

1 **BUSINESS LICNESE & PERMITS COMMITTEE**

Item # 3

2
3 September 5, 2012

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: Walkinstown Inc. d/b/a Molly Mallones**
12 *508 9th Avenue (38/39)*

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15 Dear Chairman Rosen:

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17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new on-premise liquor license for **Walkinstown**
18 **Inc. d/b/a Molly Mallones – 508 9th Avenue (383/9)**, **unless** the following stipulation, agreed to by the applicant, is
19 part of the method of operation for this establishment with a capacity of 222, with 28 tables and 98 seat, one stand-
20 up bar seating 20.

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

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26 Sincerely,

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29 Corey Johnson
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT Walkinstown Inc.		DOING BUSINESS AS (DBA) Molly Mallones		
STREET ADDRESS 508 9 th Avenue		CROSS STREETS West 38 th & 39 th Street		
OWNER	NAME: Michael T. Doyle	ATTORNEY	NAME: Patrick DeLuca	
	PHONE: 914-261-5099		PHONE: 631-264-2700	
	FAX: 845-634-1120		FAX: 631-264-2720	
MANAGER	NAME:	LANDLORD	NAME: Antonio Pecora	
	PHONE:		PHONE:	
	FAX:		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 type="radio"/> Other (Explain): Irish Pub-Restaurant			
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 type="radio"/> Other (Explain): Irish Pub-Restaurant			
License Type:	<input 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?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
		What is/was the name of establishment?	Doyler & Dunnet's/The Horse & Jockey	
		What is/was the address of the establishment?	191-95 S Main St./33 Central Ave	
		What were the dates the applicant was involved with this former premise?	1998-2011/2005-Present	
	<input type="radio"/> Transfer	What is the prior license #?	1250800	
		What is the expiration date on the prior license?	April 30, 2013	
		Are you making any alterations or operational changes?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> 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	10 a.m. – 12 a.m.	10 a.m. – 12 a.m.	10 a.m. – 12 a.m.	10 a.m. – 2 a.m.	10 a.m. – 2 a.m.	10 a.m. – 2 a.m.	10 a.m. – 2 a.m.	10 a.m. – 12 a.m.	
	Music	10 a.m. – 12 a.m.	10 a.m. – 12 a.m.	10 a.m. – 12 a.m.	10 a.m. – 2 a.m.	10 a.m. – 2 a.m.	10 a.m. – 2 a.m.	10 a.m. – 2 a.m.	10 a.m. – 12 a.m.	
	Kitchen	10 a.m. – 12 a.m.	10 a.m. – 12 a.m.	10 a.m. – 12 a.m.	10 a.m. – 2 a.m.	10 a.m. – 2 a.m.	10 a.m. – 2 a.m.	10 a.m. – 2 a.m.	10 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	
		222	28	98	-	1	20	0	0	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="checkbox"/> 1-2	<input type="checkbox"/> 3-4	<input type="checkbox"/> 5+	1 st Floor + Basement		
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A			
Will applicant have bottle service?					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A			
Will you be hosting private parties and promotional events?					<input checked="" type="checkbox"/> YES	NO	N/A	Corporate events & small parties		
Will outside promoters be used?					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	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)					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A			
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					<input checked="" type="checkbox"/> YES	NO	N/A	In the future		
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"/> YES	<input type="checkbox"/> NO	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)?			BACKGROUND	<input checked="" type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ	Traditional Irish Music, Karoke, Open Mic				
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	NO	<input type="checkbox"/> N/A			

OUTDOOR ITEMS				
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="checkbox"/> 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="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.	YES	NO	<input checked="" type="checkbox"/> 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="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.).	YES	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.	YES	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?	YES	NO	<input checked="" type="checkbox"/> N/A	

LOCATION & ZONING				
Primary Zoning District:	Commercial		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?	<input checked="" type="checkbox"/> YES	NO	N/A	
Is the 500 Foot Rule or 200 Foot Rule Triggerred? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input checked="" type="checkbox"/> YES	NO	N/A	
Is a Public Assembly permit required?	YES	NO	N/A	
Are your plans filed with DOB?	YES	NO	N/A	No changes to existing
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			
	# 2			
	# 3			

ADDITIONAL INFORMATION: (Applicant Use)

Bar Stools: 20-25

Front of Restaurant Table stools: 16-20

Dining room Chairs and both seating: Chairs 24/Bench Seating 24

Private room: 20 Bench Seating / 10 chair seating

18 tables in the formal dining room and 10 in the private room

ADDITIONAL NOTES: (Office Use Only)

ADDITIONAL STIPULATIONS: (Office Use Only)

- Applicant will implement safety/security plan and will have at least one security person outside at all times
- Applicant will implement sound report
- Applicant will close French doors at 11 p.m. Friday & Saturday; 10 p.m. Sunday – Thursday
- Applicant may return in 4 months to review hours of operation
- Applicant will end karaoke no later than 12 a.m.
- Applicant will have DJ & Live Music until 1 a.m. Thursday – Fridays
- Applicant will limit bands to 3 pieces
- Applicant will post meeting notice at: 502, 504, 506, 508 9th Ave

- Speakers will be placed on the floor, will not be hung from ceiling.
- Applicant will submit PA, TCO, any letter of no objection. if application
- no signage on sidewalk
- Respond to any complaint ASAP.

Michael T. Doff