Manhattan Community Board 1 Liquor License Stipulations

1, ATIF ALI , as a qualified representative	of RDA ASSOCIATES CORP.
located at 90 CHAMBERS STREET NEW YORK N	
the following stipulations for the applicant's Method of Operation	for their FULL LIQUOR ON PREMI license
(1) My requested hours of operation are 10-2AM Monday – Thurs	day, 10-2AM Friday - Saturday, 10-2AM Sunday
(1.a) CB approved hours of operationMonday - Thur (1 understand this to mean that all patrons will be cleared from	
(2) I will operate a full-service, (please describe type of establishment) RESTAURANT	with full food service until 1 hour(s) before closing.
(3) I will install soundproofing (please describe type) ACOUSTIC	PANELS
(please describe location)	
(4) I will have: DJs Yes No Live Music Yes No Reco	orded Music Yes No Dancing Yes No Scheduled performances Yes No
(5) Volume of music, events, performances will be at background level background music.	s only. If it can be heard outside, or by neighbors, it is not
(6) I will close all doors and windows by Mon-Ti	hur, Fri - Sat Sun.
☑ I will not have open doors or windows.	
(7) I will have delivery of regular supplies, goods and services during to	he hours of 10-11AM
(8) I will have garbage collected during the hours of	
(9) I will employ a doorman/security personnel on the following days a	
(10) I will actively manage crowds congregating on the street at nigl	
(11) I will not apply to the SLA for an alteration to the method of or	
Community Board 1.	ПП
(12) I will not apply for a sidewalk café license until at least a year a	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 establis	hments for which I have served as a principal.
(15) I will (additionally):	State of New York
	County of: New York
	The foregoing instrument was acknowledge before me 73 day of September, 2014
	Andrew L. Sarry
	Your Name Here. Notary Public
(16) Residents may contact the manager/owner at the below number. Of the above-stated method of operation if necessary in order to minimize	complaints will be explained supportingly and I will revise 12-26
Name: ATIF ALI	Phone Number: (347)463-3507
Alternate Contact: JORGE CABRERA	Phone Number: (516)576-4644
I hereby certify that the information provided above is truthful an	d accurate based upon my personal belief.
Ai Al	09/23/2024
Signed	Dated LOLY L. CORAL
Sworm to this 23 day of September, 2024	Notary Public - State of New York
Notary Publi	
Community Board 1 requests that the SLA add these stipulations to the stipulations and board resolution shall supersede all other documents.	license of the above mentioned applicate Trees

1-	Applicant Name RGS 380 Canal Street, LLC
2-	Establishment Name (Corporate & DBA) RGS 380 Canal Street LLC - TBD
3-	Address for Proposed License 285 West Broadway, 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 Wednesday Thursday Mon - Thursday Sun 12pm-2am Sun 12pm-2am
	4.1 What floor(s) is the establishment on? Ground Floor, Basement and
	Mezzanine
6-	Square Footage of Location 4200
7-	
7-	Square Footage of Location 4200 Method of Operations (bar restaurant, Catering, etc)
7- 8- 0	Square Footage of Location 4200 Method of Operations (bar restaurant, Catering, etc) Bar Lounge with Food Service Outdoor Seating? Sidewalk Roadbed Rooftop, Terrace, or Other outside
7- 8- 0 9- 10-	Square Footage of Location 4200 Method of Operations (bar restaurant, Catering, etc) Bar Lounge with Food Service Outdoor Seating? Sidewalk Roadbed Rooftop, Terrace, or outdoor Seating 8.1 Do you intend to apply for DOT Outdoor dining permit? Yes No
7- 8- (9- 10- (no	Square Footage of Location 4200 Method of Operations (bar restaurant, Catering, etc) Bar Lounge with Food Service Outdoor Seating? Sidewalk Roadbed Rooftop, Terrace, or Other outside 8.1 Do you intend to apply for DOT Outdoor dining permit? Yes No Type of Music? Live Recorded DJ Volume of Music? Background Other Entertainment Level Sound from events, performances or music will be heard outside the premises or by

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.

Center Spirits Inc. - 387 Main Street, Center Moriches, NY 11834

No Signed Stipulations

Applicant did not sign the community board stipulations. Instead they reconsidered the purchase of the location due to the stipulations not matching their vision.

