

1 **Business License & Permits Committee**

Item #: 1

2
3 June 20, 2013

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

10
11 Re: XL Dance Bar LLC
12 d/b/a XL Dance Bar
13 512 W. 42nd Street (10/11)

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of an alteration for an On-Premise Liquor
18 License for XL Dance Bar LLC d/b/a XL Dance Bar – 512 W. 42nd Street (10/11) unless the following
19 stipulations, agreed to by the applicant, are part of the method of operation for this establishment with a
20 capacity of 650 people, approximately 37 tables with approximately 138 seats with 2-4 people per table,
21 and 3 stand up bars with 10 seats.

- 22
23 ➤ Juan Vasquez – Director of Operations for XL will provide CV and intro to CB
24 ➤ Eliminated outdoor live or DJ music
25 ➤ Will keep sidewalk area clear on W. 41st Street

26
27 For Hotel

- 28 ➤ Line must be inside at all times – for special events, queue to west in front of ConEd and NYPD
29 and in front of hotel and into lobby
30 ➤ Clean up outside
31 ➤ Keep music down – comply with sound stipulations
32 ➤ Security will maintain quiet and peaceful atmosphere in vicinity
33 ➤ Communicate with neighbors and CB for any special events
34 ➤ Any outside music will be in atrium

35
36 A signed copy of the questionnaire and stipulations are enclosed.

37
38 Sincerely,

39
Corey Johnson
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

Manhattan Community Board 4

Liquor License Stipulations Application

(All Fields Must Be Completed)

APPLICANT XL Dance Bar LLC		DOING BUSINESS AS (DBA) XL Dance Bar	
STREET ADDRESS 512 West 42nd Street, New York, NY 10036		CROSS STREETS Between 10th Avenue and 11th Avenue	
OWNER	NAME: Brandon Voss	ATTORNEY	NAME: Donald M. Bernstein, Victor & Bernstein P.C.
	PHONE: (212) 239-2999		PHONE: (212) 486-6000
	FAX:		FAX: (212) 486-8668
MANAGER	NAME:	LANDLORD	NAME: 42nd Street Holdings LLC
	PHONE:		PHONE: (212) 541-9840
	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 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 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 (check one)		<input type="radio"/> New	
		Has applicant owned or managed a similar business? YES NO	
		What was the name of establishment?	
		What was the address of the establishment?	
		What were the dates the applicant was involved with this former premise?	
		<input checked="" type="radio"/> Transfer Corporate Change (see Additional Information, p. 4)	
		What is the previous license #? 1248373	
		What is the expiration date on the previous license? December 31, 2013	
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. See below and attached.			
<input checked="" type="radio"/> Alteration			
What is the current license #? 1248373			
What is the expiration date on the current license? December 31, 2013			
Please describe the nature of the alterations and attach the plans Relocation of DJ Booth, existing DJ Booth to be a Coat Check Room, removing high top tables and upgrading and adding banquette seating around perimeter of bar area. See floor plans attached			

OPERATIONAL ISSUES

HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation			4:00PM - 4:00AM				
	Music			4:00PM - 4:00AM				
	Kitchen			4:00PM - 4:00AM				

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
	650	650	Approx 37	2-4 ppl per table (approx 138 total)	0	3	10	N/A	N/A

How many floors are there? What is the capacity for each floor? (please respond in space provided)	1-2	<input checked="" type="radio"/> 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)	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	We will not be applying for a cabaret, we have one.
Will applicant have bottle service?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Will you be hosting private parties and promotional events?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	We do and will not use outside promoters but we occasionally book special or private events
Will outside promoters be used?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Will the security plan submitted be implemented?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	6-15 licensed security personnel, as stipulated with CB4.
Will State certified security personnel be used?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Will applicant provide contact information to neighbors and respond to complaints that arise?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	
If you plan to have music, what type(s)?	<input checked="" type="radio"/> BACKGROUND	<input checked="" type="radio"/> LIVE MUSIC	<input type="radio"/> 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.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	There are no open windows. Unless patrons entering/exiting, doors are kept closed.
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	N/A	
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.	<input checked="" type="radio"/> YES	<input type="radio"/> 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:	C6-4	Overlay (If Applicable):	
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
Is the 500 Foot Rule or 200 Foot Rule Triggerred? 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?	<input checked="" type="radio"/> YES	NO	N/A

Building Type Residential Commercial Mixed Use Other describe: _____
 Premises is within a building used as a hotel.

Adjacent Buildings Residential Commercial Mixed Use Other describe: Industrial and Institutional Buildings. See zoning map attached.

