPTION OF BUSINESS				
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization – Members Only) <input type="radio"/> Other (Explain): Bar/Arcade			
Method of Operation:	<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade			
License Type:	<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer			
APPLICATION TYPE (check one)	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
		What is/was the name of establishment?	Clubhouse Cafe	
		What is/was the address of the establishment?	155 W 46th Street	
		What were the dates the applicant was involved with this former premise?	2005 through 2013	
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	<input type="radio"/> YES	<input type="radio"/> NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
<i>Please describe the nature of the alterations and attach the plans</i>				

OPERATIONAL ISSUES

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HOURS	noon to midnight	noon to midnight	noon to midnight	noon to midnight	noon to 2:00 pm	sundown to midnight	noon to midnight
Music	noon to midnight	noon to midnight	noon to midnight	noon to midnight	noon to 2:00 pm	sundown to midnight	noon to midnight
Kitchen	noon to midnight	noon to midnight	noon to midnight	noon to midnight	noon to 2:00 pm	sundown to midnight	noon to midnight

OCCUPANCY	INDOOR				BAR			OUTSIDE	
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables
	99	99	25	94	0	1	15	32	8

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

1-2	3-4	5+	1st floor: 74
			mezzanine: 25

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

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

Will applicant have bottle service?

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

Will you be hosting private parties and promotional events?

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

Will outside promoters be used?

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

Will the security plan submitted be implemented?

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

Will State certified security personnel be used?

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

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

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

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

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

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

YES	<input checked="" type="radio"/> NO	N/A	Perhaps in the future. We will return to CB4 if we do.
-----	-------------------------------------	-----	--

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

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

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

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

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

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

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

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

BUILDING DESIGN

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

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

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

YES	NO	N/A	We do not plan to hire an engineer but we will consider it if necessary.
-----	----	-----	--

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

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

OUTDOOR ITEMS				
Will applicant use the rooftop, rear yard or any outdoor space?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	We will have 5 tables in the back yard & 3 tables on the terrace.
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	

LOCATION & ZONING

Primary Zoning District:	R-8	Overlay (If Applicable):	C1-5	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	N/A	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	500 foot rule
Is a Public Assembly permit required?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	It is in process

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

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

→ WITHDRAWING PERMITION OF APPLICATION TO USE ANY OUTDOOR SPACE AND WILL NOT USE OUTDOOR SPACE.

→ ALL MECHANICAL & VENTILATION SYSTEMS WILL BE DOB-COMPLIANT, INCLUDING, IF NECESSARY, MOVING ALL SUCH SYSTEMS FROM TERRACES TO ROOF.

1 **Business License & Permits Committee**

Item #: 14

2
3 February XX, 2014

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

10
11 **Re: Kiabacca Concepts Corp**
12 **d/b/a Kiabacca Pizza & Beer**
13 *639 10th Avenue (45/46)*

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of an On-Premise Liquor License
18 for Kiabacca Concepts Corp. d/b/a Kiabacca Pizza & Beer – 639 10th Avenue (45/46), unless the
19 following stipulations, agreed to by the applicant, are part of the method of operation for this
20 establishment with a capacity of 75 people, with 16 tables with 40 seats, and 1 stand-up bar
21 seating 16.

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

25
26 Sincerely,

27
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30
Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT KIABACCA CONCEPTS CORP.		DOING BUSINESS AS (DBA) KIABACCA PIZZA + BEER		
STREET ADDRESS 639 10th AVENUE		CROSS STREETS 45th AND 46th		
OWNER	NAME: DAN McLAUGHLIN	ATTORNEY	NAME: TERRY FLYNN	
	PHONE: 917-742-6819		PHONE: 718-945-1000	
	FAX: 212-239-8067		FAX: 718-318-6162	
MANAGER	NAME:	LANDLORD	NAME: GIAIMO + GIAIMO	
	PHONE: T/B/D		PHONE: 212-757-8888	
	FAX:		FAX:	
DESCRIPTION OF BUSINESS				
Establishment Type:		<input checked="" type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization – Members Only) <input type="radio"/> Other (Explain): PIZZA PUB		
Method of Operation:		<input type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input checked="" type="radio"/> Other (Explain): PIZZA PUB WITH TABLE + BAR SERVICE		
License Type:		<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
APPLICATION TYPE (check one)	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES <input type="radio"/> NO	
		What is/was the name of establishment?	LANSLOWNE + PONY	
		What is/was the address of the establishment?	599 + 63 10th AVE	
		What were the dates the applicant was involved with this former premise?	2006 – PRESENT	
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	<input type="radio"/> YES <input type="radio"/> NO	
		If alterations or operational changes are being made, please attach the plans to this form.		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
Please describe the nature of the alterations and attach the plans				