1-	Applicant Name MADELINE CARVALITO LAJEIANI
2-	Establishment Name (Corporate & DBA) MASELINE'S PATISSERIE INC DBA: DUNNE PARE PATISSERIE
3-	Address for Proposed License 179 OUANT ST_ FRONT 1
4-	Type of License (Full liquor/OP, beer and wine, etc.) WING, BEER + CIAGE
	7.1 Type of application ☑New □Alteration □Change in Method of Operation, □Corporate Change, □Class Change
5 -	Proposed Days/Hours of Operation Mon - Thurs 8 m 10 m Fri - Sat 8 m 10 pm Sun 8 m 10 pm 4.1 What floor(s) is the establishment on? 157 FCool + BASEMENT
	4.1 What floor(s) is the establishment on? (57 FLOOR + BASEMENT
	Square Footage of Location APPLOX 2000 Method of Operations (bar restaurant, Catering, etc) BAL / TAJERN
8-4	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 Ø Recorded □ DJ
10	- Volume of Music? So Background 💢 Other
	o sound from events, performances or music will be heard outside the premises or by ighbors) WE DO NO COOKING ONLY BAKING WE ARE NOT AEDIJREA TO HAJE
11	- Where will the kitchen exhaust system vent to? A MANUAL GAMUST. WE HAVE TOUT THE
	- Applicant's Previous Licensed Establishments and Addresses IPPLICANT HAS OWNED + OPERATED THIS LOCATION FOR 321/2 YEARS
z. f	MISSERUE LANCIANI 177 PLINCE ST. 1977-1987

Manhattan Community Board 1 Liquor License Stipulations
I. MADELINE CARVALHO LANCIANI as a qualified representative of MADELINE'S PATISSELIE INC
located at ITA OJANE ST , New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their WINE, BOEK + CLOCK license
(1) My requested hours of operation are Monday - Thursday, 8 - 10 Friday - Saturday, 8 - 10 Sunday (1.a) CB approved hours of operation Monday - Thursday, 8 - 10 Friday - Saturday, 8 - 10 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): BAL TAJORN BAKENY / CAFE with full food service until 1/2 hour(s) before closing.
(3) I will install soundproofing (please describe type)
(please describe location)
(4) I will have: DJs Ves 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 QPm Mon-Thur. QPm Fri-Sat QPm Sun.
☐ I will not have open doors or windows.
(7) I will have delivery of regular supplies, goods and services during the hours of 7 Am - 4/M
(8) I will have garbage collected during the hours of
(9) I will employ a doorman/security personnel on the following days and hours:
(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 cafe 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.
(15) I will (additionally):
I intend to apply for The BOT Dining OUT NYC
Roadbed seating in the Future and will return to The
Community Board when applying for outdoor seating. This approval does not cover any future outdoor dining areas or hours
(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: MADELINE LANCIAN Phone Number: 917-862-7593
Alternate Contact: Phone Number:
I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
Madeline Lanciani 9/3/24
Sworm to this 3 to day of September 2024 Rosemany Mich
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. 3/2024

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ROSEMARY A MCKENNA NOTARY PUBLIC, STATE OF NEW YORK

1-	Applicant Name Nicholas Hartman and Toni Allocca
2-	Establishment Name (Corporate & DBA) Greene Velvet Productions LLC dba Olive's
3-	Address for Proposed License 413 Greenwich St., New York, NY 10013
4-	Type of License (Full liquor/OP, beer and wine, etc.) wine and beer
	7.1 Type of application Solution □ Change in Method of Operation, □ Corporate Change, □ Class Change
5-	Proposed Days/Hours of Operation
	Mon - Thurs 9 am-8pm Fri - Sat 9 am-8pm Sun 9 am-8pm
	4.1 What floor(s) is the establishment on? ground floor and basement
6-	Square Footage of Location 1,200 SF
7-	Method of Operations (bar restaurant, Catering, etc) restaurant
8- (Outdoor Seating? □ Sidewalk □ Roadbed □Rooftop, □Terrace, or □other outside
	8.1 Do you intend to apply for DOT Outdoor dining permit? \square Yes \boxtimes No
9-	Type of Music? □ Live ➡ Recorded □ DJ
(no	- Volume of Music? □ Background □ Other osound from events, performances or music will be heard outside the premises or by ighbors)
11-	- Where will the kitchen exhaust system vent to? roof
	- 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.