NOTIFICATION: What organizations / community groups have you notified regarding your application? *The applicant has reached out to these individuals regarding the alterations at the premises.	# 1	Greg Gushde (MIMA)
	# 2	Marisa Redanty (Manhattan Plaza)
	# 3	David Solnick (The Orion)

ADDITIONAL INFORMATION: (Applicant Use)

The licensee is currently controlled by 42nd Street Holdings LLC, which in turn is controlled by Mati Weiderpass and Ian Reisner. 42nd Street Holdings LLC is increasing its ownership of the licensee from 60% to 99%. Additionally, three members of the minority member of the licensee are being removed. No new members or principals are being added.

ADDITIONAL NOTES: (Office Use Only)

ADDITIONAL STIPULATIONS: (Office Use Only)

FOR HOTEL

- line must be inside at all times
 - for special events, queue to west in front of Con Ed = NYPD. and in front of hotel into lobby.
- clean up outside
- Keep music down - comply with sound stipulations
- security will maintain quiet & peaceful atmosphere in vicinity of club.
- communicate w/ neighbors and CB for any special events.
- any outside music will be in atrium

ⓧ Will comply with stipulations and report back. If no improvement CB may recommend denial. Nat Exec for alteration. Corp charge



1 **Business License & Permits Committee**

Item #: 2

2
3 June 20, 2013

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

10
11 **Re: Entity to be named later**
12 **d/b/a Café De La Musique**
13 **510 West 27th Street**

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of new On-Premise Liquor License for
18 Café De La Musique at 510 West 27th Street unless the following stipulations, agreed to by the
19 applicant, are part of the method of operation for this establishment with a capacity of 350 people.

20
21 The following are the stipulations:

- 22
23 1. Applicant agrees to hire, and follow the recommendations, of a certified sound acoustician, to
24 help maintain and mitigate sound;
25 2. Applicant agrees to follow all MCB4 guidelines re use of rear yards space and rooftops;
26 3. Applicant will have a representative attend the 10th Precinct Community Council meeting, as
27 well as other relevant community meetings;
28 4. Applicant agrees not to have any door charge for admission unless it is for charitable
29 contributions to a not-for-profit or for political fundraisers;
30 5. Applicant will work with MCB4 and hold job fairs for local residents;
31 6. Queuing will be inside;
32 7. The freight elevator will be converted to a passenger elevator; and
33 8. There will be seating for 80% of the 350 capacity.

34
35 A signed copy of the questionnaire and stipulations are enclosed.

36
37 Sincerely,

38
Corey Johnson
Chair

Paul Seres¹
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

39

¹ Paul Seres did not participate in or vote in any manner with the Business License and Permits Committee and the Full Board on this matter or any other matter on the June 11, 2013 committee agenda.

Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

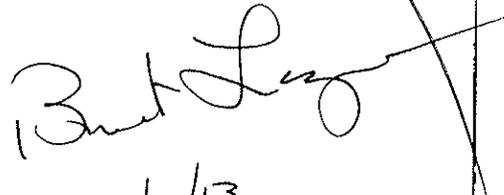
APPLICANT Entity to be named later		DOING BUSINESS AS (DBA) Cafe de La Musique			
STREET ADDRESS 510 West 27th Street		CROSS STREETS Between 10th and 11th Avenues			
OWNER	NAME: Paul Seres	ATTORNEY	NAME: Robert Bookman		
	PHONE: 917/941.1304		PHONE: 212/513.1988		
	FAX:		FAX: 212/385.0564		
MANAGER	NAME:	LANDLORD	NAME: Ashwin Verma		
	PHONE:		PHONE: (917) 640-9766		
	FAX:		FAX:		
DESCRIPTION OF BUSINESS					
Establishment Type:		<input checked="" type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): _____			
Method of Operation:		<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input checked="" type="radio"/> Other (Explain): <u>Lounge</u>			
License Type:		<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer			
APPLICATION TYPE (check one)		<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	YES	NO
			What was the name of establishment?	Dinner on Ludlow/The DL	
			What was the address of the establishment?	510 West 27th Street, 10001 95 Delancey Street, 10002	
			What were the dates the applicant was involved with this former premise?	July 2005-May 2009 January 2012-Present	
			What is the prior license #?		
		<input type="radio"/> Transfer	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.		
		<input type="radio"/> Alteration	What is the current license #?		
			What is the expiration date on the current license?		
Please describe the nature of the alterations and attach the plans					

