1-	Applicant Name Taste Of NYC, LLC
2-	Establishment Name (Corporate & DBA) Farzi
3-	Address for Proposed License 78 Leonard Street, New York, NY 10013
4-	Type of License (Full liquor/OP, beer and wine, etc.) Full Liquor
	7.1 Type of application New □Alteration □Change in Method of Operation, □Corporate Change, □Class Change
5-	Proposed Days/Hours of Operation
	Mon-Thurs 9AM - 11PM Fri-Sat 9AM - 2AM Sun 9AM - 10PM
	4.1 What floor(s) is the establishment on? Ground Floor, Basement and
	mezzanine
6-	Square Footage of Location 6,011sq ft
7-	Method of Operations (bar restaurant, Catering, etc)
	Restaurant serving full liquor.
8-	Outdoor Seating? ☐ Sidewalk ☐ Roadbed ☐Rooftop, ☐Terrace, or ☐other outside 8.1 Do you intend to apply for DOT Outdoor dining permit? ☐ Yes ☒ No
9-	Type of Music? ☑ Live ☑ Recorded ☑ DJ
(n	- 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? Back of the building
	- 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 Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.

n/a

Manhattan Community Board 1 Liquor License Stipulations

I, Deepika Singh , as a qualified representative of Taste of NYC, LLC
located at 78 Leonard Street, New York, NY 11013 , New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their On Premise Liquor license
(1) My requested hours of operation are 9AM - 11 AMMonday - Thursday, 9AM - 2AM Friday - Saturday, 9AM - 110 Sunday
(1.a) CB approved hours of operation 9am-11pm Monday - Thursday, 9am-1amgriday - Saturday, 9am-10pm Sunday (1 understand this to mean that all patrons will be cleared from the establishment at the specified hour).
(2) I will operate a full-service, (please describe type of establishment): Indian Restaurant serving full liquor with full food service until 1 hour(s) before closing.
(3) I will install soundproofing (please describe type) foam pannels
(please describe location)
(4) I will have: DJs Yes No Live Music Yes No Recorded Music Yes No Dancing Yes No Promoted events Yes No Cover events Yes No Scheduled performances Yes No
(5) Volume of music, events, 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 10:30 orn Mon-Thur, 1:300m Fri - Sat 9:30 0m Sum.
(7) I will have delivery of regular supplies, goods and services during the hours of 9am - 3pm
(8) I will have garbage collected during the hours of 9am - 3pm
(9) I will employ a doorman/security personnel on the following days and hours: 17/4 Yes
(10) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.
(11) 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.
(12) I will not apply for a sidewalk café license until at least a year after beginning operation. Yes No
(13) I will conspicuously post this stipulation form beside my liquor license inside of my business.
(14) I confirm that I have <u>0</u> violations from previous establishments for which I have served as a principal.
(15) I will (additionally):
Have no more than 12 private events/buyouts per year.
Have no outdoor dining. Have no subwoofers.
Trave no subwooters.
(16) 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: Deepika Singh Phone Number: 425-623-6073
Alternate Contact: Amit K. Upadhyay Phone Number: 408 - 718-9491
I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
Deobiku Singer 12/13/24 CA Al
Signed Dated ELENA DIAZ
Sworn to this 13 day of December, 202 Notary Public, State of New York Registration #01Di4663009 Qualified In Queens County
Community Board 1 requests that the SLA add these stipulations to the GARM ssignofix pire of the stipulations and board resolution shall supersede all other documents.

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: Taste of NY, LLC DBA Farzi

