

1 **Business License & Permits Committee**

Item #: 01

2
3 July 27, 2016

4
5 Vincent G. Bradley
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: Eden Ballroom LLC**
12 **d/b/a Space Ibiza NY**
13 *637 W. 50th Street(11/12)*
14 *Alteration to On-Premise Liquor License*

15
16 Dear Chairman Bradley:

17
18 Manhattan Community Board 4 (MCB4) recommends **denial** of an Alteration to On-Premise Liquor
19 License application for Eden Ballroom LLC d/b/a Space Ibiza NY – 637 W. 50th Street (11/12), **unless**
20 the attached stipulations, agreed to and signed by the applicant, are part of the method of operation for
21 this establishment with hours of operation 5p.m. – 4a.m. seven days a week; capacity of 1390, 45 tables,
22 231 seats, and 4 stand-up bar with 42 seats and a rooftop capacity of 115, 23 tables, and 115 seats .

23
24 Sincerely,

25
26
27 Delores Rubin
Chair

Burt Lazarin
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

28
29

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
Eden Ballroom LLC		Space Ibiza NY	
STREET ADDRESS		CROSS STREETS	ZIP CODE
637 West 50th Street		11th & 12th Avenue	10019
OWNER <small>(Attach a list of all the people that will be associated listed with the license)</small>	NAME: Anthony Piacquadio	ATTORNEY/ REPRESENTAIVE	NAME: Frank W. Palillo
	PHONE: (212) 247-2447		PHONE: (212) 227-1640
	EMAIL: Antonio@spaceibizany.com		EMAIL: Fwpalillo@gmail.com
MANAGER	NAME:	LANDLORD	NAME: John Petrucelli
	PHONE:		PHONE: (212) 262-6063
	EMAIL:		EMAIL:
APPLICATION TYPE <i>(Check One)</i>			
<input type="radio"/> New	Has applicant owned or managed a similar business?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input type="radio"/> Transfer	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input checked="" type="radio"/> Alteration Change to MO	What is the current license # and expiration date?	1272794 - 8/31/2016	
	<i>Please list/describe the nature of all the changes and attach the plans:</i> Add occasional topless entertainment		
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 checked="" type="checkbox"/> Cabaret <input checked="" type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input checked="" type="checkbox"/> Occasional topless entertainment <input checked="" 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?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
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 type="checkbox"/> 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.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

OPERATIONAL DETAILS (*Closing time will be when establishment is vacated of all patrons)									
HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation								
	Kitchen	AS PER ATTACHED STIPULATION							
	Music								
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	1390	1390	45	231	0	4	42		
OUTSIDE (Other than sidewalk cafe)	115	115	23	115					
SIDEWALK CAFE									
How many floors are there? What is the capacity for each floor?									
How frequently will the owner(s) be at the establishment?					Full time				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	NO	Already exists		
Will applicant have bottle or table service for beverage alcohol?					<input checked="" type="checkbox"/>	NO			
Will you be hosting private; promotional or corporate events?					<input checked="" type="checkbox"/>	NO	Occasionally		
Will outside promoters be used on a regular basis? If yes please describe.					YES	<input checked="" type="checkbox"/>			
Will you have a security plan? If, yes please attach.					<input checked="" type="checkbox"/>	NO			
Will security plan be implemented?					<input checked="" type="checkbox"/>	NO			
Will State certified security personnel be used?					<input checked="" type="checkbox"/>	NO			
Will New York Nightlife Association and NYPD Best Practices be followed?					<input checked="" type="checkbox"/>	NO			
Will applicant be using delivery bicycles? If yes, how many?					YES	<input checked="" type="checkbox"/>			
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	<input checked="" type="checkbox"/>			
Where will delivery bicycles be stored during the day when not in use?									

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="checkbox"/>	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="checkbox"/>	NO	
Is a Public Assembly permit required?	<input checked="" type="checkbox"/>	NO	Already exists
Are your plans filed with DOB?	<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	Community Board 4	
	# 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?			
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="checkbox"/>	NO (917) 494-8848
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="checkbox"/>	NO

BUILDING DESIGN			
State the name and type of business previously located in the space.	Eden Ballroom LLC - Nightclub		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Eden Ballroom LLC
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="checkbox"/> NO	
Will applicant have a vestibule within the establishment?	YES	<input checked="" type="checkbox"/> NO	
Will applicant use a storm enclosure?	YES	<input checked="" type="checkbox"/> 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="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant comply with the NYC noise code?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> 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="checkbox"/> YES	<input type="checkbox"/> 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="checkbox"/> YES	<input type="checkbox"/> NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Already exists
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	<input type="checkbox"/> NO	Already exists
Will the kitchen exhaust system extend to the roof?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will the establishment have an illuminated sign?	YES	<input checked="" type="checkbox"/> NO	
Will the establishment have a canopy extending over the sidewalk?	YES	<input checked="" type="checkbox"/> NO	
Where will the air conditioner be located? What type is it?	Roof		
When was the air conditioner installed?	2014		

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFE			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Rooftop currently exists
Are the floorplans for the outdoor space(s) included?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Will there be no amplified music, as per the law?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Currently exists
Will applicant agree to train staff to encourage a peaceful environment?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Currently exists
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Currently exists

OUTDOOR ITEMS – SIDEWALK CAFÉ		
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	<input checked="" type="checkbox"/>	NO
Will applicant be applying for a sidewalk café now or in the future?	YES	<input checked="" type="checkbox"/>
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	<input checked="" type="checkbox"/>
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO
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), *Continued*

- Stipulations from letter dated 5/14/10 (attached) and application dated 11/12/13 remain in effect

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
(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT <i>Eden Ballroom LLC</i>		DOING BUSINESS AS (DBA) <i>Space NY</i>			
STREET ADDRESS <i>637 West 50th Street</i>		CROSS STREETS <i>B/n 11th & 12th Avenues</i>			
OWNER	NAME: <i>Anthony Piacquadio</i>	ATTORNEY	NAME: <i>Frank Palillo</i>		
	PHONE: <i>(917) 565-5226</i>		PHONE: <i>(212) 227-1640</i>		
	FAX:		FAX: <i>(212) 349-1724</i>		
MANAGER	NAME: <i>Morgan McLean</i>	LANDLORD	NAME: <i>John Petrucci</i>		
	PHONE: <i>(212) 456-2723</i>		PHONE: <i>(212) 262-6063</i>		
	FAX:		FAX:		
DESCRIPTION OF BUSINESS					
Establishment Type:		<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input checked="" type="radio"/> Cabaret <input checked="" 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 checked="" 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			
APPLICATION TYPE <i>(check one)</i>		<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	YES	<input checked="" type="radio"/> 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 #?	<i>1572794</i>	
			What is the expiration date on the current license?	<i>(lic pending)</i>	
<i>Please describe the nature of the alterations and attach the plans</i> <i>Remove westerly section</i> <i>+ add roof top</i>					

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation									
	Music	AS PER THE ATTACHED STIPULATION								
Kitchen										
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	
	1390	1390	45	231	0	4	42	115	23	
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 applicant have bottle service?					YES	NO	N/A	undecided		
Will you be hosting private parties and promotional events?					YES	NO	N/A	occasionally		
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 Cafe 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			
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					YES	NO	N/A			
If you plan to have music, what type(s)?					BACKGROUND	LIVE MUSIC	DJ	Popular Contemporary		
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			
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.					YES	NO	N/A			

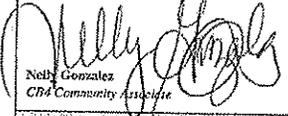
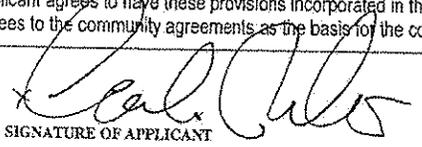
OUTDOOR ITEMS				
Will applicant use the rooftop, rear yard or any outdoor space?	<input checked="" type="radio"/> YES	NO	N/A	Retractable Rooftops
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	<input checked="" type="radio"/> 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.	<input checked="" type="radio"/> 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	<input checked="" type="radio"/> N/A	Dance Floor
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 checked="" type="radio"/> 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.	<input checked="" type="radio"/> YES	NO	N/A	
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	NO	N/A	

LOCATION & ZONING				
Primary Zoning District	M-2-4	Overlay (if Applicable):	N/A	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/> NO	N/A	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO	N/A	currently being amended
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	<input checked="" type="radio"/> NO	N/A	
Is a Public Assembly permit required?	<input checked="" type="radio"/> YES	NO	N/A	
Are your plans filed with DOB?	YES	<input checked="" type="radio"/> NO	N/A	
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 STIPULATIONS: (Office Use Only)

- increase capacity by 147 ppl.
- amplified sound
- no music when windows ^{rooftop} open.
- East wall will be fixed, non-openable.
- rooftop enclosure will close at 10PM
- space will remain in use
- will follow recommendation of sound report
 - limiter - sound will be controlled by sound engineer on-site
- will address complaints as they arise.
 - employees will be directed to do same
- if after repeated complaints it is not possible to address concerns, will reconsider use of outdoor space.



Manhattan Community Board 4 (MCB4) recommends:		<input type="radio"/> Approval <input checked="" type="radio"/> Denial unless all agreed to by applicant is part of the method of operation <input type="radio"/> Denial
CB4 REPRESENTATIVES		
 Nelly Gonzalez CB4 Community Associate	 Lisa Daglian CB4 BLP Committee Co-Chair	 Paul Seres 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	11-12-13 DATE

* Paul Seres Voted PNE



JOHN WEIS
Chair

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

CITY OF NEW YORK
MANHATTAN COMMUNITY BOARD FOUR
330 West 42nd Street, 26th floor New York, NY 10036
tel: 212-738-4536 fax: 212-847-9512
www.nyc.gov/mcb4

May 14, 2010

Dennis Rosen
Chairman
New York State Liquor Authority
84 Holland Avenue, 2nd floor, A-Wing
Albany, NY 12208

Re: Eden Ballroom LLC
637 West 50th Street (11th/12th)

Dear Chairman Rosen:

Manhattan Community Board 4 (MCB4) recommends denial of a new full liquor license for Eden Ballroom LLC, unless the following stipulations, agreed to by the applicant, are part of their method of operation:

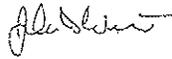
- 1) Hours of operation for serving alcohol in lounge and upstairs dance floor will be no earlier than 5:00 pm and no later than 4:00 am, 7 days per week.
- 2) Hours of operation for café will be 24 hours per day but alcohol will be served no earlier than 8:00 am and no later than 4:00 am, 7 days per week and will be within the hours legislated by the NY SLA.
- 3) The establishment will have a total capacity of no more than 1,240 with no more than 38 tables and 250 seats. Total capacity of the 24 hour café is 74, located on the ground floor. Total capacity of the lounge, located on the ground floor, is 266. Total capacity of the night club upstairs is 900.
- 4) There will be no more than three standing only bars in the establishment. One located in the lounge on the ground floor and two located upstairs in the nightclub.
- 5) The applicant agrees to never use outside promoters.
- 6) The applicant will not distribute advertisement fliers around the exterior of the establishment.

- 7) The applicant agrees to employ 25 New York licensed guards and will use between 15-25 during hours of operation of the lounge and nightclub, dependent upon the size of the crowd.
- 8) The applicant agrees to follow the best practices as outlined by the New York Nightlife Association which was developed in cooperation with the New York City Police Department.
- 9) A certified soundproofing engineer will recommend and implement soundproofing. The recommendations of the sound engineer include, but are not limited to, decibel restrictors/controls and sound absorbing material. A copy of the full report will be submitted with the application and is attached to this letter. A double door entry way will be employed to minimize sound escaping from the establishment.
- 10) To ensure that neighbors are not negatively impacted by sound emanating from the sidewalk in front of the establishment due to the gathering of people, the applicant's security personnel will monitor the area and encourage patrons to either enter the establishment or leave the area.
- 11) There will be absolutely no use of delivery bikes.
- 12) Only soft background music will be played in café and lounge and all doors and windows will be kept closed when music is being played. The night club will have a dj and also live music. Applicant has stated they will not allow hip hop music. The applicant further stated they will not allow events that attract a dangerous element to the neighborhood.
- 13) There will be no French doors or windows that open to the street front.
- 14) Kitchen exhaust will exit through ventilation above the highest floor of surrounding buildings and be constructed in a manner to not disturb neighboring residents or offices. Additionally it will be compliant with NY DOB code.
- 15) Applicant will never install a storm vestibule enclosure as they have the double door 'soundtrap' vestibule.
- 16) The applicant will proactively clean the sidewalk and area immediately outside of the establishment and club-related trash on neighboring properties.
- 17) No outdoor sidewalk space will be used for queuing of patrons waiting to enter the establishment. Applicant stated queuing will occur inside so there will be no velvet rope lines.
- 18) The applicant will make a concerted effort to hire employees from the community.

- 19) Applicant will provide 24 hour contact details to CBA and pertinent community representatives.
- 20) Applicant will arrange for representatives to regularly attend Precinct Council, Block Association and Community Board meetings to address and resolve any community problems that may arise from this establishment.
- 21) There will be no use of any outdoor spaces (rooftop, patio or sidewalk café) at this time for the sale or consumption of alcoholic beverages.
- 22) The applicant is simultaneously applying to the NYCDCA to obtain a cabaret license which will be incorporated into their method of operation of the liquor license. The cabaret license will only permit dancing in the upstairs night club section of the establishment.

Eden Ballroom LLC has not yet determined the name of its establishment. The complex will consist of the café and lounge on the first floor and the night club (cabaret) on the second floor. The applicant has stated they have designed the café into the facility to control the number of patrons exiting at one time by providing a post closing venue. Entrance to the lounge and nightclub will be on West 50th Street with the café entrance located on the corner of West 50th and Westside Highway. A signed copy of the stipulations agreed to by the applicant is enclosed.

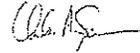
Sincerely,



John Weis
Chair
Manhattan Community
Board 4



John Owens
Co-Chair
Business License & Permits
Committee - North



Chuck Spence
Co-Chair
Business License & Permits
Committee - North

1 **Business License & Permits Committee**

Item #: 02

2
3 July 27, 2016

4
5 Vincent G. Bradley
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: Sonny Lou Inc.**
12 **d/b/a Pepe Giallo**
13 *195 10th Avenue (21/22)*
14 *New Restaurant Wine and Beer License*

15
16 Dear Chairman Bradley:

17
18 Manhattan Community Board 4 (MCB4) recommends **denial** of a New Restaurant Wine and Beer
19 License application for Sonny Lou Inc. d/b/a Pepe Giallo – 195 10th Avenue (21/22), **unless** the attached
20 stipulations, agreed to and signed by the applicant, are part of the method of operation for this
21 establishment with hours of operation 11a.m. – 11p.m. Sunday – Thursday and 11a.m. – 12a.m. Friday -
22 Saturday; capacity of 74, 27 tables, 64 seats, and 1 service-only bar.

