Manhattan Community Board 1 Liquor License Stipulations

I, fom Gialambou kis, as a qualified representative of,
located at 452 Washington Street, New York, New York, agree to
the following stipulations for the applicant's Method of Operation:
☐ My hours of operation will beSunday – Thursday andFriday – Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).
will operate a full-service restaurant, (please describe type of restaurant):
with full food service until hour(s) before closing.
☑ I will install soundproofing (please describe type and locations)
I will have: DJs DYes □No Live music □Yes □No Promoted events □Yes □No Cover fee events □Yes □No Scheduled performances □Yes □No
☐ I will play recorded background music only, consisting of
If it can be heard outside, or by neighbors, it is not background music.
☐ I will close all doors and windows by Sun-Thurs and Fri Sat. ☐ will not have French doors or windows.
☐ I will employ a doorman/security personnel on the following days and hours:
☐ I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.
☑ 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.
I intend to apply for a sidewalk café license. ☑Yes ☐No
I intend to apply for a cabaret license. □Yes ☒No
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: Tom Giglamboukis Phone Number: 917 796 0358
Alternate Contact: Phone Number:
I will (additionally): five music will be a consteronly

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
12/15/16
Signed Dated Dated
Sworn to this 15th day of December, 2016
Na. Ozko 62 250 an Kordas
Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. Rev. 7/14 Qualified in Nassau County Commission Expires on 05/07/2020
Comp 2000 Expires on 05/07/2020
opinit show only

 \vec{P}

Mannattan Community Board 1 Liquor License Supulations
I, Robert U. Romano, as a qualified representative of HLD Tribeco, LLC
located at Such of Comin 130 West Broading, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their Beer Vine Cider license
08
(1) My hours of operation will be See below Sunday - Thursday and Friday - Saturday (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 restaurant, (please describe type of restaurant): South Restaurant
with full food service until hour(s) before closing.
(3) I will install soundproofing (please describe type and locations)
(4) I will have: DJs \(\text{DYes \(\text{DNo} \) Live music \(\text{DYes \(\text{DNo} \)} \) Recorded Music \(\text{DYes \(\text{DNo} \)} \) Dancing \(\text{DYes \(\text{DNo} \)} \)
Promoted events \(\superscript{Yes} \sumscript{No} \) Cover fee events \(\superscript{Yes} \sumscript{No} \) Scheduled performances \(\superscript{Yes} \sumscript{No} \)
(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 bySun-Thurs and Fri-Sat. The will not have French doors or windows.
(7) I will have delivery of supplies, goods and services during the hours of
(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. We es No
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.
(13) I confirm that I have
(14) I will (additionally):
a local Sun love
= C 103ear apr 7 - mays
-closed on Sundays M-F noon-245pm
M-Sat Spm-10:45pm
e de la companya del companya de la companya de la companya del companya de la co
(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: Phone Number:
Alternate Contact: Phone Number:
I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
5000 2/19/2019
Signed Dated
Sworn to this 19th day of February 209 Folia Russ
Notary Public
Community Board 1 requests that the SLA add these stipulations to the stipulations and board resolution shall supersede all other documents. RITA ROSS. Registration No. 01R06303032 Rev. 12/18 Qualified in Westchester County
Commission Expires May 12, 2022

