

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

APPLICANT <b>PBQ LLC.</b>		DOING BUSINESS AS (DBA) <b>BarBacon</b>		
STREET ADDRESS 832-836 9 <sup>th</sup> Avenue		CROSS STREETS <del>West 50<sup>th</sup> &amp; 51<sup>st</sup> Street</del> <b>54<sup>th</sup> &amp; 55<sup>th</sup></b>		
OWNER	NAME: <b>Peter Sherman</b>	REPRESENTATIVE	NAME: <b>Keven Danow</b>	
	PHONE: <b>914-629-6233</b>		PHONE: <b>212-370-4996</b>	
	FAX:		FAX:	
MANAGER	NAME: <b>Pending</b>	LANDLORD	NAME: <b>360 West 55<sup>th</sup> Street LP</b>	
	PHONE: <b>Pending</b>		PHONE: <b>212-764-0700</b>	
	FAX:		FAX:	
<b>DESCRIPTION OF BUSINESS</b>				
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization – Members Only) <input type="radio"/> Other (Explain):			
Method of Operation:	<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain):			
License Type:	<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer			
<b>APPLICATION TYPE</b> <i>(check one)</i>	<input checked="" type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?	YES	<input checked="" type="checkbox"/> NO
		What is/was the name of establishment?		
		What is/was the address of the establishment?		
		What were the dates the applicant was involved with this former premise?		
	<input type="radio"/> <b>Transfer</b>	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	YES	NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input type="radio"/> <b>Alteration</b>	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	11 a.m. - 2 a.m.	11 a.m. - 2 a.m.	11 a.m. - 2 a.m.	11 a.m. - 4 a.m.	11 a.m. - 4 a.m.	11 a.m. - 4 a.m.	11 a.m. - 4 a.m.	11 a.m. - 2 a.m.	
	Music	Recorded	Recorded	Recorded	Recorded	Recorded	Recorded	Recorded	Recorded	
	Kitchen	11 a.m. - 12 a.m.	11 a.m. - 12 a.m.	11 a.m. - 12 a.m.	11 a.m. - 2 a.m.	11 a.m. - 2 a.m.	11 a.m. - 2 a.m.	11 a.m. - 2 a.m.	11 a.m. - 12 a.m.	
OCCUPANCY	INDOOR				BAR			OUTSIDE		
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables	
	<del>125</del>	125	20	55	1	<del>1</del>	23			
How many floors are there? What is the capacity for each floor? (please respond in space provided)					1-2	3-4	5+	Ground and Basement		
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"/> NO	N/A			
Will applicant have bottle service?					YES	<input checked="" type="checkbox"/> NO	N/A	*There will be Wine available by the bottle		
Will you be hosting private parties and promotional events?					<input checked="" type="checkbox"/> YES	NO	N/A	*However, if a company wants to hold a private meeting or a Holiday Party we would like to be able to provide those types of services. (No dancing. No loud music.)		
Will outside promoters be used?					YES	NO	<input checked="" type="checkbox"/> N/A			
Will the security plan submitted be implemented?					<input checked="" type="checkbox"/> YES	NO	N/A			
Will State certified security personnel be used?					<input checked="" type="checkbox"/> YES	NO	N/A			
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					<input checked="" type="checkbox"/> 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="checkbox"/> NO	N/A	*There will be delivery service for local <del>residents</del> <i>residents</i> on foot.		
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	<input checked="" type="checkbox"/> NO	N/A			
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)					YES	NO	<input checked="" type="checkbox"/> N/A			
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="checkbox"/> YES	NO	N/A			
If you plan to have music, what type(s)?			<input checked="" type="checkbox"/> BACKGROUND	<input type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ					
BUILDING DESIGN										
Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.					<input checked="" type="checkbox"/> YES	NO	N/A			
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					<input checked="" type="checkbox"/> YES	NO	N/A			

Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	
<b>OUTDOOR ITEMS</b>				
Will applicant use the rooftop, rear yard or any outdoor space?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> N/A	
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> 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 type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> N/A	
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> 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 type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> 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 type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	

<b>LOCATION &amp; ZONING</b>				
Primary Zoning District:	C1-5/R8CL		Overlay (If Applicable):	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	<b>500 Ft. Rule</b>
Is a Public Assembly permit required?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	
Are your plans filed with DOB?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> 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: _____			
<b>NOTIFICATION:</b> What organizations / community groups have you notified regarding	# 1			
	# 2			

your application?