Address: 78 Leonard Street, NY, NY 10013

(1) I will follow the recommendations made by the sound e that noise including sound and bass vibrations cannot be he	engineer and outlined in the acoustical testing report. I will make sure eard outside of the premises of my establishment.
(2) I will take the steps outlined in the resolution and in the	traffic plan to manage vehicular and pedestrian activity.
(3) I will follow and abide by the conditions set forth in the collected on the follows days and hours: 9am - 3pm	e resolution regarding garbage disposal and collection. Garbage will be
(4) I will have delivery of any event supplies, goods and se	ervices during the hours of 9am - 3pm
(5) Lighting that affects the security of the community and	quality of life of nearby residents must be considered, and must be
appropriately lit while not attracting unsavory elements (e.g	g. rodents, thes, moid, nazardous substances, etc.)
(6) I understand that I must submit a notice to the communicast 45 days in advance	ity board for a street activity permit for my licensed establishment at
property and provide proof of receipt of the 30-day Standar	Permits Committee if I am applying for an expansion onto municipal rdized Notice form, a block plot diagram detailing the municipal space icipal's approval to use the space. I also agree that I must sign the ered to for the roadbed/sidewalk seating.
(8) Cameras will be used for viewing the entrance and egre	988.
(9) I agree to follow the conditions outlined in the resolution congestion and unruly patrons.	on on security oversight of the establishment to prevent noise,
(10) I will (additionally):	
(15) Residents may contact the manager/owner at the below the above-stated method of operation if necessary in order t	v number. Complaints will be addressed immediately and I will revisit to minimize my establishment's impact on my neighbors.
Name: Deepika Singh	Phone Number: 425-623-6073
Alternate Contact; Amit . K. Upodhyay	,Phone Number:
Alternate Contact; Amit . K. Upodhyay	,Phone Number:
Alternate Contact: Amit . K. Upodhycu I hereby certify that the information provided above is to Deepita Signed	Phone Number: truthful and accurate based upon my personal belief. Dated May
Alternate Contact: Amit K. Upodhyay I hereby certify that the information provided above is a Deepita Signed Sworn to this 13 th day of Deumby	Phone Number: truthful and accurate based upon my personal belief. Dated May Public, State of New York Notary Public, State of New York Registration #01D14663009
Sworn to this 13th day of Deumber	Phone Number: truthful and accurate based upon my personal belief. ELENA DIAZ ELENA DIAZ Notary Public, State of New York Notary Public Registration #01D14663009 Notary Public Qualified In Queens County Qualified In Queens County ations to the incommission belief.

1-	Applicant Name
	St. Helier Tavern LLC
2-	Establishment Name (Corporate & DBA) Palace
3-	Address for Proposed License 285 West Broadway
4-	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
5-	Proposed Days/Hours of Operation
	Mon - Thurs Fri - Sat Sun
	4.1 What floor(s) is the establishment on?
6-	Square Footage of Location SF
7-	Method of Operations (bar restaurant, Catering, etc)
	BARC/ Louise
8- (Outdoor Seating? Sidewalk Roadbed Rooftop, Terrace, or other outside
	8.1 Do you intend to apply for DOT Outdoor dining permit? \square Yes \square No
9-	Type of Music? ☑ Live □ Recorded ☑ DJ
(no	- Volume of Music? A Background A Other E ~ Too Too ~ 13 N To Sound from events, performances or music will be heard outside the premises or by ighbors)
11	- Where will the kitchen exhaust system vent to? VELT (C)
	- Applicant's Previous Licensed Establishments and Addresses Meloly ' Flave Bar 102. Loxins Ton A vonco
1	THO EAST POLE 133 EAST GSTL STREET

