

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
Silom Thai		Thai Sliders	
STREET ADDRESS		CROSS STREETS	ZIP CODE
150 8th Avenue		17th & 18th Streets	10011
OWNER <small>(Attach a list of all the people that will be associated/listed with the license)</small>	NAME:	Wai Ying Lau	ATTORNEY/ REPRESENTAIVE
	PHONE:	917-757-6608	
	EMAIL:	gingerty@gmail.com	
	NAME:	Anthony L. Caraballo	
	PHONE:	718-875-2929	
	EMAIL:	Anthony@cblservices.com	
MANAGER	NAME:	SAME	LANDLORD
	PHONE:		
	EMAIL:		
	NAME:	St. Francis Friends Of poor	
	PHONE:	212-627-4131	
	EMAIL:	resl@stfrancisfriends.org	
APPLICATION TYPE (Check One)			
<input type="radio"/> New	Has applicant owned or managed a similar business?		YES 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?		Bangkok Bistro 148 Inc./#1207703/9-30-2016
	Is applicant making any alterations or operational changes?		YES NO <input checked="" type="checkbox"/>
	<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			
TYPE OF ALCOHOL	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer		
ESTABLISHMENT TYPE	<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	NO <input checked="" type="checkbox"/>
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		YES <input checked="" type="checkbox"/>	NO

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	12:00 PM to 12:00 AM	12:00 PM to 12:00 AM	12:00 PM to 12:00 AM	12:00 PM to 12:00 AM	12:00 PM to 12:00 AM	12:00 PM to 12:00 AM	12:00 PM to 12:00 AM
	Kitchen	Same	Same	Same	Same	Same	Same	Same
	Music	Same background	Same background	Same background	Same background	Same background	Same background	Same background
If you plan to have music, what type(s)? (Circle all that apply)			<input checked="" type="checkbox"/> 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	under 74	50	12	44	NONE	ONE	2
OUTSIDE <i>(Other than sidewalk café.)</i>	N/A	N/A	N/A	N/A	N/A	N/A	N/A
SIDEWALK CAFÉ	N/A	N/A	N/A	N/A			

How many floors are there? What is the capacity for each floor? 2 floors; restaurant and basement with kitchen & storage

How frequently will the owner(s) be at the establishment? All open hours

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	<input checked="" type="checkbox"/> NO	
Will applicant have bottle or table service for beverage alcohol?	YES	<input checked="" type="checkbox"/> NO	
Will you be hosting private, promotional or corporate events?	YES	<input checked="" type="checkbox"/> NO	
Will outside promoters be used on a regular basis? If yes please describe.	YES	<input checked="" type="checkbox"/> NO	
Will you have a security plan? If, yes please attach.	YES	<input checked="" type="checkbox"/> NO	(small restaurant)
Will security plan be implemented?	YES	<input checked="" type="checkbox"/> NO	
Will State certified security personnel be used?	YES	<input checked="" type="checkbox"/> NO	
Will New York Nightlife Association and NYPD Best Practices be followed?	<input checked="" type="checkbox"/> YES	NO	
Will applicant be using delivery bicycles? If yes, how many?	YES	<input checked="" type="checkbox"/> 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	NOT APPLICABLE
Where will delivery bicycles be stored during the day when not in use?	NOT APPLICABLE		

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	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"/>	NO	
Is a Public Assembly permit required?	YES	NO <input checked="" type="checkbox"/>	
Are your plans filed with DOB?	YES <input checked="" type="checkbox"/>	NO	

Community Notification/Relations			
NOTIFICATION: 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	Applicant has owned the restaurant for the past 8 years; this is a change in structure of company	
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.		N/A	
Who was your contact person at each group you met with?		N/A	
When did applicant post the notice that was provided?		N/A	
Where did applicant post the notice that was provided?		N/A	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES <input checked="" type="checkbox"/>	NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES <input checked="" type="checkbox"/>	NO