# 3

**ADDITIONAL INFORMATION: (Applicant Use)**

PBQ LLC, will be a full service restaurant and bar, offering high quality American fare at the prices comparable to the competition. Our Chef Owner Peter Sherman will utilize his considerable experience at some of the top restaurants in NYC (David Bouley's, Danube, The Four Seasons Hotel, Joel Robuchon's L'Atelier, and Veritas) to construct menus that will reflect his talent as well as the customer's budget concerns. Chef Sherman has spent his entire cooking career learning to cook the best of what New York has to offer. He now aims to share his talent and passion with more diverse audience. The PBQ LLC, concept is intent on celebrating comfort food with menus that have been developed and prepared with the same level of care and focus as seen in the best restaurants, with the best ingredients. Chef Sherman hopes to bring a high value amenity to his neighborhood, Hell's Kitchen, with menus that are focused on creating affordable dishes prepared in the best possible way.

In today's economic environment, people are now more than ever looking for a more affordable option that doesn't compromise their current standards for food. People want to spend less without sacrificing quality. The prices for the appetizers and main course that will be served will not exceed the prices of similar dishes in the cafes and restaurants in the surrounding area. Overall we estimate the average check per guest to be \$35 before taxes and gratuity. Value is integral to the PBQ LLC, concept – the restaurant must be comparable to the competition's prices and therefore affordable to a broad range of clientele.

It will always be the goal of PBQ LLC, to create community spirit. Our Chef's attitude towards food and how it should be used as a catalyst for conversation will be similarly reflected in the décor and ambiance of PBQ LLC,. We will purposefully design the front of the house to encourage people to interact with our wait staff and with each other with long communal tables and ample bar seating. The rustic, warm ambiance will resonate among our customers a sense of comfort that will as well encourage them to create conversation and have fun.

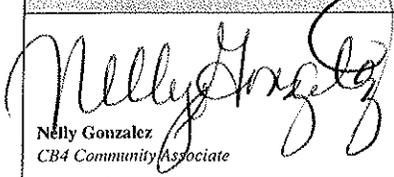
**ADDITIONAL NOTES: (Office Use Only)**

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

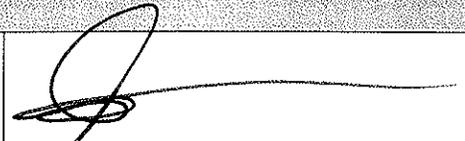
Manhattan Community Board 4 (MCB4) recommends:

Approval  Denial unless all agreed to by applicant is part of the method of operation  Denial

**CB4 REPRESENTATIVES**

  
Nelly Gonzalez  
CB4 Community Associate

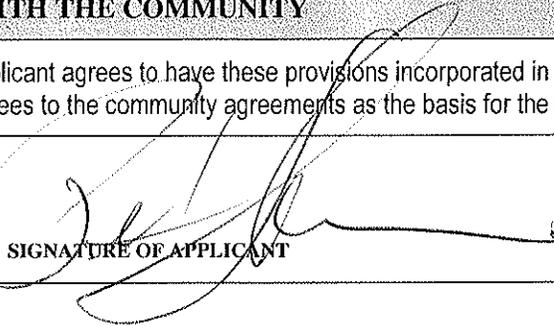
Lisa Daglian  
CB4 BLP Committee Co-Chair

  
Paul Scres  
CB4 BLP Committee Co-Chair

**APPLICANT AGREEMENT WITH THE COMMUNITY**

Pursuant to these stipulations, this applicant agrees to have these provisions incorporated in the method of operation of their liquor license. Additionally, the applicant agrees to the community agreements as the basis for the community supporting this application.

**SIGN HERE** →

  
SIGNATURE OF APPLICANT

8/26/13  
DATE