Manhattan Community Board 1 Licensing & Permits Committee Liquor License Application Guidelines Revised 1- 2024

The Licensing & Permits Committee has established the following guidelines for review of Liquor License Applications. Please be accurate and complete with the information requested so the committee can properly address your application. The Committee asks applicants to give careful consideration to all quality of life issues, particularly with respect to hours of operation and noise, refuse removal and possible traffic/pedestrian congestion.

The Licensing & Permits Committee requires all applicants:

- 1) To post hearing notices Notices, 8½" x 11" must be posted on the exterior of all doors of the proposed establishment, and on a minimum of three (3) conspicuous sites one city block in each direction from the proposed establishment. The notice must include the name, address, proposed hours and method of operation of the establishment and the date, time and place of the public hearing at least **15 days** before the date of such hearing (sample provided in this packet). A dated photograph of three of the postings must be submitted no later than 15 days before the hearing.
- 2) To provide to the Committee seven days prior to the meeting, an electronic copy of the Liquor License Questionnaire and Summary Sheet, including each item noted below:

Map and Drawings - A map of Community District 1 (8½" x 11"), showing the location of the establishment, a legible architectural floor plan(s) and section(s) of the proposed interior layout including seating plan on 8½" x 11" sized paper (minimum).

Photographs – Color photographs showing the existing current interior and exterior of the site at 8½" x 11" size (minimum).

Menu- Food and beverages with proposed pricing, if applicable.

<u>Petition of Support</u>- Signatures in support of the business are to be gathered from within the immediate location of the business, no more than 2 blocks in either direction.

<u>NOTE:</u> The Committee may postpone or decline review if a questionnaire is not complete or accurate or if proper public notice has not been posted. Applicant will then be asked to write a letter to the SLA and CB1 explaining that the applicant was not prepared in time and attesting that no application to the SLA will be made until an appearance before and review by the Committee and full Community Board.

- 3) To provide at the Committee ten (10) hard copies, double sided, of the complete questionnaire packets for review.
- 4) To sign and have notarized a Stipulation Sheet indicating terms of operation agreed upon at the Committee meeting A copy of the agreed upon stipulations will be made after the vote and the applicant will be asked to notarize a copy either at that time if possible, or to return it notarized by the Friday before the full board meeting.
- 5) A principal must be present during the application review at the Committee meeting.

The Licensing & Permits Committee requires applicants to be prepared to stipulate to the following conditions of operation depending on which geographic area they are located:

Liquor Licenses (including beer and/or wine only):

TRIBECA	Closing Hours:	Weekdays	Weekends	
	Avenues: Side	1:00AM	2:00AM	
	streets:	12:00AM	1:00AM	

(It is understood that all patrons must be cleared from the premises at the closing hour.)

The Committee will consider extending closing hours after the establishment has been in operation for one year.

Open Window Conditions:	Weekdays	Weekends
Avenues (closing hours): Side	9:00PM	10:00PM
Streets (closing hours):	8:00PM	9:00PM

Only background music is allowed with open windows. Background music is defined as music that cannot be heard by neighbors.

Rooftop Permits:

The Committee discourages permits for rooftops. The Committee requires applicants to wait a minimum of a year after commencing operation before seeking a liquor license permit for a rooftop space.

Sidewalk Cafes:

The Committee requires applicants to wait a minimum of a year after commencing operation before seeking a Sidewalk Café.

Additional Notes:

The Committee may ask for additional conditions on a case by case basis. The determination of what constitutes an Avenue or Side Street for an establishment is determined by the address of the main front entrance. In Tribeca, streets running east to west are generally considered side streets.

FINANCIAL DISTRICT

Closing Hours: Weekdays 12:00AM Weekends 1:00AM

(It is understood that all patrons must be cleared from the premises at the closing hour.)

The Committee will consider extending closing hours after the establishment has been in operation for one year.

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Additional Notes:

The Committee may ask for additional conditions on a case by case basis.

SEAPORT/CIVIC CENTER

Hours:

Sunday: 12:00PM – 12:00AM

Monday - Wednesday -: 11:00AM - 12:00AM

Thursday - Friday: 11:00AM - 1:00AM

Saturday: 10:00AM - 1:00AM

(It is understood that all patrons must be cleared from the premises at the closing hour.)