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
1, 10	MARINGHOTT , as a qualified representative of ST. Helico. TAUTERN LL,
located	lat 285 West Brish b way, New York, New York, agree to
the fol	l at 285 Met of Operation for their New York, New York, agree to licens
(1) My	requested hours of operation are 12p-2a Monday – Wednesday 12p-4a Thursday – Saturday 12p-2a Sunday Wednesday 12p-4a Thursday – Thursday Thursday Saturday 12p-2a Sunday – Thursday – Thursday – Thursday – Saturday – Satur
(1.a) C	B approved hours of operation 12p-2a Monday – Thursday, 12p-4a Friday – Saturday, 12p-2a Sunda (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).
	ill operate a full-service, (please describe type of establishment): ge/bar with full food service until hour(s) before closing
(3) I w	ill install soundproofing (please describe type)
(please	describe location)
Pron (5) Vo	rill have: DJs Yes No Live Music Yes No Recorded Music Yes No Dancing Yes No noted events Yes No Cover events Yes No Scheduled performances Yes No Olume of music, events, performances will be at background levels only. If it can be heard outside, or by neighbors, it is not round music.
(6) I w	rill close all doors and windows byMon- Thur,Fri - SatSun.
	✓ I will not have open doors or windows.
(7) 1 w	ill have delivery of regular supplies, goods and services during the hours of morning /early afternoon
	ill have garbage collected during the hours of morning daytime hours
	ill employ a doorman/security personnel on the following days and hours: no less than 4 security personne
(10)	I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.
(11)	I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifyin
, ,	unity Board 1. 🖂
(12)	I will not apply for a sidewalk café license until at least a year after beginning operation. Yes No
(13)	I will conspicuously post this stipulation form beside my liquor license inside of my business.
(14)	I confirm that I have violations from previous establishments for which I have served as a principal.
mu on	I will (additionally): Sound will not extend beyond the sidewalk, where the net effect will be like background sic, that is, it cannot be heard or felt. Any queues and patron car service pickup will be west Broadway. Patrons will be asked to wait inside the establishment and to not loit wait in front of the establishment.
(16) R the ab	esidents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will review-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.
Name	Tom MARTISMETTI Phone Number: 917 576 5046
Altern	ate Contact: Phone Number:
I here	by certify that the information provided above is truthful and accurate based upon my personal belief. Terrence belief.
	Notary Public Si
	17/19/72 No.02FL

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. 3/2024

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:	TBD	
Address: 785	WEST BURP	w/ Y
1) I will follow the recommen	ndations made by the sound engi bass vibrations cannot be heard	d outside of the premises of my establishment.
2) I will take the steps outline	7	affic plan to manage vehicular and pedestrian activity.
		esolution regarding garbage disposal and collection. Garbage will be
4) I will have delivery of any	event supplies, goods and servi	ices during the hours of
-		nality of life of nearby residents must be considered, and must be rodents, flies, mold, hazardous substances, etc.)
6) I understand that I must sub east 45 days in advance	bmit a notice to the community	board for a street activity permit for my licensed establishment at
property and provide proof of am expanding to, and docume	receipt of the 30-day Standardiz entation confirming the municip	rmits Committee if I am applying for an expansion onto municipal zed Notice form, a block plot diagram detailing the municipal space pal's approval to use the space. I also agree that I must sign the ed to for the roadbed/sidewalk seating.
8) Cameras will be used for v	riewing the entrance and egress.	
9) I agree to follow the condit		on security oversight of the establishment to prevent noise,
10) I will (additionally):		
 Residents may contact the ne above-stated method of open 	: manager/owner at the below nu eration if necessary in order to n	number. Complaints will be addressed immediately and I will revisit minimize my establishment's impact on my neighbors.
lame: Ton M	MKTIGHTTI.	Phone Number: 917 57 6 8 0 9 6
ulternate Contact:		Phone Number:
hereby certify that the infor	rmation provided above is tru	Phone Number: Phone Number: sthful and accurate based upon my personal belief.
igned		Dated Da
tworn to this day	of Denne 202	Hotary Public

Notary 1 done

1- Applicant Name 48 Wall Retail, LLC				
2-	Establishment Name (Corporate & DBA) 48 Wall Retail, LLC			
3-	- Address for Proposed License 48 Wall Street, New York, NY 10005			
4-	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			
5-	Proposed Days/Hours of Operation 10am-1am (M-W) Mon - Thurs 10am-2am (TH) Fri - Sat 10am-2am Sun 10am-1am			
	4.1 What floor(s) is the establishment on? Grand Mezzanine Floor, Ground Floor			
	Cellar			
6-	Square Footage of Location 19,094 sq. ft.			
7-	Method of Operations (bar restaurant, Catering, etc) Legitimate Theater or Concert Hall (Circus Shows, Performances, and Private Events)			
8- (Outdoor Seating? □ Sidewalk □ Roadbed □Rooftop, □Terrace, or □other outside			
	8.1 Do you intend to apply for DOT Outdoor dining permit? \square Yes \square No			
9-	Type of Music? ☑ Live ☑ Recorded ☑ DJ **Live Entertainment			
10	- Volume of Music? ☑ Background □ Other			
ne	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? No Exhaust System at Kitchen, only warmin			
	- Applicant's Previous Licensed Establishments and Addresses			
	N/A			