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	11:30AM-4AM								→
	Music	NO								
	Kitchen	11:30AM-2AM								NOON → 2AM
OCCUPANCY	INDOOR				BAR			OUTSIDE		
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables	
	75	74	APS 16	APX 40	0	1	16	0	0	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					1-2	3-4	5+	74 GROUND FLOOR		
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	NO	N/A			
Will applicant have bottle service?					YES	NO	N/A			
Will you be hosting private parties and promotional events?					YES	NO	N/A			
Will outside promoters be used?					YES	NO	N/A			
Will the security plan submitted be implemented?					YES	NO	N/A			
Will State certified security personnel be used?					YES	NO	N/A			
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					YES	NO	N/A			
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)					YES	NO	N/A			
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	NO	N/A			
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	NO	N/A			
Will applicant provide contact information to neighbors and respond to complaints that arise?					YES	NO	N/A			
If you plan to have music, what type(s)?			BACKGROUND	LIVE MUSIC	DJ	COMPUTER / INTERNET				
BUILDING DESIGN										
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					YES	NO	N/A			
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					YES	NO	N/A	NEW SOUND PROOFING INSTALLED BY LANDLORD		
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)					YES	NO	N/A			

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

LOCATION & ZONING			
Primary Zoning District:	C2-5	Overlay (If Applicable):	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	NO	N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO	N/A
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input checked="" type="radio"/> YES	NO	N/A
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	N/A
Are your plans filed with DOB?	YES	NO	<input checked="" type="radio"/> N/A
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____		
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	44th ST. BLOCK ASSN.	
	# 2	PS 51 525 W. 44th ST.	
	# 3	PS 212 MIDTOWN West School	

ADDITIONAL INFORMATION: (Applicant Use)

See Appendix A.

ADDITIONAL NOTES: (Office Use Only)

APPENDIX A

Manhattan Community Board 4

Liquor License Stipulation Application

Appendix A

NAME: KIABACCA PIZZA & BEER

Both counter and table seating.

Specializing in 12" personal pies.

Rotating selection of American Craft Beers

Featuring Wine & Sangria "On-Tap"

Limited hard liquor sales.

Take-Out Only.

No delivery. No bikes or annoying bike racks.

No outdoor seating.

As part of our lease, we have negotiated that the landlord shall sound-proof the newly renovated building as per the specs we provide. Our methods of sound-proofing have been very effective in our other licensed establishments and we will work closely with the landlord to make sure the work is done properly.

Preliminary Floor Plan Provided. *** Subject to change

Owned and operated by Patrick Hughes and Dan McLaughlin who have years of experience operating in CB4.

1 **Business License & Permits Committee**

Item #: 15

2
3 February XX, 2014

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

10
11 **Re: 635 Catering, LLC**
12 **d/b/a Espace**
13 *635 W. 42nd Street (11/12)*

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of a transfer for an On-Premise
18 Liquor License for 635 Catering, LLC d/b/a Espace – 635 W. 42nd Street (11/12), unless the
19 following stipulations, agreed to by the applicant, are part of the method of operation for this
20 establishment with a capacity of 460 people.

21
22
23 A signed copy of the questionnaire and stipulations are enclosed.

