



CITY OF NEW YORK
MANHATTAN COMMUNITY BOARD FOUR

330 West 42nd Street, 26th floor New York, NY 10036
tel: 212-736-4536 fax: 212-947-9512
www.nyc.gov/mcb4

4 COREY JOHNSON
5 Chair

6 ROBERT J. BENFATTO, JR., ESQ.
7 District Manager

9 BUSINESS LICNESE & PERMITS COMMITTEE

Item # 3

11 April 4, 2012

13 Dennis Rosen
14 Chairman
15 New York State Liquor Authority
16 80 S. Swan Street, 9th Floor
17 Albany, New York 12210

19 **Re: Avenues Restaurant LLC, Northquay Properties LLC, Strategic Dream Restaurant,**
20 **Electric Hospitality d/b/a Marble Lane**
21 *355 W 16th Street (8th/9th)*

23 Dear Chairman Rosen:

25 Manhattan Community Board 4 (MCB4) recommends **denial** of an alteration of an on-premise liquor
26 license to **Avenues Restaurant LLC, Northquay Properties LLC, Strategic Dream Restaurant,**
27 **Electric Hospitality d/b/a Marble Lane, unless** the following stipulations, agreed to by the applicant,
28 is part of the method of operation for this establishment with a capacity of 452, with varies number of
29 tables and 161 seats with one service bar and one stand-up bar with 12 seats.

31 A signed copy of the questionnaire, stipulations and community agreements are enclosed.

34 Sincerely,

37 Corey Johnson
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT Avenues Restaurant LLC, Northquay Properties LLC, Strategic Dream Restaurant, Electric Hospitality Inc,		DOING BUSINESS AS (DBA) Marble Lane	
STREET ADDRESS 355 West 16 th Street		CROSS STREETS 8 th & 9 th Avenue	
OWNER	NAME: See Additional Notes Section (applicant Use)	ATTORNEY	NAME: Russell W. Rosen
	PHONE: 212-474-9830		PHONE: 212-603-6321
	FAX: 212-474-9831		FAX: 212-956-2164
MANAGER	NAME: See Additional Notes Section (Applicant Use)	LANDLORD	NAME: 346 West 17 th Street LLC
	PHONE: 212-420-9420		PHONE: 212-474-9874
	FAX: 212-481-3763		FAX: 212-474-9875

DESCRIPTION OF BUSINESS

Establishment Type:

Bar/Tavern
 Bed & Breakfast
 Eating Place Beer
 Cabaret
 Night Club
 Hotel
 Restaurant

Catering Establishment
 Club (Fraternal Organization – Members Only)

Other (Explain): _____

Method of Operation:

Restaurant
 Dance Club
 Sports Bar
 Adult Entertainment
 Wine Bar
 Pizzeria
 Cafe

Other (Explain): _____

License Type:

Hotel On-Premise
 Wine
 Beer
 Wine & Beer

APPLICATION TYPE <i>(check one)</i>	<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 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	NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input checked="" type="radio"/> Alteration	What is the current license #?	1250744/1250745/1250746	
		What is the expiration date on the current license?	January 31, 2013	
<i>Please describe the nature of the alterations and attach the plans</i> Addition of a second stand-up bar				

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	6 a.m. – 1 a.m.	6 a.m. – 1 a.m.	6 a.m. – 2 a.m.	6 a.m. – 2 a.m.	6 a.m. – 2 a.m.	6 a.m. – 2 a.m.	6 a.m. – 2 a.m.	6 a.m. – 1 a.m.	
	Music	none	9 p.m. – 1 a.m.	9 p.m. – 2 a.m.	9 p.m. – 2 a.m.	9 p.m. – 2 a.m.	9 p.m. – 2 a.m.	9 p.m. – 2 a.m.	none	
	Kitchen	6 a.m. – 1 a.m.	6 a.m. – 1 a.m.	6 a.m. – 2 a.m.	6 a.m. – 2 a.m.	6 a.m. – 2 a.m.	6 a.m. – 2 a.m.	6 a.m. – 2 a.m.	6 a.m. – 1 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	
	452	250	varies	161	1	1	12	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+			
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 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					

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	

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	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	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
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	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.).	YES	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.	YES	NO	N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

LOCATION & ZONING			
Primary Zoning District:	R8B	Overlay (If Applicable):	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	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.	YES	NO	N/A
Is a Public Assembly permit required?	YES	NO	N/A
Are your plans filed with DOB?	YES	NO	N/A
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input type="radio"/> Mixed Use <input checked="" type="radio"/> Other, describe: Transient Hotel		
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	None	
	# 2		
	# 3		