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Additional Notes:

The Committee may ask for additional conditions on a case by case basis.

BATTERY PARK CITY

The Committee will review applications on a case by case basis.

PUBLIC MEETING NOTICE FOR LIQUOR LICENSE APPLICATION

SUBJECT: [ADDRESS]

Application for [type of license/ permit application]

Type of Establishment [Restaurant, Bar, Tavern, Hotel, Catering, etc

Applicant name [Entity Name; LLC, Inc, Corp, Ltd]

d/b/a [Establishment name]

Hours: [Proposed hours of operation]

for all licensed areas such as [List licensed areas/floors]

There will be an opportunity for public comment at the following Community Board Meeting:

DATE: [Day of the week], [MM/DD/YYYY]

TIME: [Time]

LOCATION: Manhattan Community Board 1

[Address of Licensing & Permits Committee Meeting]

(Please bring photo ID if attending)

Any member of the public interested in learning more about this application or in expressing their opinion about it is urged to attend this meeting. Please contact Community Board 1 via email at man01@cb.nyc.gov with any questions or comments.

CB 1 website https://www.nyc.gov/site/manhattancb1/index.page

A summary of this application is available from CB1 upon request.

PUBLIC MEETING NOTICE FOR LIQUOR LICENSE APPLICATION

STIB IECT.

SOBJEC1.
Application for
Type of Establishment
Applicant Name
d/b/a
Hours: Sunday:, Monday - Wednesday: Thursday:, Friday - Saturday:
for all licensed area such as
There will be an opportunity for public comment at the following Community Board Meeting:
DATE: TIME: LOCATION: Manhattan Community Board 1
(Please bring photo ID if attending)

CB 1 website https://www.nyc.gov/site/manhattancb1/index.page
A summary of this application is available from CB1 upon request.

Any member of the public interested in learning more about this

this meeting. Please contact Community Board 1 via email at

man01@cb.nyc.gov with any questions or comments.

application or in expressing their opinion about it is urged to attend

MANHATTAN COMMUNITY BOARD 1 Liquor License Application Questionnaire Summary Revised 10/2023

1-	Applicant Name
2-	Establishment Name (Corporate & DBA)
3-	Address for Proposed License
4-	Proposed Days/Hours of Operation
	4.1 What floor(s) is the establishment on?
5-	4.2 Any Rooftop, Terrace, Sidewalk Roadbed or other outside usage Square Footage of Location
6-	Method of Operations (bar restaurant, Catering, etc)
7-	Type of License (Full liquor/OP, beer and wine, etc.) 7.1 Type of application New Alteration Change in Method of Operation, Corporate Change, Class Change
8-	Outdoor Seating? □ Sidewalk □ Roadbed
10- (n	Type of Music? □ Live □ Recorded □ DJ - Volume of Music? □ Background □ Other o sound from events, performances or music will be heard outside the premises or by eighbors)
11	- Where will the kitchen exhaust system vent to?
12	- Annlicant's Previous Licensed Establishments and Addresses

This Liquor License Application Questionnaire Summary will be made available to the public one week prior to the Licensing and Permits Committee meeting. Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.

Community Board One Questionnaire Revised 9/2025

Any information provided herein is superseded by that described, if different, in the final stipulation sheet that will be agreed upon by the applicant and the Licensing & Permits Committee of Manhattan Community Board 1.

Section 1: General Information

Type of application:	New application Temporary Retail Permit	Method of Op Corporate Ch	peration Change ange	Alteration Transfer	
Describe the method of op	eration, alteration or corpor	rate change:			
Type of proposed establ	ishment (check one):				
Restaurant Bar Tavern	Cafe Catering Banquet Hall	Hotel Kiosk Club		sbar Entertainm :	
Seeking license to sell:	Beer & Cider Wine,	Beer & Cider	Liquor, Wine, Beer	& Cider	
To be sold: On-premis	se Off-premise				
	nment:				
	hment:				
Previous establishment name	, if Transfer:				
Address of establishmen	nt:				
Cross Street of establish	ment:				
•	with a primary function a es of worship within 200			Yes	No
	other establishments with stablishment? If Yes, please	•	•	Yes tances.	No
What is the area zoned What is the zoning design	for? Residential gnation of the property?	Comme	ercial Mixe	d	
Visit https://zola.planning	.nyc.gov			-	
muomoutry?	ny residential buildings a	re there neighl	poring or across th	e street froi	n the
How many residential u	nits are within the proper	ty?			