225 Liberty St., NYC (Wall Trade)

Manhattan Community Board 1 Liquor License Stipulations , as a qualified representative of Greene Velvet Productions LLC I. Nicholas Hartman located at 413 Greenwich St. New York, New York, agree to the following stipulations for the applicant's Method of Operation for their restaurant wine/beer/cider license (1) My requested hours of operation are 7a-10p Monday - Thursday, 7a-10p Friday - Saturday, 9a-8p Sunday (1.a) CB approved hours of operation 7a-10p Monday - Thursday 7a-10p Friday - Saturday, 9a-8p 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): restaurant with full food service until 1/2 hour(s) before closing. (3) I will install soundproofing (please describe type) (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 XNo (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 8p Mon-Thur, 8p Fri-Sat 8p I will not have open doors or windows. (7) I will have delivery of regular supplies, goods and services during the hours of 9a-5p (8) I will have garbage collected during the hours of 9a-5p (9) 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 will not apply for a sidewalk café license until at least a year after beginning operation. (12)I will conspicuously post this stipulation form beside my liquor license inside of my business. I confirm that I have 0 violations from previous establishments for which I have served as a principal. (14)I will (additionally): (15)This approval does not cover any future outdoor dining areas or hours. (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: Nicholas Hartman Phone Number: (917) 340-1505 Alteri ntact: Phone Number: ify that the information provided above is truthful and accurate based upon my personal belief. I here

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.

MAY KWAN CHEUNG No. 01CH6020405 Notary Public, State of New York Qualified in Queens County My Commission Expires 03/01/2029 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: Olive's

Address: 413 Greenwich Street, New York, NY 10013

(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:daily 10 pm
(4) I will have delivery of any event supplies, goods and services during the hours of N/A
(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: Nic Hours Imraws Phone Number: 212-941-0411 Alternate Contact: Thy Aloun Phone Number: 212-941-0111
Alternate Contact: Towi Allown Phone Number: 212-941-0111
I hereby certify that the information provided above is truthful and accurate based upon my personal belief. XIAOYIN ZHANG No. 01ZH0014882 Notary Public, State of New York Qualified in Kings County My Commission Expires 10/25/2027
Sworn to this 20th day of September 2024 Xiaoyin Zhang
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. 3/2024