24
25 Sincerely,

26
27
28
29
Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT		DOING BUSINESS AS (DBA)			
635 Catering, LLC		espace			
STREET ADDRESS		CROSS STREETS			
635 West 42 nd Street N.Y. 10036		11 th and 12 th Avenues			
OWNER	NAME:	ATTORNEY	NAME:		
	PHONE:		PHONE:		
	FAX:		FAX:		
SETH GREENBERG		Terrence R. Flynn Jr.			
646-283-2792		(718) 945-1000			
212-967-7183		(718) 318-6162			
MANAGER	NAME:	LANDLORD	NAME:		
	PHONE:		PHONE:		
	FAX:		FAX:		
SETH GREENBERG		Moinain Group			
212-967-7003		212-308-4000			
212-967-7183					
DESCRIPTION OF BUSINESS					
Establishment Type:		<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place/Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Restaurant <input checked="" type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): _____			
Method of Operation:		<input type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input checked="" type="radio"/> Other (Explain): <u>Catering Facility</u>			
License Type:		<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer			
APPLICATION TYPE (check one)	<input type="radio"/> New	Has applicant owned or managed a similar business?	YES	NO	
		What is/was the name of establishment?			
		What is/was the address of the establishment?			
		What were the dates the applicant was involved with this former premise?			
	<input checked="" type="radio"/> Transfer	What is the prior license #?	11 92573		
		What is the expiration date on the prior license?	10-31-2015		
		Are you making any alterations or operational changes?	YES	NO	
		If alterations or operational changes are being made, please attach the plans to this form.			
	<input type="radio"/> Alteration	What is the current license #?			
		What is the expiration date on the current license?			
Please describe the nature of the alterations and attach the plans					

OPERATIONAL ISSUES

HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	Varies weekly						
	Music	Varies weekly	Varies weekly	"	"	"	"	"
	Kitchen	Varies weekly	"	"	"	"	"	"

OCCUPANCY	INDOOR				BAR			OUTSIDE	
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables
	460		N/A	N/A	N/A	N/A	0	0	0

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

1-2 3-4 5+ 2 Floors, 1 main floor for public space

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

YES NO N/A Yes, and cabaret

Will applicant have bottle service?

YES NO N/A Yes, private events only

Will you be hosting private parties and promotional events?

YES NO N/A Yes

Will outside promoters be used?

YES NO N/A Yes

Will the security plan submitted be implemented?

YES NO N/A Yes

Will State certified security personnel be used?

YES NO N/A Yes

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

YES NO N/A Yes

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

YES NO N/A NO

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

YES NO N/A NO

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

YES NO N/A N/A

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

YES NO N/A Yes

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

BACKGROUND LIVE MUSIC DJ

Yes

BUILDING DESIGN

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

YES NO N/A Yes

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 Yes

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

YES NO N/A Yes

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

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

2
3 February XX, 2014

4
5 Jonathan Mintz
6 Commissioner
7 City of New York
8 Department of Consumer Affairs
9 42 Broadway
10 New York, NY 10004

11
12
13 **Re: Brick House Saloon Corp. d/b/a Meemo Tapas Sport**
14 **Sidewalk Café License 2186-2013-ASWC**
15 **735 Tenth Avenue (50th Street)**

16
17 Dear Commissioner Mintz:

18
19 Manhattan Community Board 4 (MCB4) recommends denial of an unenclosed sidewalk café permit for
20 Brick House Saloon Corp. d/b/a Meemo Tapas Sport unless the following stipulation is agreed to by the
21 applicant:

- 22
23 • To close and vacate the sidewalk café no later than 11:00 p.m. Friday and Saturday and 10:00
24 p.m. all other nights.

25
26 The applicant has agreed to:

- 27
28 • Reduce the number of tables and chairs from 20 tables and 40 chairs to 12 tables and 24 chairs,
29 to be located on either side of and adjacent to the main entrance of the establishment; and
30
31 • To mark the sidewalk boundaries according to the approved plans submitted to MCB4 and
32 approved by the DCA.
33

34
35 Sincerely,

36
37
38
39
Christine Berthet
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee