

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
Brewpon LLC			
STREET ADDRESS		CROSS STREETS	ZIP CODE
85 10th Avenue		15 & 16th Streets	10011
OWNER <i>(Attach a list of all the people that will be associated listed with the license)</i>	NAME: Joshua Berkowitz	ATTORNEY/ REPRESENTATIVE	NAME: Robert Bookman, Esq.
	PHONE: 917-576-8000		PHONE: 212-513-1988
	EMAIL: josh@bleeckerkitchen.com		EMAIL: rbookman@pandblegal.com
MANAGER	NAME: Shaun Rose	LANDLORD	NAME: 85 10th Avenue Associates LLC
	PHONE: 917-523-7656		PHONE: 212-929-8510
	EMAIL:		EMAIL:
APPLICATION TYPE (Check One) <i>N/A - Sidewalk Cafe Assignment Application</i>			
<input 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 and address of establishment?	Bleecker Kitchen & Co. - 643 Broadway	
	What were the dates applicant was involved with this former premise?	09/2013 - Present	
<input type="radio"/> Transfer	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?	<input type="radio"/> YES	<input type="radio"/> NO
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input checked="" 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> TO EXTEND LICENSE		
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 checked="" 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 checked="" 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?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	Filed on 3/4/16 Effective date: 5/18/2016
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="radio"/> YES	<input type="radio"/> 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	10am-4am	10am-4am	10am-4am	10am-4am	10am-4am	10am-4am	10am-4am
	Kitchen	SAA	SAA	SAA	SAA	SAA	SAA	SAA
	Music	SAA	SAA	SAA	SAA	SAA	SAA	SAA
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE	
OCCUPANCY								
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar	
INSIDE								
OUTSIDE <i>(Other than sidewalk café)</i>								
SIDEWALK CAFÉ	18	18	9	18				
How many floors are there? What is the capacity for each floor?					Ground Floor			
How frequently will the owner(s) be at the establishment?					An owner/manger will always be on premises			
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	<input checked="" type="radio"/>		
Will applicant have bottle or table service for beverage alcohol?					YES	<input checked="" type="radio"/>		
Will you be hosting private, promotional or corporate events?					<input checked="" type="radio"/>	NO		
Will outside promoters be used on a regular basis? If yes please describe.					YES	<input checked="" type="radio"/>		
Will you have a security plan? If, yes please attach.					YES	<input checked="" type="radio"/>		
Will security plan be implemented?					YES	<input checked="" type="radio"/>		
Will State certified security personnel be used?					YES	<input checked="" type="radio"/>		
Will New York Nightlife Association and NYPD Best Practices be followed?					<input checked="" type="radio"/>	NO		
Will applicant be using delivery bicycles? If yes, how many?					YES	<input checked="" type="radio"/>		
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	N/A	
Where will delivery bicycles be stored during the day when not in use?					N/A			

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/>	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/>	NO	
Is a Public Assembly permit required?	YES	NO	
Are your plans filed with DOB?	YES	NO	N/A

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		
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.			
Who was your contact person at each group you met with?			
When did applicant post the notice that was provided?			
Where did applicant post the notice that was provided?		Front Window	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="radio"/>	NO 917-576-8000
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="radio"/>	NO

BUILDING DESIGN			
State the name and type of business previously located in the space.	Willow Road		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	
Will applicant have a vestibule within the establishment?	YES	<input checked="" type="radio"/> NO	
Will applicant use a storm enclosure?	<input checked="" type="radio"/> YES	<input type="radio"/> 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?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	<input type="radio"/> 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?	<input checked="" type="radio"/> YES	<input type="radio"/> 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?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input checked="" type="radio"/> 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?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the kitchen exhaust system extend to the roof?	YES	<input type="radio"/> NO	
Will the establishment have an illuminated sign?	YES	<input checked="" type="radio"/> NO	
Will the establishment have a canopy extending over the sidewalk?	YES	<input checked="" type="radio"/> NO	
Where will the air conditioner be located? What type is it?	N/A		
When was the air conditioner installed?	N/A		

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

OUTDOOR ITEMS – SIDEWALK CAFÉ		
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	<input checked="" type="radio"/> YES	NO
Will applicant be applying for a sidewalk café now or in the future?	<input checked="" type="radio"/> YES	NO
Is applicant in this application seeking to include a sidewalk café in its liquor license?	<input checked="" type="radio"/> YES	NO
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	<input checked="" type="radio"/> YES	NO
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	<input checked="" type="radio"/> YES	NO
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	<input checked="" type="radio"/> YES	NO
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	<input checked="" type="radio"/> YES	NO
Will applicant mark the perimeter of the café on the sidewalk?	<input checked="" type="radio"/> YES	NO
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	<input checked="" type="radio"/> YES	NO
Will the sidewalk café not provide standing space for drinking or smoking?	<input checked="" type="radio"/> YES	NO
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	<input type="checkbox"/>	<input checked="" type="radio"/> YES
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	NO
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	<input checked="" type="radio"/> 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?	<input checked="" type="radio"/> YES	NO
Will applicant use umbrellas?	<input checked="" type="radio"/> 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?	<input checked="" type="radio"/> YES	NO

ADDITIONAL STIPULATIONS: (Office Use Only)

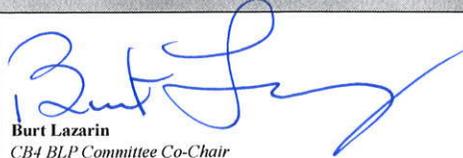
To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.

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:	<input checked="" type="radio"/> Denial unless all stipulations agreed to by applicant/owner are part of the method of operation <input type="radio"/> Denial <input type="radio"/> Approval
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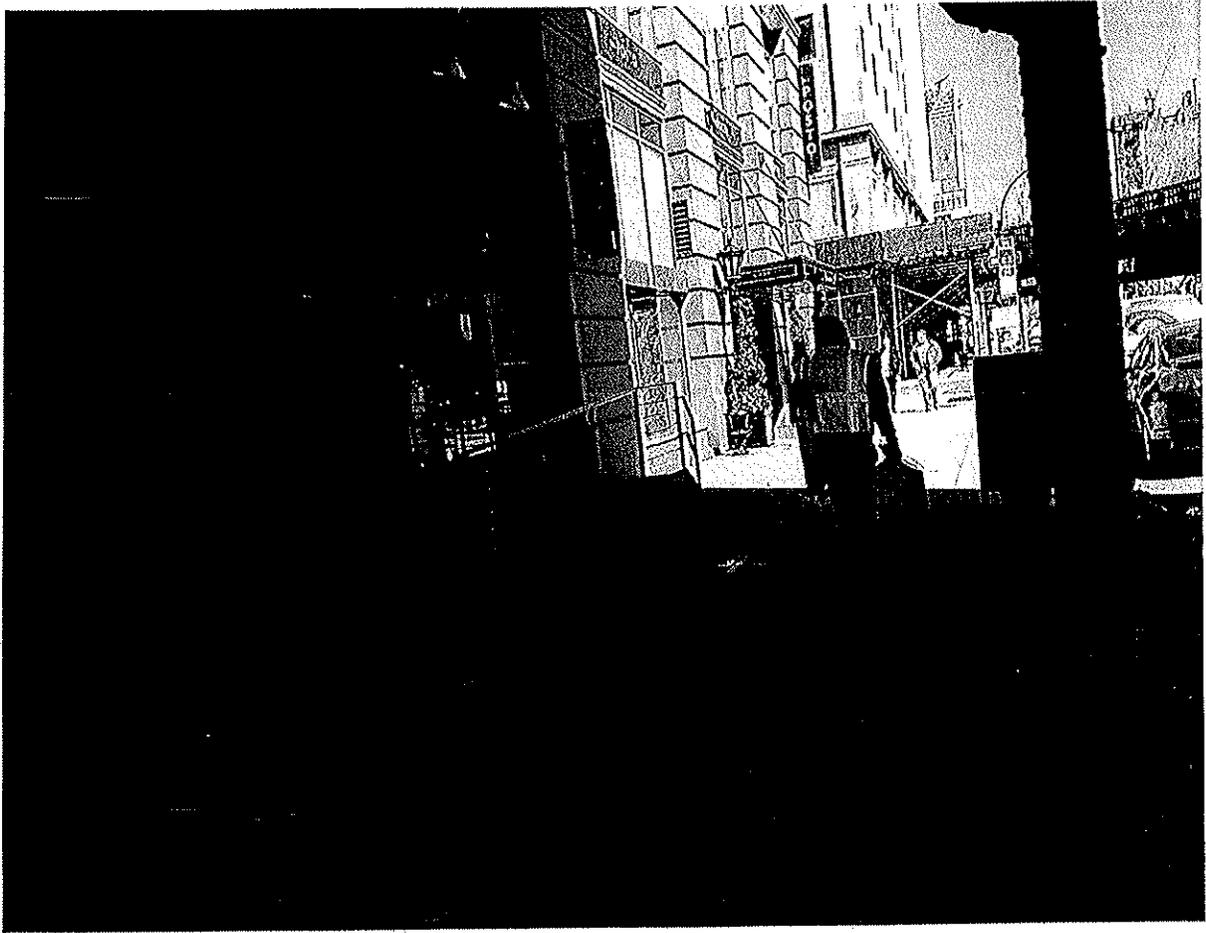
CB4 REPRESENTATIVES

 Nelly Gonzalez <i>CB4 Assistant District Manager</i>	 Frank Holozubiec <i>CB4 BLP Committee Co-Chair</i>	 Burt Lazarin <i>CB4 BLP Committee Co-Chair</i>
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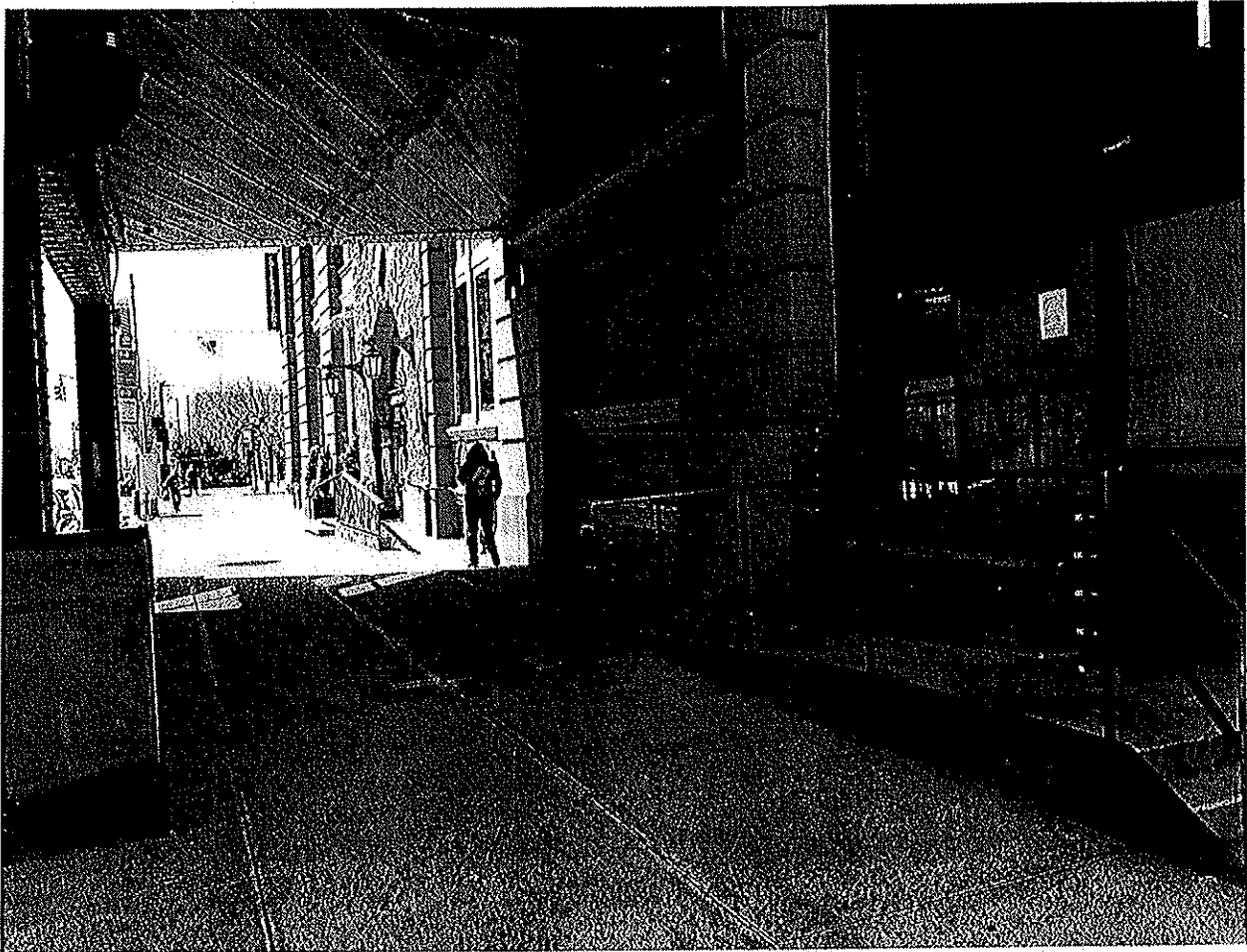
APPLICANT AGREEMENT WITH THE COMMUNITY

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.

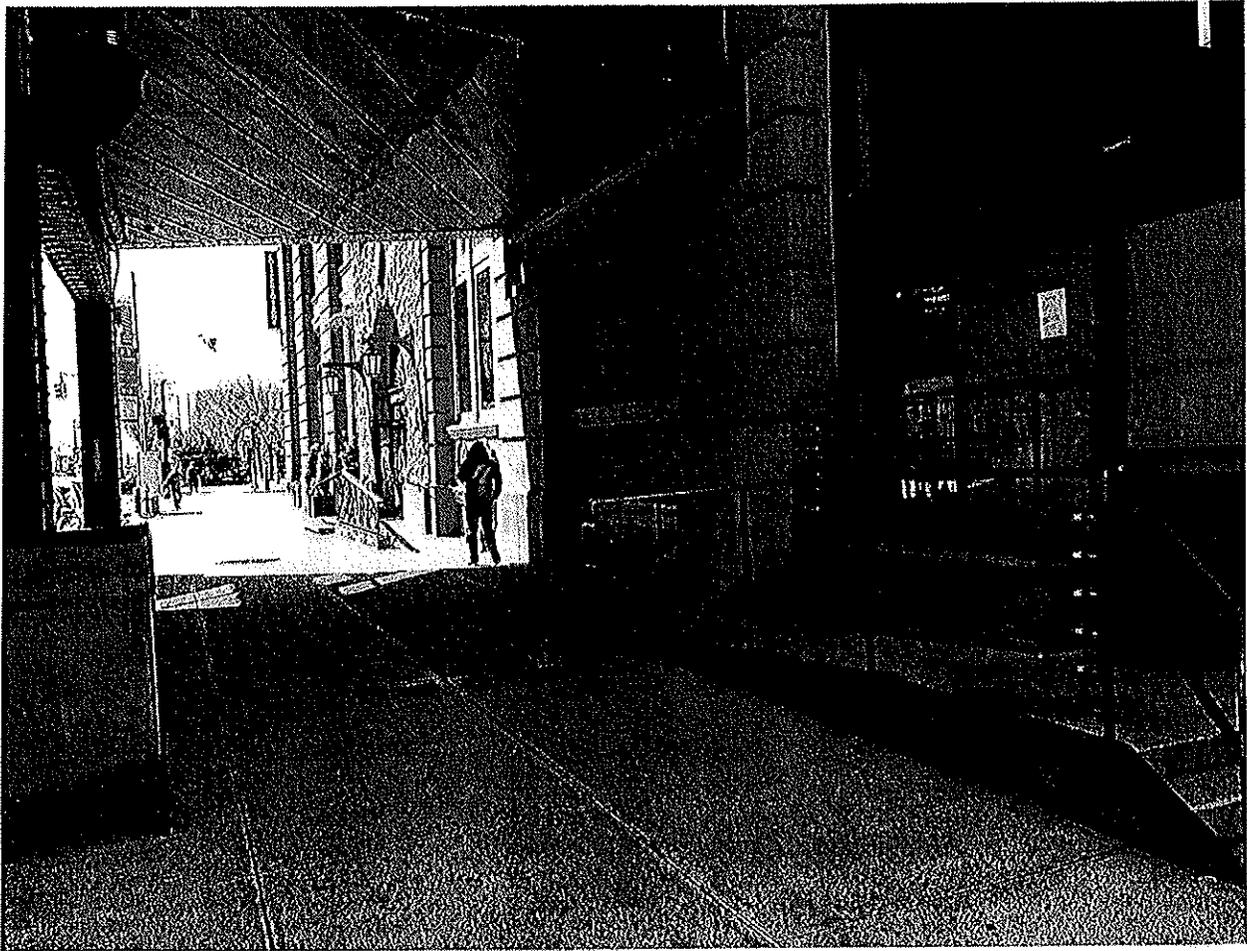
SIGN HERE →	Joshua Berkowitz PRINT NAME OF APPLICANT	 SIGNATURE OF APPLICANT	05/27/2016 6/6/2016 DATE
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Brewster LLC
AS 10th Ave.
NY NY 10011



