1-	Applicant Name
	Serafina To Go 30 Broad LLC
2-	Establishment Name (Corporate & DBA)
	Serafina Express 30
3-	Address for Proposed License
	30 Broad Street, New York, NY 10004
4-	Proposed Days/Hours of Operation  Sunday-Thursday: 11am to 10pm and Friday-Saturday: 11am to 11pm  4.1 What floor(s) is the establishment on?  Ground Floor  4.2 Any rooftop, terrace, or other outside usage?  N/A
5-	Square Footage of Location
	2138 SQ FT
6-	Method of Operations (bar restaurant, Catering, etc)
	Bar/Tavern
7-	Type of License (Full liquor/OP, beer and wine, etc.)  Class Change from a Tavern Wine to an On-Premises Liquor License 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
8-	Sidewalk Café? Yes/No <b>No</b>
9-	Type of Music? ☐ Live
10	-Volume of Music? Background (no sound from events, performances or music will be heard outside the premises or by neighbors)
	☐ Other
11	- Where will the kitchen exhaust system vent to?  Directly to the street
12	- Applicant'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 Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.

See attached rider

### Manhattan Community Board 1 Liquor License Stipulations

I,, as a qualified represe	entative of Seratina Express 30
located at 30 Broad street	, New York, New York, agree to
the following stipulations for the applicant's Method of Ope	eration for their liquor, wine, beer & Cider license
(1) My hours of operation will be	e establishment at the specified hour).
(2) I will operate a full-service restaurant, (please describe type	of restaurant): Bar/Tavern
	with full food service until hour(s) before closing.
(3) I will install soundproofing (please describe type and location	ons)
(4) I will have: DJs □Yes ☑No Live music □Yes ☑No Rec	
Promoted events Tyes No Cover fee events Ty	Yes ™No Scheduled performances □Yes ☑No
(5) Volume of all music, events or performances will be at back is not background music.	or ound levels only. If it can be heard outside, or by neighbors, it
(6) I will close all doors and windows bySun-Thurs and	Fri-Sat. I will not have French doors or windows.
(7) I will have delivery of supplies, goods and services during t	
	112
(8) I will employ a doorman/security personnel on the followin	
(9) I will actively manage crowds congregating on the street at	
Community Board 1. 🛛	of operation agreed to by this stipulation without first notifying
(11) I will not apply for a sidewalk café license until at least a	year after beginning operation. ☑Yes □No
(12) I will conspicuously post this stipulation form beside my l	iquor license inside of my business. 🛛
(13) I confirm that I have violations from previous est	
(14) I will (additionally):	
(15) Residents may contact the manager/owner at the below nu the above-stated method of operation if necessary in order to m	mber. Complaints will be addressed immediately and I will revisit
	912/91/08/
Name: FABIU GRANATO	Phone Number: 117 6 1 000 /
Alternate Contact:	Sof Phone Number: 917-33/4656
I hereby certify that the information provided above is trut	hful and accurate based upon my personal belief.
	Dated MAX BOOKMAN MAX BOOKMAN MAX BOOKMAN MAX BOOKMAN
Signed	Dated  MAX BOOKMAN  NO 02BO6334211  NO 02BO6334211  NO 02BO6334211
Sworn to this B day of Mach 2a	NOTARY PUBLIC-STATE NO 02B06334211 N
No	otary Public Oualing Expires
Community Board 1 requests that the SLA add these stipulation	ns to the license of the above-mentioned applicant. These
submanions and nown resolution snan subersene an omer noch	HIS/HO,

1-	Applicant Name 109 W Broadway Basement LLC
2-	Establishment Name (Corporate & DBA) Holywater
3-	Address for Proposed License  109 W Broadway, Basement, New York, NY 10013
4-	Proposed Days/Hours of Operation (Sun - Sat) 10am - Zam
	4.1 What floor(s) is the establishment on? Basement
	4.2 Any rooftop, terrace, or other outside usage? N/A
5-	Square Footage of Location 2,039 sq ft
6-	Method of Operations (bar restaurant, Catering, etc) Tavern
7-	Type of License (Full liquor/OP, beer and wine, etc.) Full Liquor, beer, wine & cider
	7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change) Change in Method of operation
8-	Sidewalk Café? Yes/No No
9-	Type of Music? X Live ☐ Recorded □ DJ
10-	Volume of Music? Background (no sound from events, performances or music will be heard outside the premises or by neighbors)
	□ Other
11-	Where will the kitchen exhaust system vent to? There is an existing exhaust system which vents to the roof
12-	Applicant's Previous Licensed Establishments and Addresses
	see attached

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.