Community Board One Questionnaire Revised 9/2023

Section 2: Size and capacity of establishment

Which floor(s) will the	establishment be on?			
List use of each floor:				
Total square footage:		Number of bathı	rooms:	
Public Assembly Capacity:		ADA Compliant bathrooms:		
	Total Square Footage	# of Tables	# of Seats	
Dining Area				
Bar Area				
Kitchen Area				
Terrace Area				
Rooftop Area			_	
Number of stand-up bar		r of service bars:		
Any food counters?	Yes No			
Describe all bars (length	, shape, and location):			
	Monday - Thursday	Friday - Saturday	Sunday	
Hours of Operation				
	·			
Bar Service Hours				
Rooftop Service Hours	·			
Outdoor seating hours				

I understand this to mean that all patrons will be cleared from the establishment at the specified hour.

Community Board One Questionnaire Revised 9/2023

Section 3

Will there be music?	Yes	No				
Will you have subwoofers	? Yes	s No				
If yes, what type of music Background (If checked that no sound from events, perfection)	d, the applican	t has agreed	to abide by the			Jukebox music, such
Other, describe						
Type of sound equipment:						
Size and number of speake	ers and ampo	erage:				
Where will the speakers be	e installed?					
Type of sound proofing to	be used:					
How many TVs or monito	ors will you	have?				
Will there be non-musical	entertainme	ent?	Yes	No		
Describe:						
Will the premises permit of The Cabaret Liquor License fi businesses with musical entert	rom the New				is require	d for
Will the windows be open	ed or closed		Open	Closed		
If open, what hour	rs?					
I have/intend to apply for o	outside seati	ng, throug	h the DOT o	pen restaurant p	rogram	
Sidewalk	Ro	adbed				
What type of security and	crowd contr	ol will you	ı employ?			
Do you intend to have bic	•	•		No ortation bicycle ru	les)	
At what times of day or ni	ght will you	receive d	eliveries of s	upplies?		
At what time will you hav	e garbage pi	ickup?				

Community Board One Questionnaire Revised 9/2023

Section 4

Have you signed a lease for the space	e?	Yes	No			
Does the premise have a valid certification	icate of oc	cupancy?		Yes	No	
Will you require any other permits to you have them?	o operate	your estab	ishment at t	his location?	? If so, when	ı will
Are the premises to be licensed divide which the applicant does not have ex	•		• •	vate passage Yes	·	er No
Is there interior access to any other t	floor(s) tha	at will not	be part of th	e licensed p	remises?	
If yes, list floors and means o	of access to	each floc	Yes r(i.e, stairs,	No elevator, etc	·.)	
Will the basement or any other floor	rs be used Ye	_	of alcoholi No	c beverages?	?	
If yes, does any other person/						
Will new kitchen exhaust equipmen What type of kitchen exhaust systen			Yes here will it v		No	
Where will the air conditioning syst What is the tonnage of the air	-					
Is a membership or reward program Explain:	required t	to access a	ny of the lic	ensed areas?	?	
Are premises within a hotel?	Yes	No				
How many rooms?		H	ow many flo	oors?		
Finally, please submit the following	ng items v	vith this q	uestionnair	e:		
latest copy of your menu floor plan Certificate of occupancy						

Community Board One Questionnaire Revised 9/2023

Section 5: Corporate Background information

Corporate name:	
Corporate address:	Phone number:
Previous or existing corporate name(s) and d/b/a	
Manager:	Manager phone contact:
Previous related experience of the manager:	
Name(s) and addresses of all principals:	
Have any of the principals been previously licensed If <u>yes</u> indicate name(s) and address of other establis	•
Were there any violations on previous establishment please list type, date and which establishment	ts for which you served as a principal? If so,
I will not apply to the SLA for an alteration to the n without first notifying the community board.	nethod of operation or the hours of operation
This page must be printed, signed and scanned by written signature.	ack into PDF form so we have a hand
Signature of Principal	- Date (mm/dd/yyyy)
	_
Printed name of Principal	
Signature of Presenter (if different from Principal)	Date (mm/dd/yyyy)
Printed name of Presenter (if different from Princip	al)

We recommend that you attend the community board meeting at which the full board will vote on your liquor license application.