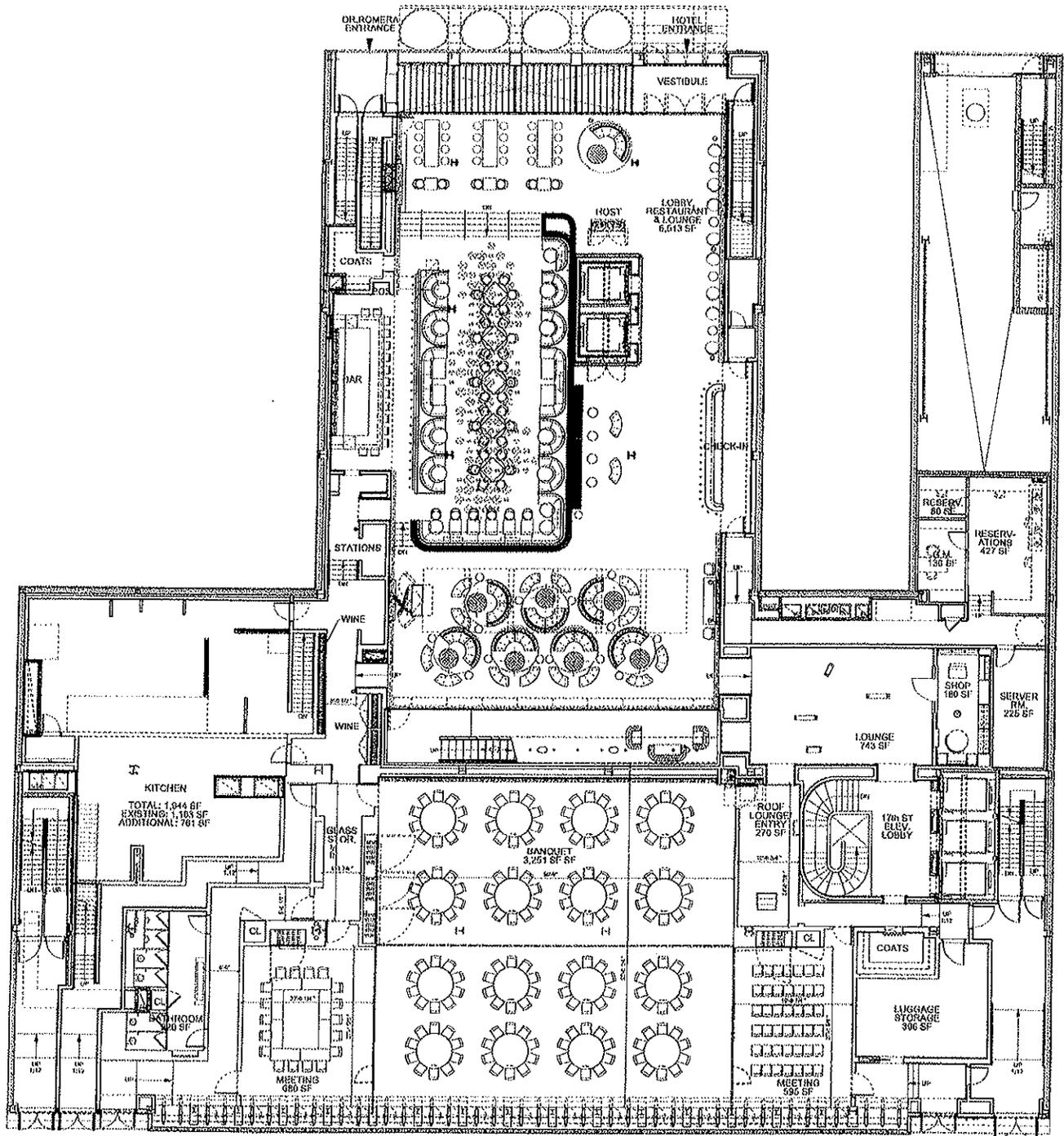
ADDITIONAL INFORMATION: (Applicant Use)

- Owners: Chatwal Family II LLC (Pardaman Chatwal, Vikram Chatwal and Vivek Chatwal)
- Managers: Ninth Avenue Hospitality LLC (Noah Tepperberg, Jason Strauss, Marc Parker and Richard Wolf)

ADDITIONAL NOTES: (Office Use Only)

ADDITIONAL STIPULATIONS: (Office Use Only)

- **No change in the method of operation**



1 GROUND FLOOR PLAN
SCALE: 1" = 8'

SR 655 C	
DATE: 01/10/01	BY: J. HANDEL
SCALE: 1" = 8'	PROJECT: 17th ST. RESTAURANT
OWNER: 17th ST. RESTAURANT	ARCHITECT: HANDEL ARCHITECTS LLP
110 N. W. 11th St., Suite 1100, New York, NY 10011	TEL: (212) 213-2111 FAX: (212) 213-2111