# 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

(1) I will follow the recommendations made by the sound engine that noise including sound and bass vibrations cannot be hear	gineer and outlined in the acoustical testing report. I will make sure rd outside of the premises of my establishment: YES
(2) I will take the steps outlined in the resolution and in the tr	raffic plan to manage vehicular and pedestrian activity: YES
(3) I will follow and abide by the conditions set forth in the recollected on the follows days and hours: DAILY BETWEEN	resolution regarding garbage disposal and collection. Garbage will be 11:30PM AND 5AM
(4) I will have delivery of supplies, goods and services during DAILY BETWEEN 8AM AND 6PM	ng the hours of
(5) Lighting that affects the security of the community and quappropriately lit while not attracting unsavory elements (e.g.	uality of life of nearby residents must be considered, and must be rodents, flies, mold, hazardous substances, etc.) YES
(6) I understand that I must submit a notice to the community least 45 days in advance: YES	y board for a street activity permit for my licensed establishment at
property and provide proof of receipt of the 30-day Standard	ermits Committee if I am applying for an expansion onto municipal lized Notice form, a block plot diagram detailing the municipal municipal's approval to use the space. I also agree that I must sign dhered to for the roadbed/sidewalk seating: YES
(8) Cameras will be used for viewing the entrance and egress	s: YES
(9) I agree to follow the conditions outlined in the resolution congestion and unruly patrons: MANAGEMENT TRAINED IN	on secuirty oversight of the establishment to prevent noise, I SECURITY AND CROWD CONTROL OVERSIGHT AND PROCEDURES
(10) I will (additionally): MAINTAIN THE BUSINESS IN A MANNER AS TO NOT CREATE DIS	PROFESSIONAL, NEIGHBORLY STURBANCE TO THE COMMUNITY.
(15) Residents may contact the manager/owner at the below the above-stated method of operation if necessary in order t	number. Complaints will be addressed immediately and I will revisit to minimize my establishment's impact on my neighbors.
Name: TOM SIMPSON	Phone Number: 302-377-9156
Alternate Contact: MICHAEL CRAMER	Phone Number: 231-392-4277
I hereby certify that the information provided above is t	truthful and accurate based upon my personal belief.
Allen, Koz	1/4/23
Signed	Dated
Sworn to this 4th day of January 20	Notary Public - State of New York NO. 01DE6391929  Qualified in Queens County
	Notary Public Limits ion Expires May 20, 2023
Community Board 1 requests that the SLA add these stipul stipulations and board resolution shall supersede all other d	ations to the license of the above-mentioned applicant. These locuments.

Rev. 12/21

## Manhattan Community Board 1 Liquor License Stipulations 109 West Broadway Basement LLC dba Holywater I. Alexander Pincus , as a qualified representative of located at 109 W Broadway, Basement, New York, NY 10013 , New York, New York, agree to Full Liquor, Wine, Beer & Cider the following stipulations for the applicant's Method of Operation for their license (1) My hours of operation will be Sunday - Saturday 10am - 2am (I understand this to mean that all patrons will be cleared from the establishment at the specified hour). Oyster bar (2) I will operate a full-service restaurant, (please describe type of restaurant): with full food service until hour(s) before closing. N/A (3) I will install soundproofing (please describe type and locations) (4) I will have: DJs Tyes Tho Live music Yes Special events only Recorded Music Tyes Ino Dancing Tyes Tho Cover fee events Tyes No Scheduled performances Tyes Alo Promoted events Tyes No (5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background music. (6) I will close all doors and windows by Sun-Thurs and Fri-Sat. It will not have French doors or windows. (7) I will have delivery of supplies, goods and services during the hours of Daily between 8am and 6pm N/A (8) I will employ a doorman/security personnel on the following days and hours: (9) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents. (10) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1. (11) I will not apply for a sidewalk café license until at least a year after beginning operation. The No (12) I will conspicuously post this stipulation form beside my liquor license inside of my business. (13) I confirm that I have violations from previous establishments for which I have served as a principal. (14) I will (additionally): We will have three (3) televisions (15) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors. 302-377-9156 Tom Simpson Phone Number: Name: Michael Cramer 231-392-4277 Phone Number: Alternate Contact: I hereby certify that the information provided above is truthful and accurate based upon my personal belief. Signed Dated