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
I, Jefffey B. Gewirtz, as a qualified representative of 48 Wall Retail LLC,
located at 48 Wall Street, New York, NY 10005, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their On Premise Liquor license
(1) My requested hours of operation are
(1.a) CB approved hours of operation 10a-1a Monday – Wednesday, 10a-1a Thursday – Saturday, 10a-10p Sunday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).
(2) I will operate a full-service, (please describe type of establishment): Legitimate Theater or Concert Hall with full food service until hour(s) before closing.
(3) I will install soundproofing (please describe type) curtains, acoustic panels, sound absorbing floor and wall materials
(please describe location) on the premises
(4) I will have: DJs XYes No Live Music XYes No Recorded Music XYes No Dancing Yes No Promoted events XYes No Cover events Yes No Scheduled performances Yes No
(5) Volume of music, events, 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 byMon- Thur,Fri - SatSun.
X I will not have open doors or windows.
(7) I will have delivery of regular supplies, goods and services during the hours of TBD
(8) I will have garbage collected during the hours of TBD
(9) I will employ a doorman/security personnel on the following days and hours: TBD
(10) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.
(11) 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.
(12) I will not apply for sidewalk seating until a year after opening
(13) I will conspicuously post this stipulation form beside my liquor license inside of my business.
(14) I confirm that I have violations from previous establishments for which I have served as a principal.
(15) I will (additionally):
12 buyouts per year. Coordinate with Cipriani to attempt to align with the same vendors and schedules for supply delivery and garbage pickup. No smoking signs will be posted along the entrance. Coordinate with Cipriani to attempt to avoid private events on the same evenings. Have no less than 3 check in attendants. Public transit will be heavily recommended to patrons prior to events. All regularly scheduled events will have a staggered timed entry to reduce the number of patrons arriving and leaving at the same time. Have no more than approximately 550 guests per event. There will be a queuing area in the left vestibule area within the entrance which will be utilized before allowing any queuing on the sidewalk. Tickets will only be available for advance purchase. Sundays of holiday weekends the hours will be 10am-1am.
(1) 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: Jeffrey Gewirtz (718)942-9544
Alternate Contact: Phone Number:
I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
Signed Dated Dated Notary Public, State of New York No. 01FR6367080 Qualified in Kings County
Sworn to this \ \ \ \ day of \) \earlies Commission Expires November 13, 202

Notary Public

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: 48 Wall Retail LLC
Address: 48 Wall Street, New York, NY 10005
(1) I will follow the recommendations made by the sound engineer and outlined in the acoustical testing report. I will make sure that noise including sound and bass vibrations cannot be heard outside of the premises of my establishment.
(2) I will take the steps outlined in the resolution and in the traffic plan to manage vehicular and pedestrian activity.
(3) I will follow and abide by the conditions set forth in the resolution regarding garbage disposal and collection. Garbage will be collected on the follows days and hours:
(4) I will have delivery of any event supplies, goods and services during the hours of
(5) Lighting that affects the security of the community and quality of life of nearby residents must be considered, and must be appropriately lit while not attracting unsavory elements (e.g. rodents, flies, mold, hazardous substances, etc.)
(6) I understand that I must submit a notice to the community board for a street activity permit for my licensed establishment at least 45 days in advance
(7) I understand that I must appear before the Licensing & Permits Committee if I am applying for an expansion onto municipal property and provide proof of receipt of the 30-day Standardized Notice form, a block plot diagram detailing the municipal space I am expanding to, and documentation confirming the municipal's approval to use the space. I also agree that I must sign the stipulations sheet outlining the conditions that must be adhered to for the roadbed/sidewalk seating.
(8) Cameras will be used for viewing the entrance and egress.
(9) I agree to follow the conditions outlined in the resolution on security oversight of the establishment to prevent noise, congestion and unruly patrons.
(10) I will (additionally):
(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:
Alternate Contact: Phone Number:
I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
Signed COREY FRANCIS Notary Public, State of New York No. 01FR6367080 Qualified in Kings County
Sworn to this 17th day of December 2024 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
	Otani & Nassau Inc.
2-	Establishment Name (Corporate & DBA) Otani
3-	Address for Proposed License 59 Nassau Street, New York, NY 10038
4-	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
5-	Proposed Days/Hours of Operation
	Mon - Thurs 11AM-12AM Fri - Sat 11AM-12AM Sun 11AM-12AM
	4.1 What floor(s) is the establishment on? Basement
6-	Square Footage of Location 3500sf
7-	Method of Operations (bar restaurant, Catering, etc)
	Restaurant
8- (Outdoor Seating? □ Sidewalk □ Roadbed □Rooftop, □Terrace, or □other outside
Ŭ	8.1 Do you intend to apply for DOT Outdoor dining permit? ☐ Yes ☑ No
9-	Type of Music? □ Live ⊗ Recorded □ DJ
10 (n	- Volume of Music? Background □ Other so sound from events, performances or music will be heard outside the premises or by ighbors)
11	- Where will the kitchen exhaust system vent to? roof
12	- Applicant's Previous Licensed Establishments and Addresses