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	12PM-2AM	12PM-2AM	12PM-3AM	12PM-4AM	12PM-6AM	12PM-4AM	12PM-2AM		
	Music	15 minutes prior to closing each day of operation								
	Kitchen	45 minutes prior to closing each day of operation								
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	
	Proposed Occupancy 350									
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="radio"/> 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	<input checked="" type="radio"/> NO	N/A			
Will applicant have bottle service?					<input checked="" type="radio"/> YES	NO	N/A			
Will you be hosting private parties and promotional events?					<input checked="" type="radio"/> YES	NO	N/A			
Will outside promoters be used?					YES	<input checked="" type="radio"/> NO	N/A			
Will the security plan submitted be implemented?					<input checked="" type="radio"/> YES	NO	N/A			
Will State certified security personnel be used?					<input checked="" type="radio"/> YES	NO	N/A			
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					<input checked="" type="radio"/> 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	<input checked="" type="radio"/> NO	N/A			
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	<input checked="" type="radio"/> 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	<input checked="" type="radio"/> N/A			
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="radio"/> YES	NO	N/A	Paul Seres 917/941.1304		
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					<input checked="" type="radio"/> YES	NO	N/A	We will hold a job fair for district residents		
If you plan to have music, what type(s)?			BACKGROUND	LIVE MUSIC	<input checked="" type="radio"/> 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.					<input checked="" type="radio"/> YES	NO	N/A			
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?					<input checked="" type="radio"/> YES	NO	N/A			
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.					<input checked="" type="radio"/> YES	NO	N/A			

ADDITIONAL STIPULATIONS: (Office Use Only)

1. Applicant will agree to hire and follow the recommendations of certified Sound Acoustician to help maintain and mitigate sound.
2. Applicant agrees to follow all MCB4 guidelines as it pertains to use of outdoor space and rooftops.
3. Applicant will have a representative attend the Tenth Precinct Community Council Meetings as well as any other relevant community meetings.
4. Applicant agrees not to have any door charge for admission unless it is for charitable contributions to a not for profit or for political contributions.
5. Applicant will work with MCB4 and hold job fairs for local area residents.

- queuing inside
- convert passenger elevator from freight elevator
- CEILING ON OCCUPANCY 350
- 80% SEATED


06/11/13

1 **Business License & Permits Committee**

Item #: 3

2

3 June 20, 2013

4

5 Dennis Rosen

6 Chairman

7 New York State Liquor Authority

8 80 S. Swan Street, 9th Floor

9 Albany, New York 12210

10

11 **Re: Midwest Tomato**
12 **d/b/a Puttanesca**
13 **859-861 9th Avenue**

14

15 Dear Chairman Rosen:

16

17 Manhattan Community Board 4 (MCB4) recommends denial of an alteration for an On-Premise Liquor
18 License for Puttanesca at 859-861 9th Avenue unless the following stipulations, agreed to by the
19 applicant, are part of the method of operation for this establishment with a capacity of 100 people, with
20 28 tables, 60 seats, 1 stand-up bar with 10 seats.

21

- 22 ➤ No other change in operation
- 23 ➤ No sidewalk café
- 24 ➤ Doors and windows close per CB4 regulations

25

26 A signed copy of the questionnaire and stipulations are enclosed.

27

28 Sincerely,

29

Corey Johnson
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

30

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT MIDWEST TOMATO INC.		DOING BUSINESS AS (DBA) PUTTANESCA	
STREET ADDRESS 859 861 9th Ave, New York, NY 10019		CROSS STREETS W 56th Street & 9th Ave	
OWNER	NAME: George Kalergios	ATTORNEY	NAME: Francis R. Buscemi
	PHONE: 917-417-0686		PHONE: 212-962-4688
	FAX: 212-944-1233		FAX: 212-964-0643
MANAGER	NAME: THOMAS BIFULCO	LANDLORD	NAME: AJ Clarke
	PHONE: 917-295-3286		PHONE: 212-541-4477
	FAX: 212-535-0247		FAX:
DESCRIPTION OF BUSINESS			
Establishment Type:		<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input 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 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 (check one)		<input type="radio"/> New	
		Has applicant owned or managed a similar business?	
		YES	
		NO	
		What is/was the name of establishment?	
		What is/was the address of the establishment?	
		What were the dates the applicant was involved with this former premise?	
		<input type="radio"/> Transfer	
		What is the prior license #?	
		What is the expiration date on the prior license?	
Are you making any alterations or operational changes?			
YES			
NO			
If alterations or operational changes are being made, please attach the plans to this form.			
<input checked="" type="radio"/> Alteration			
What is the current license #?			
1026309			
What is the expiration date on the current license?			
04/30/2015			
Please describe the nature of the alterations and attach the plans			
corporate change			