BUILDING DESIGN			
State the name and type of business previously located in the space.			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES ✓	NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO ✓	
Will applicant have a vestibule within the establishment?	YES ✓	NO	
Will applicant use a storm enclosure?	YES	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 ✓	
Will applicant comply with the NYC noise code?	YES ✓	NO	
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	
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	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	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?	YES ✓	NO	
Will the kitchen exhaust system extend to the roof?	YES ✓	NO	
Will the establishment have an illuminated sign?	YES ✓	NO	
Will the establishment have a canopy extending over the sidewalk?	YES	NO ✓	
Where will the air conditioner be located? What type is it?	Inside ground floor of restaurant/Standard Central Air system		
When was the air conditioner installed?	8 years ago upon the opening of the existing restaurant		

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	N
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	O
Are the floorplans for the outdoor space(s) included?	YES	NO	T
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	A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	P
Will there be no amplified music, as per the law?	YES	NO	P
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	L
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	I
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	G
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	B

L
E

OUTDOOR ITEMS – SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	N
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	O T
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	A
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	P P
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	L I
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	C A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	B
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	L
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	E
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 st and March 21 st , 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)

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*

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.

Manhattan Community Board 4 (MCB4) recommends:

Denial unless all stipulations agreed to by applicant/owner are part of the method of operation

Denial Approval

CB4 REPRESENTATIVES

Nelly Gonzalez
CB4 Assistant District Manager

Frank Holozubiec
CB4 BLP Committee Co-Chair

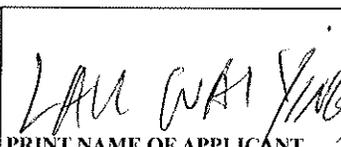

Burt Lazarin
CB4 BLP Committee Co-Chair

APPLICANT AGREEMENT WITH THE COMMUNITY

Applicant agrees to these stipulations as the basis for the community support of this application and acknowledges that all of these stipulations are essential prerequisites to the MCB4 recommendation regarding this application. Applicant agrees to have these stipulations incorporated in the method of operation of its liquor license. The stipulations in this application constitute the entire agreement between MCB4 and applicant and may only be altered in writing signed by MCB4 and applicant. These stipulations supersede any oral statements or representations in connection with this application.

SIGN HERE




PRINT NAME OF APPLICANT


SIGNATURE OF APPLICANT

12/06/15
DATE

S I L O M

APPETIZERS

DUMPLINGS BY THE PIECE ¹

chicken, pork, or veggie filling

GRILLED HONEY GLAZED BUN ⁴

savory, honey marinated grilled pork between a brioche roll with lettuce tomato & mayo

FIVE SPICE PORK BUN ⁴

sliced pork belly & scallion in a steamed rice flour bun

ROTI ⁵

a thin, buttery, & flaky bread. Side of fiery coconut curry dipping sauce with sliced chicken

VEGETABLE SPRING ROLLS BY THE PIECE ²

deep fried glass noodles, mushroom and cabbage tightly wrapped in a wheat flour sheet

CHIVE CAKES ⁶

crispy deep fried, chive centered chive cakes

EDAMAME ⁵

THAI

CHICKEN CURRY 9.95

chicken simmered in a rich & creamy coconut milk based curry

CHICKEN BASIL 9.95

chicken sauteed in basil chili sauce sweetened by the flavors of sauteed onions & bell peppers

GARLIC CHILI FISH 11.95

a lightly breaded & deep fried fillet of fish crowned with subtly sweet, basil garlic chili paste

TAMARIND SHRIMP + BROCCOLI 11.95

shrimp and broccoli crowned with a tangy, sweet and savory tamarind sauce

BEEF BASIL 11.95

sliced beef sauteed in basil essence chili sauce sweetened by the flavors of sauteed onions & bell peppers

THAI STYLED FRIED RICE 9.95

jasmine rice, egg, peas, carrot and a balance of Thai sauces and seasonings combined for a subtly sweet + savory stir fry

VEGETARIAN

TOFU BASIL 9.95

fried tofu sauteed in basil chili sauce sweetened by the flavors of sauteed onions & bell peppers

MIXED VEGGIE CURRY 9.95

mixed veggies simmered in a rich & creamy coconut milk based curry

NOODLES

PAD THAI 10.95

sauteed thin rice noodles, egg, crushed peanuts, preserved turnips, balanced with bean sprouts and scallions

