1- Applicant Name The Mint at FIDI Inc.	
2- Establishment Name (Corporate & DBA) The Mint at FIDI Inc.	
3- Address for Proposed License 11 Stone Street, New York, NY 10004	
4- Proposed Days/Hours of Operation Restaurant 1st Floor: Sun-Thurs (9am-11pm) Fri-Sat (9am-12am) Restaurant 1st Floor: Sun-Thurs (9am-11pm) Fri-Sat (9am-12am) Lounge 30th & 31st Fl: Sun-Thurs (12pm-12am) Fri-Sat (12pm-2am)	
4.1 What floor(s) is the establishment on? 1st, 2nd, 30th & 31st	
4.2 Any rooftop, terrace, or other outside usage? terrace/patio	
5- Square Footage of Location Total 3,700 sq. ft. for 4 floors: 1st FI - 1,000 sq.ft. 30th & 31st FI - 1,000 sq. ft. 2nd FI - 1,400 sq. ft. 2nd FI - 300 sq. ft.	.ft
6- Method of Operations (bar restaurant, Catering, etc) Hotel restaurant/bar, lounge, minibars & room serv	'ice
7- Type of License (Full liquor/OP, beer and wine, etc.) Full liquor/HL (Hotel Liquor License)	
7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change) New	
8- Sidewalk Café? Yes/No No	
9- Type of Music? ☐ Live ☐ Recorded ☐ DJ	
10-Volume of Music? A Background (no sound from events, performances or music will be heard outside the premises or by neighbors)	
☐ Other	
11- Where will the kitchen exhaust system vent to? Roof	
12- Applicant's Previous Licensed Establishments and Addresses Not applicable	

I, Louis Llach, as a qualified representative of The Mint at FIDI Inc,
New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their Hotel Liquor (HL) licen
(1) My hours of operation will be Sunday – Thursday and 9am – 12am y Monday – Thursday (I) My hours of operation will be Sunday – Thursday and 9am – 1am y Hriday – Saturday (I) will be cleared from the establishment at the specified hour).
(2) I will operate a full-service restaurant, (please deserve type of 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 □Yes ♥No Live music □Yes ♥No Recorded Music ♥Yes □No Dancing □Yes ♥No
CILLL Samples TVer VNo
Tromoted Crond 2100 210
(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 7am - 12pm
(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. Yes No
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.
(13) I confirm that I have N/A violations from previous establishments for which I have served as a principal.
(14) I will (additionally): be employing corporate promotions/buyouts for daytime events, meeting events, which will lead to them breakouts and early cocktail receptions on the second floor, security will be employed; second floor terrace will close at 8pm; secure the hotel's sanitation company and coordinate to pick up all refuse at the same time
(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: Louis Llach Phone Number: (646) 942-0961
Alternate Contact: Phone Number:
Alternate Contact: Phone Number: I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
Provided above is diddinar and accurate based upon my personal belief.
Signed Dated LAURA ANN LACONCA Notary Public - State of New York NO. 01LA6250845 Qualified in Queens County My Commission Expires Oct 31, 2023
Sworn to this day of NOV, 2022
Community Board 1 requests that the SLA add these stimulations to the license of the characteristics.

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 NUMBER ONE CAVIAR LLC
2-	Establishment Name (Corporate & DBA)
3-	Address for Proposed License 4 WALL STREET
4-	Proposed Days/Hours of Operation 7 days; 10 AM - 12 AM
	4.1 What floor(s) is the establishment on? GROVND LOBBY
	4.2 Any rooftop, terrace, or other outside usage? NO
5-	Square Footage of Location 450
	Method of Operations (bar restaurant, Catering, etc.) (AVIAR BOUTIQUE, with food preparation area (Article 20-c.) License. Type of License (Full liquor/OP, beer and wine) etc.)
Tl	7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
8-	Sidewalk Café? Yes(No
9-	Type of Music? ☐ Live ☐ Recorded ☐ DJ None
	Volume of Music? 🖾 Background (no sound from events, performances or music will be heard outside the premises or by neighbors)
	□ Other
11-	Where will the kitchen exhaust system vent to? \mathcal{N} . α
12-	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.