23
24 Sincerely,

25
26
27 Delores Rubin
Chair

Burt Lazarin
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

28
29

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
SONNY LOU INC		PEPE GIALLO	
STREET ADDRESS		CROSS STREETS	ZIP CODE
195 10TH AVENUE		W 21ST + W 22ND STREETS	10011
OWNER <i>(Attach a list of all the people that will be associated listed with the license)</i>	NAME:	GASPARE VILLA	NAME: MICHAEL KELLY
	PHONE:	212-242-6055	PHONE: 914-740-3580
	EMAIL:	GASPAREVILLA@GMAIL.COM	EMAIL: KELLYMLK136@GMAIL.COM
MANAGER	NAME:	ANNA DASILVA	NAME: 195 10TH AVE LLC
	PHONE:	212-242-6055	PHONE:
	EMAIL:		EMAIL:
APPLICATION TYPE <i>(Check One)</i>			
<input checked="" type="checkbox"/> 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?		PEPE GIALLO 253 10TH AVENUE
	What were the dates applicant was involved with this former premise?		1998 - PRESENT
<input type="checkbox"/> 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 type="checkbox"/> 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 type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer		
ESTABLISHMENT TYPE	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	<input checked="" type="radio"/> NO	WHEN APPLICANT IS READY
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="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.	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	11am - 11pm	11am - 11pm	11am - 11pm	11am - 11pm	11am - 12am	11am - 12am	11am - 11pm
	Kitchen	11am - 10pm	11am - 10pm	11am - 10pm	11am - 10pm	11am - 11pm	11am - 11pm	11am - 10pm
	Music	11am - 11pm	11am - 11pm	11am - 11pm	11am - 11pm	11am - 12am	11am - 12am	11am - 11pm
If you plan to have music, what type(s)? (Circle all that apply)			<input checked="" type="radio"/> BACKGROUND	<input type="radio"/> LIVE MUSIC	<input type="radio"/> DJ	<input type="radio"/> JUKE BOX	<input type="radio"/> 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	74	74	27	64	1	0	0
OUTSIDE <i>(Other than sidewalk café)</i>	N/A						
SIDEWALK CAFÉ	N/A						

How many floors are there? What is the capacity for each floor? **2 FLOORS (BASEMENT AND 1ST FLOOR)**

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 NO

Will applicant have bottle or table service for beverage alcohol? YES NO

Will you be hosting private; promotional or corporate events? YES NO

Will outside promoters be used on a regular basis? If yes please describe. YES NO

Will you have a security plan? If, yes please attach. YES NO

Will security plan be implemented? YES NO

Will State certified security personnel be used? YES NO

Will New York Nightlife Association and NYPD Best Practices be followed? YES NO N/A

Will applicant be using delivery bicycles? If yes, how many? YES NO 2

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

Where will delivery bicycles be stored during the day when not in use? **ON STREET OR AGAINST OUR WALL**

LOCATION & ZONING		
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/> NO
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO
Are your plans filed with DOB?	YES	<input checked="" type="radio"/> 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	SEE ATTACHED
	# 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?		
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"/> YES	NO 646-552-9587
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	<input checked="" type="radio"/> YES	NO WE WILL BE TAKING THE EXISTING STAFF WITH US

BUILDING DESIGN			
State the name and type of business previously located in the space.	PRINTED MATTER INC / RESTAURANT		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	<input checked="" type="radio"/> NO	
Do you plan any changes to the existing façade? If yes, please describe.	<input checked="" type="radio"/> YES	NO	FRENCH DOORS AND OUR SIGN
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	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	NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	NO	
Will the establishment have any of the following: (circle all that apply)	<input checked="" type="radio"/> FRENCH DOORS	<input type="radio"/> GARAGE DOORS	<input type="radio"/> 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	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	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	NO	
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	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	AWNING
Where will the air conditioner be located? What type is it?	ON ROOF		
When was the air conditioner installed?	NOT INSTALLED YET		

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Are the floorplans for the outdoor space(s) included?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will there be no amplified music, as per the law?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input type="radio"/> YES	<input type="radio"/> NO	N/A

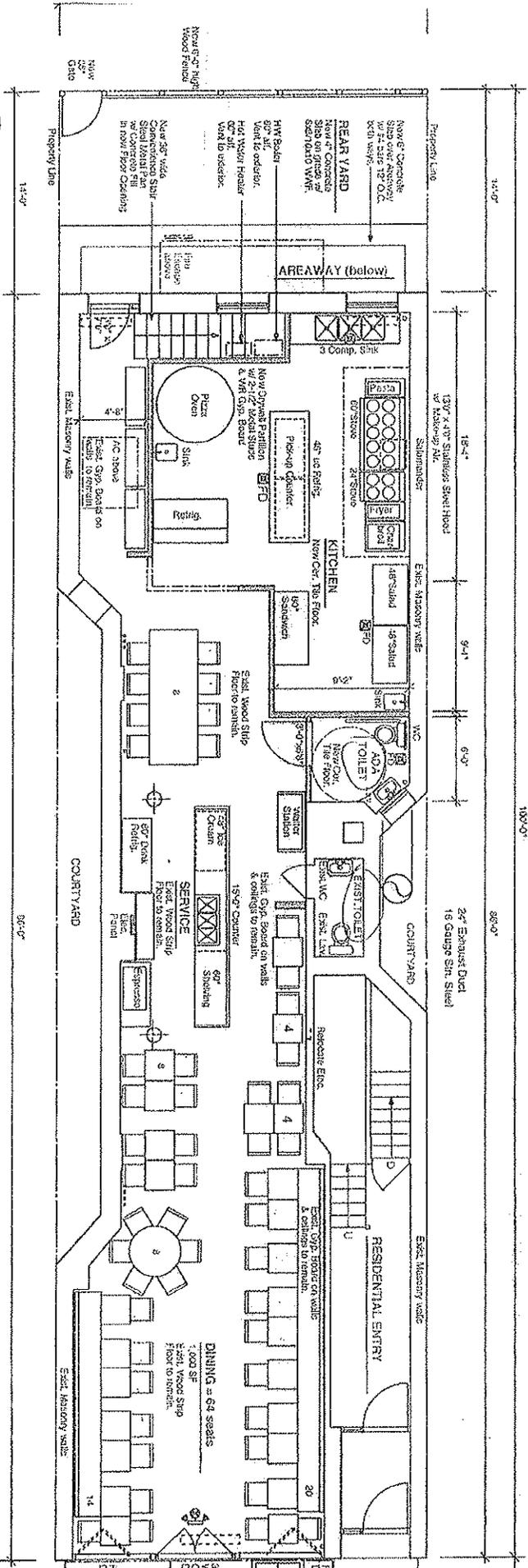
OUTDOOR ITEMS – SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	N/A
Will applicant be applying for a sidewalk café now or in the future?	YES	<input checked="" type="radio"/>	
Is applicant in this application seeking to include a sidewalk café in its liquor license?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

ADDITIONAL STIPULATIONS: (Office Use Only)

- Any storm enclosure will extend no more than 18" from building facade

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.

Sony Loos Inc
 195 f 10th Ave
 NY NY 10011



1st FLOOR PLAN
 NOTES: SEPARATE APPLICATION FOR FIRE EXTINGUISHING SYSTEM

Sonny Lou Inc

PEPE GIALLO TO GO

253 10 AVENUE @ 25TH STREET
212-242-6055

PANINI

GRILLED VEGETABLES & MOZZARELLA, EXTRA VIRGIN OLIVE OIL	9
FRESH TOMATO, MOZZARELLA, ARUGULA & BASIL	9
PROSCIUTTO DI PARMA, TOMATO, MOZZARELLA & ARUGULA	10
EGGPLANT PARMIGIANA WITH MELTED MOZZARELLA	11
AIR CURED BEEF, GOAT CHEESE, ARUGULA & TRUFFLE OIL	11
GRILLED CHICKEN, ROASTED PEPPERS & PESTO SAUCE	11
GRILLED CHICKEN, CRISPY BACON & GUACAMOLE	11
SLOW-COOKED PULLED PORK, CARMELIZED ONIONS & PROVOLONE	11
**ANY OF THE ABOVE ON HOMEMADE FOCACCIA ADD	1
PRESSED HOT PANINI WILL DELAY YOUR ORDER	

INSALATE

MIXED GREENS & TOMATO	7
PEPE GIALLO CAESAR	9
APPLE, GOAT CHEESE, TOMATO OVER MIXED GREENS	10
GREEK SALAD: FETA, TOMATO, CUCUMBER, & B. OLIVES	10
ORANGE, GOAT CHEESE, TOMATO OVER GREENS	10
PEAR, ARUGULA, GORGONZOLA & WALNUTS	11
TUNA, WHITE BEANS, POTATO, TOMATO, ARUGULA & BLACK OLIVES	12
GRILLED SHRIMP, CORN, HEART OF PALM OVER GREENS	12
**ANY OF THE ABOVE WITH GRILLED CHICKEN ADD	5
**WITH SALMON	6
** WITH SHRIMP	7

ANTIPASTI

EGGPLANT PARMIGIANA	11
ANTIPASTO MISTO	11
SAUTEED CALAMARI WITH CHOPPED TOMATO & BLACK OLIVES	12
BURRATA CHEESE WITH ROASTED CHERRY TOMATOES	12

CONTORNI

SPINACH SAUTEED IN GARLIC OIL	7
BROCCOLI SAUTEED IN GARLIC OIL	7
GARLIC MASHED POTATOES	7
MIXED SEASONAL VEGETABLES IN GARLIC OIL	8

PASTE

PENNE WITH TOMATO & BASIL OR BUTTER & PARMIGIANO	8
FUSILLI WITH SEASONAL VEGETABLES IN GARLIC OIL	9
PENNE VODKA WITH PANCETTA (not vegetarian)	11
CAPELLINI, ZUCCHINI, TOMATO, GOAT CHEESE, B. OLIVES	12
SPAGHETTI BOLOGNESE OR PESTO	14
RIGATONI, EGGPLANT, MOZZARELLA IN TOMATO & BASIL	14
PAPPARDELLE WITH SAUSAGE IN SPICY TOMATO SAUCE	15
GNOCCHI GORGONZOLA	15
RIGATONI WITH SALMON, MUSHROOM IN CREAM SAUCE	15
FETTUCCINE CHICKEN & MUSHROOM IN ALFREDO SAUCE	15
FUSILLI NORCINA, SAUSAGE & PARSLEY IN CREAM SAUCE	15
PENNE WITH MEATBALLS IN SPICY TOMATO SAUCE	16

SECONDI

LEMON CHICKEN WITH SIDE OF BROCCOLI	13
POACHED OR GRILLED SALMON WITH SIDE OF BROCCOLI	14
CHICKEN MILANESE WITH ARUGULA & CHOPPED TOMATO	14
POLLO AL BALSAMICO WITH ROSEMARY & SPINACH	15
COD FISH LIVORNESE WITH GARLIC MASHED POTATOES & SPINACH	17
VEAL SCALLOPINE LEMON & CAPERS WITH GARLIC MASHED POTATOES	19
BRANZINO OR ORATA WITH SPINACH SAUTEED IN GARLIC OIL	20

PEPE GIALLO'S LUNCH SPECIAL

FROM 11:00 A.M. TO 4:00 P.M. \$10.00

CHOICE OF:

SOUP OF THE DAY OR ORGANIC MIXED GREENS & TOMATO SALAD

CHOICE OF:

PROSCIUTTO PANINO WITH MOZZARELLA & ARUGULA

GRILLED VEGETABLES PANINO WITH MOZZARELLA & VIRGIN OLIVE OIL

FUSILLI WITH CHOPPED TOMATOES AND FRESH ARUGULA

PENNE TOMATO, BASIL & MOZZARELLA

BIBITE

HOT TEA	1.75	ESPRESSO	3.00
DBL. ESPRESSO	3.75	CAPPUCCINO	3.50
LATTE	3.50	ICE CAPPUCCINO	4.00
ICE COFFEE	3.00	ICE TEA	1.75
ICE LEMONADE	1.75	CHINOTTO	2.50
ARANCIATA	2.50	LIMONATA	2.50
COCA COLA	2.00	MINERAL WATER	2.50/5.00

NO DIET COKE - NO SKIM MILK - NO DECAF COFFEE

1 **Business License & Permits Committee**

Item #: 03

2
3 July 27, 2016

4
5 Vincent G. Bradley
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: New Wineskins, Inc.**
12 **d/b/a Oramen**
13 *579 6th Avenue, Fl. 1*
14 *New Restaurant Wine and Beer License*

15
16 Dear Chairman Bradley:

17
18 Manhattan Community Board 4 (MCB4) recommends **denial** of a New Restaurant Wine and Beer
19 License application for New Wineskins, Inc. d/b/a Oramen – 579 6th Avenue Fl. 1, **unless** the attached
20 stipulations, agreed to and signed by the applicant, are part of the method of operation for this
21 establishment with hours of operation 10:30a.m. – 10:30p.m. seven days a week; capacity of 100, 16
22 tables, 46 seats, 1 service-only bar and 1 stand-up bar with 6 seats

23
24 Sincerely,

25
26
27 Delores Rubin
Chair

Burt Lazarin
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

28
29

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
New Wineskins, Inc.		Oramen	
STREET ADDRESS		CROSS STREETS	ZIP CODE
579 6th Avenue, FL 1, New York, New York			10011
OWNER <i>(Attach a list of all the people that will be associated listed with the license)</i>	NAME: Park, Jung Woon	ATTORNEY/ REPRESENTATIVE	NAME: Cho, Sungchan
	PHONE: 917 923 1105		PHONE: 718 321 2577
	EMAIL: lipark777@gmail.com		EMAIL: mac4326@ymail.com
MANAGER	NAME: Michael Choi	LANDLORD	NAME: 579 Hana Corp.
	PHONE: 646 468 5140		PHONE: 718 352 0214
	EMAIL: michaelchoi.ny@gmail.com		EMAIL:
APPLICATION TYPE (Check One)			
<input checked="" type="checkbox"/> 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?	JK Takumi Inc. 517 Third Ave, New York, NY	
	What were the dates applicant was involved with this former premise?	January 2014	
<input type="checkbox"/> 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 type="checkbox"/> 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 type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input checked="" type="radio"/> 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	<input checked="" type="radio"/>	after board meeting
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="radio"/>	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	<input checked="" type="radio"/>	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	YES	<input checked="" type="radio"/>	

OPERATIONAL DETAILS (*Closing time will be when establishment is vacated of all patrons)									
HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	_____	10:30 - 3:00 ⁱⁿ	_____	5:00 - 10:30 dinner ⁱⁿ	_____	_____	_____	_____
	Kitchen	_____	10:00 to	10:30pm	_____	_____	_____	_____	_____
	Music	no music							
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	100	50 to 55	16	46	1	1	6		
OUTSIDE (Other than sidewalk café)	none								
SIDEWALK CAFÉ	none								
How many floors are there? What is the capacity for each floor?					one floor , as above				
How frequently will the owner(s) be at the establishment?					presence during operation hour				
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"/>	NO	<input type="radio"/>	
Will you be hosting private; promotional or corporate events?					YES	<input checked="" type="radio"/>			
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?					YES	<input checked="" type="radio"/>			
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	<input checked="" type="radio"/>			
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 type="radio"/>	not certain
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/>	No	Yes it does
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/>	
Are your plans filed with DOB?	YES	<input checked="" type="radio"/>	

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	100/200 West 15th Street Block Association: Stanley Bulbach	
	# 2	100 West 16th St. Block Associations: Elizabeth Zechella	
	# 3	200 West 16th Street Block Association: Will Rogers	
	# 4	300 West 18/19 Street Block Association: Cheryl Kupper	
	# 5	100 West 19th/20th/21st/22nd Streets Block Association: Bill Borock attached email contact lists	
Please provide dates when applicant met with the groups listed above.		We sent an email to inform them of our application	
Who was your contact person at each group you met with?		please refer to the email contact lists	
When did applicant post the notice that was provided?		May 25, 2016	
Where did applicant post the notice that was provided?		at the 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
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.	Ave six Food Court		
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	Three Stories Inc.
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?	YES	<input checked="" 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?	Yes	<input checked="" type="radio"/> NO	
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> 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?	Central air conditioner on the roof top		
When was the air conditioner installed?	During renovation before opening to the public		

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFE			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Are the floorplans for the outdoor space(s) included?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be no amplified music, as per the law?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
if amplified sound is played inside the establishment, will windows and doors be closed?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant agree to train staff to encourage a peaceful environment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	