PAD SI-EEW 10.95

stir fried broad rice noodles, broccoli and an egg, sauteed with a large variety of soy sauces

TOM YUM NOODLES 10.95

choice of shrimp, chicken, or veggies in an enlivening broth of lime leaves, infused with lemongrass and red chili peppers

CHICKEN CURRY CHAIING MAI NOODLES 10.95

egg noodles simmered in a sweet + creamy curry sauce. topped with toasted wonton crisps, steamed chicken, bean sprouts, and a half of a boiled egg

FIVE SPICE PORK NOODLES 10.95

pork slow cooked in a hot + tangy broth with Chinese greens

SALADS

BEEF OR SHRIMP YUM 11.95

marinated in lime juice, tossed with chili peppers, onion, tomato, cucumber, coriander and lettuce. served at room temperature

BEVERAGES

THAI ICED TEA 3.5

classic sweet + creamy thai styled tea

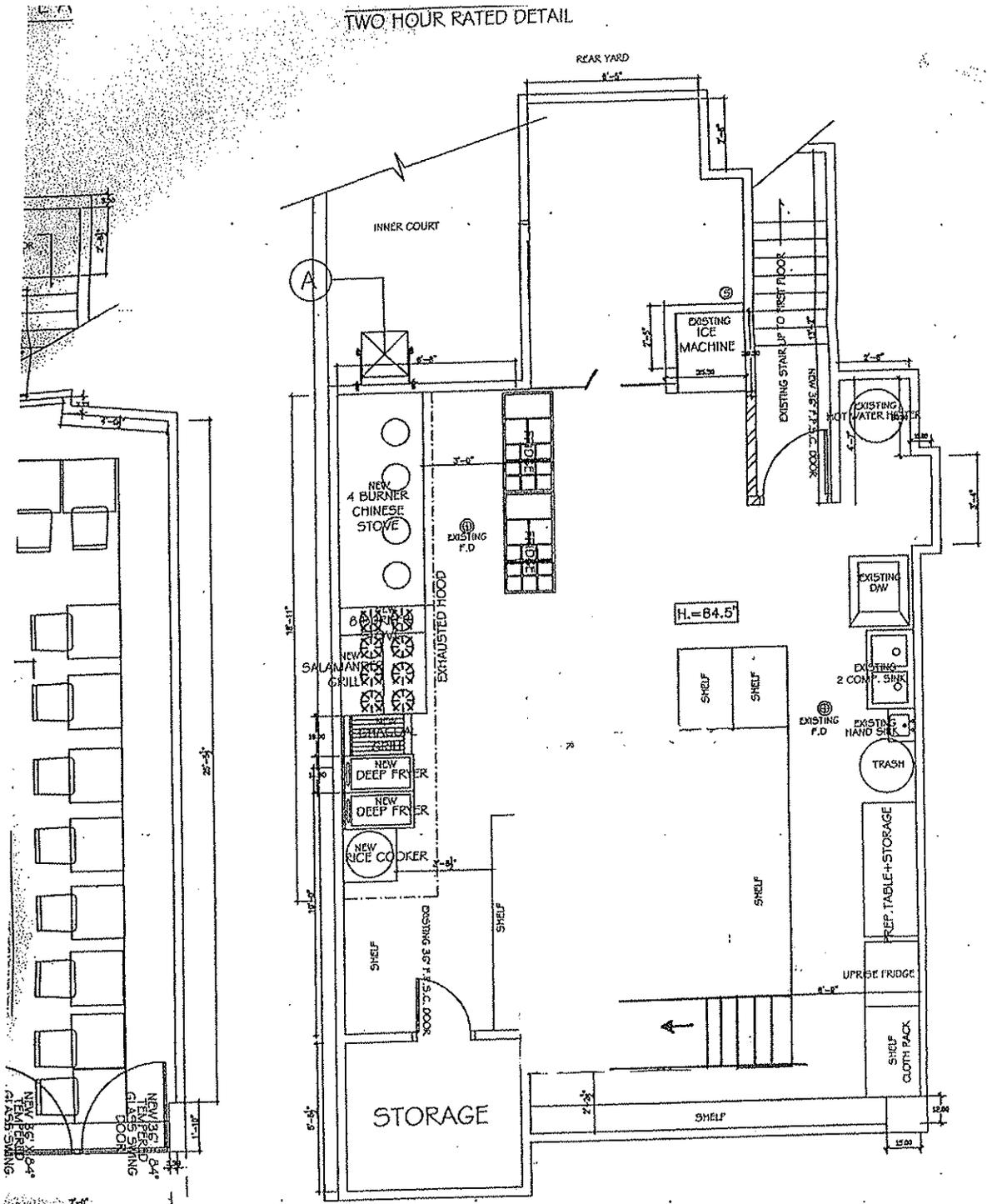
GREEN THAI ICED TEA 3.5

a floral, green tea infused take on the classic sweet + creamy thai iced tea

THAI ICED COFFEE 3.5

classic sweet + creamy thai styled coffee

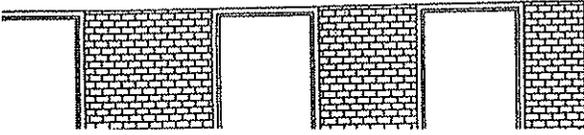
TWO HOUR RATED DETAIL



RENOVATION PLAN

PROPOSED CELLAR FLOOR PLAN

SCALE 1/4" = 1'-0"