OPERATIONAL ISSUES

HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	11 AM-10 PM						
	Music	11 AM-10 PM						
	Kitchen	11 AM-10 PM						

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
	100	90	28	60	0	1	10	0	0

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	
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	
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	

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	<input checked="" type="radio"/> NO	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="radio"/> 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	<input checked="" type="radio"/> NO	N/A
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	<input checked="" type="radio"/> 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.).	<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:		Overlay (If Applicable):	
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
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?	<input checked="" type="radio"/> YES	NO	N/A
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____		
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	MANHATTAN COMMUNITY BOARD No. 4	
	# 2		
	# 3		

ADDITIONAL STIPULATIONS: (Office Use Only)

- No other change in operation
- no sidewalk cafe
- Doors & windows close per CB4 regs.

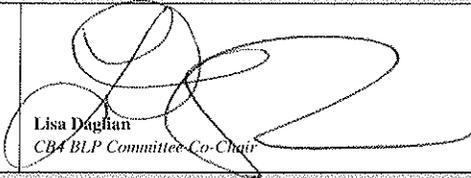
By MP
/ *Butler*

Manhattan Community Board 4 (MCB4) recommends:

Approval Denial unless all agreed to by applicant is part of the method of operation Denial

CB4 REPRESENTATIVES

Nelly Gonzalez
CB4 Community Associate

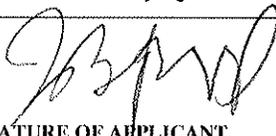

Lisa Daglian
CB4 BLP Committee Co-Chair


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

DATE

1 **Business License & Permits Committee**

Item #: 4

2

3 June 20, 2013

4

5 Dennis Rosen

6 Chairman

7 New York State Liquor Authority

8 80 S. Swan Street, 9th Floor

9 Albany, New York 12210

10

11 Re: Manhattan Fare Crop

12 d/b/a Brooklyn Fare

13 431 W. 37th Street

14

15 Dear Chairman Rosen:

16

17 Manhattan Community Board 4 (MCB4) recommends denial of a new On-Premise Liquor License for
18 Brooklyn Fare at 431 W. 37th Street unless the following stipulations, agreed to by the applicant, are part
19 of the method of operation for this establishment with a capacity of 65 people, with 7 tables, 35 seats, 6
20 tables outside with 24 seats within building property line.

21

22 > Will adhere to CB4 outdoor guidelines – closed and vacated by 10PM Sunday-Thursday and
23 11PM Friday & Saturday

24 > Will work with CB4 for jobs/applicants.

25

26

27 A signed copy of the questionnaire and stipulations are enclosed.

28

29 Sincerely,

30

Corey Johnson
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

31

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT		DOING BUSINESS AS (DBA)		
MANHATTAN FARE CORP.		BROOKLYN FARE		
STREET ADDRESS		CROSS STREETS		
431 West 37 th ST, UNIT B, NY NY 10036		Between 9 th + 10 th Avenues on 37 th ST.		
OWNER	NAME:	MONEER ISSA	ATTORNEY NAME:	ARTHUR A. HIRSCHLER
	PHONE:	917-750-1055 (cell)	PHONE:	212-301-6945
	FAX:		FAX:	
MANAGER	NAME:	MONEER ISSA	LANDLORD NAME:	WEST 37 th YVY LLC
	PHONE:	917-750-1055 (cell)	PHONE:	212-766-9651
	FAX:		FAX:	
DESCRIPTION OF BUSINESS				
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input 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 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 (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 of establishment?	BROOKLYN FARE KITCHEN CORP	
		What is/was the address of the establishment?	200 Schermerhorn ST, Brooklyn	
		What were the dates the applicant was involved with this former premise?	Presently involved	
	<input type="radio"/> Transfer	What is the prior license #?	1258785	
		What is the expiration date on the prior license?	11-30-13	
		Are you making any alterations or operational changes?	<input type="radio"/> YES	<input type="radio"/> NO
		If alterations or operational changes are being made, please attach the plans to this form.		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
Please describe the nature of the alterations and attach the plans				

OPERATIONAL ISSUES

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HOURS	Operation	5PM - 11 PM	5PM - 11AM	5PM - 11PM	5AM - 11AM	5AM - 11PM	5AM - 11AM	5AM - 10 PM
	Music	"	"	"	"	"	"	"
	Kitchen	8 AM - 10:30 PM	8:AM - 10:30 PM	8:AM - 9:30 AM				