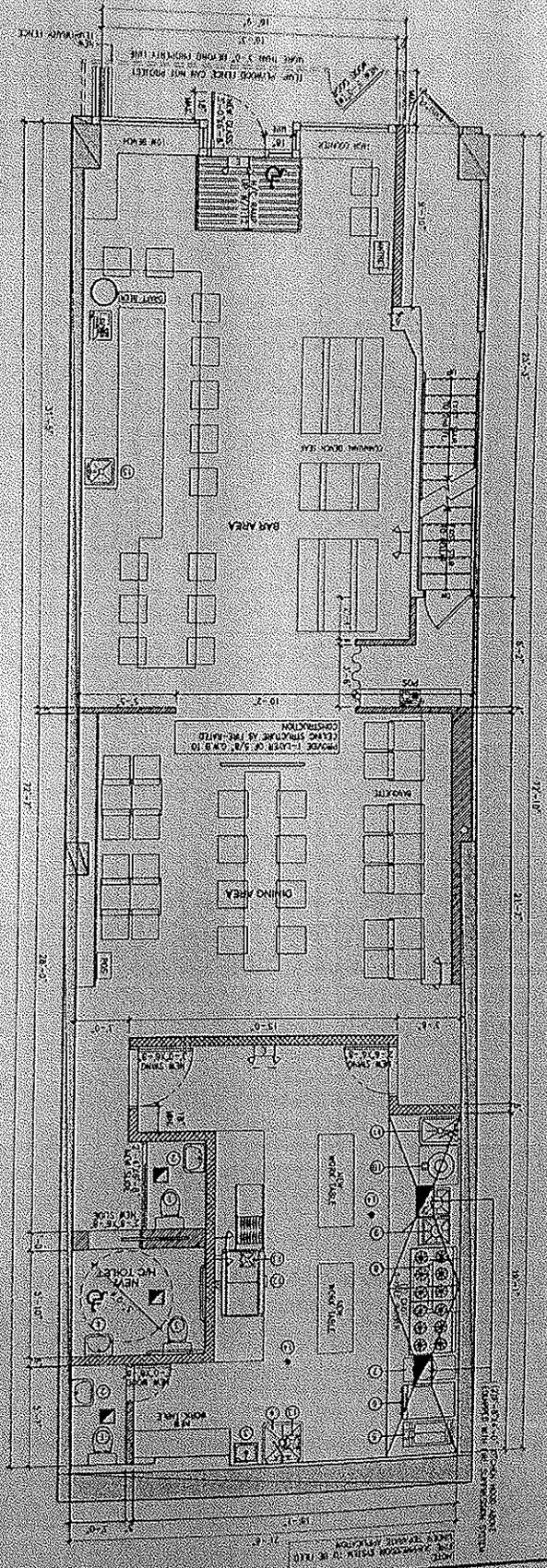
OUTDOOR ITEMS – SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant be applying for a sidewalk café now or in the future?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will applicant mark the perimeter of the café on the sidewalk?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will the sidewalk café not provide standing space for drinking or smoking?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will all furniture be stored inside between December 21 st and March 21 st , and any other day when it rains or snows?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
Will applicant use umbrellas?	<input type="radio"/> YES	<input type="radio"/> NO	n/a
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 type="radio"/> YES	<input type="radio"/> NO	n/a

ADDITIONAL STIPULATIONS: (Office Use Only)

- Hours of operation will be 10:30 a.m. to 10:30p.m. seven days a week
- Will operate on first floor of premises only (no public use whatsoever of upper floors)
- No music or amplified sound whatsoever
- Will not operate as a club
- Will keep front of sidewalk neat and swept
- If air conditioning system is noisy, and upon request of CB4, applicant will employ certified sound engineer and follow engineer's suggestions to ameliorate noise
- Will not apply for sidewalk cafe now or in the future

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.

1 CONSTRUCTION PLAN @ 1ST FLOOR



枝豆
Edamame

A1

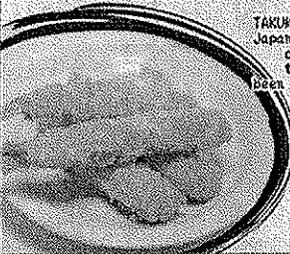


Steamed green soybeans

4.50

エビテンぷら
Shrimp Tempura

A2



TAKUMI styled Japanese dish of shrimp that have been battered and deep fried

7.95

たこわさび
Tako Wasabi

A3

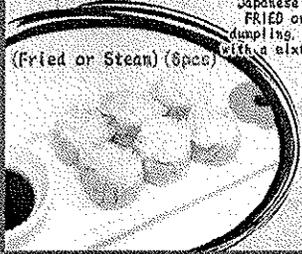


wheat flour-based batter and cooked in a special takoyaki pan. It is typically filled with minced or sliced octopus

4.95

エビシューマイ
Shrimp Shumai

A5

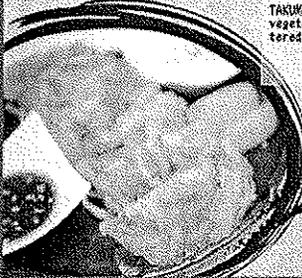


Japanese styled FRIED or STEAM dumpling, filled with a mixture of shrimp
(Fried or Steam) (6pcs)

5.50

やまい せんぷら
Vegetable Tempura

A4

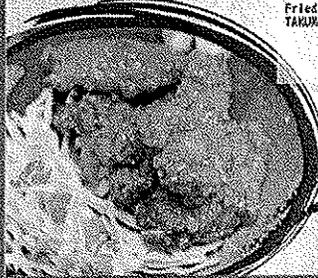


TAKUMI styled Japanese dish of vegetable that have been battered and deep fried

7.50

チキンウイング
TAKUMI Chicken Wings

A6

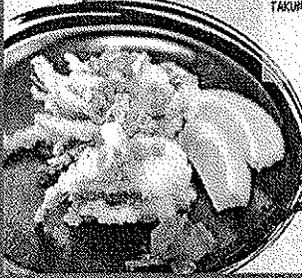


Fried chicken wings (4pcs) with TAKUMI's special pepper sauce

7.50

フライド げっ
Fried Calamari Leg

A7

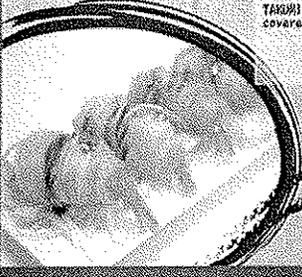


TAKUMI styled fried squid leg

7.50

フライドジャンボエビ
Fried Jumbo Shrimp

A17

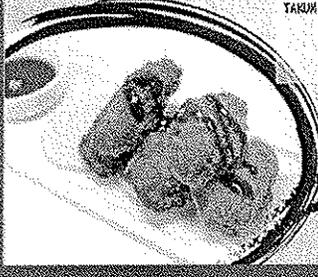


TAKUMI crispy fried shrimp covered with potato noodle

7.50

ぱりっぴ かき
Crispy Oyster

A10



TAKUMI styled fried oyster

7.50

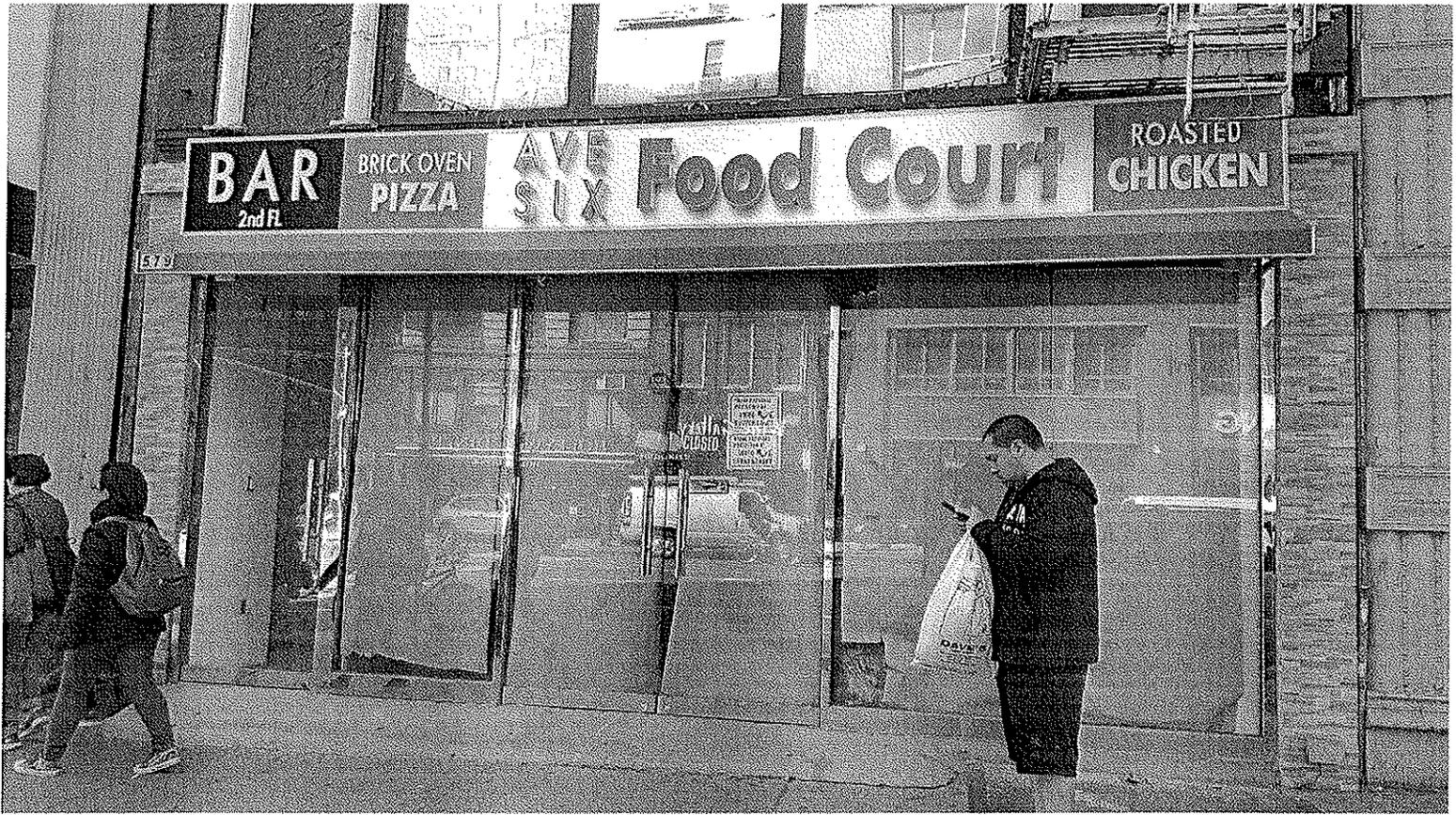
野菜コロッケ
Vegetable Croquette

A18



Crispy panko-crust croquette with mashed potato vegetables with tonkatsu sauce

7.50



1 **Business License & Permits Committee**

Item #: 04

2
3 July 27, 2016

4
5 Vincent G. Bradley
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: Three Brothers Baking Inc.**
12 **d/b/a Pierside Cafe**
13 *1 Pier 78 (38/39)*
14 *New On-Premise Liquor License*
15

16 Dear Chairman Bradley:

17
18 Manhattan Community Board 4 (MCB4) recommends **denial** of a New On-Premise Liquor License
19 application for Three Brothers Baking Inc. d/b/a Pierside Café – 1 Pier 78 (38/39), **unless** the attached
20 stipulations, agreed to and signed by the applicant, are part of the method of operation for this
21 establishment with hours of operation 7am. to 12a.m. seven days a week; capacity of 74, 6 tables, 24
22 seats, and 1 service-only bar, and an outdoor space closed no later than 11p.m. nightly with a capacity of
23 74, 13 tables, 52 seats and 1 service-only bar
24

25 Sincerely,

26
27
28 Delores Rubin
Chair

Burt Lazarin
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

29
30

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
Three Brothers Baking Inc.		Pierside Cafe	
STREET ADDRESS		CROSS STREETS	ZIP CODE
1 Pier 78		W38TH & W39TH STREET	10018
OWNER <small>(Attach a list of all the people that will be associated/listed with the license)</small>	NAME: Siraj B. Himani	ATTORNEY/ REPRESENTATIVE	NAME: Jacob T. Fogel, Esq.
	PHONE: 212-220-2848		PHONE: 917-974-2782
	EMAIL: fhimani@gmail.com		EMAIL: jayfogel@aol.com
MANAGER	NAME: Salmann S. Himani	LANDLORD	NAME: JMB PROPERTY LLC
	PHONE: 917-536-3918		PHONE: 212-564-2894
	EMAIL: salhimani1@gmail.com		EMAIL:
APPLICATION TYPE (Check One)			
<input checked="" 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?	Docklands Maco-451 12th Ave Aka Pier 79 Ferry House Cafe-Pier 11 South St Seaport	
	What were the dates applicant was involved with this former premise?	2011	
<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
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="radio"/> Alteration	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
METHOD OF OPERATION			
TYPE OF ALCOHOL	<input checked="" type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
ESTABLISHMENT TYPE	<input type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	<input checked="" type="radio"/> NO	
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="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.	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* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	7am-12am	7am-12am	7am-12am	7am-12am	7am-12am	7am-12am	7am-12am
	Kitchen	7am-12am	7am-12am	7am-12am	7am-12am	7am-12am	7am-12am	7am-12am
	Music	7am-12am	7am-12am	7am-12am	7am-12am	7am-12am	7am-12am	7am-12am

If you plan to have music, what type(s)? (Circle all that apply)

BACKGROUND
 LIVE MUSIC
 DJ
 JUKE BOX
 KARAOKE

561

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	74	74	6	24	1	0	0
OUTSIDE (Other than sidewalk café)	74	74	13	52	1	0	0
SIDEWALK CAFÉ	N/A	N/A	N/A	N/A			

How many floors are there? What is the capacity for each floor? ONE (1)

How frequently will the owner(s) be at the establishment? DAILY

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing? YES

Will applicant have bottle or table service for beverage alcohol? YES

Will you be hosting private; promotional or corporate events? YES

Will outside promoters be used on a regular basis? If yes please describe. YES

Will you have a security plan? If, yes please attach. YES

Will security plan be implemented? YES NO N/A

Will State certified security personnel be used? YES NO N/A

Will New York Nightlife Association and NYPD Best Practices be followed? NO

Will applicant be using delivery bicycles? If yes, how many? YES

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

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?	YES	<input checked="" type="radio"/>	LETTER OF NO OBJECTION
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/>	
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?			
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES	NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES	NO

BUILDING DESIGN			
State the name and type of business previously located in the space.	Three Brother Inc. Pierside Cafe		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	<input checked="" 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?	YES	<input checked="" 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?	YES	<input checked="" type="radio"/> NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> 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?	<input checked="" type="radio"/> 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?	<input checked="" type="radio"/> 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	<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?	YES	NO	Music will be background music only.
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	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?			
When was the air conditioner installed?			