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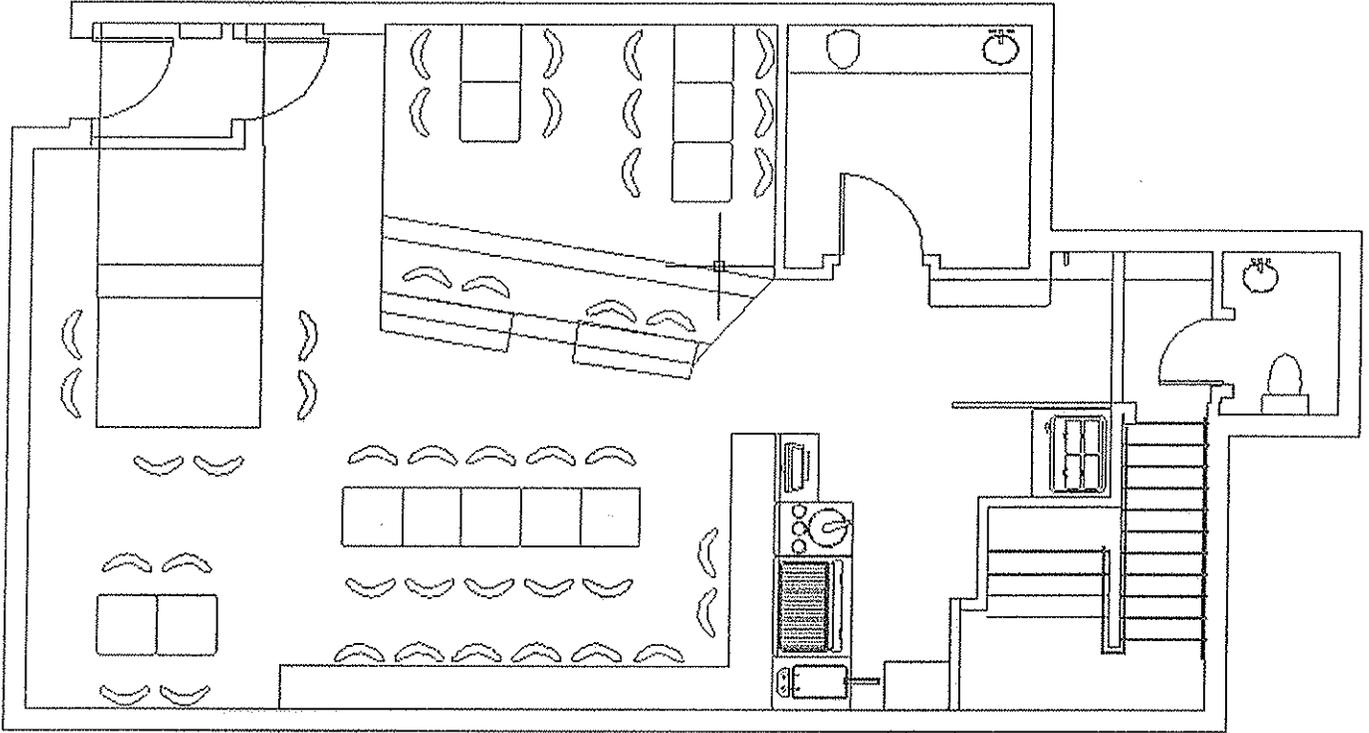
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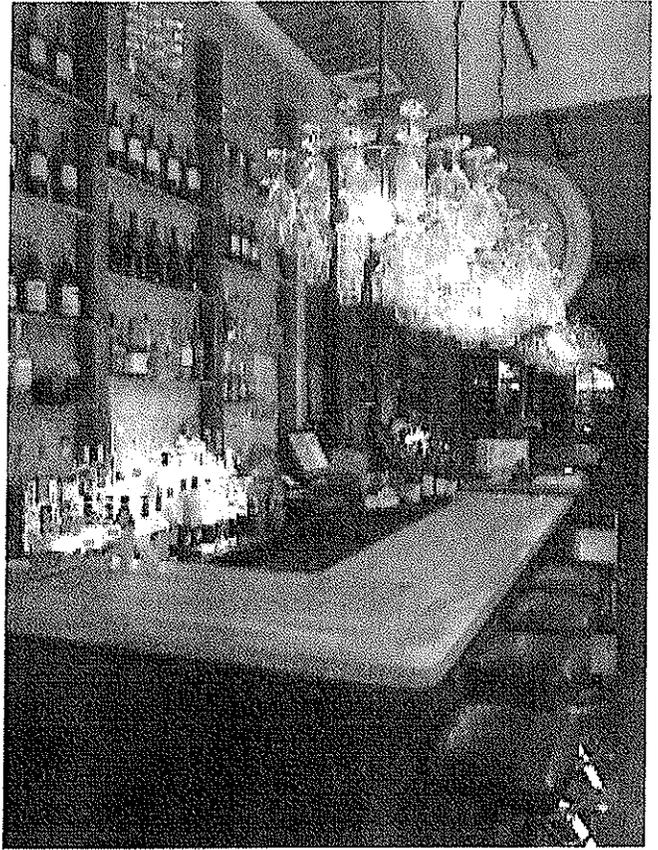