And the second standard of the applicant's Method of Operation for their Sold Notes of Sold Notes of Operation for their Sold Notes of Operation for Operation for Notes of Operation for Sold Notes of Operation for Oper	Manhattan Community Board 1 Liquor License Stipulations
Following stipulations for the applicant's Method of Operation for their CULC UT SO	1. DAVID BANK as a qualified representative of BLISS FULLY HOSPITALITY LLC
My requested hours of operation at 2	A THE PARTY OF THE
and the second hours of operation [2] Monday - Thursday, [2] Monday	the minowing stipulations for the applicant's Method of Operation for their FUCC CI GOOK license
I will operate a full-service, please describe type of establishment the conditionment at the specified form) I will operate a full-service, please describe type of establishment with full food service until Y2 bourts) before closuing I will install soundprooffing (please describe type) EXISTING Take discribe (centron) I will have DIA Yes No Tive Music Yes No Recorded Music Yes No Dancing Yes No Pomorted events Yes No Circ events Dies No Scheduled performances Yes No Volume of music, events, performances will be at background levels only. If it can be heard outside, or by neighbors, it is not known of music, events, performances will be at background levels only. If it can be heard outside, or by neighbors, it is not known of will close all gloors and semdous by Mon-Thur. Sun. I will close all gloors and semdous by Mon-Thur. Yes No I will close all gloors and semdous by Mon-Thur. Yes Yes No I will close all gloors and semdous by Mon-Thur. Yes Yes	1) My returns of house of manufacture 17 12 16 as a second of 17 12 16
well operate a full-servace, (please describe type) Catableshment	(1.a) CB approved hours of operation 12 - 11 Pm Monday - Thursday, 12 Pm I Friday - Saturday, 12 Pm Sunday (1. insubstrated this we mise that all pursues will be a lowest from the establishment at the specified tune)
I will not apply in the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying immunity Board 1 SLA for an alteration form brevide my locality of a sidewalk cafe in even of the fill and apply for a sidewalk cafe in even of the fill and apply for a sidewalk cafe in even of the fill and the stipulation form previous establishments for which I have served as a principal. I will continuously post this stipulation form previous establishments for which I have served as a principal. I will additionally: I will additionally: I Residents may contact the manager fowner at the below mumber. Complaints will be additived in my ocighbors. I will additionally: I will additionally: I Residents may contact the manager fowner at the below mumber. Complaints will be additived in my ocighbors. I will additionally: I will additionally: I will additionally: I Residents may contact the manager fowner at the below mumber. Complaints will be additived in my ocighbors. I will additionally: I will additionally information provided above is treatiful and eccurate based upon my personal helief. And I a discovery will an additional helief. Notary Public. Phone Number: Ph	211 will operate a full-service, (please describe type of establishment)
will have Discovered by the properties No Discovered No	to make comp
Notary Public	please describe (ocation)
Volume of music, events, performances will be at background levels only. If it can be heard outside, or by neighbors, it is not kignum disusse. will close all doors and windows by	Property of the Control of the Contr
I will not have elelisery of regular supplies, goods and services during the hours of twill have delisery of regular supplies, goods and services during the hours of twill employ a documan/security personnel on the following days and hours. I will employ a documan/security personnel on the following days and hours. I will actively manage crowdy congregating on the street at high, is 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 fiest notifying minimizity. Board 1. I will not apply for a sidewalk cafe license until at least a year after beginning operation. Yes. No. I will conspicuously post this stipulation form beside my liquor license usade of my business. I will conspicuously post this stipulation form beside my liquor license usade of my business. I will cadditionally: I will cadditionally:	 Volume of music, events, performances will be at background levels only. If it can be heard outside, or by neighbors, it is not sackground music.
I will not have elelisery of regular supplies, goods and services during the hours of twill have delisery of regular supplies, goods and services during the hours of twill employ a documan/security personnel on the following days and hours. I will employ a documan/security personnel on the following days and hours. I will actively manage crowdy congregating on the street at high, is 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 fiest notifying minimizity. Board 1. I will not apply for a sidewalk cafe license until at least a year after beginning operation. Yes. No. I will conspicuously post this stipulation form beside my liquor license usade of my business. I will conspicuously post this stipulation form beside my liquor license usade of my business. I will cadditionally: I will cadditionally:	6) I will close all goors and windows by Mon-Thur Iris Sat Com-
I will employ a documan/security personnel on the following days and hours. 1 will employ a documan/security personnel on the following days and hours. 2 I will actively manage crowds congregating on the street at right, to minimize dosturbances to residents. 3 I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying minimized. 3 I will not apply for a sodewalk cafe becase until at least a year after beginning operation. 4 I will conspicuously post this stipulation form beside my liquor focuse inside of my business. 5 I will conspicuously post this stipulation form beside my liquor focuse inside of my business. 6 I confirm that I have O collations from previous establishments for which I have served as a principal. 7 I will (additionally) 6 Residents may contact the manager/owner at the below mumber. Complaints will be additivesed immediately and I will revisit abuses stated method of operation if necessary in order to imminize my establishments in impact on my acciphores on the provided above is truthful and accurate based upon my personal helief. 6 Phone Number: 7 Phone Number: 8 7 928 - 9416 1 Phone Number: 8 7 928 - 9416 1 Phone Number: 8 8 7 928 - 9416 1 Phone Number: 8 8 7 928 - 9416 1 Phone Number: 8 8 7 928 - 9416 1 Phone Number: 1 Phone Nu	
will employ a document-security personnel on the following days and hours.	711 will have delivery of regular supplies, goods and services during the hours of 12 Jm - 6 Jm
Ewill actively manage crowds congregating on the street at right, to minimize disturbances to residents.	f) I will have parhage collected during the hours of
Lettl not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying minutely Board 1	I) I will employ a documan/security personnel on the following days and hours.
Lettl not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying minutely Board 1	10) I will actively manage crowds congregating on the street at right, to minimize disturbances to residents.
Will not apply for a sidewalk cafe license until at least a year after beginning operation Yes No	1) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying
I will conspicuously post this stipulation form beside my Jiquor Jicense inside of my business. I confirm that I have O violations from previous establishments for which I have served as a principal. I will (additionally) Residents may contact the manager owner at the below number. Compliants will be addressed immediately and I will revisit above-stated method of operation of necessary in order to imminize my establishment's impact on my neighbors. DAVID BASIC Phone Number. Phone Number: Ph	ommunity Board 1 🖾
Festive of the state of the sta	(2) I will not apply for a sidewalk cafe license until at least a year after beginning operation. Yes. No.
Festive of the state of the sta	 I will conspicuously post this stipulation form beside my figure ficense inside of my business.
Residents may contact the manager rowner at the below number of complaints will be addressed immediately and I will revisit above-stated method of operation if necessary in order to imminize my establishment's impact on my neighbors are DAVID BAVIC Phone Number. Phone Number: Phone Number	
The DAVID BANC Phone Number: 347 428 - 9416 The DAVID BANC Phone Number: 347 428 - 9416 That Contact Phone Number: Phone Numbe	
rnate Contact Phone Number reby cerefts that the information provided above is truthful and accurate based upon my personal belief. AV 29th 2024 Bated Dated Notacy Fublic - Scattu of Now New New Notacy Fublic Notacy Fublic - Scattu of Now New New Notacy Fublic Output of Notacy Fublic - Scattu of Now New New Notacy Fublic - Scattu of Now New New Notacy Fublic - Scattu of Now New New Notacy Fublic - Scattu of Norw New Norw New Norw Norw Norw New Norw New Norw Norw Norw Norw Norw Norw Norw Nor	(6) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and Uwill revisit to above-stated method of operation if necessary in order to imminize my establishment's impact on my neighbors.
reby cereity that the information provided above is truthful and accurate based upon my personal helief. AU 29th 2024 Batcol Datcol Notary 6.816 - Scalo of Now Nova Notary Public Notary Not	ame DAS(0 BASIC Phone Number, 887 426 - 9416
Av j 29th 2024 Dated Dated Notary Fublic Seato of Norw Norw Norw Norw North Notary Fublic Seato of Norw Norw North North Country Public North N	liernate Contact Phone Number
m in this 29 day of AUGUST 2029 Notary Public Notary Notary Public Notary Notar	hereby ceruity that the information provided above is truthful and accurate based upon my personal belief.
m in this 29 day of AUGUST 2024 Notary Public Notary Notary Public Notary Notar	Avi 29th 2024
m in this 29 day of AUGUST 2024 Notary Public Notary Notary Public Notary Notar	paced Dated
Notary Public Cushned on New York Country	
My Paragraphy Control of the Control	NO. 217(a)(a)(a)
munity Heard I remove that the SLA add those completions to the lease of the A.	mmunity Board 1 requests that the SLA add these supulations to the license of the above-mentioned applicants like