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	Patio is used by patrons waiting to get on the Citysightseeing Tourist boats.
Are the floorplans for the outdoor space(s) included?	YES	<input checked="" type="radio"/> NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	<input checked="" type="radio"/> NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be no amplified music, as per the law?	<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	There will not be any amplified music.
If amplified sound is played inside the establishment, will windows and doors be closed?	<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	There will not be any amplified sounds.
Will applicant agree to post signs outside asking customers to respect the neighbors'?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant agree to train staff to encourage a peaceful environment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	<input checked="" type="radio"/> NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	

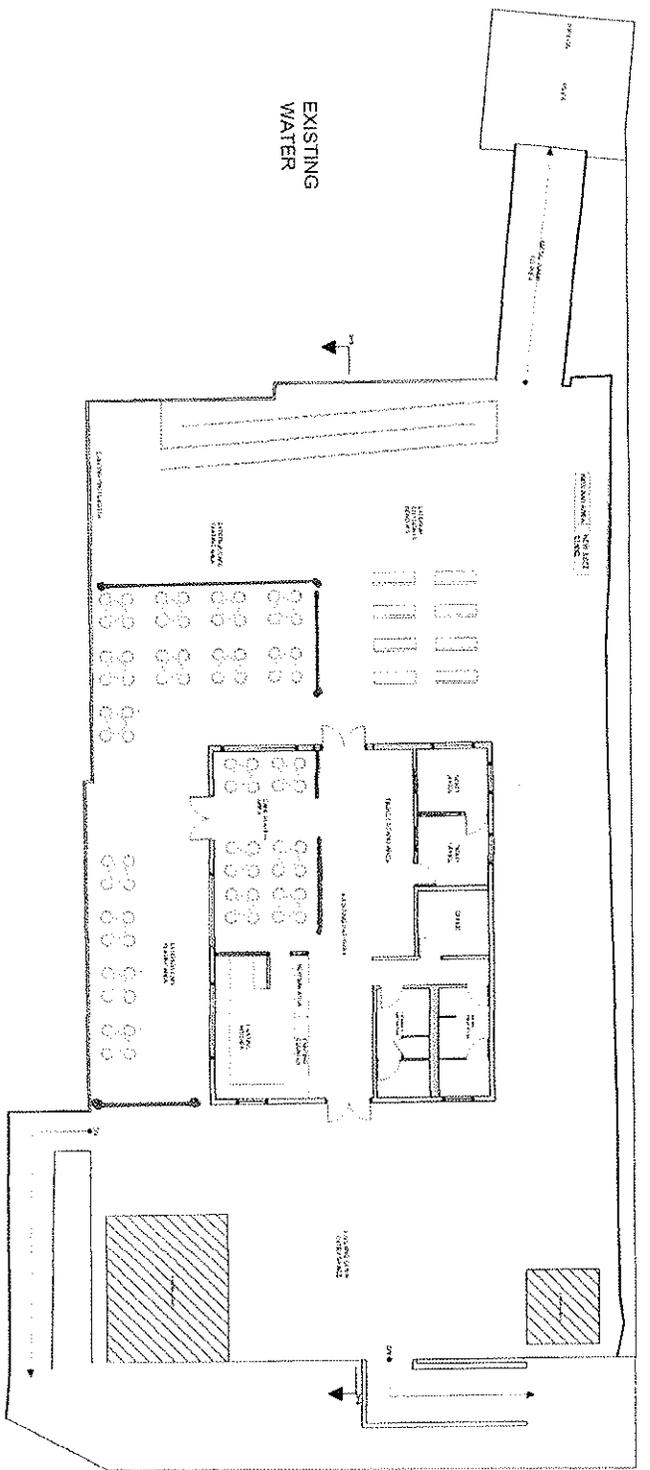
SA

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

ADDITIONAL STIPULATIONS: (Office Use Only)

- No music or amplified sound whatsoever at any time in outdoor space
- Outdoor space will be closed and vacated of all patrons no later than 11p.m. nightly

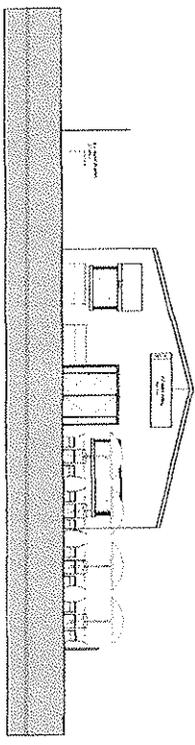
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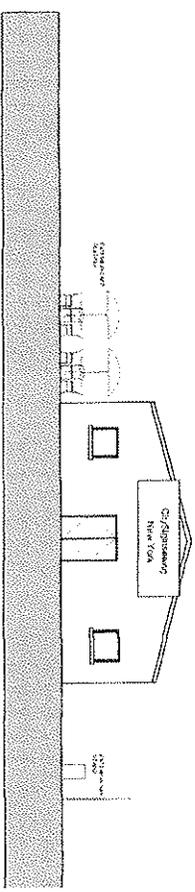
EXISTING WATER

12th Avenue

SITE PLAN
SCALE: 1/8" = 1'-0"



REAR ELEVATION
SCALE: 1/8" = 1'-0"



FRONT ELEVATION
SCALE: 1/8" = 1'-0"

THREE Brothers BAKING INC
D/31A Pier 78
New York, NY 10018

MENU

BREAKFAST

Bagel W/ cream cheese
Two eggs on a roll
Egg and Cheese on a roll
Bacon egg and cheese on a roll
Ham egg and cheese on a roll

COFFEE AND EXPRESSO

Coffee
Tea
Espresso
Cappuccino
Café Latte
Hot Chocolate
Iced coffee
Iced latte
Iced cappuccino

HOT SANDWICHES

Philly cheese steak
Roast turkey on rye
Tuna Melt
Grilled Cheese w/ tomatoes

WRAPS

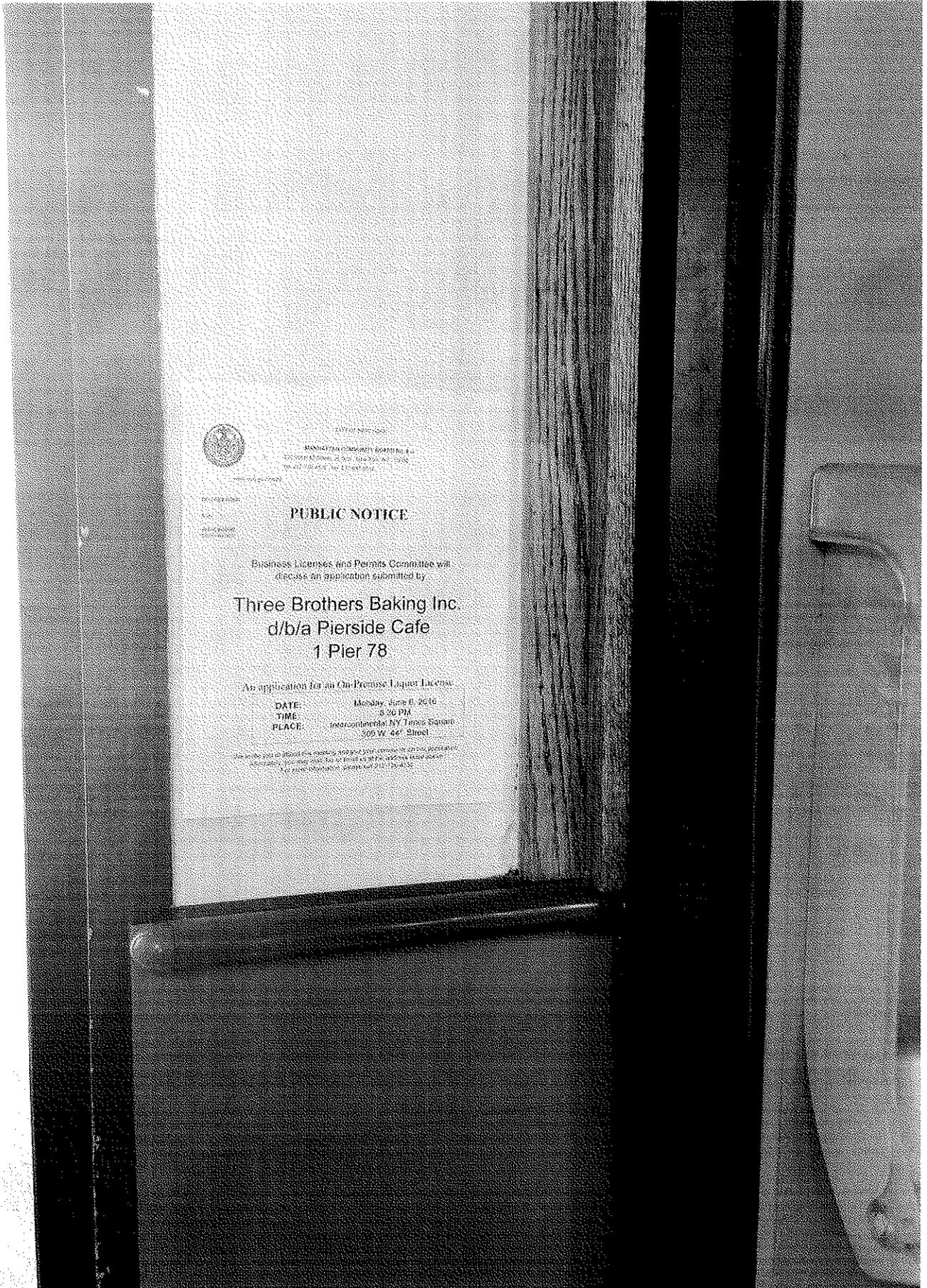
Grilled Chicken club
Tuna salad wrap
Turkey club wrap
Ham and Swiss wrap
Grilled Chicken wrap

PANINI

Grilled Chicken fajita
Monte Cristo
Vegetarian

TROPICAL SMOOTHIES

Mango Madness
Peach Pizzaz
Pina Collider
Strawberry Sensation



OFFICE OF THE
COMMISSIONER OF
BUSINESS LICENSING
AND PERMITS
100 WEST STREET, 22ND FLOOR, NEW YORK, NY 10038
TEL: 212-312-4000 FAX: 212-312-4001

PUBLIC NOTICE

Business Licenses and Permits Committee will discuss an application submitted by

**Three Brothers Baking Inc.
d/b/a Pierside Cafe
1 Pier 78**

An application for an On-Premise Liquor License

DATE: Monday, June 8, 2016
TIME: 3:30 PM
PLACE: Intercontinental NY Times Square
505 W. 46th Street

The notice post on Board Ona meeting and you your committee on this date. If you have any questions, you may call or email us at the address above.

AMDOX


MASSACHUSETTS DEPARTMENT OF STATE
100 STATE STREET, SUITE 1000
BOSTON, MASSACHUSETTS 02109
TEL: 617-725-2000

PUBLIC NOTICE

Business Licenses and Permits Committee will discuss an application submitted by

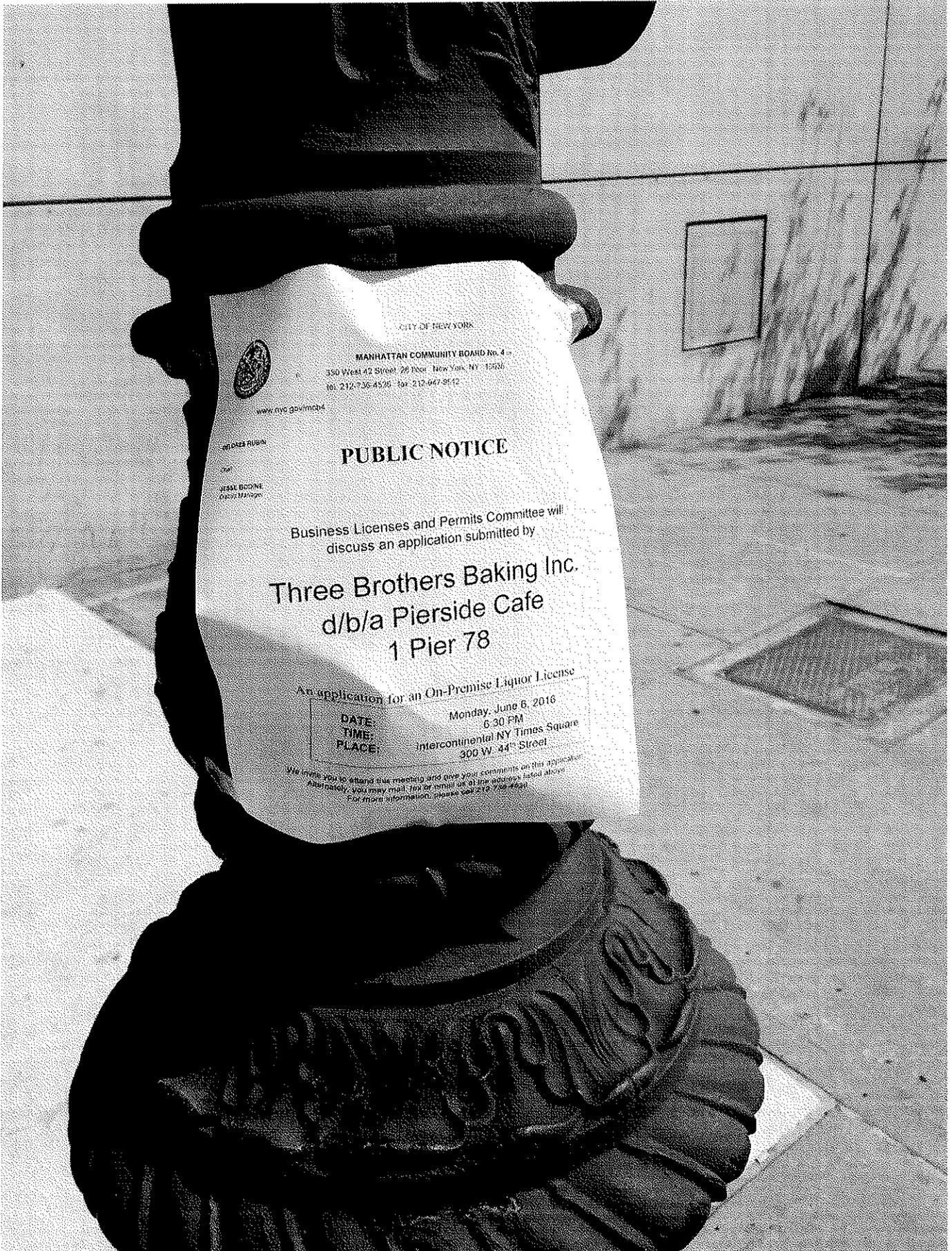
**Three Brothers Baking Inc.
d/b/a Pierside Cafe
1 Pier 78**

An application for an On-Premise Liquor License

DATE: Monday, June 8, 2016
TIME: 5:30 PM
PLACE: Intercontinental 447 T Union Square
2nd Fl, 457, Boston

For more information, contact the committee at the above address or call the committee at 617-725-2000. For more information on the application process, visit the website at www.mass.gov/dor.





CITY OF NEW YORK

MANHATTAN COMMUNITY BOARD No. 4
350 West 42 Street, 29 Floor, New York, NY 10036
Tel: 212-736-4526 Fax: 212-647-9112

www.nyc.gov/mc04

MICHAEL RUBIN

Chair

JESSE BOONE

Chair, Meetings

PUBLIC NOTICE

Business Licenses and Permits Committee will discuss an application submitted by

**Three Brothers Baking Inc.
d/b/a Pierside Cafe
1 Pier 78**

An application for an On-Premise Liquor License

DATE:	Monday, June 6, 2016
TIME:	6:30 PM
PLACE:	Intercontinental NY Times Square 300 W. 44 th Street

We invite you to attend the meeting and give your comments on this application.
Alternately, you may mail, fax or email us at the address listed above.
For more information, please call 212-736-4526.