My Commission Expires May 20, 2023 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. 12/18

Notary Public

Sworn to this

LINDSAY DEWALT

Notary Public - State of New York

NO. 01DE6391929

Qualified in Queens Co. ": v

1- Applicant Name TK Tribeca LLC
2- Establishment Name (Corporate & DBA) TK Tribeca LLC d/b/a Tara Kitchen
3- Address for Proposed License 253 Church Street, New York, NY 10013
4- Proposed Days/Hours of Operation Sun - Thurs 11am-9pm Fri & Sat 11am-10pm  4.1 What floor(s) is the establishment on? Ground Floor and Basement  4.2 Any rooftop, terrace, or other outside usage?
Intends to apply for Temporary DOT Program in Spring 2023  5- Square Footage of Location 1,718 square feet
6- Method of Operations (bar restaurant, Catering, etc) Restaurant
7- Type of License (Full liquor/OP, beer and wine, etc.) Full liquor/OP
7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change) New
8- Sidewalk Café? Yes/No Intends to apply for Temporary DOT Program in Spring 2023
9- Type of Music? Live Maccorded DJ
10-Volume of Music? ☑ Background (no sound from events, performances or music will be heard outside the premises or by neighbors)
☐ Other
11- Where will the kitchen exhaust system vent to? The roof
12- Applicant's Previous Licensed Establishments and Addresses
The applicant principal, Aneesa Waheed, is the owner and executive chef from the following establishments:  BOLLYWOOD MASALA CORP. d/b/a Tara Kitchen-431 Liberty Street, Schenectady, NY 12305- Serial #2229605 & 2186409  BOLLYWOOD MASALA CORP. d/b/a Tara Kitchen -1785 WESTERN AVE GUILDERLAND, NY 12203 - Serial #2224301  BOLLYWOOD MASALA CORP. d/b/a Tara Kitchen -172 RIVER ST STE A TROY, NY 12180- Serial #2229605

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.

## Manhattan Community Board 1 Liquor License Stipulations

, Aneesa Waheed	, as a qualified representat	ive of TK Tribeca L	.LC ,
ocated at 253 Church Street,			New York, New York, agree to
he following stipulations for the	applicant's Method of Operati	on:	
My hours of operation will be I understand this to mean that all	11am-9pm Sunday – Topatrons will be cleared from the e	hursday and 11am-1 stablishment at the spec	Opm Friday - Saturday cified hour).
2) I will operate a full-service re	estaurant, (please describe type of	of restaurant); Morroc	an Restaurant
	with full	food service until	hour(s) before closing.
I will install soundproofing (p	lease describe type and locations)	Type: acoustic pa	nels to soften noise and soun
y - management of the comment of the		Location: mounted	d on the wall in side of the res
(4) I will have: DJs □Yes ☑No Promoted events	Live music Yes No I	Recorded Music ☑Yes ☐Yes ☑No Scheo	duled performances ☐Yes ☑No
(5) Volume of all music, events neighbors, it is not background.	or performances will be at ba	ckground levels only.	If it can be heard outside, or by
(6) I will close all doors and wind	ows bySun-Thurs and	_ Fri-Sat. 2 I will not	have French doors or windows.
(7) I will employ a doorman/secu	rity personnel on the following da	ys and hours: N/A	
(8) I will actively manage crowds	congregating on the street at nigh	nt, to minimize disturba	nces to residents.
(9) I will not apply to the SLA fo Community Board 1. ☒	r an alteration to the method of or	peration agreed to by the	is stipulation without first notifying
(10) I intend to apply for a sidew	alk café license. Yes No		
(11) I will conspicuously post thi	s stipulation form beside my liquo	or license inside of my b	ousiness.
(12) Residents may contact the revisit the above-stated method of	manager/owner at the below num f operation if necessary in order to	ber. Complaints will be o minimize my establish	e addressed immediately and I will hment's impact on my neighbors.
Name: Aneesa Waheed		Phone Number: 9	17-414-0029
Alternate Contact: Muntasim S	Shoaib	Phone Numb	per: 917-886-6760
(13) I will (additionally):			
			Notary Public, State of New Yorking No. 01PE4936029  Qualified in Schenectady Court
11			Commission Expires 08/13/20:
I hereby certify that the inform	afion provided above is truthfu	I and accurate based t	Or og 3
Signed			Dated
Sworn to this day o	January 2023	3	orothy a Vellans
			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.