Rev. 3 2024

1- 1	Applicant Name DAJID BAJIC
	Stablishment Name (Corporate & DBA) BLISSFULLY HOSPIFALITY LIC DBA: TBO
	Address for Proposed License 345 GRECNWICH ST. 18
4- T	Type of License (Full liquor/OP, beer and wine, etc.) _ FULL LIGUOL / OF
	7.1 Type of application ☑New □ Alteration □ Change in Method of Operation, □ Corporate Change, □ Class Change
5- F	Proposed Days/Hours of Operation Mon - Thurs 12 Pm 11 Pm Fri - Sat 12 Pm 12 Pm Sun 12 Pm 11 Pm
	4.1 What floor(s) is the establishment on? IST FLOOL
	BASOMENT
	quare Footage of Location 3,000 50 FF TOTAL fethod of Operations (bar restaurant, Catering, etc.) RESTAURANT
8- Ou	itdoor Seating? □ Sidewalk □ Roadbed □Rooftop, □Terrace, or □other outside
	8.1 Do you intend to apply for DOT Outdoor dining permit? Yes No MARK IN CAT
9- 1	Type of Music? □ Live 🗗 Recorded □ DJ
(no s	folume of Music? We Background Dear Other Sound from events, performances or music will be heard outside the premises or by hbors)
11- V	Where will the kitchen exhaust system vent to? KECPING EXISTING EXHAUST TO ROOF
12- A	Applicant's Provious Licensed Establishments and Addresses PULE THAI EOOK HOUSE 766 9th AUE NY NY 18019
445 445	WHEN IN DANGKOK RESTAURANT 161-16 NOATHERN BLUD FLUSHING MY 17358 LAND THAS KITCHEN 450 AMSTERDAM AND NY NY 10029 HEARS THAS KITCHEN 1729 REE SE BRICK NE 05723