1 **Business License & Permits Committee**

Item #: 05

2
3 July 27, 2016

4
5 Vincent G. Bradley
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: Shorty's Restaurant LLC**
12 **d/b/a Shorty's**
13 *576 9th Avenue (41/42)*
14 *New On-Premise Liquor License*
15

16 Dear Chairman Bradley:

17
18 Manhattan Community Board 4 (MCB4) recommends **denial** of a New On-Premise Liquor License
19 application for Shorty's Restaurant LLC d/b/a Shorty's – 576 9th Avenue (41/42), **unless** the attached
20 stipulations, agreed to and signed by the applicant, are part of the method of operation for this
21 establishment with hours of operation 11am. to 4a.m. seven days a week; capacity of 72, 5 tables, 25
22 seats, and 1 stand-up bar with 15 seats.
23

24 Sincerely,

25
26
27 Delores Rubin
Chair

Burt Lazarin
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

28
29

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
Shorty's Restaurant LLC		Shorty's	
STREET ADDRESS		CROSS STREETS	ZIP CODE
576 9th Avenue		41st/42nd	10036
OWNER <i>(Attach a list of all the people that will be associated listed with the license)</i>	NAME: Evan Stein	ATTORNEY/ REPRESENTATIVE	NAME: Robert S Bookman, Esq
	PHONE: 917-770-9505		PHONE: 212-513-1988
	EMAIL: evan@shortysnyc.com		EMAIL: rbookman@pandblegal.com
MANAGER	NAME: Justine Jaskier	LANDLORD	NAME: Martin Sanders
	PHONE: 716-208-5003		PHONE: 212-307-0887
	EMAIL: justine@shortysnyc.com		EMAIL:
APPLICATION TYPE (Check One)			
<input checked="" 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?	Wise Wiz LLC / 576 9th Ave / See attached rider for additional list of businesses	
	What were the dates applicant was involved with this former premise?	04/2006 - 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 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="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
ESTABLISHMENT TYPE	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	<input checked="" type="radio"/> NO	
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.	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	11am - 4am	11am - 4am	11am - 4am	11am - 4am	11am - 4am	11am-4am	11am - 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)			<input checked="" type="checkbox"/> BACKGROUND	<input type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ	<input type="checkbox"/> JUKE BOX	<input type="checkbox"/> 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	72	60	5	25	0	1	15		
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?					Ground Floor - 72				
How frequently will the owner(s) be at the establishment?					Daily				
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"/> NO			
Will applicant have bottle or table service for beverage alcohol?					YES	<input checked="" type="radio"/> NO			
Will you be hosting private; promotional or corporate events?					YES	<input checked="" type="radio"/> NO			
Will outside promoters be used on a regular basis? If yes please describe.					YES	<input checked="" type="radio"/> NO			
Will you have a security plan? If, yes please attach.					YES	<input checked="" type="radio"/> NO			
Will security plan be implemented?					YES	<input checked="" type="radio"/> NO			
Will State certified security personnel be used?					YES	<input checked="" type="radio"/> NO			
Will New York Nightlife Association and NYPD Best Practices be followed?					<input checked="" type="radio"/> YES	NO			
Will applicant be using delivery bicycles? If yes, how many?					<input checked="" type="radio"/> YES	NO	4		
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?					<input checked="" type="radio"/> YES	NO			
Where will delivery bicycles be stored during the day when not in use?					Bike Rack Outside				

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/>	NO	Clinton
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	<input checked="" type="radio"/>	
Are your plans filed with DOB?	<input checked="" type="radio"/>	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		
	# 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?			
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	917-770-9505
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	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.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	Wise Wiz LLC d/b/a Shorty's - currently licensed
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) N/A	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	<input type="radio"/> NO	N/A
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	<input type="radio"/> NO	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input type="radio"/> 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	<input type="radio"/> NO	N/A
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the establishment have an illuminated sign?	<input checked="" type="radio"/> YES	<input 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?	Mitsubishi/Split System		
When was the air conditioner installed?	2006		

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

- Any storm enclosure will extend no further than 18" from building facade
- Any A-frame or other sidewalk signs shall be placed ONLY parallel to and leaning against building facade

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.

SHORTY'S

Authentic Philly Steaks and Sandwiches

69th Ave. Tel: 212-967-3055

69th Ave. **SHORTY'S** 212-967-3055

WINE ON TAP

THREE BELLS OF THE BEST SANDWICHES

SHORTY'S

Authentic Philly Steaks and Sandwiches

69th Ave. Tel: 212-967-3055

THREE BELLS OF THE BEST SANDWICHES

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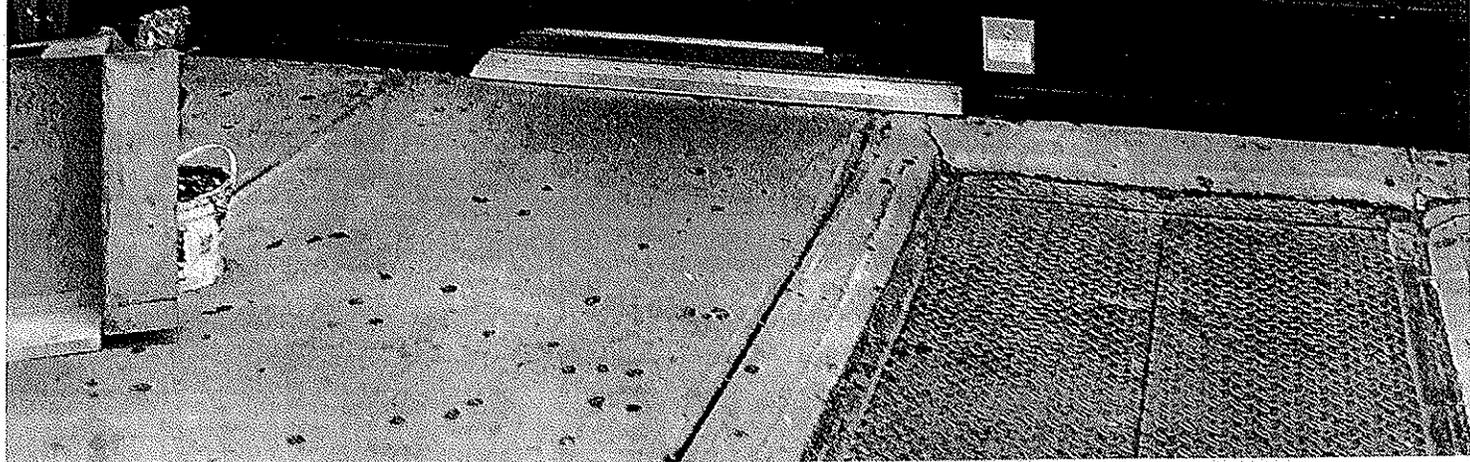
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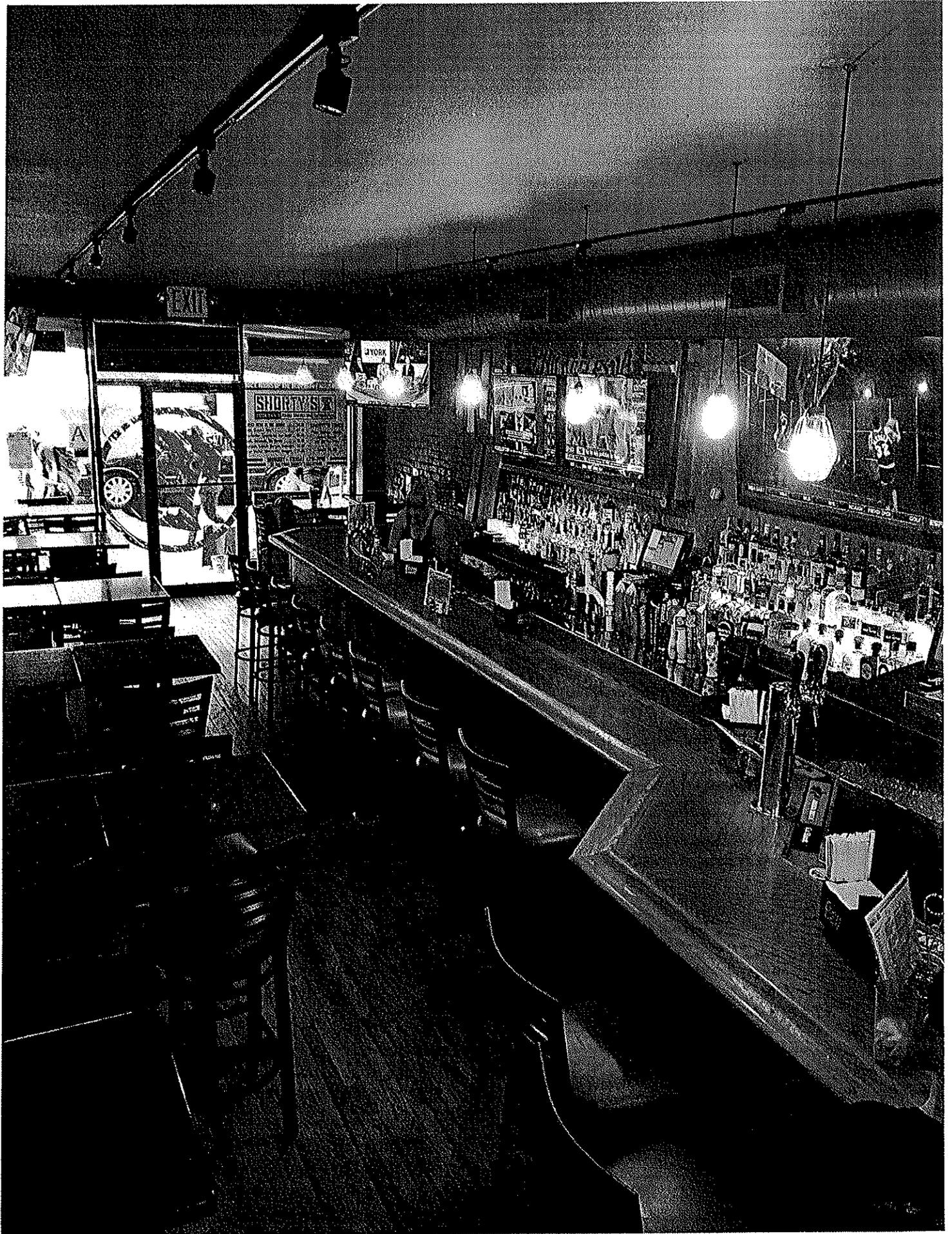
ZAGAT 2016

PHILLY'S

PHILLY'S

PHILLY'S









PHILLY STEAK SANDWICHES

STEAKS (1/2 lb. Steak or Chicken)

Served "w/our" fried onions unless you ask

Cheesesteak (American, Whiz or Provolone)	\$11.	Chicken Cheesesteak (American, Whiz or Provolone)	\$11.
Pizza Steak (Marinara, Provolone)	\$12.	Chicken Pizza Steak (Marinara, Provolone)	\$12.
Pepper Steak (Bell Sweet Peppers, Provolone)	\$12.	Buffalo Chicken Steak (Blue Cheese or Ranch, Hot or Mild Buffalo Sauce)	\$12.
Steak Special (Homemade Broccoli Rabe, Provolone)	\$13.	Chicken Steak Special (Homemade Broccoli Rabe, Provolone)	\$13.
Steak Club (Mayo, Lettuce, Tomato, Bacon, American Cheese)	\$13.	Chicken Steak Club (Mayo, Lettuce, Tomato, Bacon, American Cheese)	\$13.

Add On To Any Sandwich

Bell Sweet Peppers, Diced Cherry Hot Peppers, Italian Hot Peppers, Sautéed Mushrooms

SNACKS N' SIDES

Plain Fries	\$5.	Yuengling Rings (Yuengling beer battered onion rings)	\$8.
Cheese Fries (Whiz)	\$6.	Chicken Fingers	\$9.
Italian Fries (Italian Seasoning topped with Romano Cheese)	\$6.	Buffalo Chicken Fingers	\$10.
Sweet Potato Fries	\$6.	Buffalo Wings - 10 (Homemade Sauce - Hot or Mild)	\$13.
Old Bay Fries (Old Bay Seasoning)	\$6.	Shorty's Nachos (Steak or Chicken Steak - Melted Jack & Cheddar, Homemade Guacamole & Pico de Gallo, Jalapeños, Sour Cream)	\$15.
Bacon Cheese Fries	\$7.		
Mozzarella Triangles	\$8.		



PHILLY STYLE SANDWICHES

Italian Hoagie (Thinly sliced Mortadella, Capicola, Genoa Salami, Pepperoni, Provolone, Mayo, Lettuce, Tomato, Raw Onions, Banana Hot Peppers, Oil & Vinegar)	\$12.
Chicken Cutlet Special (Homemade, Breaded Chicken Cutlet, Homemade Broccoli Rabe, Provolone)	\$13.
Chicken Cutlet Club (Homemade, Breaded Chicken Cutlet, Mayo, Lettuce, Tomato, Bacon, American Cheese)	\$13.
Roast Pork Special (Homemade Broccoli Rabe, Provolone, Au Jus)	\$13.

We use center cut, boneless pork loin sliced thin and served with a roasted garlic "jus." -- A South Philly Favorite!

VEGGIE SANDWICHES

Broccoli Rabe (Homemade Broccoli Rabe, Provolone)	\$12.
Veggie Combo (Homemade Broccoli Rabe, Italian Hot Peppers, Bell Sweet Peppers, Fried Onions, Marinara Sauce, Provolone)	\$13.

SALADS

Shorty's Salad Choice of Steak, Chicken Steak or Chicken Cutlet (Romaine, Cherry Tomatoes, Red Onions, Bacon, Seasoned Croutons, Provolone)	\$12.
Choice of Dressing - Served on the side (Balsamic Vinaigrette, Golden Italian, Ranch, Blue Cheese, Fat-Free Raspberry Vinaigrette)	
Italian Hoagie Salad (Romaine, Mortadella, Capicola, Genoa Salami, Pepperoni, Provolone, Cherry Tomatoes, Raw Onions, Banana Hot Peppers. Served with Oil & Vinegar)	\$12.
Buffalo Salad Choice of Chicken Steak or Chicken Cutlet (Romaine, Carrots, Celery, Cherry Tomatoes, Hot or Mild Buffalo Sauce. Served with Ranch or Blue Cheese)	\$12.

PROJECT LOCATION: 576 9TH AVENUE N.Y., N.Y.