Mountain Fusion Inc., 1765 Victory Blvd., Staten Island, NY Kushi Izakaya Restaurant Inc., 1934 86th St., Brooklyn, NY

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

	, as a qualified repres	entative of Otani & N	Vassau Inc.	
located at 59 Nassau Street			New York, New York, agr	ee to
the following stipulations for the app	licant's Method of Op	eration for their <u>ON-P</u> r	emise liquor	license
(1) My requested hours of operation are	11A-11P Monday	- Thursday, <u>11A-12A</u>	Friday – Saturday, <u>12P-1</u>	1_Sunday
(1.a) CB approved hours of operation (1 understand this to mean	11am-11pm Monday- that all patrons will be	-Thursday, 11am-12aml cleared from the establish	Friday – Saturday, 12pm-11 ment at the specified hour).	pmSunday
(2) I will operate a full-service, (please Restaurant	describe type of establis		ice until 0 hour(s) befo	
(3) I will install soundproofing (please of			nour(s) befo	re closing.
(please describe location)				
(4) I will have: DJs Yes No Live Promoted events Yes No Cove	Music □Yes ■No r events □Yes ■No	Recorded Music Ye Scheduled perfor	s No Dancing Yes	
(5) Volume of music, events, performan background music. ⊠	ces will be at backgroun	nd levels only. If it can be	heard outside, or by neighbor	rs, it is not
(6) I will close all doors and windows by	/ all times	Mon- Thur, all times	Fri - Sat all times	Sun.
(7) I will have delivery of regular supplied	es, goods and services d	during the hours of 3PM -	5PM	
(8) I will have garbage collected during t				NATIONAL AND AND AND ADDRESS.
(9) I will employ a doorman/security per				
(10) I will actively manage crowds co				
(11) I will not apply to the SLA for an Community Board 1. ⊠				notifying
(12) I will not apply for a sidewalk ca	fë license until at least a	ı year after beginning oper	ration. Yes No	
(13) I will conspicuously post this stip				
(14) I confirm that I have no vio	lations from previous ea	stablishments for which I	have served as a principal.	
Not have outdoor seating				
(16) Residents may contact the manager/of the above-stated method of operation if no	owner at the below num ecessary in order to min	ber. Complaints will be actimize my establishment's	ldressed immediately and I w impact on my neighbors.	ill revisit
1 / 1			146-287-028	2
Alternate Contact:		Phone Numbe	r:	
I hereby certify that the information pr	ovided above is truthf	ul and accurate based up	oon my personal belief.	
9		12/14	Trong Doals	Governi
Signed		Dated	DEANA GIOV	THE CONTRACT OF THE PARTY OF
Sworn to this day of	Clmbl C Notary	2024	NOTARY PUBLIC STA	COUNTY
Community Board 1 requests that the SLA stipulations and board resolution shall sup-	add these stimulations	to the license of the above	LIC. #01GIG	0241270

Rev. 3/2024