Manhattan Community Board 1 Liquor License Stipulations I, Danie Murphy, as a qualified representative of Black Fox Coffee C	
	0,
the following stipulations for the applicant's Method of Operation for their form	agree to
(1) My hours of operation will be Sam - 12am Sunday - Thursday and Sam - 12am Friday - Sunday - Sunday - Thursday and Sam - 12am Friday - Sunday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday and Sam - 12am Friday - Sunday - Thursday - Sunday - S	aturday (I
(2) I will operate a full-service restaurant, (please describe type of restaurant): Coffee shop & caewith full food service until hour(s)	tering
(3) I will install soundproofing (please describe type and locations) \sqrt{q}	octore closing.
(4) I will have: DJs Sayes CNo Live music Clyes CNo Recorded Music Clyes CNo Dancing Clyes CNo Cover fee events Clyes CNo Scheduled participants	Manager and the second
Scheduled performan	
(5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by is not background music.	
(6) I will close all doors and windows bySun-Thurs and Fri-Sat. 1 will not have French doors or w (7) I will have delivery of supplies, goods and services during the hours of	indows.
(8) I will employ a doorman/security personnel on the following days and hours: General building	Security
(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 fit Community Board 1. ⊠	rst notifying
(11) I will not apply for a sidewalk café license until at least a year after beginning operation. UYes Tho	
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.	
(13) I confirm that I have	
(14) I will (additionally):	
no terrace on 30th floor of 85 broad St.	
(15) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbor.	d I will revisit s.
Name: Daniel Murphy Phone Number: 917,705.	5712
Name: Daniel Murphy Phone Number: 917,705. Alternate Contact: Kris Wood Phone Number: 424.216	.0895
hereby certify that the information provided above is truthful and accurate based upon my personal belief.	
2.22.19	
Bigned Dated	
Sworn to this 29th day of February 2019.	_
ELKE HOFMANN	

Notary Public, State of New York
No. 02HO6176638
Qualified in Kings County
Commission Expires April 27, 20

1-	Applicant Name Black Fox 85 Broad, LLC
2-	Establishment Name (Corporate & DBA) Black Fox 85 Broad, LLC Black Fox Coffee Co.
3-	Address for Proposed License 85 Broad Street, 30th Floor, New York, NY 10004
i	Proposed Days/Hours of Operation Monday - Thursday: 8am to 10pm (12 AM for events) Friday: 8am to 10pm
	Square Footage of Location 3000 sq ft
6- N	Method of Operations (bar restaurant, Catering, etc) Restaurant
7- T	Type of License (Full liquor/OP, beer and wine, etc.) Full Liquor
	idewalk Café? Yes/No Io
9- T	ype of Music ? 🗖 Live 📓 Recorded 🖾 DJ
10- V	olume of Music? 🛛 Background 🚨 Other
11- A	nnlicant's Pravious Licensed Establishment

Manhattan Community Board 1 Liquor License Stipulations
I, Maston Sanson, as a qualified representative of AC Hotel NYC downtown.
located at 151 Maiden Lane , New York, New York, agree to
the following stipulations for the applicant's Method of Operation for theirliquorlicense
(1) My hours of operation will be 12pm - 2am Sunday - Thursday and 12pm - 2am Friday - Saturday (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 restaurant, (please describe type of restaurant): adding a refrictgerated unit that will dispuse been to existing operation with full food service until hour(s) before closing. (3) I will install soundproofing (please describe type and locations)
(4) I will have: DJs Wes INo Live music Wes INo Recorded Music Wes INO Dancing IYes INO
Promoted events \(\text{DYes}\) \(\text{DNo}\) Cover fee events \(\text{DYes}\) \(\text{DNo}\) Scheduled performances \(\text{DYes}\) \(\text{DNo}\)
(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. I will not have French doors or windows.
(7) I will have delivery of supplies, goods and services during the hours of
(8) I will employ a doorman/security personnel on the following days and hours: <u>general hotel</u> Security
(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. □Yes ☑No
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.
(13) I confirm that I have
(14) I will (additionally):
- first floor only refrigeration unit for beer - no rouftop caterly
- he confine catecha
1.0 1004100 20013119
(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: CRAICE KEPPLE Phone Number:
Name:Phone Number:
Alternate Contact: MISHKA A. WOODLEY
Alternate Contact: Phone Number: MISHKA A. WOODLEY I hereby certify that the information provided above is truthful and accurate based upon my personal belief. 03W08381788
NO.024VC0361798
2/70/1 Qualified In Albany County My Commission Expires 07-17-2021
Signed Dated Dated
20th Telacura 11-2019. /// (1) 2000 () non
Sworn to this day of HIO WOOD OUT
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

1- Applicant Name

CP Maiden Lane, LLC

2- Establishment Name (Corporate & DBA)

AC Hotel New York City Downtown

3- Address for Proposed License

151 Maiden Lane, New York, NY 10038

4- Proposed Days/Hours of Operation

24 hours hotel with food service from 6:30 am until 2 am and alcohol service from 12 pm until 2 am with a rooftop with events at varying times.