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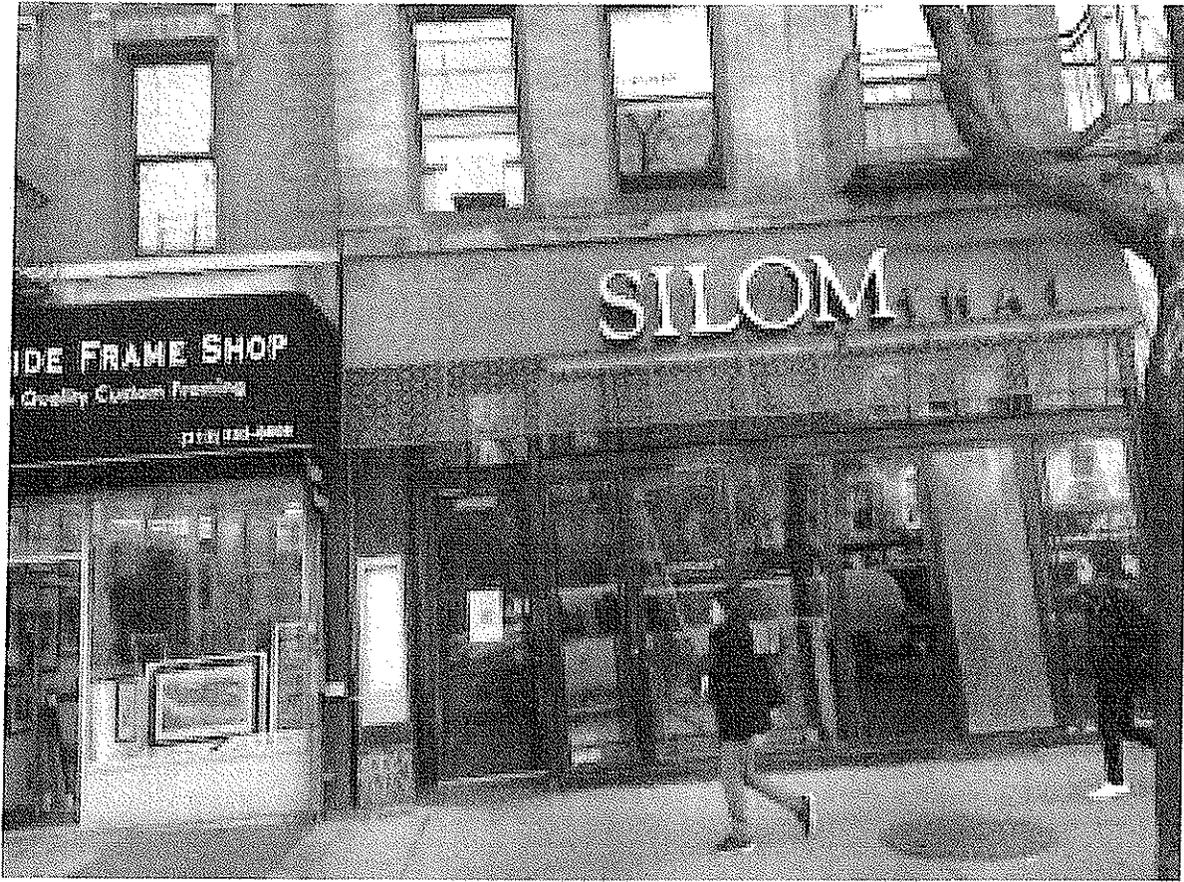
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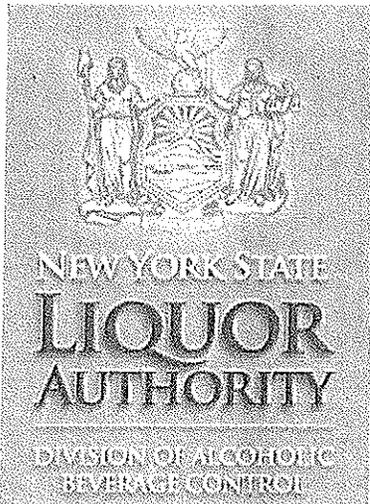
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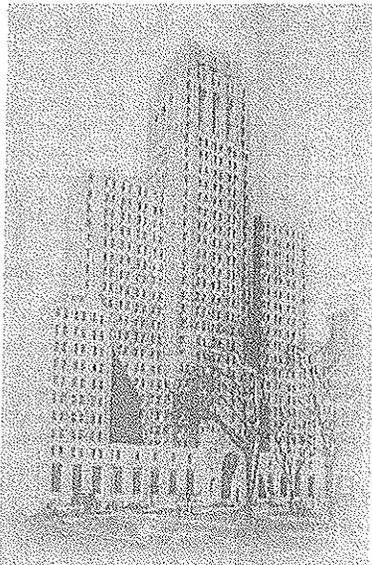
Silom Thai Inc. DBA: Thai Inc. 150 8th Avenue, Brooklyn, NY 10011