Brewpon LLC
85 10th Avenue.
NY NY 10011



Brew pon LLC.



LICENSING CENTER
 42 Broadway, 5th floor
 New York, NY 10004
 Monday-Friday: 9:00 a.m.-5:00 p.m.
 Wednesday: 8:30 a.m.-5:00 p.m.
 www.nyc.gov/consumers

SIDEWALK CAFÉ COMPLIANCE CHECKLIST

Applicants must answer a series of questions to demonstrate that the café meets City requirements. Please answer all questions and sign the Checklist.

1. Is there a minimum of 12 feet of sidewalk space for the entire length of the property? Yes No
2. Will your café be at an address zoned for the type of sidewalk café you plan to operate? Yes No

If you answered "No" to question 1 or 2, you cannot apply for a Sidewalk Café license and must stop the application process.

3. Sidewalk Café Business Name: Brewpon LLC

4. Sidewalk Café Type: Enclosed Small Unenclosed Unenclosed
Check all that apply.

5. Application Type: New
 Renewal
 Assignment *(Consent assigned by previous owner more than 90 days before expiration date)*
 Modification *(Changes to an existing consent)*

6. Maximum number of tables in your café: 9

7. Maximum number of chairs in your café: 18

8. Block Number: 687

9. Lot Number: 29

10. Community Board Number: 4

11. Will your café be on the same level as the adjoining sidewalk? *(Unenclosed and Small unenclosed only)* Yes No

12. Is your café in a historic district or in or adjacent to a landmarked building or district? Yes No
- a. If Yes, have you applied to the Landmarks Preservation Commission (LPC) for approval to operate your café? Yes No
- i. If Yes, have you received approval from LPC to operate your café? Yes No

Sidewalk Café Business Information

13. Sidewalk Café Business Address:

85 10th Ave
New York, NY 10011

14. Is there an alternate entrance to your sidewalk café with a different address than your business address? Yes No

If Yes, please enter address:

Sidewalk Café Architect or Engineer Information

15. Full Name of Architect or Engineer:

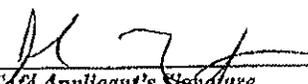
16. Business Name of Architect or Engineer:

17. Address:

18. Telephone Number:

19. Fax Number (optional):

20. E-mail Address:


Sidewalk Café Applicant's Signature

Joshua Berkowitz
Print Name

Managing Member
Title (if any)

4/22/16
Date