Manhattan Community Board 1 Liquor License Stipulations

				Shack 102 North E	and a
	-			, New York, New Yor	
the fo	llowing stipulations for th	e applicant's Method of (Operation for their $f B$	eer, Wine, and Cide	rlicense
	CB approved hours of ope	10:30am-10:30pr	n 10:30a day – Thursday,	0-14 Friday – Saturday, 10 am -11pmFriday – Saturday, lishment at the specified how	10:30am-10:30pm Sunday
. ,	vill operate a full-service, (p od establishment			d service until 0 hour(s) before closing.
(3) I v	vill install soundproofing (p	lease describe type) N/A			
(pleas	e describe location)				
` '	will have: DJs□Yes □No moted events □Yes □No			Performances Yes	
backg	round music. 🗵			can be heard outside, or by n	
(6) I v	_	lows by	Mon- Thur,	Fri - Sat	Sun.
(7) I v	vill have delivery of regular	supplies, goods and service	es during the hours of	4am - 8pm	
(8) I v	will have garbage collected of	during the hours of <u>land</u>	lord responsible		
(9) I v	vill employ a doorman/secur	rity personnel on the follow	ving days and hours: 📭	V/A	
(10)	I will actively manage cro	wds congregating on the s	treet at night, to minim	ize disturbances to residents.	. 🖾
(11)		A for an alteration to the me	ethod of operation agre	ed to by this stipulation with	out first notifying
Comn	nunity Board 1. 🛮				
(12)	I will not apply for a side	walk café license until at le	ast a year after beginni	ng operation. Yes	No
(13)	I will conspicuously post	this stipulation form beside	e my liquor license insi	de of my business. 🛛	
(14)	I confirm that I have 0	violations from previo	ous establishments for v	which I have served as a princ	cipal.
(15)	I will (additionally):				
(16) I the ab	Residents may contact the move-stated method of opera	anager/owner at the below tion if necessary in order to	number. Complaints w minimize my establis	vill be addressed immediately hment's impact on my neigh	y and I will revisit bors.
Name	Kadijha Bobb			nber: 3479485000	
Alten	nate Contact: Nick Bolic)	Phone	Number: 9297774727	,
I here	eby certify that the inform	ation provided above is t	ruthful and accurate l	based upon my personal be	lief.
	2 DIK	Loin	7 9	15/2024	AND SOME OF THE PROPERTY OF THE PARTY OF THE
Signe	d T		Date	15/2024 Le Gagnaire	WHITH SOPHIE LOUISE
•	n to this 5 day of	September, 202'	otary Public	is 6 agrance	OF NEW YORK OUT OF NEW YORK
Comn	nunity Board 1 requests that ations and board resolution :	the SLA add these stipula shall supersede all other do	tions to the I cense of the	he above-mentioned applica	The street Sound
					AND APIRES ON THE

1-	Applicant Name Shake Shack 102 North End Ave LLC				
2-	Establishment Name (Corporate & DBA) Shake Shack				
3-	Address for Proposed License 215 Murray St, New York, NY 10282				
4-	Type of License (Full liquor/OP, beer and wine, etc.) Beer and Wine				
	7.1 Type of application ☐New ☐Alteration ☐Change in Method of Operation, ②Corporate Change, ☐Class Change				
5-	Proposed Days/Hours of Operation				
	Mon-Thurs 10:30-11 Fri-Sat 10:30-11 Sun 10:30-11				
	4.1 What floor(s) is the establishment on? Ground				
6-	Square Footage of Location N/a				
	Method of Operations (bar restaurant, Catering, etc)				
,-	Restaurant				
8- (Outdoor Seating? ☐ Sidewalk ☐ Roadbed ☐Rooftop, ☐Terrace, or ②other outside 8.1 Do you intend to apply for DOT Outdoor dining permit? ☐ Yes ③ No				
9-	Type of Music? □ Live ⊗ Recorded □ DJ				
(ne	- Volume of Music? ② Background ② Other o sound from events, performances or music will be heard outside the premises or by ighbors)				
11-	- Where will the kitchen exhaust system vent to? N/a				
	- Applicant's Previous Licensed Establishments and Addresses				