5- Square Footage of Location

140,000 sq. ft.

6- Method of Operations (bar restaurant, Catering, etc)

Hotel

7- Type of License (Full liquor/OP, beer and wine, etc.)

Full Liquor OP

- 8- Sidewalk Café? Yes/No
- 9- Type of Music? Live Recorded DJ Varies by events
- 10-Volume of Music? Background Other Varies by events
- 11- Applicant's Previous Licensed Establishments and Addresses

Hilton Garden Inn Port Washington - 3 Harbor Park Drive, Port Washington, NY 11050 Cambria NY Times Square Chazz Palminteri Italian Restaurant - 30 W. 64th Street, New York, NY 10036

Table 133 - 133 Greenwich Street, 6th Floor, New York, NY 10006

Manhattan Community Board 1 Liquor License Stipulations
1, Kian 1644 tible as a qualified representative of HOPICINS Hawley LLC
located at 229 Front Street, New York, NY 10038, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their On - Premises Liquor license
(1) My hours of operation will be Sunday - Thursday and below Friday - Saturday (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 restaurant, (please describe type of restaurant): First Class Searod Restructory with full food service until All hour(s) before cleaning.
(3) I will install soundproofing (please describe type and locations) in III install fiber 9 1955 doin pening material in Culing as new do d
(4) I will have: DJs CYes CNo Live music CYes CNo Recorded Music CYes CNo Dancing CYes CNo
Promoted events Tyes No Cover fee events Tyes No Scheduled performances 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 bySun-Thurs and Fri-Sat. 1 will not have French doors or windows.
(7) I will have delivery of supplies, goods and services during the hours of
(8) I will employ a doorman/security personnel on the following days and hours: Not hing planned
(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. □Yes □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):
Hours of operation! Sunday noon-midnight; M-W 11-midnight; Th-Fri 11am-1am; Sat 10am
Sunday noon-midnight; M-W 11-midnight; 14-Fr; 114m-14m; ser 14m
(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.
1/5 VIO 1'1'
Name: 6101 + 11411 Phone Number: 212-978-9230
Alternate Contact: 10x1 Li Phone Number: 9/7-753-6001
I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
Signed KERNESA JNOBAPTISTE Notary Public - State of New York NO. 01JN6382271 Qualified in Kings County My Commission Expires Oct 22, 2022
Sworn to this 19 day of Jehness 2019 Sworn to this Notary Public 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 Kia	in Knatibi + Ji	axi, Ci,
2- Establishment Name (C	forporate & DBA) awley LLC d/6/4	HOPKINS + Hawley
3- Address for Proposed L 229 Front	icense STPECE, NEW	451K, NY 10038
4- Proposed Days/Hours of	of Operation	
SUNDay: 12:00Pm -	id: ODAM /MON -wed 11:	100AM-12: 00AM
5- Square Footage of Local	tion	Thurs + Fri ; 11:00AM -1:00A SATURDAY! 10:00AM-1:00AA
	bar restaurant, Catering, etc) SeaFool Restaura	7/1 1-
7- Type of License Full lice	quor/OP, beer and wine, etc.)	
8- Sidewalk Café? Yes/No	9	
9- Type of Music? 🗖 Live	e 🗃 Recorded 🚨 DJ	
10-Volume of Music?	Background	
11- Applicant's Previous Li	icensed Establishments and Addre	esses