iocated a	New York, New York, agree to
the follow	Manhattan Community Board I Liquor License Stipulations key Litwak, as a qualified representative of Mumber One Canic LLC it 19 WALL STREET, New York, New York, agree to wing stipulations for the applicant's Method of Operation for their On premise liquor license
nday	10am-10pm Monday 10 13
understan	ours of operation will be / Oux / Cam
(2) I will	operate a full-service restaurant, (please describe type of 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 Tyes No Live music Tyes No Recorded Music Tyes No Dancing Tyes No
	ed events \(\text{Yes} \) \(\text{Sho} \) Cover fee events \(\text{Yes} \) \(\text{Sho} \) Scheduled performances \(\text{Yes} \) \(\text{No} \)
	me of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it
is not bac	close all doors and windows by $\frac{1}{2}$ Sun-Thurs and $\frac{1}{2}$ Fri-Sat. At will not have French doors or windows.
(7) I will	have delivery of supplies, goods and services during the hours of 13 cm = 12 cm
(8) I will	employ a doorman/security personnel on the following days and hours: 24/7 building security
	actively manage crowds congregating on the street at night, to minimize disturbances to residents.
(10) I wil	Il not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying notify Board 1.
and the same that	Il not apply for a sidewalk café license until at least a year after beginning operation. At es = 10
(12) I wil	Il not apply for a sidewalk café license until at least a year after beginning operation. We salve a local license until at least a year after beginning operation.
	Il conspicuously post this stipulation form beside my liquor license inside of my business.
(13) I con	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con	Il conspicuously post this stipulation form beside my liquor license inside of my business.
(13) I con	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con (14) I wil	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con (14) I wil	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con (14) I wil	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con (14) I wil	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con (14) I wil (15) Resid the above Name:	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con (14) I wil (15) Resid the above Name:	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I con (14) I wil (15) Resid the above Name:	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I cor (14) I wil (15) Resid the above Name:	Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I cor (14) I wil (15) Resid the above Name: Alternate ! I hereby (Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have
(13) I cor (14) I wil (15) Resid the above Name: Alternate ! I hereby (Il conspicuously post this stipulation form beside my liquor license inside of my business. Infirm that I have

BARROOM CONTRACTOR OF THE PARTY OF THE PARTY

医生态性发表,这种介绍的特别的各种思想

Manhattan Community Board 1 Liquor License Stipulations Bragwani I. Hemant , as a qualified representative of Smort Kitchen Lech Inc. located at egrand! Smeet New York, New York, agree to the following stipulations for the applicant's Method of Operation for their _ Restautant wine _ license (1) My hours of operation will be 9AM - 11PM - MON - THU, $9AM - 12AM + RN - SAT_9AM - 10PM$, SUN 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): Indian Fusion with full food service until 1. hour(s) before closing. (3) I will install soundproofing (please describe type and locations) Fram Pannels (4) I will have: DJs \(\frac{1}{2}\)Yes \(\square\)No \(\text{Live music \(\frac{1}{2}\)Yes \(\square\)No \(\text{Recorded Music \(\frac{1}{2}\)Yes \(\square\)No Dancing Tyes No Promoted events Wes No Cover fee events Tyes MNo Scheduled performances Wes KNo (5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background music. (6) I will close all doors and windows by 10: 30 PA MON-THO, II: 2014 FRI-SAT MI will not have French doors or windows. (7) I will have delivery of supplies, goods and services during the hours of 9am - 3pm (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. *IYes \subsetention 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): (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: Hemant Bhagwani. Phone Number: 905 - 330 - 6061 Alternate Contact: Phone Number: I hereby certify that the information provided above is truthful and accurate based upon my personal belief. March 13, 2023 day of March 2023 Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. These stipulations and board resolution shall supersede all other documents. Rev. 12/18 PETEUMEERA R CARR Notary Public - State of New York

Manhattan Community Board 1 Liquor License Stipulations for Large Venue Establishments A "large venue" as defined by the NYC Department of Building designation on public assembly is an establishment designed to hold 75 persons or more

(1) I will follow the recommendations made by the sound 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 supplies, goods and services 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. 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 reached/cidenvalle continue. We can be added to find the stipulations are conditions that must be adhered to for the reached/cidenvalle continue.
(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: Hemant Bhagwani Phone Number: 905 - 330 - 6061
Alternate Contact: Phone Number:
I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
(hh) March 13/23
Signed Dated
Sworn to this 13th day of March, 2023
Notary Public
Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. These
PETEUMEERA R CARR Notary Public - State of New York NO. 01CA6334699 Qualified in Queens County My Commission Expires Dec 21, 2023

1-	Applicant Name Fulton Seafood Market LLC & Creative Culinary Management Company LLC
2-	Establishment Name (Corporate & DBA) Tin Building by Jean Georges
3-	Address for Proposed License 96 South Street, New York, NY 10038
4-	Proposed Days/Hours of Operation Sun - Wed 6am to 1am; Thurs - Sat 6am to 2am
	4.1 What floor(s) is the establishment on? 1st, 2nd and 3rd Floors
5-	4.2 Any rooftop, terrace, or other outside usage? Outdoor seating on 3 sides of leased/licensed premises. Square Footage of Location 54,494 sq. ft.
6-	Method of Operations (bar restaurant, Catering, etc) Restaurant/Food Hall
7-	Type of License (Full liquor/OP, beer and wine, etc.) Full Liquor/OP
	7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
8-	Sidewalk Café? Yes/No No
9-	Type of Music? 🗷 Live 🖾 Recorded 🖾 DJ
10-	Volume of Music? A Background (no sound from events, performances or music will be heard outside the premises or by neighbors)
	□ Other
11-	Where will the kitchen exhaust system vent to? ALL PCUs exhausts to the roof.
12-	Applicant's Previous Licensed Establishments and Addresses See Attached Rider

Manhattan Community Board 1 Liquor License Stipulations ___, as a qualified representative of _____ Fulton Scafood Market LLC & Creative Culinary Management Company LLC David O'Reilly 96 South Street located at , New York, New York, agree to the following stipulations for the applicant's Method of Operation for their on-premises liquor (1) My hours of operation will be Sunday - Thursday and 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): marketplace will full service and fast casual grab-and-go restaurants with full food service until hour(s) before closing. (3) I will install soundproofing (please describe type and locations) Sound level limiters and building construction material (4) I will have: DJs Wes UNo Live music Wes UNo Recorded Music Wes UNo Dancing UYes No Promoted events Tyes No Cover fee events □Yes XXNo Scheduled performances TYes XNo (5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it not background music. ***(6) I will close all doors and windows by ____Sun-Thurs and ____ Fri-Sat. \(\mathbb{M}\) 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: Seaport Security will be present during all hours of operation. (9) 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. (11)I will not apply for a sidewalk café license until at least a year after beginning operation. Alyes INo (12)I will conspicuously post this stipulation form beside my liquor license inside of my business. violations from previous establishments for which I have served as a principal. (13)I confirm that I have (14)I will (additionally): * The hours of operation will be from 6AM opening to 1AM Sunday through Wednesday, and 6AM opening to 2AM closing Thursday through Saturday, and the hours of food service and bar service will be the same as the hours of operation ** Also include a jukebox, and non-musical entertainment in the form of live cooking shows that can be filmed and broadcasted with audience *** Open seasonally: May through October, from 6AM to 10PM Monday through Thursday, and 6AM to 11PM Friday through Sunday The applicant agreed to provide a 30-days notice in advance to the Community Board for a venue that intends to play music outside of the premises (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. DAVID R. O'REI'lly Phone Number: (917) 583-504 Alternate Contact: Phone Number: I hereby certify that the information provided above is truthful and accurate based upon my personal belief. **REBECCA MISTY ABASTA NOTARY PUBLIC** STATE OF NEVADA Signed Commission Expires: 12-10-24 Certificate No: 17-4216-1

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

Manuactan Community Board 1 Elquor Electise Supulations
1, Sachin Yadav , as a qualified representative of OH SAI NYC UC
located at 120 Chuych STREET , New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their LiquoR license
(1) My hours of operation will be
(2) I will operate a full-service restaurant, (please describe type of restaurant): ORGANIC BUYGEL JOINT
with full food service until Att_ hour(s) before closing.
(3) I will install soundproofing (please describe type and locations) We Play Very Slow Sound Music But whatever need to make it sound Proof We will do it
(4) I will have: DJs Tyes Tho Live music Tyes Tho Recorded Music Tyes Tho Dancing Tyes Tho
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 by lolw Sun-Thurs and lolm Fri-Sat. W 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: N·A
(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.
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.
(13) I confirm that I have NO violations from previous establishments for which I have served as a principal.
(14) 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: Sam Vadar Nick Vadar Phone Number: 646-251-4029 917 310 8454 Alternate Contact: Ravi Yadar Vick Yadar Phone Number: 6315782437 3477986207
Alternate Contact: Ravi Yalav Vick Yalav Phone Number: 6315782437 / 347798620
I hereby certify that the information provided above is truthful and accurate based upon my personal belief.
52/01/2022
Signed ANGELA CALIXTO ORTEGA New York
Notary Public, State of New York No. 01CA6401720 Qualified in Suffolk County Qualified of Suffolk County Output Description Output
Sworn to this day of Commission Expires 12/16/2023
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
	Chefscape NYC LLC
2-	Establishment Name (Corporate & DBA)
	Chefscape
3-	Address for Proposed License
	205 Hudson Street, New York, New York 10013
4-	Proposed Days/Hours of Operation Sunday to Thursday 11am-12am; Friday to Saturday 7am-1am
	4.1 What floor(s) is the establishment on? Ground
	4.2 Any rooftop, terrace, or other outside usage? No
5-	Square Footage of Location 1483 SF
6-	Method of Operations (bar restaurant, Catering, etc)
	Restaurant
7-	Type of License (Full liquor/OP, beer and wine, etc.) Full liquor/OP
	7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change) New Application
8-	Sidewalk Café? Yes/No No
9-	Type of Music? ☐ Live 🔀 Recorded ☐ DJ
	Volume of Music? A Background (no sound from events, performances or music will be heard outside the premises or by neighbors)
	☐ Other
11-	Where will the kitchen exhaust system vent to?
	In facility
12-	Applicant's Previous Licensed Establishments and Addresses
Lovir	pee Events Inc. 2 Desbrosses Street, New York, NY 10013 n Oven & Lands End Corp. 80 Browns River Road, Sayville, NY 11782 erfield Celebrations Inc. 199 Mills Pond Road, Saint James, NY 11780