See annex

1-	Applicant Name		
	Hornblower New York LLC		
2-	Establishment Name (Corporate & DBA) Infinity		
3-	Address for Proposed License Pier 15, 78 South Street, New York, NY 10006		
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, ⑤Removal		
5-	Proposed Days/Hours of Operation Hours vary by event but will take place between:		
	Mon - Thurs 9am-2am Fri - Sat 9am-2am Sun 9am-2am		
	4.1 What floor(s) is the establishment on? Entire vessel		
6- 7-	Square Footage of Location 5,000 sq ft Method of Operations (bar restaurant, Catering, etc) Vessel for sightseeing and events.		
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		
10- (no	Volume of Music? Background Other sound from events, performances or music will be heard outside the premises or by ighbors)		
11	Where will the kitchen exhaust system vent to? n/a		
12-	Applicant's Previous Licensed Establishments and Addresses		
	<> Hornblower New York LLC - 353 West Street, Pier 40, New York, NY 10014 (3 vessels d/b/a Serenity, Lexington, Sensation) <> Hornblower Cruises and Events LLC - Pier 62, Chelsea Piers, New York, NY 10011 (5 vessels d/b/a Celestial, Manhattan Elite, Atlantica, Spirit of New York, Spirit of New Jersey) <> HNY Ferry LLC - 63 Flushing Ave, Brooklyn, NY 11205 (38 vessels)		

Manhattan Community Board 1 Liquor License Stipulations

I, Mitchell Randall , as a qualified representative of Hornblower New York LLC dba II
located at Pier 15, 78 South Street, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their <u>Vessel/Boat/Ship</u> license
Hours of operation will vary based on event but will be between ** (1) My requested hours of operation are 9a-12a Monday – Thursday, 9a-12a Friday – Saturday, 9a-12a Sunday
(1.a) CB approved hours of operationMonday - Thursday,Friday - Saturday,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): Vessel/Boat/Ship with full food service until _0 hour(s) before closing.
(3) I will install soundproofing (please describe type) n/a
(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 byMon- Thur,Fri - SatSun.
✓ I will not have open doors or windows.
(7) I will have delivery of regular supplies, goods and services during the hours of Mon-Fri 8am-4pm; Sat 8am-1pm
(8) I will have garbage collected during the hours of 6am (Monday, Wednesday, and Friday)
(9) I will employ a doorman/security personnel on the following days and hours: N/A
(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 violations from previous establishments for which I have served as a principal.
(15) I will (additionally):
The applicant is allowed to stay open till 2am on 24 occasions during the year.
(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: Nilda Bracero Phone Number: (646) 358-3103
Alternate Contact: Phone Number:
I hereby certify that the information provided above is truthful and accurate based upon my personal bases.
Signed Sworn to this 29th day of August 2024 Argue Dated Dated
Motary Public # KYNP22328 (64P 2/18/2025) ////////////////////////////////////
Community Board 1 requests that the SLA add these stipulations 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.

Rev. 3/2024

.	Establishment Name (Corporate & DBA) Theta 121 Corp dba Blue Haven South
}-	Address for Proposed License 121 Fulton Street
ļ.,	Type of License (Full liquor/OP, beer and wine, etc.) Full liquor
	7.1 Type of application ☐New ☐Alteration 圖Change in Method of Operation, ☐Corporate Change, ☐Class Change
5-	Proposed Days/Hours of Operation
	Mon-Thurs 11am-4am Fri-Sat 11am-4am Sun 11am-4am
6-	Square Footage of Location Approx 8,000sf
7-	Method of Operations (bar restaurant, Catering, etc)
	Restaurant
	Outdoor Seating? Sidewalk Roadbed Rooftop, Terrace, or other outside 8.1 Do you intend to apply for DOT Outdoor dining permit? Yes No Type of Music? Live Recorded DJ
10 (n	· Volume of Music? ■ Background □ Other o sound from events, performances or music will be heard outside the premises or by lighbors)
	- Where will the kitchen exhaust system vent to? Roof
11	- Applicant's Previous Licensed Establishments and Addresses