(NCC)

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
	65	65	7	35	0	0	0	24	6

How many floors are there? What is the capacity for each floor? (please respond in space provided)	1/2	1/4	0+	ONE (1) FLOOR
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)	YES	<input checked="" type="radio"/> NO	N/A	
Will applicant have bottle service?	<input checked="" type="radio"/> YES	NO	N/A	
Will you be hosting private parties and promotional events?	YES	NO	N/A	maybe
Will outside promoters be used?	YES	<input checked="" type="radio"/> NO	N/A	
Will the security plan submitted be implemented?	YES	<input checked="" type="radio"/> NO	N/A	
Will State certified security personnel be used?	YES	<input checked="" type="radio"/> NO	N/A	
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?	<input checked="" type="radio"/> 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	<input checked="" type="radio"/> NO	N/A	
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)	YES	<input checked="" type="radio"/> 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	<input checked="" type="radio"/> N/A	
Will applicant provide contact information to neighbors and respond to complaints that arise?	<input checked="" type="radio"/> YES	NO	N/A	
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?	<input checked="" type="radio"/> YES	NO	N/A	

If you plan to have music, what type(s)? BACKGROUND LIVE MUSIC DJ *music inside only*

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	<input checked="" type="radio"/> NO	N/A	11 PM
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	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	<input checked="" type="radio"/> NO	<input checked="" type="radio"/> N/A	NECESSARY

OUTDOOR ITEMS				
Will applicant use the rooftop, rear yard or any outdoor space?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	rear yard (small)
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	<input checked="" type="radio"/> NO	<input type="radio"/> N/A	11 PM 
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	<input type="radio"/> NO	<input type="radio"/> N/A	Seating only 
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	No Standing
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	<input type="radio"/> NO	<input type="radio"/> 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	<input type="radio"/> NO	<input type="radio"/> 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	<input type="radio"/> NO	<input type="radio"/> N/A	

LOCATION & ZONING				
Primary Zoning District:		Overlay (If Applicable):		
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Is the 500 Foot Rule or 200 Foot Rule Triggerred? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input type="radio"/> YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A	
Is a Public Assembly permit required?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	<input type="radio"/> N/A	
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> N/A	
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1			
	# 2			
	# 3			

ADDITIONAL INFORMATION: (Applicant Use)

This will be a first class Restaurant similar to owner's other Restaurant by the name of Brooklyn Fare located at 200 Schermerhorn Street, Brooklyn, NY. There is NO BAR & PATRONS CANNOT DRINK unless they are also Dining. The Restaurant is presently under construction, so I am forwarding a Diagram of the SEATING & menus in his Brooklyn Restaurant.

ADDITIONAL NOTES: (Office Use Only)

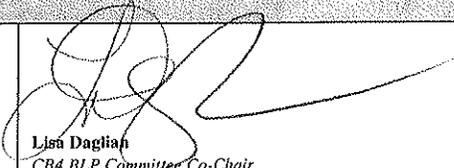
ADDITIONAL SUPPLACTIONS: (Office Use Only)

- will adhere to CB4 outdoor guidelines
 - closed and vacated
 - by 10pm Sun - Thurs
 - 11pm Fri - Sat
- will work with CB for jobs/applicants

MS

Manhattan Community Board 4 (MCB4) recommends:	<input type="radio"/> Approval <input type="radio"/> Denial unless all agreed to by applicant is part of the method of operation <input type="radio"/> Denial
--	---

CB4 REPRESENTATIVES

Nelly Gonzalez <i>CB4 Community Associate</i>	 Lisa Daglian <i>CB4 BLP Committee Co-Chair</i>	 Paul Seres <i>CB4 BLP Committee Co-Chair</i>
--	---	--

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	DATE
--------------------	---	------

1 **Business License & Permits Committee**

Item #: 5

2
3 June 20, 2013

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

10
11 Re: 818 10th Ave., Inc
12 d/b/a Reserve
13 818 10th Avenue (54/55)

14
15 Dear Chairman Rosen:

16
17 Manhattan Community Board 4 (MCB4) recommends denial of a new On-Premise Liquor License for
18 Reserve at 818 10th Avenue (54/55) unless the following stipulations, agreed to by the applicant, are part
19 of the method of operation for this establishment with a capacity of 60 people, with 6 tables, 20 seats, 1
20 stand-up bar with 10 seats, 5 tables outside with 10 seats within building property line.