Andrew M. Cuomo, Governor
 Vincent G. Bradley, Chairman
 Kevin Kim, Commissioner

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License Information

Serial Number: 1207703
 License Type: ON-PREMISES LIQUOR
 License Status: License is Active
 Credit Group: 1
 Filing Date: 04/17/2008
 Effective Date: 10/01/2014
 Expiration Date: 09/30/2016

Premises Information

Principal's Name: BHUVIRIYAKUL, AMNARD
 KWANCHAI PRUCK, PETER
 LAU, WAI YING
 Premises Name: BANGKOK BISTRO 148 INC
 Trade Name: SILOM
 Zone: 1
 Address: 150 8TH AVENUE
 W 17TH ST & W 18TH STREETS
 NEW YORK, NY 10011
 County: NEW YORK

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New York State Liquor Authority • 80 S. Swan Street • 9th Floor • Albany, New York • 12210-8002

**EXISTING LICENSE AT THE PREMISES. THE CURRENT LICENSEE
 WILL CONTINUE TO OPERATE THE NEW ESTABLISHMENT**

Manhattan Community Board 4 (MCB4) recommends:

- Denial unless all stipulations agreed to by applicant/owner are part of the method of operation
- Denial Approval

CB4 REPRESENTATIVES

Nelly Gonzalez
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SIGN HERE



Wai Ying Lau

PRINT NAME OF APPLICANT

SIGNATURE OF APPLICANT

November 20, 2015

DATE

Silom Thai Inc.
Dba Thai Sliders
150 8th Avenue
New York, NY 10011

PUBLIC INTEREST STATEMENT

This issuance of this license would be in the public interest as this premises has been licensed by the applicant since 2008. The applicant is updating the interior of the premises and modifying the food concept.

The applicant has owned and operated the premises for the past 7 years with a clean operating record. The applicant has extensive experience in the restaurant industry with other establishments that have liquor licenses. He will continue to operate in the same fashion with a special attention to abiding to all the Alcoholic Beverage Control laws.

Certificate of Occupancy

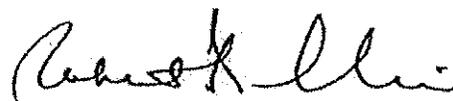
CO Number: 110142756T001

This certifies that the premises described herein conforms substantially to the approved plans and specifications and to the requirements of all applicable laws, rules and regulations for the uses and occupancies specified. No change of use or occupancy shall be made unless a new Certificate of Occupancy is issued. *This document or a copy shall be available for inspection at the building at all reasonable times.*

A.	Borough: Manhattan	Block Number: 00767	Certificate Type: Temporary
	Address: 150 8TH AVENUE	Lot Number(s): 2	Effective Date: 02/10/2010
	Building Identification Number (BIN): 1013845	Building Type: Altered	Expiration Date: 05/11/2010
<i>For zoning lot metes & bounds, please see BISWeb.</i>			
B.	Construction classification: 3	(Prior to 1968 Code)	
	Building Occupancy Group classification: COM	(Prior to 1968 Code)	
	Multiple Dwelling Law Classification: OL		
	No. of stories: 5	Height in feet: 58	No. of dwelling units: 79
C.	Fire Protection Equipment: None associated with this filing.		
D.	Type and number of open spaces: None associated with this filing.		
E.	This Certificate is issued with the following legal limitations: None		
Outstanding requirements for obtaining Final Certificate of Occupancy:			
There are 12 outstanding requirements. Please refer to BISWeb for further detail.			
Borough Comments: None			



Borough Commissioner



Commissioner

Certificate of Occupancy

CO Number: **110142756T001**

Permissible Use and Occupancy						
All Building Code occupancy group designations are 1968 designations, except RES, COM, or PUB which are 1938 Building Code occupancy group designations.						
Floor From To	Maximum persons permitted	Live load lbs per sq. ft.	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
CEL		OG	COM		3B	BOILER ROOM, ACCESSORY STORAGE AND ACCESSORY KITCHEN IN CONJUNCTION WITH 1ST FLOOR.
001	137	100	COM		6	DOCTOR'S OFFICE, OFFICES, ACTIVITY ROOM, LOUNGE AND TOILETS AND EATING & DRINKING PLACES (UG-6).
002		40	RES	20	3	TWENTY (20) SLEEPING ROOMS
003		40	RES	19	3	NINETEEN (19) SLEEPING ROOMS AND 1 KITCHEN
004		40	RES	20	3	TWENTY (20) SLEEPING ROOMS
005		40	RES	20	3	TWENTY (20) SLEEPING ROOMS
END OF SECTION						



Borough Commissioner



Commissioner

END OF DOCUMENT