OWNER NAME: CD DESIGN INC.
22 RUTGERS ST. N.Y. 10007
TEL: 212-226-7261 FAX: 212-431-0074

SEAL & SIGNATURE: [Professional Seal of Thomas G. Ting, State of New York, Licensed Professional Engineer, No. 40488]

DATE: 11/14/13
SCALE: AS NOTED

Accepted by CHPN #1/04
Professional Certification
MANHATTAN
Date: [Signature]

DEPT. BLDG. 12-133-002E 003-1-0000
SC-443197815 Scan Code

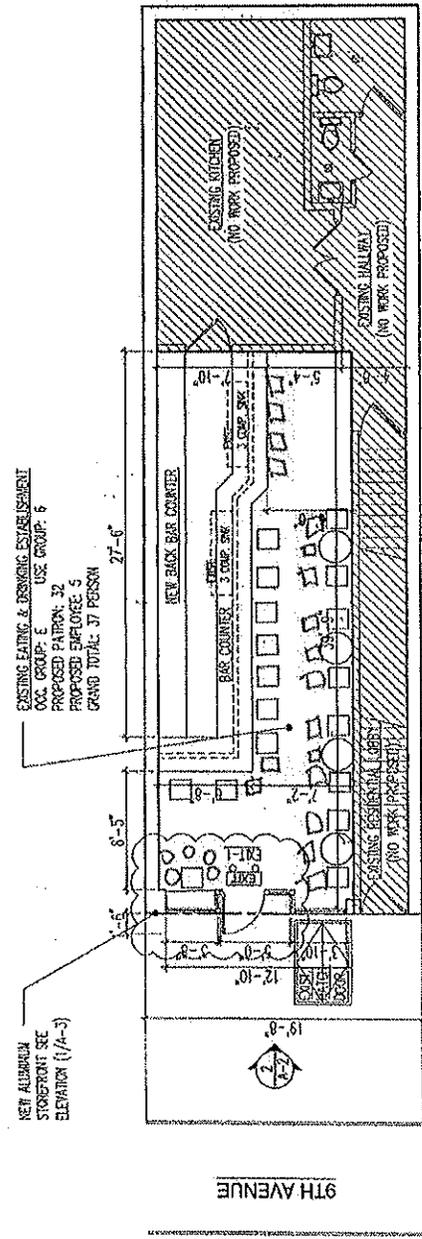
DRAWING TITLE: FIRST FLOOR PLAN ELEVATION & DETAIL

DRAWING NO.: A-002.01

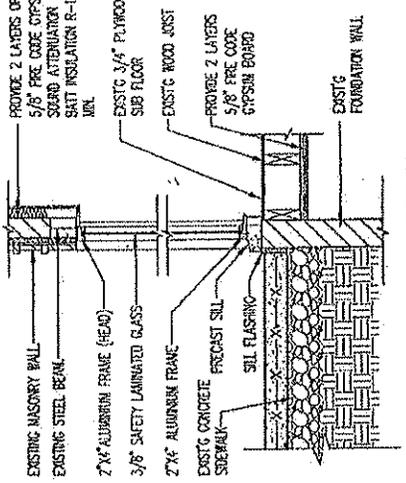
PROJECT NO.: 1208-06Z
PAGE NO.: 5 OF 5

OCCUPANCY LOAD CALC.
(BC TABLE 6-2)
TOTAL FLOOR AREA = 986 SF
KITCHEN FLOOR AREA = 287 SF
TOILET AREA = 63 SF
BAR COUNTER = 212 SF
NET FLOOR AREA = 444 SF
BC TABLE 6-2 OCCUPANT LOAD REQUIREMENT FOR NON RESIDENTIAL DINING SPACES IS 12 SF PER OCCUPANT
OCCUPANCY LOAD = 37

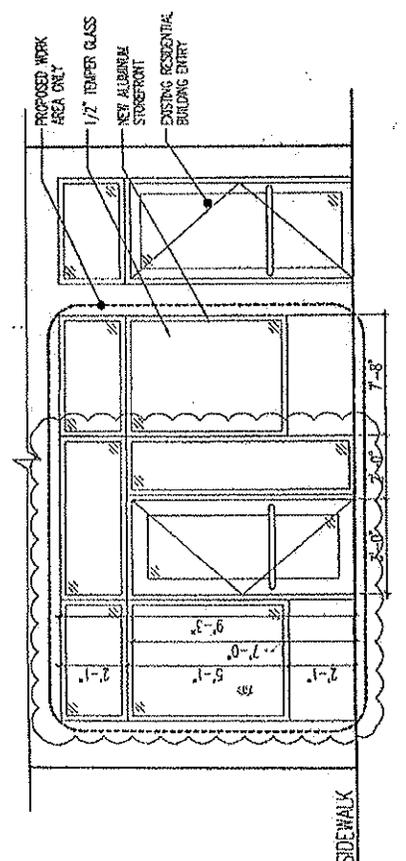
EXIT & ACCESS
CAPACITY ANALYSIS:
FIRST FLOOR EXIT 1:
DOOR WIDTH = 3'-0" OR 36"
ACCORDING TO NYC BC TABLE 6-4:
22" = 1 UNIT WIDTH
1 UNIT = MAX # OF 100 PERSONS THEREFORE, 36" / 22" = 1.6 UNIT;
MAX # OF PERSON ALLOWED THRU EXIT 1 IS 160 PERSONS > 37 PERSONS. O.K.



1 FIRST FLOOR PLAN
SCALE 1/8"=1'-0"



3 STOREFRONT SECTION
SCALE N.T.S.



2 FRONT ELEVATION
SCALE 1/8"=1'-0"

REV. #	ISSUED FOR	DATE

THESE PLANS ARE AN INSTRUMENT OF SERVICE AND THE PROPERTY OF THE ARCHITECT. INFRINGEMENT WILL BE PROSECUTED. CONTRACTOR SHALL VERIFY ALL FIELD CONDITIONS AND BE RESPONSIBLE FOR FIELD FIT AND QUANTITY OF WORK. NO ALLOWANCES SHALL BE MADE IN BEHALF OF THE CONTRACTOR FOR ANY ERROR OR OMISSION ON THE PART.

1 **Business License & Permits Committee**

Item #: 06

2
3 July 27, 2016

4
5 Vincent G. Bradley
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: Great Food 57th St. LLC**
12 **d/b/a Ousia**
13 *625 W. 57th Street (11/12)*
14 *New On-Premise Liquor License*
15

16 Dear Chairman Bradley:

17
18 Manhattan Community Board 4 (MCB4) recommends **denial** of a New On-Premise Liquor License
19 application for Great Food 57th St. LLC d/b/a Ousia – 625 W. 57th Street (11/12), **unless** the attached
20 stipulations, agreed to and signed by the applicant, are part of the method of operation for this
21 establishment with hours of operation 11am. to 12a.m. Sunday – Thursday, and 11a.m. to 2a.m. Friday -
22 Saturday; capacity of 184, 46 tables, 148 seats, and 1 stand-up bar with 36 seats.
23

24 Sincerely,

25
26
27 Delores Rubin
Chair

Burt Lazarin
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

28
29

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
GREAT FOOD 57TH ST LLC		OUSIA	
STREET ADDRESS		CROSS STREETS	ZIP CODE
625 W 57TH STREET		11TH + 12TH AVENUES	10019
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME: JOHN LIVANOS	ATTORNEY/ REPRESENTATIVE	NAME: ROBERT ROMANO
	PHONE: 914-216-3435		PHONE: 914-500-3196
	EMAIL: NLIVANOS@GMAIL.COM		EMAIL: ROMANOLAW@GMAIL.COM
MANAGER	NAME: ENRICO LIVANOS	LANDLORD	NAME: DURST PYRAMID
	PHONE: 914-273-2383		PHONE: 646-237-4600
	EMAIL:		EMAIL:
APPLICATION TYPE (Check One)			
<input checked="" 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?	AGORA RESTAURANT CORP / MOLYVOS	
	What were the dates applicant was involved with this former premise?	1997 - 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 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="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
ESTABLISHMENT TYPE	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
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	11a.m. - 12a.m.	11a.m. - 12a.m.	11a.m. - 12a.m.	11a.m. - 12a.m.	11a.m. - 2a.m.	11a.m. - 2a.m.	11a.m. - 12a.m.
	Kitchen	11a.m. - 10p.m.	11a.m. - 10p.m.	11a.m. - 10p.m.	11a.m. - 10p.m.	11a.m. - 11p.m.	11a.m. - 11p.m.	11a.m. - 9p.m.
	Music	11a.m. - 11p.m.	11a.m. - 11p.m.	11a.m. - 11p.m.	11a.m. - 11p.m.	11a.m - 12a.m.	11a.m. - 12a.m.	11a.m - 10p.m.
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	184		46	148		1	36
OUTSIDE <i>(Other than sidewalk café)</i>	N/A						
SIDEWALK CAFÉ	N/A						

How many floors are there? What is the capacity for each floor? 1ST FLOOR

How frequently will the owner(s) be at the establishment? 40 - 50 HOURS PER WEEK

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?	YES	<input checked="" type="radio"/>	
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?	YES	NO	N/A
Will applicant be using delivery bicycles? If yes, how many?	<input checked="" type="radio"/>	NO	3 BIKES
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?	<input checked="" type="radio"/>	NO	
Where will delivery bicycles be stored during the day when not in use?	SPACE PROVIDED INSIDE LEASED LOCATION		

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/> NO	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO	
Is a Public Assembly permit required?	<input checked="" type="radio"/> YES	NO	
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	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	SEE ATTACHED	
	# 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?			
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"/> YES	NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="radio"/> YES	NO

BUILDING DESIGN			
State the name and type of business previously located in the space.	NEW CONSTRUCTION		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	<input checked="" 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?	<input checked="" type="radio"/> YES	NO	
Will applicant use a storm enclosure?	YES	<input checked="" 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	NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> 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	N/A
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	N/A
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	NO	
Will the kitchen exhaust system extend to the roof?	YES	<input checked="" type="radio"/> NO	There will be a precipitator
Will the establishment have an illuminated sign?	YES	NO	Yet to be determined as premise still under construction
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?	In restaurant. Water sourced heat pumps		
When was the air conditioner installed?	Will be installed when building is completed		

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/>	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	<input checked="" type="radio"/>	
Are the floorplans for the outdoor space(s) included?	YES	NO	N/A
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

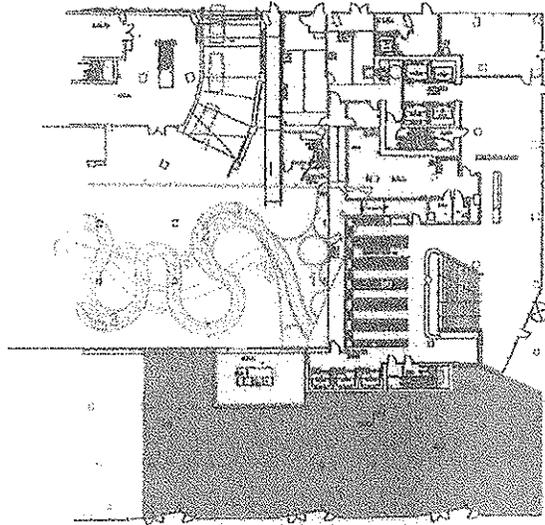
OUTDOOR ITEMS – SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	N/A
Will applicant be applying for a sidewalk café now or in the future?	YES	<input checked="" type="radio"/>	
Is applicant in this application seeking to include a sidewalk café in its liquor license?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

FLOOR PLAN

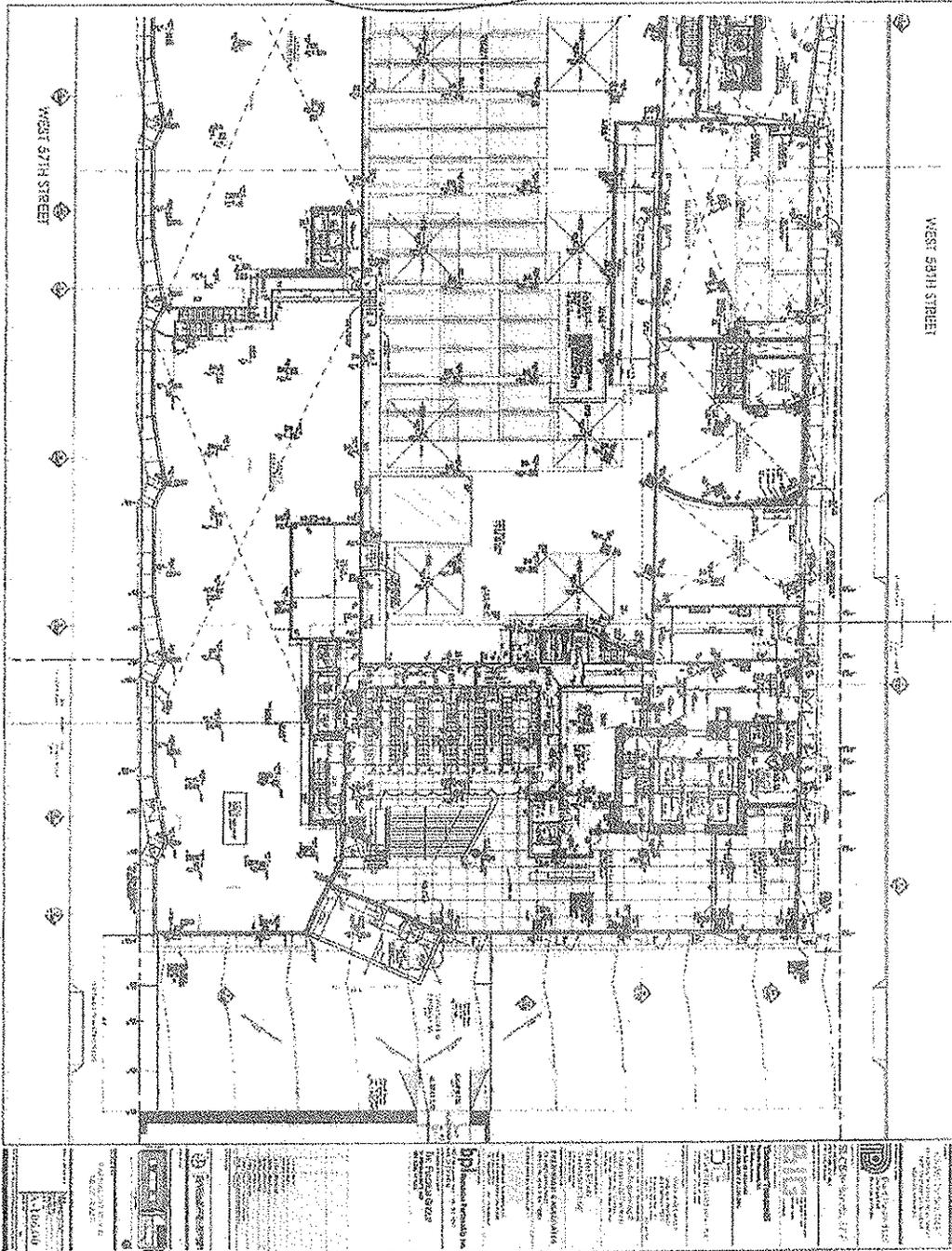
West 57th Street

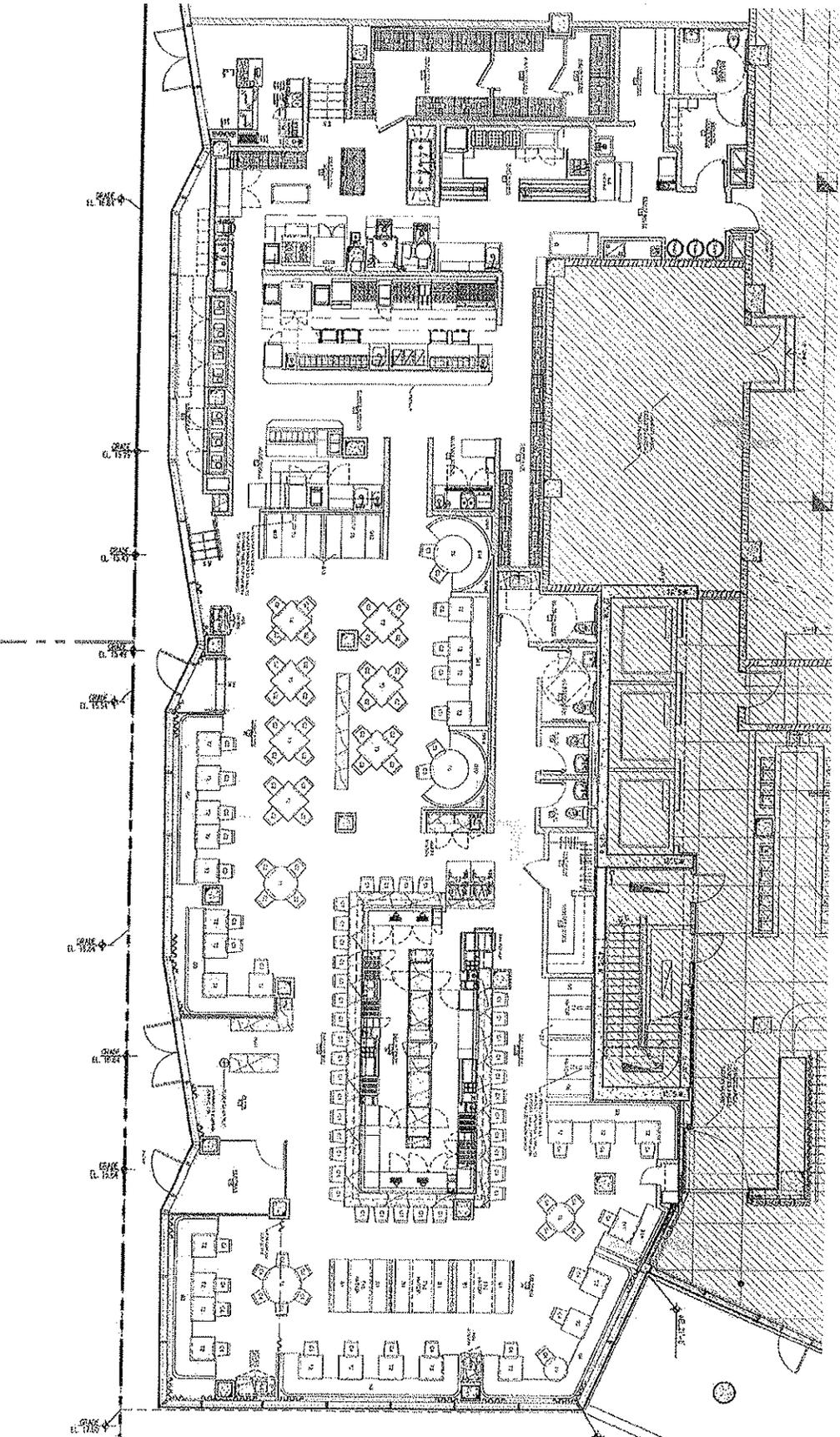


Ground Floor



LOCATION OF GARAGE MECHANICAL SPACE





SEATING EQUIP:

BAR SEAT	20
BAR STOOL	20
STUCCO TOTAL	100

<p>studio rai 1000 Broadway, Suite 1000 New York, NY 10003 Tel: (212) 693-9000 Fax: (212) 693-9001 www.studio-rai.com</p>	<p>Nimble Design Group 1000 Broadway, Suite 1000 New York, NY 10003 Tel: (212) 693-9000 Fax: (212) 693-9001 www.nimble-design.com</p>	<p>PROPOSED RESTAURANT OUSIA 625 WEST 27TH ST. NEW YORK, NY 10019</p>	<p>FURNITURE PLAN ID-1.4A</p>	<p>DATE: 10/10/08 SCALE: AS SHOWN PROJECT NO.: 08-001 CLIENT: [REDACTED] ARCHITECT: [REDACTED] DATE: 10/10/08</p>
---	---	--	---	--

Dinner

SPREADS

Three Spreads 25

Taramosalata 10

"Caviar" Mousse, Almonds, Potatoes

Avocado Sesame Tahini Dip 10

Organic Chickpeas, Roasted Garlic,
Pomegranate, Manouri Cheese

Three Cheese Spread 10

Whipped Mizithra, Manouri and Aged Kefalotyri Cheese,
Garlic, Roasted Marinated Bell Peppers

Santorini Fava 10

Capers, Arugula, Scallions

Melitzanosalata 10

Roasted Eggplant, Tomato, Yogurt, Garlic, Herbs

Tzatziki 10

Sheep's Milk Yogurt, Cucumber,
Garlic, Mint, Dill

Roasted Pepper Feta Cheese 10

Marinated Peppers, Thyme

Hummus 10

Chick Peas, Sesame Tahini, Garlic,
Extra Virgin Olive Oil

Crunchy Veggies for your Spreads 6

SMALL PLATES

Icaria Wild Greens Pie 9

Chard, Spinach, Butternut Squash, Mint

Spanakopita 9

Leeks, Dodoni Feta, Dill

Pumpkin & Cheese Pie 12

Apricot Spoon Sweet

Mitilini Meatballs 10

Lamb and Beef, Cumin, Tomato Red Wine Sauce

Lamb & Pork Sausage 9

Fennel, Orange, Coriander

Crispy Fillet of Sardines 12

Picked Mediterranean Vegetables

Crispy Lesvos Feta Sticks 9

Strawberry Spoon Sweet

GREEK CHEESES

Each 8 // Selection of 3 cheeses 21

Manouri, Thessaly, EVOO, Rosemary, Country Bread

Smoked Feta, Mitilini, Orange Spoon Sweet

Kasseri, Livadia, Sour Cherries Spoon Sweet

Metsovon, Epirus, Candied Walnuts

Ladotyri, Lesvos, Apricot Spoon Sweets, Toasted Pine Nuts

Graviera, Crete, Thyme Honey

Fresh Mizithra, Naxos, Red Onion Apricot Compote

Classic Feta, Arachova, Black Olive "Caviar"

APPETIZERS

Avgolemono Chicken Soup 12

Egg, Lemon, Dill

Lentil Soup 10

5 Years Aged Assyrtiko Vinegar, Sesame Lagana Crouton

Grilled Marinated Mini Vegetable Souvlaki 15

Molyvos Classic Hummus, Spiced Charmoula

Kumato Tomato Salad 16

Shaved Red Onions, Lesvos Basil, Feta Cheese, Red Wine Vinaigrette

Greek Salad 16

Vine Ripe Tomatoes, Cucumbers, Peppers, Red Onions,

Kalamata Olives, Lesvos Feta, Red Wine Vinaigrette

Roasted Beet Salad 14

Grapefruit, Baby Arugula, Roasted Garlic Vinaigrette

Spring Salad 15

Red Baby Kale, Mizuna Greens, Marinated Spring Potatoes,

Red Onions, Feta Cheese, Sherry Lemon Vinaigrette

Buttermilk Crispy Calamari 18

Herb Garlic Yogurt Sauce, Aleppo Spiced Tomato Sauce

Seared Macedonia Spiced Big Eye Tuna 21

Baby Frisee, Red Endive, Sesame Seeds,

Cretan Blood Orange Reduction

Grilled Octopus 21

Santorini Fava, Fresh Spring Sweet Peas and Fava Beans,

Red Onions, Dill, Lemon Vinaigrette

Ouzo Flamed Haloumi Cheese 15

Lemon Sauce

CLASSICS

Stuffed Red Pepper 24

Basmati Rice, Eggplant, Tomato, Manouri Cheese

Moussaka 28

Spiced Ground Lamb and Beef, Potato,

Eggplant, Pepper, Yogurt Béchamel

Roasted Free Range Chicken 27

Lemon Garlic Roasted Potatoes

Lamb Shank Yuvetsi 34

Orzo, Tomatoes, Kefalotyri Cheese

Grilled Loin of Lamb Souvlaki 36

Three Grain Pilaf, Yogurt Garlic Sauce

Stuffed Napa Cabbage 28

Ground Lamb, Beef & Pork, Arborio Rice,

Avgolemono, Scallions and Dill Sauce

INSPIRED

Pan Seared Day Boat Sea Scallops 34

Cauliflower Puree, Pomegranate Seeds, Oven-dried Tomatoes & Feta

Marinated Black Sea Bass "Moussaka" 30

Potato, Eggplant, Dill, Lemon, Caper Skordalia

Cannelloni 28

Rolled Stuffed Pasta, Braised Lamb Shank,

Aged Kefalotyri Cheese Sauce

Grilled Baby Lamb Chops 42

Wild Mushroom & Yogurt Creamy Potato Cake,

Baby Greens, Citrus Vinaigrette

Grilled Red Snapper 34

Melted Leeks, Snow Pea, Baby Carrot, Artichoke and Orzo Fricassee

WHOLE FISH

Charcoal Grilled Whole Fish

Lemon & Olive Oil Emulsion

Market Price / Priced per pound

Lavraki Greece

Tsipoura Greece

Pink Snapper Greece

Black Sea Bass *Montauk*

Red Snapper *Florida*

Sardines *Portugal*

Wild Prawns *Guatemala*

Dover Sole, Holland

SIDES

Spring Vegetable Fricassee 12

Lemon Garlic Potatoes 10

Beets & Skordalia 12

Spinach Rice Pilaf 10

Wild Greens 10

Sauteed Spinach 10

1 **Business License & Permits Committee**

Item #: 07

2
3 July 27, 2016

4
5 Julie Menin
6 Commissioner
7 Department of Consumer Affairs
8 42 Broadway
9 New York, NY 10004

10
11 **Re: Brewpon LLC**
12 *85 10th Avenue (15/16)*
13 *Tables: 9/18 seats*

14
15
16 Dear Chairman Rosen:

17
18 Manhattan Community Board 4 (MCB4) recommends **denial** of a new Unenclosed Sidewalk Cafe
19 License application for Brewpon LLC – 85 10th Avenue (15/16), **unless** the attached stipulations, agreed
20 to by the applicant, are part of the method of operation for this establishment with 9 tables and 18 seats.

21
22 Sincerely,

23
24
25
26 Delores Rubin
Chair

Burt Lazarin
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

27
28

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/ REPRESENTAIVE	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) <u>N/A - Sidewalk Cafe Assignment Application</u>			
<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
	If alterations or operational changes are being made, please describe/list all changes.		
<input checked="" type="radio"/> Alteration	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans: <u>TO EXTEND LICENSE</u>		
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			

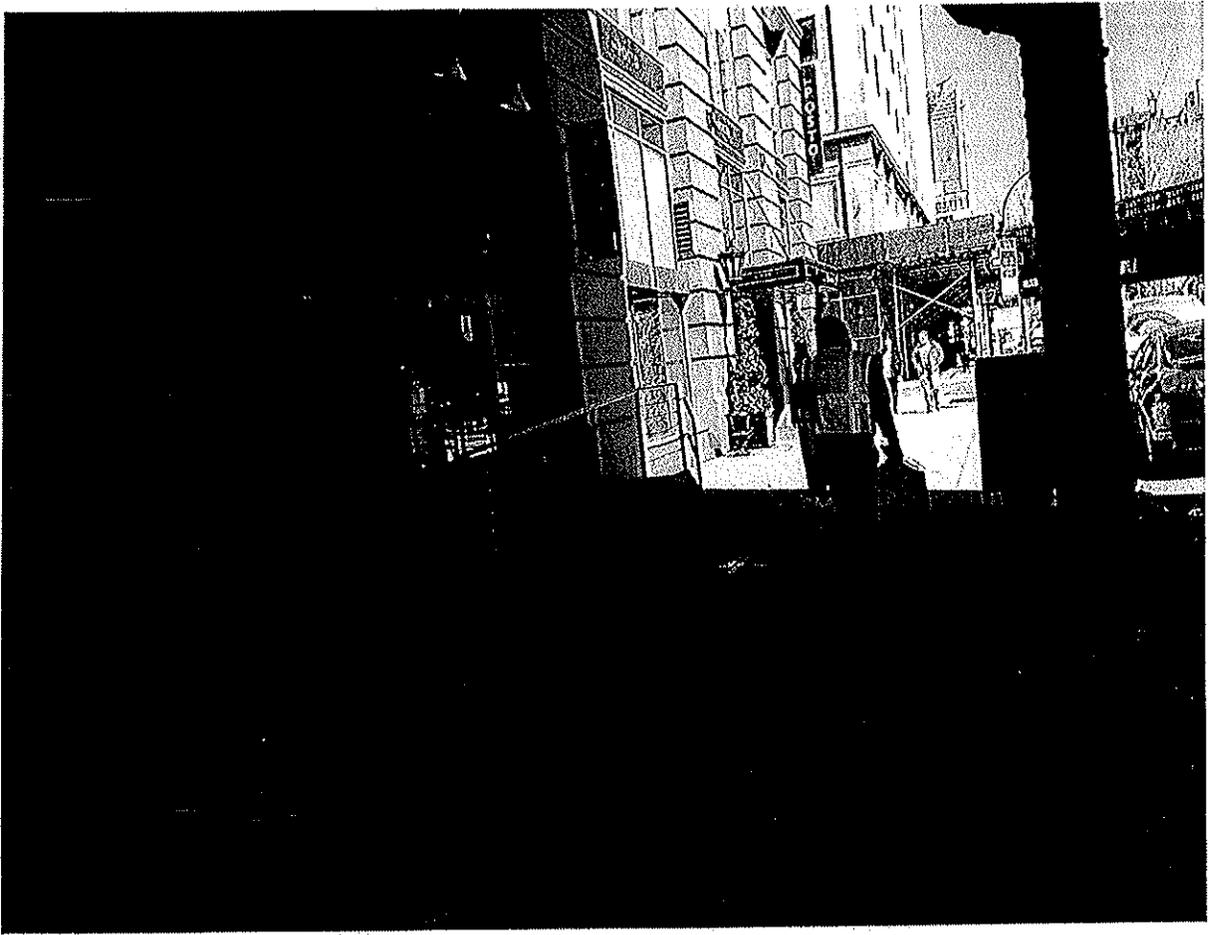
LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/>	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/>	NO	
Is a Public Assembly permit required?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

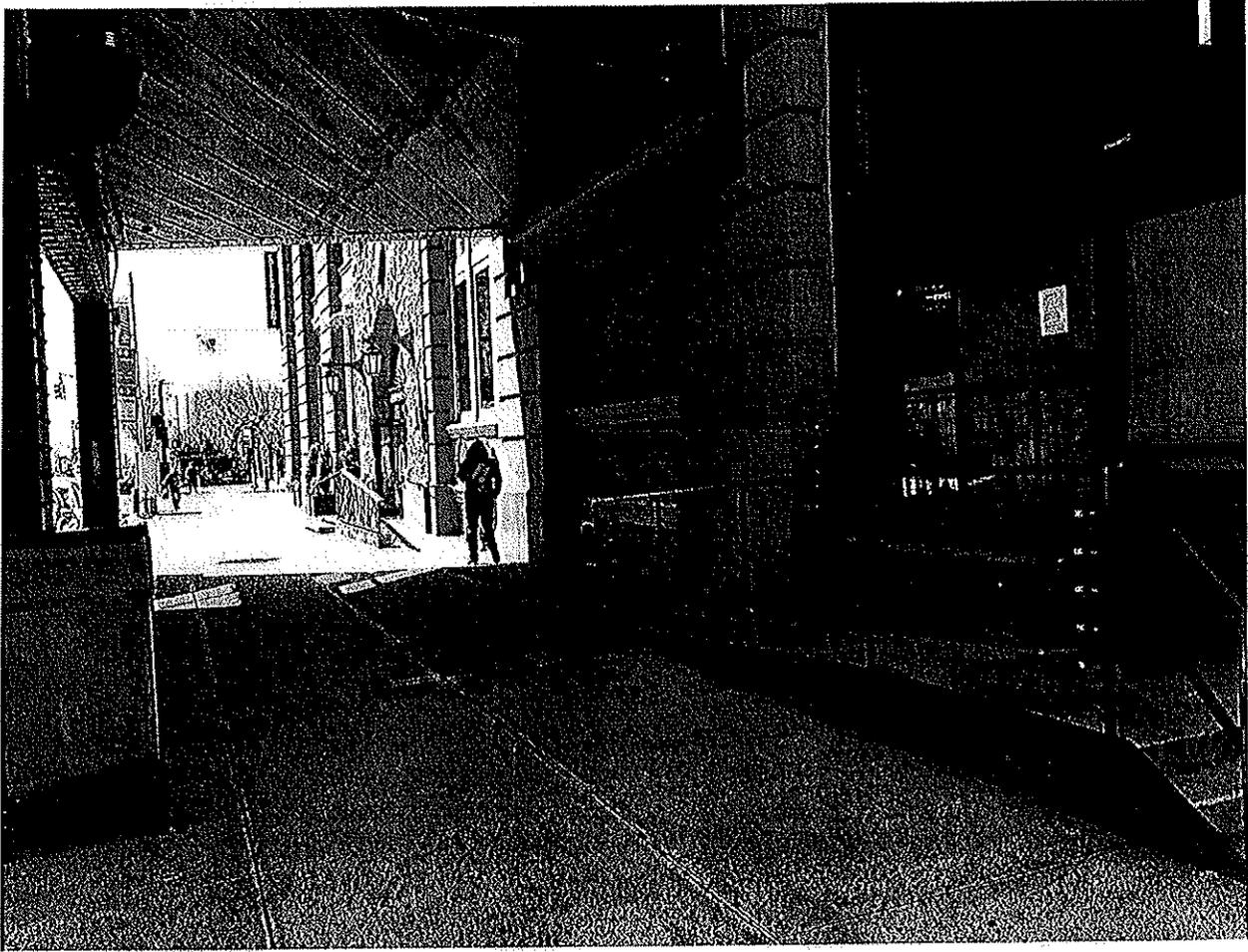
BUILDING DESIGN			
State the name and type of business previously located in the space.	Willow Road		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Do you 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 CAFE		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	