I, Michael Scollan, as a qualified representative	/e ofChefscape NYC LLC,
located at 205 Hudson Street, New York, New York 10013	, New York, New York, agree to
the following stipulations for the applicant's Method of Operation	n for their on-premises liquor, beer and cider license
(1) My hours of operation will be 12pm - 10pm Sunday - Thu understand this to mean that all patrons will be cleared from the estable (2) I will operate a full-service restaurant, (please describe type of restaurant) I will install soundproofing (please describe type and locations)	elishment at the specified hour). staurant): Restaurant with full food service until hour(s) before closing.
(4) I will have: DJs \(\text{DYes}\) \(\text{QNo}\) Live music \(\text{DYes}\) \(\text{QNo}\) Recorded	
Promoted events \(\text{UYes XNo}\) Cover fee events \(\text{UYes XI}\) (5) Volume of all music, events or performances will be at background is not background music. \(\text{\text{\text{\text{\text{\text{UYes XI}}}}}\)	y.
(6) I will close all doors and windows bySun-Thurs and	Fri-Sat. OI will not have French doors or windows.
(7) I will have delivery of supplies, goods and services during the hou	
(8) I will employ a doorman/security personnel on the following days	s and hours:
(9) I will actively manage crowds congregating on the street at night,	
(10) I will not apply to the SLA for an alteration to the method of ope Community Board 1.	
(11) I will not apply for a sidewalk café license until at least a year af	ther beginning operation. WYes □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 establish	ments for which I have served as a principal.
(14) I will (additionally):	
Post no smoking and no loitering signs outside the	establishment.
Private event buyouts will be limited to 2 per year, ar The residential community will be given advanced no	
Sanitation company pickup will be on Saturday and	Sunday 8am to 9am
(15) Residents may contact the manager/owner at the below number. the above-stated method of operation if necessary in order to minimize	
Name: Darryl Stupp	Phone Number: (212) 625–2600
Alternate Contact: Robert Bachert	Phone Number: (212) 625–2600
I hereby certify that the information provided above is truthful a	nd accurate based upon my personal belief.
200	3/16/03
Signed	Dated
Sworn to this 16th day of March, 2023	borah G. Callaway
Notary P	rublic
Community Board 1 requests that the SLA add these stipulations to t stipulations and board resolution shall supersede all other documents	

the above-mentioned applicant. These
DEBORAH G. CALLAWAKev. 12/18
Notary Public, State of New York
No. 01CA4887127
Qualified in Suffolk County
Commission Expires March 9, 2027

DocuSign Envelope ID: 30D7D723-74F9-4988-9172-AD454EE62126

Liquor License Application Questionnaire Summary Revised 8/2019

1-	Applicant Name Dustin Wilson
2-	Establishment Name (Corporate & DBA)
3-	Ambassadors Only LLC (DBA: Rigor Hill Market) Address for Proposed License 227 w Broadway, New York, NY 10013
4-	Proposed Days/Hours of Operation 7am-7pm daily
	4.1 What floor(s) is the establishment on? Ground floor
	4.2 Any rooftop, terrace, or other outside usage? No
5-	Square Footage of Location 800 sqft
6-	Method of Operations (bar restaurant, Catering, etc) Cafe/market
7-	Type of License (Full liquor/OP, beer and wine, etc.) Beer & wine
	7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change) New
8-	Sidewalk Café? Yes/No Yes
9-	Type of Music? ☐ Live ☐ Recorded ☐ DJ N/A
10-	Volume of Music? Description (no sound from events, performances or music will be heard outside the premises or by neighbors)
	☐ Other
11-	Where will the kitchen exhaust system vent to?
12-	Applicant's Previous Licensed Establishments and Addresses 1 White Street, New York, NY 10013