We, the undersigned residents of		_	-t-1.11-1t-
(please indicate	type of license) license to	the following applicant/e	stabiishment:
Address of premises:			
The business will be a () 1	restaurant () tavern-restau	nrant () other:	
The hours of operation will be	Weekday Weeken	Weekdays (Mon. – Wed.) Weekends (Fri. & Sat.)	
PLEASE NOTE: signatures show within 2-block area of property in		uildings, adjoining buildi	ngs, and
NAME	SIGNATURE	ADDRESS	

Manhattan Community Board 1 Liquor License Stipulations

I,	, as a qualified representative of	·····
	located at	, New York, New York,
agree to th	e following stipulations for the applicant's Method of Operation for their _	license
	Complete all sections	
(1) My hou	rs of operation will beMon - Wed,Thurs, (I understand this to mean that all patrons will be cleared from the establishm	
(2) I will op	erate a full-service restaurant, (please describe type of restaurant):	
	with full food service until hour(s) before closing.	
(3) I will in	tall soundproofing Yes No N/A	
(please desc	ribe type and locations)	
(4) I will ha	ve: DJs □Yes □No Live music □Yes □No Recorded Music □Yes □No	Dancing Tyes No Promoted
events 🗆 Ye	S □No Cover fee events □Yes □No Scheduled performances □Yes	s □No
	of all music, events or performances will be at background levels only. If it car round music. \boxtimes	be heard outside, or by neighbors, it
	se all doors and windows bySun-Thurs andFri-Sat. □ I will not we delivery of supplies, goods and services during the hours of	have French doors or windows.
(8) I will en	uploy a doorman/security personnel on the following days and hours:	
	ively manage crowds congregating on the street at night, to minimize disturban	_
(10) I wi	I not apply to the SLA for an alteration to the method of operation agreed to by sommunity Board 1. \boxtimes	
	l wait at least one year after beginning operation before applying for a sidewall	café license. Tyes No N/A
(12) I wi	l conspicuously post this stipulation form beside my liquor license inside of my	husiness 🏻
	firm that I have violations from previous establishments for which I l	
, ,	l (additionally):	ave served as a principal.
(-1)	- (
	ats may contact the manager/owner at the below number. Complaints will be adated method of operation if necessary in order to minimize my establishment's	
Name:	Phone Number:	
	ontact: Phone Numbe	
I hereby ce	tify that the information provided above is truthful and accurate based up	oon my personal belief.
Signed	Dated	
_	s day of	
	Notary Public	

Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. These stipulations and board resolution shall supersede all other documents.

Rev. 9/2025

Manhattan Community Board 1 Liquor License Stipulations for Large Venue Establishments

A "large venue" as defined by the NYC Department of Building designation on public assembly is an establishment designed to hold 75 persons or more

Name of Establishment:

Address:

(1) I will follow the recommendations made by the sound engineer and that noise including sound and bass vibrations cannot be heard outside	
(2) I will take the steps outlined in the resolution and in the traffic plan	1
(3) I will follow and abide by the conditions set forth in the resolution collected on the follows days and hours:	
(4) I will have delivery of supplies, goods and services during the hour	rs of
(5) Lighting that affects the security of the community and quality of lappropriately lit while not attracting unsavory elements (e.g. rodents, f	•
(6) I understand that I must submit a notice to the community board folleast 45 days in advance	r a street activity permit for my licensed establishment at
(7) I understand that I must appear before the Licensing & Permits Corproperty and provide proof of receipt of the 30-day Standardized Notic I am expanding to, and documentation confirming the municipal's apprestipulations sheet outlining the conditions that must be adhered to for the standard of the	the form, a block plot diagram detailing the municipal space roval to use the space. I also agree that I must sign the
(8) Cameras will be used for viewing the entrance and egress.	
(9) I agree to follow the conditions outlined in the resolution on security congestion and unruly patrons.	ty oversight of the establishment to prevent noise,
(10) I will (additionally):	
(15) Residents may contact the manager/owner at the below number. Cethe above-stated method of operation if necessary in order to minimize	
Name:	Phone Number:
Alternate Contact:	Phone Number:
I hereby certify that the information provided above is truthful an	
Signed	Dated
Sworn to this day of	
	blic

Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. These stipulations and board resolution shall supersede all other documents.