BUSINESS LICNESE & PERMITS COMMITTEE **Item # 17**

July 25, 2012

Dennis Rosen
Chairman
New York State Liquor Authority
80 S. Swan Street, 9th Floor
Albany, New York 12210

Re: 200 Ninth Restaurant LLC d/b/a The Meatball Shop
200 9th Avenue (22/23)

Dear Chairman Rosen:

Manhattan Community Board 4 (MCB4) recommends **denial** of a new on-premise liquor license for **200 Ninth Restaurant LLC d/b/a The Meatball Shop - 200 9th Avenue (22/23)**, **unless** the following stipulation, agreed to by the applicant, is part of the method of operation for this establishment with a capacity of 74-86, with 17 tables and 56 seats with two stand-up bar seating 17.

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

Sincerely,

Corey Johnson Chair	Paul Seres Co-Chair Business License & Permits Committee	Lisa Daglian Co-Chair Business License & Permits Committee

DRAFT

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT	DOING BUSINESS AS (DBA)
200 Ninth Restaurant LLC	The Meatball Shop
STREET ADDRESS	**CROSS STREETS**
200 9th Avenue	West 22nd & 23rd Street

OWNER	NAME:	Michael Chernow	ATTORNEY	NAME:	Elke A. Hofmann Law, PLLC
	PHONE:	212-982-8895		PHONE:	212-487-9100
	FAX:			FAX:	212-487-9131
MANAGER	NAME:		LANDLORD	NAME:	200 Chelsea Corp.
	PHONE:			PHONE:	212-406-3070
	FAX:			FAX:	

DESCRIPTION OF BUSINESS

Establishment Type:	◯ Bar/Tavern ◯ Bed & Breakfast ◯ Eating Place Beer ◯ Cabaret ◯ Night Club ◯ Hotel ☑ **Restaurant** ◯ Catering Establishment ◯ Club (Fraternal Organization – Members Only) ◯ Other (Explain):_____
Method of Operation:	☑ **Restaurant** ◯ Dance Club ◯ Sports Bar ◯ Adult Entertainment ◯ Wine Bar ◯ Pizzeria ◯ Cafe ◯ Other (Explain):_____
License Type:	☑ **On-Premise** ◯ Wine ◯ Beer ◯ Wine & Beer

APPLICATION TYPE *(check one)*				
	☑ **New**	Has applicant owned or managed a similar business?	**YES**	**NO**
		What is/was the name of establishment?	**The Meatball Shop**	
		What is/was the address of the establishment?	**3 locations: 84 Stanton, 64 Greenwich, 170 Bedford Avenue (Brooklyn)**	
		What were the dates the applicant was involved with this former premise?	**2009 - Present**	
	◯ **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**
		If alterations or operational changes are being made, please attach the plans to this form.		
	◯ **Alteration**	What is the current license #?		
		What is the expiration date on the current license?		
		Please describe the nature of the alterations and attach the plans		

OPERATIONAL ISSUES

HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.
	Music	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.
	Kitchen	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.	12 p.m. – 4 a.m.

OCCUPANCY	INDOOR				BAR			OUTSIDE	
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables
	Pending	74-86	17	56	0	2	17	20	10

How many floors are there? What is the capacity for each floor? (please respond in space provided)	1-2	3-4	5 +	Ground Floor: 52-56/Cellar: 25-28
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)	YES	NO	N/A	
Will you be hosting private parties and promotional events?	YES	NO	N/A	
Will outside promoters be used?	YES	NO	N/A	
Will the security plan submitted be implemented?	YES	NO	N/A	
Will State certified security personnel be used?	YES	NO	N/A	
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?	YES	NO	N/A	
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)	YES	NO	N/A	
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)	YES	NO	N/A	
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)	YES	NO	N/A	
Will applicant provide contact information to neighbors and respond to complaints that arise?	YES	NO	N/A	
If you plan to have music, what type(s)?	BACKGROUND	LIVE MUSIC	DJ	

BUILDING DESIGN

Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.	YES	NO	N/A	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES	NO	N/A	
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?	YES	**NO**	N/A	
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	**YES**	NO	N/A	
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	**YES**	NO	N/A	
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	**YES**	NO	N/A	
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	**YES**	NO	N/A	
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	**YES**	NO	N/A	
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	**YES**	NO	N/A	

LOCATION & ZONING					
Primary Zoning District:	**R7B**	Overlay (If Applicable):			**C1-5**
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?		**YES**	NO	N/A	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?		YES	NO	N/A	**Pending**
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.		**YES**	NO	N/A	
Is a Public Assembly permit required?		YES	NO	N/A	**To be determined**
Are your plans filed with DOB?		**YES**	NO	N/A	
Building Type	◯ Residential ◯ Commercial ☑ **Mixed Use** ◯ Other, describe: _____				
Adjacent Buildings	◯ Residential ◯ Commercial ☑ **Mixed Use** ◯ Other, describe: _____				

NOTIFICATION: What organizations / community groups have you notified regarding your application?		
	# 1	
	# 2	
	# 3	

ADDITIONAL INFORMATION: (Applicant Use)

ADDITIONAL NOTES: (Office Use Only)

- This application does not include the sidewalk café at this time
- Applicant will soundproof the ceiling