	1- Applicant Name Stafili tribece Inc.
	2- Establishment Name (Corporate & DBA) Stafifi Tribeea Inc. a/b/a Stafili & Cast  3- Address for Proposed License 212 West Broadway a/k/a 6 Varick Street
	3- Address for Proposed License 211 West Broadway alk/a 6 Varick Street
	New York , NY 10013 4- Proposed Days/Hours of Operation
	4.1 What floor(s) is the establishment on? Ground Floor, Basement
	4.2 Any rooftop, terrace, or other outside usage? DOT Sidewalk Cafe
	5- Square Footage of Location $2,315$
	6- Method of Operations (bar restaurant, Catering, etc) Tawern / Box
	7- Type of License (Full liquor/OP, beer and wine, etc.) On Premises Full Liquor License
	7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
	8- Sidewalk Café? Yes No - 0 of
	9- Type of Music? Live Recorded DJ
	10-Volume of Music? Background (no sound from events, performances or music will be heard outside the premises or by neighbors)
	□ Other
	11- Where will the kitchen exhaust system vent to?
Cl	12- Applicant's Previous Licensed Establishments and Addresses 6/6/6/10/10/10/10/10/10/10/10/10/10/10/10/10/
	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.

Manhattan Community Board 1 Liquor License Stipulations  C. L. Ali Tribeca Inc.
Manhattan Community Board I Liquor License Stipulate License Stipulate Lampadaris, as a qualified representative of Stafili Tribeca Inc.
located at 222 W. Broadway a/k/a 6 Variok Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their On Premises Full Liquor license
the following stipulations for the applicant's Method of Operation to the
(1) My hours of operation will be 11am-12am Monday—Thursday and 11am-1 am Friday—Saturday (I 11am-10p-m-Sunday understand this to mean that all patrons will be cleared from the establishment at the specified hour).  Toulen / Bar
understand this to mean that all patrons will be cleared from the establishment at the special content of the service restaurant, (please describe type of restaurant):
with the same of t
(3) I will install soundproofing (please describe type and locations)
(4) I will have: DIs Tyes The Live music Tyes The Recorded Music Tyes The Dancing Tyes The
(4) I will have: Dis Uyes UNo  Cover fee events Uyes UNo  Scheduled performances Uyes UNo  Scheduled performances Uyes UNo
(5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background music.
(6) I will close all doors and windows bySun-Thurs and Fri-Sat. If I will not have French doors or windows.
(7) I will have delivery of supplies, goods and services during the hours of  11 a m - 5 pm Monday & Friday
(8) I will employ a doorman/security personnel on the following days and hours:
(9) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.
(10) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying  Community Board 1.
(11) I will not apply for a sidewalk case license until at least a year after beginning operation. We can the case of the case
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.
(13) I confirm that I have violations from previous establishments for which I have served as a principal.
(14) I will (additionally):
(15) Residents may contact the manager/augus at the haloure has a
(15) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.
Name: Chris Lampadaris Phone Number 13471640-94-91
Name:
Alternate Contact: Phone Number:
I hereby certify that the jaformation provided above is truthful and accurate based upon my personal belief.
CM3-40
1113/23
Signed Dated
Sworm to this 13th day of January 12023 Christos Lampadavi Notary Public Dresented valid IN
Sworm to this 12 day of January 12062 Christos Lampadavi Notary Public Presented valid IS
Community Board I requests that the SI A add those crimulations to the Vicence of the SI A add those crimulations to the Vicence of the SI A add those crimulations to the Vicence of the SI A add those crimulations to the Vicence of the SI A add those crimulations to the Vicence of the SI A add those crimulations to the Vicence of the
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.  NUs Driver U The Rev. 12/18
603 057 041
1/h1// Fun - 1/2
[MU] EERIAL D'IN EXP: 7/3/29
Thumaning Et Paris
III ELIZENEWE
LILEN OF ST. DIM
OF NEW YORK' NOTARY PUBLIC
OF NEW YORK NOTARY PUBLIC OUR COUNTY
OF NEW YORK NOTARY PUBLIC COUNTY PUBLIC COUN
OF NEW YORK  NOTARY PUBLIC  OUGANISHED  OTOIGS COUNTY  OTOIGS COUN
OF NEW YORK  NOTARY PUBLIC  OLOGISTICS IN  OLOGISTI