Manhattan Community Board 1 Liquor License Stipulations Theta 121 Comm

located at 121 Fulton Street	_, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their on p	premise liquor license
(1) My requested hours of operation are 11a-4a Monday – Thursday, 11a-4a	Friday – Saturday, <u>11a-4a</u> _{Sunday}
(1.a) CB approved hours of operation 11AM -2AM Sunday – Wednesday, 11AM-(I understand this to mean that all patrons will be cleared from the establish	
(2) I will operate a full-service, (please describe type of establishment): Restaurant with full food se	ervice until 1 hour(s) before closing.
(3) I will install soundproofing (please describe type)	
(please describe location)	
	Yes No Dancing Yes No
(5) Volume of music, events, performances will be at background levels only. If it can background music. \boxtimes	be heard outside, or by neighbors, it is not
(6) I will close all doors and windows by 10pm Mon- Thur, 10pm	Fri - Sat 10pm Sun.
✓ I will not have open doors or windows.	
(7) I will have delivery of regular supplies, goods and services during the hours of 8ai	m-12pm
(8) I will have garbage collected during the hours of 12am-6am on Ann Stre	
(9) I will employ a doorman/security personnel on the following days and hours: 3-4	
(10) I will actively manage crowds congregating on the street at night, to minimize	
(11) I will not apply to the SLA for an alteration to the method of operation agreed Community Board 1.	to by this stipulation without first notifying
(12) I will not apply for a sidewalk café license until at least a year after beginning	oneration V N
(13) I will conspicuously post this stipulation form beside my liquor license inside of	
(14) I confirm that I have $\underline{0}$ violations from previous establishments for which	ich I have served as a principal.
(15) I will (additionally):	
I do not intend to apply for the DOT Dining Out NYC Prog cover any future outdoor dining areas.	gram and this approval does not
There are no other changes to the method of operation.	
The CB has granted the applicant to remain open until 4a	am only for major
international sporting events and the applicant will post r	v v
(16) Residents may contact the manager/owner at the below number. Complaints will the above-stated method of operation if necessary in order to minimize my establishm.	
Name: Meghan Joye Phone Number	er:
Alternate Contact: Abby Dowd Phone N	Jumber: 937-474-0251
I hereby certify that the information provided above is truthful and accurate bas	
Michen Jane	FRANK W. PALILLO Notary Public, State of New York
Signed Dated	Qualified in Kinha Fourt
Sworn to this 1st day of October 2524	Commission Expires April 30 142
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. 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 1993/6 milled It is between process and work was a serious designed to hold 75 persons or more I. Att minde at home man the boat 47 a too though me tell achelogide gulwoited to Name of Establishment: Theta 121 Corp Address: 121 Fulton Street and 1051 geteration which is the first in an energy of model becomes (6'11) (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. The complete and a contract the first of the (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: SUNDAY THROUGH MONDAY BETWEEN 12 MM - 6AM (4) I will have delivery of any event supplies, goods and services during the hours of 8 am - 120m VI VI December 1 miles and a Class (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.) Sharrow Emmissed and (6) I understand that I must submit a notice to the community board for a street activity permit for my licensed establishment at 100 least 45 days in advance and being making the property with the start of the (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. त्यां पर विशेष प्रकारीके पूर्व रहिए की विवेद हुई। विवेद क्षित्र के प्रकार कार्या कर है। है है के प्रकार कार्या कर किया है। वहीं क (9) I agree to follow the conditions outlined in the resolution on accurity oversight of the establishment to prevent noise; congestion and unruly patrons. polarista primari, al sulla sera un collectioni carra l'Electron de la rationale de la Marchina de la Marchina (10) I will (additionally): A second of the second rough you shiped and a sufficient self-and showing one form in the tare american terrer e anti-material in a tradecare are a consideration of the contract and tradecare and tradecar (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: Meghan	derakensas en ediku selikus elaipisse disest Doye in nemer nelimbre historie grued se	Phone Number: (917) 319-3933	álastár. <u>St</u> enskilá
Alternate Contact:	0802-P19 (719) Jedan V 19-293	Phone Number:	Wi sale
I hereby certify th	at the information provided above is truthful	and accurate based upon my personal belief.	
x Mus	her Jage	09/04/2024	Sainth).
Signed		Dated	10 mg
Swom to this	1th day of SEPTEMBER 202	24 Jan 2 1	18 18 00 PM

Notary Public

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