Manhattan Community Board 1 Liquor License Stipulations

ı, Grant Herlitz	, as a qualified representative of	HHC Pier Village LLC	,
located at 89 South St	reet. Ground Floor	, New York, New York, agree to	
the following stimulations for	the applicant's Method of Operation for	r their Tavern/Barlic	eense
	(10cm) (2cm)	•	
(1) My hours of operation will understand this to mean that al	be Sam - lam Sunday - Thursda I patrons will be cleared from the establish	ay and &m - 2 am Friday - Saturday (I ment at the specified hour).	
(2) I will operate a full-service	स्त्रसम्माम् (कृष्टिक्ट्यक्ट्यमेष्ट्रम्) स्ट्रासम	Tavern/Bar	 8
	w	ith fall-food service until ±aan(x) ±afare clo	
		constic dry wall	- -
		sic Tyes No Dancing Tyes No	noks.
Promoted events TYes Wo		Scheduled performances □Yes	
is and bankaround music X		evels only. If it can be heard outside, or by neighbor	2
(6) I will close all doors and w	rindows bySun-Thurs and Fri	-Sat. □I will not have French doors or windows.	(onelitiona)
(7) I will have delivery of sup	plies, goods and services during the hours of	of	50000 50000 10 0
(8) I will employ a doorman/s	ecurity personnel on the following days and	d hours: General HHC securits	/
(9) I will actively manage crow	wds congregating on the street at night, to r	minimize disturbances to residents. 🗵	
(10) I will not apply to the SL Community Board 1. ⊠	A for an alteration to the method of operati	on agreed to by this stipulation without first notifyi	ing
(11) I will not apply for a side	walk café license until at least a year after	beginning operation. 🗆 Yes 🕏 No	
	this stipulation form beside my liquor licer		
	o violations from previous establishmen		
(14) I will (additionally):			
20 C T T T T T T T T T T T T T T T T T T		lune level	
- after 100	m wlopen doors, musica	will become background muss	ic,
,		7 41	
- windows/doo	as closure is condition	onal on weather	
(15) Decidents were contact th	a managar/aumar at the below number. Co	mplaints will be addressed immediately and I will i	revisit
the above-stated method of op	peration if necessary in order to minimize n	ny establishment's impact on my neighbors.	
	1	Phone Number	
Name:		Phone Number:	_
Alternate Contact:		Phone Number: accurate based upon my personal belief.	_ .
I hereby certify that the info	ormation provided above is truthful and	accurate based upon my personal belief.	
		2/19/19 Dated	
Signed		Dated	
		· At A a 1	
Sworn to this da	y of FEBRUARY 2019 J	surviva	
		20 17 VANA.V 20-22	
C 't Desert Lessussite	that the CLA add these stimulations to the	license of the above-mentioned applicant. These	

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.

LISETTE GONZALEZ
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01GO6207103
Qualified in New York County
Commission Expires June 8, 2021

1- Applicant Name HHC Pier Village, LLC
2- Establishment Name (Corporate & DBA)
3- Address for Proposed License 89 South Street, Ground Floor New York, NY 10038
4- Proposed Days/Hours of Operation Sun - Wed 8am - 1am Thurs - Sat 8am - 2am
5- Square Footage of Location 8,296 ft
6- Method of Operations (bar restaurant, Catering, etc) Tavern/Bar
7- Type of License (Full liquor/OP, beer and wine, etc.) Full Liquor/OP
8- Sidewalk Café? Yes No
9- Type of Music? 🖾 Live 🖾 Recorded 🖾 DJ
10- Volume of Music? ☐ Background ☐ Other
11- Applicant's Previous Licensed Establishments and Addresses
Several affiliated licenses throughout the Seaport

1-	Applicant Name
	Ziming Shen, Jr.
2-	Establishment Name (Corporate & DBA)
	Watanabe NYC LLC d/b/a TBD
3-	Address for Proposed License
	88 Battery Place, New York, NY 10280
4-	Proposed Days/Hours of Operation
×	Sunday-Saturday 11:00am-11:00pm
5-	Square Footage of Location
	1200
6-	Method of Operations (bar restaurant, Catering, etc)
	Full-Service Restaurant
7-	Type of License (Full liquor/OP, beer and wine, etc.)
	Full Liquor License
8-	Sidewalk Café? Yes/No
9-	Type of Music? ☐ Live ☐ Recorded ☐ DJ
10-	Volume of Music? ► Background □ Other
11-	Applicant's Previous Licensed Establishments and Addresses
	None