- 21
22
- 23 ➤ Soundproof ceiling
 - 24 ➤ Will provide diagram of outdoor space with clearly shown escape egress
 - 25 ➤ Rear yard will close at 9PM Sunday-Thursdays and 11PM Friday & Saturday – clear & vacated
 - 26 ➤ Rear Yard will open at 4PM
 - 27 ➤ Job postings on website
 - 28 ➤ Distribute contact info and respond to any complaints.
 - 29 ➤ No music outside

30 A signed copy of the questionnaire and stipulations are enclosed.

31
32 Sincerely,

33
Corey Johnson
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

34

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT 818 10th Ave., Inc.		DOING BUSINESS AS (DBA) Reserve			
STREET ADDRESS 818 10th Ave., New York, NY		CROSS STREETS 54th and 55th			
OWNER	NAME:	Joe Miller	ATTORNEY		
	PHONE:	631-331-3334			
	FAX:	631-880-7101			
MANAGER	NAME:	Michael G. LoRusso	LANDLORD		
	PHONE:	516-921-4305			
	FAX:	631-382-8190			
DESCRIPTION OF BUSINESS					
Establishment Type:	<input checked="" type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization – Members Only) <input type="radio"/> Other (Explain): _____				
Method of Operation:	<input type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input checked="" type="radio"/> Other (Explain): <u>tavern serving food at all hours of operation</u>				
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 XXX	NO	
		What is/was the name of establishment?	Claw		
		What is/was the address of the establishment?	744 9th Ave.		
		What were the dates the applicant was involved with this former premise?	9/2012-present		
	<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 type="radio"/> Alteration	What is the current license #?			
		What is the expiration date on the current license?			
<i>Please describe the nature of the alterations and attach the plans</i>					

OPERATIONAL ISSUES

HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	12p-2a	12p-2a	12p-2a	12p-2a	12p-2a ⁴	12p-2a ⁴	12p-2a
	Music	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Kitchen	12p-2a	12p-2a	12p-2a	12p-2a	12p-2a ⁴	12p-2a ⁴	12p-2a

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
	60	40-50	6	20	0	1	10	10	5

How many floors are there? What is the capacity for each floor? (please respond in space provided)	1-2	3-4	5+	1
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	no
Will applicant have bottle service?	YES	NO	N/A	no
Will you be hosting private parties and promotional events?	YES	NO	N/A	no
Will outside promoters be used?	YES	NO	N/A	no
Will the security plan submitted be implemented?	YES	NO	N/A	yes
Will State certified security personnel be used?	YES	NO	N/A	no
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?	YES	NO	N/A	yes
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	no
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)	YES	NO	N/A	no
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	n/a
Will applicant provide contact information to neighbors and respond to complaints that arise?	YES	NO	N/A	yes
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?	YES	NO	N/A	yes

If you plan to have music, what type(s)?	BACKGROUND	LIVE MUSIC	DJ	background / ambient
--	------------	------------	----	----------------------

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	yes
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	yes
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	yes

OUTDOOR ITEMS

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

LOCATION & ZONING

Primary Zoning District:	C	Overlay (If Applicable):	F4	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	N/A	Yes... clinton
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	N/A	yes
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	no
Is a Public Assembly permit required?	YES	NO	N/A	no
Are your plans filed with DOB?	YES	NO	N/A	yes
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	CB 4		
	# 2			
	# 3			

ADDITIONAL INFORMATION: (Applicant Use)

"Reserve" will be small, quiet neighboring gathering place. A light menu including appetizers, pub food and some entrees will be served at all hours of operation. The applicant, an experienced restaurant operator, is aware of quality of life issues and promises to be respectful of the rights and needs of neighbors at all times.

ADDITIONAL NOTES: (Office Use Only)

ADDITIONAL STIPULATIONS: (Office Use Only)

- soundproofed ceiling
- will provide diagram of outdoor space with clearly shown fire escape egress
- rear yard will close at 9PM Sun-Thurs and 11pm Fri & Sat - cleared & vacated.
- rear yard will open at 4PM
- job postings on website
- distribute contact info & respond to any complaints
- no music outside

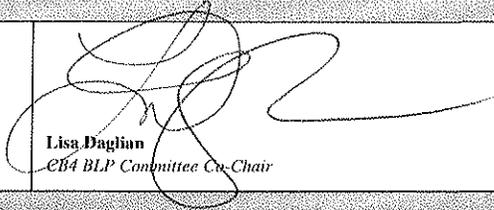


Manhattan Community Board 4 (MCB4) recommends:

Approval Denial unless all agreed to by applicant is part of the method of operation 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