Incented at 227 W. Broadway New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Beer and Wine	I, Dustin Wilson	, as a qualified representative of	Ambassadors Only	, LLC
(1) My hours of operation will be 7.00am-7.00pm Sunday — Thursday and 7.00am-7.00pm 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): CafeMarket with full food service until	located at 227 W. Broadway		, New York, Ne	w York, agree to
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): CaleMarket with full food service until with full food service until hour(s) before closing. (3) I will install soundproofing (please describe type and locations) _normal insudation (4) I will have: DJs □Ves ②No	the following stipulations for th	e applicant's Method of Operation for	their Beer and Wine	license
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): CaleMarket with full food service until with full food service until hour(s) before closing. (3) I will install soundproofing (please describe type and locations) _normal insudation (4) I will have: DJs □Ves ②No				
with full food service until Ohours's before closing. (3) I will install soundproofing (please describe type and locations) normal insutation (4) I will have: DIS CIVES (2No Live music CIVES (2No Recorded Music (2) Performances CIVES (2) ON Scheduled CIVES ((1) My hours of operation will be understand this to mean that all p	2 7:00am-7:00pm Sunday – Thursday coatrons will be cleared from the establishm	y and 7:00am-7:00pm Finent at the specified hour).	riday – Saturday (I
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	Community Board 1 requests th	at the SLA add these stipulations to the	10	d applicant. These

1-	Applicant Name
	VICREY LLC
2-	Establishment Name (Corporate & DBA)
3-	VICREY LLC / TAGMO Address for Proposed License
	226 FRONT STREFT
4-	Proposed Days/Hours of Operation SUN: 10AM-10PM
	MON-SAT: 8AM-10PM 4.1 What floor(s) is the establishment on?
	4.2 Any rooftop, terrace, or other outside usage?
5-	Square Footage of Location
J-	Square Pootage of Location
6-	Method of Operations (bar restaurant, Catering, etc)
7-	Type of License (Full liquor/OP, beer and wine, etc.)
	7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
8-	Sidewalk Café? Yes/No NO
9-	Type of Music? Live Recorded DJ
10-	Volume of Music? Background (no sound from events, performances or music will be heard outside the premises or by neighbors)
10-	Volume of Music? ☐ Background (no sound from events, performances or music will be heard outside the premises or by neighbors) ☐ Other
	neura ouiside the premises or by neighbors)
11-	Other

Manhattan Community Board 1 Liquor License Stipulations I. Renee Lee _, as a qualified representative of Vicrey LLC located at 226 Front Street , New York, New York, agree to the following stipulations for the applicant's Method of Operation for their full service liquor license (1) My hours of operation will be 10am-10pm 8am-10pm Sunday and Monday - Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour). Brunch, breakfast cafe, restaurant (2) I will operate a full-service restaurant, (please describe type of restaurant): with full food service until 1/2 hour(s) before closing. (3) I will install soundproofing (please describe type and locations) Dancing Tyes No (4) I will have: DJs Tyes No Live music Tyes No Recorded Music Tyes No Scheduled performances Tyes No Promoted events Tyes No Cover fee events Tyes No (5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background music. Fri-Sat. I will not have French doors or windows. (6) I will close all doors and windows by Sun-Thurs and (7) I will have delivery of supplies, goods and services during the hours of not before 9am (8) I will employ a doorman/security personnel on the following days and hours: NA (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. MY es No (12) I will conspicuously post this stipulation form beside my liquor license inside of my business. violations from previous establishments for which I have served as a principal. (13) I confirm that I have (14) 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. Phone Number: 917 838 2178 RENEE Name: Phone Number: Alternate Contact: I hereby certify that the information provided above is truthful and accurate based upon my personal belief. Daniel Ellison Commissioner of Deeds, City of New York No.1-10197 Cert. Filed in New York County Commission Expires March 1st 2024 Signed Dated The UPS Store @ 82 Nassau 212.406.9010 Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. These

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stipulations and board resolution shall supersede all other documents.

Rev. 12/18