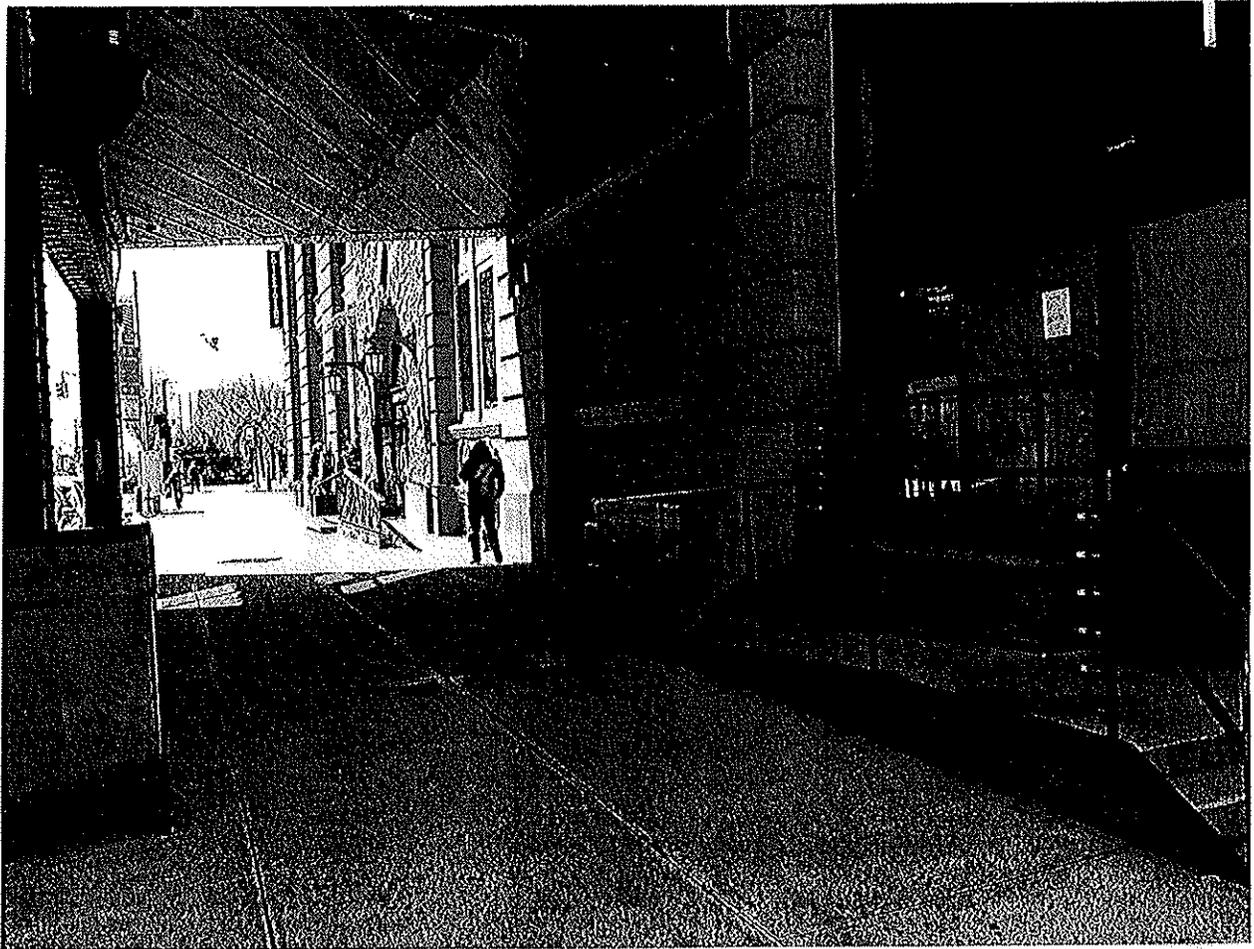
OUTDOOR ITEMS – SIDEWALK CAFÉ		
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	<input checked="" type="radio"/>	NO
Will applicant be applying for a sidewalk café now or in the future?	<input checked="" type="radio"/>	NO
Is applicant in this application seeking to include a sidewalk café in its liquor license?	<input checked="" type="radio"/>	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"/>	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"/>	NO
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	<input checked="" type="radio"/>	NO
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	<input checked="" type="radio"/>	NO
Will applicant mark the perimeter of the café on the sidewalk?	<input checked="" type="radio"/>	NO
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	<input checked="" type="radio"/>	NO
Will the sidewalk café not provide standing space for drinking or smoking?	<input checked="" type="radio"/>	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"/>
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/>	NO
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	<input checked="" type="radio"/>	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"/>	NO
Will applicant use umbrellas?	<input checked="" type="radio"/>	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"/>	NO



Brewster LLC
AS 10th Ave.
NY NY 10011



Brewpon LLC
85 10th Avenue.
NY NY 10011



Brewpon LLC.

1 **Business License & Permits Committee**

Item #: 08

2
3 July 27, 2016

4
5 Julie Menin
6 Commissioner
7 Department of Consumer Affairs
8 42 Broadway
9 New York, NY 10004

10
11 **Re: AIO Gourmet LLC**
12 **d/b/a Le Bon Choix**
13 *652 10th Avenue (10/46)*
14 *Tables: 8/26 seats*

15
16
17 Dear Chairman Rosen:

18
19 Manhattan Community Board 4 (MCB4) recommends **denial** of a new Unenclosed Sidewalk Cafe
20 License application for AIO Gourmet LLC d/b/a Le Bon Choix – 652 10th Avenue (10/46), **unless** the
21 attached stipulations, agreed to by the applicant, are part of the method of operation for this
22 establishment with 8 tables and 26 seats.

23
24 Sincerely,

25
26
27
28 Delores Rubin
Chair

Burt Lazarin
Co-Chair
Business License & Permits
Committee

Frank Holozubiec
Co-Chair
Business License & Permits
Committee

29
30

Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME A10 GOURMET LLC.		DOING BUSINESS AS (DBA) LE BON CHOIX.	
STREET ADDRESS 652 10 AV.		CROSS STREETS 10AV & 46ST.	ZIP CODE 10977
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME: ABDULLAH AHMED	NAME: DONALD J. WEISS ESC	
	PHONE: 212.262.0100	PHONE: 212.265.5044	
	EMAIL: SALEH115@YAHOO.COM	EMAIL:	
MANAGER	NAME: SAL PICCARDI	NAME: GEORGE BOWMAN	
	PHONE: 646.355.7127	PHONE: 212.840.0930	
	EMAIL: SALPICCARDI@GMAIL.COM	EMAIL: FREDSASSY@GMAIL.COM	
ATTORNEY/ REPRESENTATIVE			
APPLICATION TYPE (Check One) COM			
<input checked="" type="checkbox"/> New	Has applicant owned or managed a similar business?	YES	<input checked="" type="checkbox"/> NO
	What is/was the name and address of establishment?	N/A	
	What were the dates applicant was involved with this former premise?	N/A	
<input type="checkbox"/> Transfer	What is the prior license # and expiration date?	N/A	
	Is applicant making any alterations or operational changes?	YES	<input checked="" type="checkbox"/> NO
	If alterations or operational changes are being made, please describe/list all changes.	N/A	
<input type="checkbox"/> Alteration	What is the current license # and expiration date?	N/A	
	Please list/describe the nature of all the changes and attach the plans:	N/A	
METHOD OF OPERATION			
TYPE OF ALCOHOL	DO NOT WANT OR WILL APPLY = N/A. <input type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> 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="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization - Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	<input checked="" type="checkbox"/> NO	N/A = DO NOT WANT LIQUOR LIC.
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	DO NOT WANT TO
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	<input checked="" type="checkbox"/> NO	APPLY FOR LIQUOR
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)

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HOURS* (Indoor Only)	Operation	7AM-11PM	7A-11P	7A-11P	7A-11P	7A-11P	7A-11P	7A-11P
	Kitchen	11	11	11	11	11	11	11
	Music	NA	NA	NA	NA	NA	NA	NA
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE	

NO COFO - AT LOCATION 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	30	73	8	30	NA	NA	NA
OUTSIDE (Other than sidewalk café)		32	12	32	NA	NA	NA
SIDEWALK CAFÉ		32	12	32	NA	NA	NA

How many floors are there? What is the capacity for each floor?
ONE.

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

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"/> NO	NA DO NOT
Will applicant have bottle or table service for beverage alcohol?	YES	<input checked="" type="radio"/> NO	NA WAIT.
Will you be hosting private; promotional or corporate events?	YES	<input checked="" type="radio"/> NO	N/A LIQUOR
Will outside promoters be used on a regular basis? If yes please describe.	YES	<input checked="" type="radio"/> NO	N/A LIC.
Will you have a security plan? If, yes please attach.	YES	<input checked="" type="radio"/> NO	N/A
Will security plan be implemented?	YES	<input checked="" type="radio"/> NO	N/A
Will State certified security personnel be used?	YES	<input checked="" type="radio"/> NO	PIA
Will New York Nightlife Association and NYPD Best Practices be followed?	YES	<input checked="" type="radio"/> NO	NA.
Will applicant be using delivery bicycles? If yes, how many?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	1
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?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Where will delivery bicycles be stored during the day when not in use?	<input checked="" type="checkbox"/> INSIDE BUILDING		

LOCATION & ZONING		
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/> NO
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	<input checked="" type="radio"/> NO
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	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	QUEEN OF SHEBA - STORE.
	# 2	CLINTON GOURMET MKT. - STORE.
	# 3	IT'S CLEANERS - 460 - W. 46th - STORE
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.	NO - Block Assoc - Required.	
Who was your contact person at each group you met with?	N/A.	
When did applicant post the notice that was provided?	MAY - 9.	
Where did applicant post the notice that was provided?	FRONT OF STORE.	
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"/> YES	NO 646-827-1129
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	<input checked="" type="radio"/> YES	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	<input checked="" 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?	<input checked="" type="radio"/> YES	NO	
Will applicant use a storm enclosure?	YES	<input checked="" 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?	YES	<input checked="" type="radio"/> NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	NO	
Will the establishment have any of the following: (circle all that apply) <i>N/A</i>	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	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	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	<i>N/A - NO BAR OR CLUB</i>
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	<i>N/A</i>
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	NO	
Will the establishment have an illuminated sign?	YES	<input checked="" type="radio"/> NO	
Will the establishment have a canopy extending over the sidewalk?	<input checked="" type="radio"/> YES	NO	
Where will the air conditioner be located? What type is it?	<i>IN STORE</i>		
When was the air conditioner installed?	<i>6-1-15</i>		

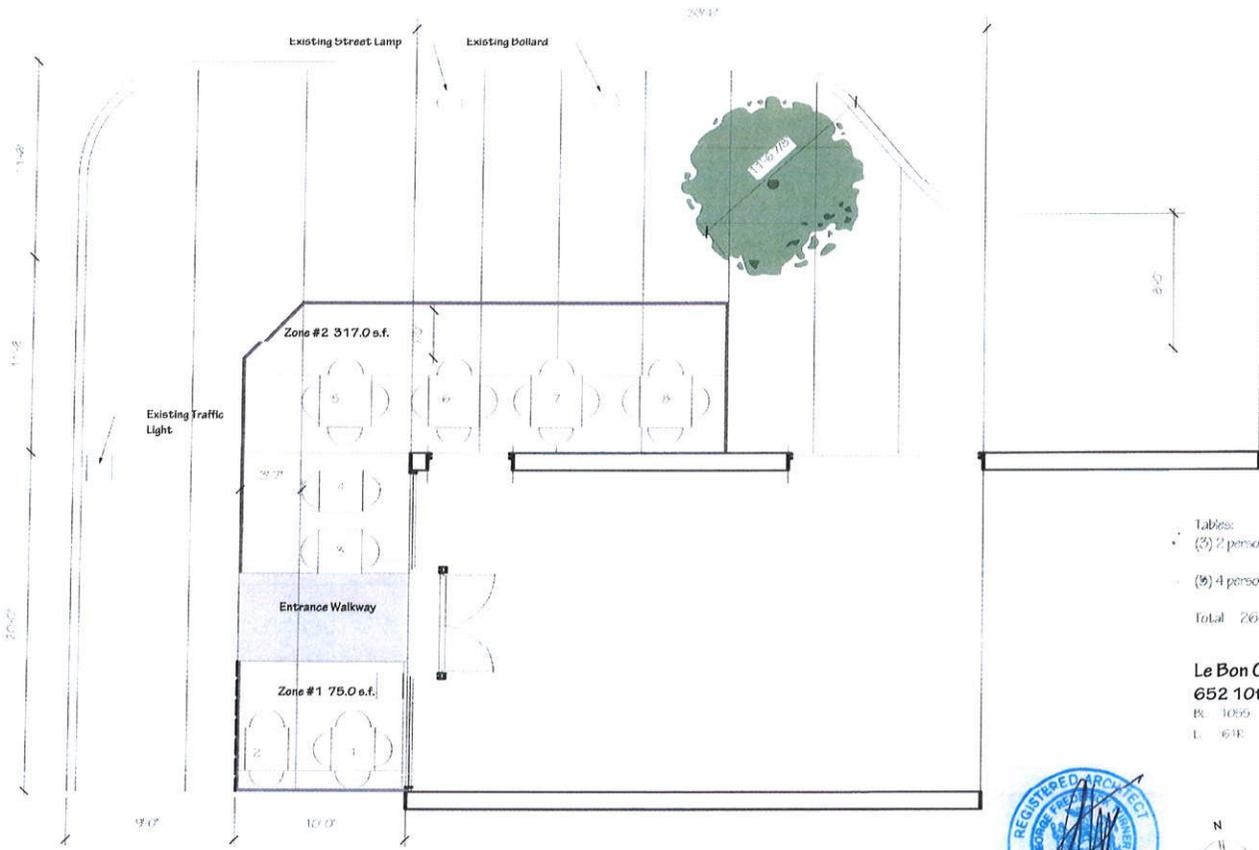
OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	N/A.
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	<input checked="" type="radio"/> NO	N/A.
Are the floorplans for the outdoor space(s) included?	<input checked="" type="radio"/> YES	NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	<input checked="" type="radio"/> YES	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A.
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input checked="" type="radio"/> YES	NO	
Will there be no amplified music, as per the law?	YES	NO	N/A.
If amplified sound is played inside the establishment, will windows and doors be closed?	<input checked="" type="radio"/> YES	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors?	<input checked="" type="radio"/> YES	NO	
Will applicant agree to train staff to encourage a peaceful environment?	<input checked="" type="radio"/> YES	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	<input checked="" type="radio"/> YES	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	NO	

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

ADDITIONAL STIPULATIONS: (Office Use Only)

- No barriers or dividers along edges of sidewalk cafe
- Tables numbered 9 through 12 on sidewalk cafe plan dated 4/14/16 will be eliminated
- Will submit revised sidewalk cafe plan to Board office and advise Board office by 6/10/16 of DCA schedule
- Submitted revised floor plans on 6/10/16, with 8 tables and 26 seats

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.



- Tables:
- (3) 2 person tables total of 6 seats
- (9) 4 person tables total of 20 seats
- Total 26 seats

Le Bon Choix Cafe
652 10th Ave
 R: 10:05
 L: 6:45

Proposed Sidewalk Cafe
 ARCHITECT Terra Firma, New York
 605 10th Ave, New York NY 10014, 212-693-9997

A. Proposed Table Scheme: Le Bon Choix



5C-101.0
 April 14, 2016