6/11/2013
DATE

1 **Business License & Permits Committee**

Item #: 6

2
3 June 20, 2013

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

10
11 Re: Gastro Market Ltd.
12 315-317 10th Avenue (28/29)

13
14 Dear Chairman Rosen:

15
16 Manhattan Community Board 4 (MCB4) recommends denial of a new On-Premise Liquor License for
17 Gastro Market Ltd. At 315-317 10th Avenue (28/29) unless the following stipulations, agreed to by the
18 applicant, are part of the method of operation for this establishment with a capacity of less than 74
19 people, with 11 tables with 49 seats at 315 10th Ave and 11 tables with 38 seats at 317 10th Ave, 1
20 service bar with 13 seats, and 12 tables outside with 36 seats within building property line.

21
22 A signed copy of the questionnaire and stipulations are enclosed.

23
24 Sincerely,

25
Corey Johnson
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

26

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT Gastro Market Ltd.		DOING BUSINESS AS (DBA)	
STREET ADDRESS 315 - 317 10th Ave, NYC, NY 10001		CROSS STREETS Btw 28th and 29th street	
OWNER	NAME: Michael Tzezaolidis	ATTORNEY	NAME: Nehal Trivedi
	PHONE: 631-682-1827		PHONE: 516 470 1379
	FAX:		FAX: 516 470 1382
MANAGER	NAME:	LANDLORD	NAME: Pradera Realty Corp.
	PHONE:		PHONE: 917-796-8474
	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 <i>(check one)</i>	<input type="radio"/> New	Has applicant owned or managed a similar business?	YES	NO
		What is/was the name of establishment?		
		What is/was the address of the establishment?		
		What were the dates the applicant was involved with this former premise?		
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	YES	NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input checked="" type="radio"/> Alteration	What is the current license #?	1259862	
		What is the expiration date on the current license?	2/28/2014	
<i>Please describe the nature of the alterations and attach the plans</i> - On premise brewing license and extend the premises				

OPERATIONAL ISSUES

HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	11-12	11-12	11-12	11-12	11-12	11-12	11-12
	Music	11-12	11-12	11-12	11-12	11-12	11-12	11-12
	Kitchen	11-12	11-12	11-12	11-12	11-12	11-12	11-12

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
	140	81 94	20	70	1	0	15	48	12

How many floors are there? What is the capacity for each floor? (please respond in space provided)	<input checked="" type="radio"/> 1-2	<input type="radio"/> 3-4	<input type="radio"/> 5+	1	75-80
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)	YES	<input checked="" type="radio"/> NO	N/A		NO
Will applicant have bottle service?	YES	<input checked="" type="radio"/> NO	N/A		NO
Will you be hosting private parties and promotional events?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A		Yes
Will outside promoters be used?	YES	<input checked="" type="radio"/> NO	N/A		NO
Will the security plan submitted be implemented?	YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A		N/A
Will State certified security personnel be used?	YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A		N/A
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A		Yes
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	<input checked="" type="radio"/> NO	N/A		NO
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)	YES	<input checked="" type="radio"/> NO	N/A		NO
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)	YES	<input type="radio"/> NO	<input checked="" type="radio"/> N/A		N/A
Will applicant provide contact information to neighbors and respond to complaints that arise?	YES	<input type="radio"/> NO	N/A		Yes
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?	YES	<input checked="" type="radio"/> NO	N/A		NO

If you plan to have music, what type(s)? BACKGROUND LIVE MUSIC DJ Background

BUILDING DESIGN

Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	Yes
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	N/A	Yes.
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A	Yes

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

LOCATION & ZONING

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

Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____

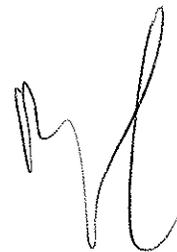
NOTIFICATION: What organizations / community groups have you notified regarding your application? <i>None.</i>	# 1	
	# 2	
	# 3	

ADDITIONAL INFORMATION: (Applicant Use)

Crast's market is an upscale establishment providing quality food and beverage. We have artisan menu and our destination will help continue the trend of making this neighborhood busier, healthier, safer and more attractive.

ADDITIONAL NOTES: (Office Use Only)

- Brew pub license
- extend to 317 10th Ave as part of license (w 315 10th Ave)
- no other change of Method of Operation
- 87 total inside seating
- will get plans & correct counts before full board.

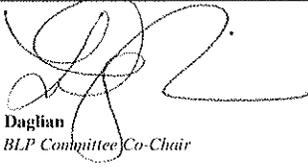


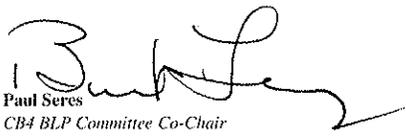
Manhattan Community Board 4 (MCB4) recommends:

Approval Denial unless all agreed to by applicant is part of the method of
operation 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

DATE

1 **Business License & Permits Committee**

Item #: 7

2

3 June 20, 2013

4

5 Dennis Rosen

6 Chairman

7 New York State Liquor Authority

8 80 S. Swan Street, 9th Floor

9 Albany, New York 12210

10

11 Re: Seki, Inc

12 208 W. 23rd Street (7/8)

13

14 Dear Chairman Rosen:

15

16 Manhattan Community Board 4 (MCB4) recommends denial of a new On-Premise Liquor License for
17 Seki, Inc. at 208 W. 23rd Street (7/8) unless the following stipulations, agreed to by the applicant, are
18 part of the method of operation for this establishment with a capacity of 70 people, with 18 tables with
19 62 seats, 1 service bar and 1 stand up bar with 6 seats.

20

21 ➤ Will apply for bike rack

22 ➤ Delivery bikes will include ID, lights, restaurant name

23

24 A signed copy of the questionnaire and stipulations are enclosed.

25

26 Sincerely,

27

Corey Johnson
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

28

Manhattan Community Board 4

Liquor License Stipulations Application

(All Fields Must Be Completed)

APPLICANT		DOING BUSINESS AS (DBA)		
Seki Inc.		N/A		
STREET ADDRESS		CROSS STREETS		
208 W. 23rd Street, New York, NY 10011		7th & 8th Avenues		
OWNER	NAME: Neng Ju Wang	ATTORNEY	NAME:	
	PHONE: 917-583-8852		PHONE:	
	FAX:		FAX:	
MANAGER	NAME:	LANDLORD	NAME: J.S.B Properties LLC.	
	PHONE:		PHONE: 212-315-5555	
	FAX:		FAX:	
DESCRIPTION OF BUSINESS				
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input 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 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 (check one)	<input checked="" type="radio"/> New <i>AN</i>	Has applicant owned or managed a similar business?	YES	NO
		What is/was the name of establishment?		
		What is/was the address of the establishment?		
		What were the dates the applicant was involved with this former premise?		
	<input checked="" type="radio"/> Transfer	What is the prior license #?	1162923	
		What is the expiration date on the prior license?	04/30/2013	
		Are you making any alterations or operational changes?	YES	<input checked="" type="radio"/> NO
		If alterations or operational changes are being made, please attach the plans to this form.		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
Please describe the nature of the alterations and attach the plans				

OPERATIONAL ISSUES										
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY		
	Operation	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	
	Music	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	
	Kitchen	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	11AM-12AM	
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	
	70	70	18	62	1	1	6	N/A	N/A	
How many floors are there? What is the capacity for each floor? (please respond in space provided)					1-2	3-4	5+			
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	NO	N/A			
Will applicant have bottle service?					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			
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					
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	<input checked="" type="radio"/> NO	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="radio"/> N/A
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	YES	NO	<input checked="" type="radio"/> 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
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="radio"/> N/A
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	<input checked="" type="radio"/> N/A

LOCATION & ZONING			
Primary Zoning District:	C2-7A R8B		Overlay (If Applicable):
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
Is the 500 Foot Rule or 200 Foot Rule Triggerred? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	NO	<input checked="" type="radio"/> N/A
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	N/A
Are your plans filed with DOB?	YES	<input checked="" type="radio"/> NO	N/A
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____		
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1		
	# 2		
	# 3		

ADDITIONAL STIPULATIONS: (Office Use Only)

- = will apply for bike rack
- delivery bikes will include ID,
lights - restaurant name

[Signature]

Manhattan Community Board 4 (MCB4) recommends:	<input type="radio"/> Approval <input type="radio"/> Denial unless all agreed to by applicant is part of the method of operation <input type="radio"/> Denial
--	---

CB4 REPRESENTATIVES

<p>Nelly Gonzalez <i>CB4 Community Associate</i></p>	<p>Lisa Daglian <i>CB4 BLP Committee Co-Chair</i></p>	<p>Paul Seres <i>CB4 BLP Committee Co-Chair</i></p> 
--	---	---

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.

<p>SIGN HERE →</p>	<p>SIGNATURE OF APPLICANT</p>	<p>DATE</p>
---------------------------	-------------------------------	-------------