

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD NO. 3

59 East 4th Street - New York, NY 10003 Phone: (212) 533-5300 - Fax: (212) 533-3659 www.cb3manhattan.org - info@cb3manhattan.org

Dominic Pisciotta, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire

Please complete and return (with requested diagram) to the Community Board office by fax or mail to arrive at least 10 business days before the Committee meeting. In addition, bring 6 copies (double sided) plus supporting material requested to the meeting. Failure to complete and return this form on time will result in your item being placed at the end of the agenda. Application must be complete to be heard, including petitions and all items on check list below. Use N/A for answer if appropriate.

Conspicuously display the enclosed posters on the outside of your establishment for 7 days prior to the meeting. Bring a photo with a newspaper showing date as proof of the posting. Check which you are applying for: \square new liquor license \square upgrade of an existing liquor license alteration of an existing liquor license transfer of an existing liquor license Type of license: ON- PASM15 & 5 If alteration, describe nature of alteration: Previous or current use of the location: ADDITION OF 2ND BARIN REAR OF PREMISES Is any license under the ABC Law now in effect for this location? X Yes No Corporation and trade name of current/previous license: Huzzah LLC - FINNERTY IRISH Pub Will any other business besides food or alcohol service be conducted at said premises? If yes, details: Please bring the following items to the meeting: NOTE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED. ☐ Photographs of the inside and outside of your establishment; ☐ Schematics/floor plans of the inside of your establishment; ☐ If a restaurant, please include a proposed menu (including drink menu); Petition in support of proposed business or change in business with signatures from residential tenants at location and in surrounding buildings and also letter from block association if one exists. E-mail the CB office at info@cb3manhattan.org for help to find block associations. Petition must give proposed hours and method of operations. For example: restaurant, sports bar, combination restaurant/bar. Petitions are required and application will not be heard without petitions. Photographs of proof of conspicuous posting with newspaper showing date. APPLICANT: Name of applicant and all principals: HUZZAH LLC

PRINCIPALS - BRIAN STAPLETON & DIETER SEELIB

Trade name (DBA): FINNERTY'S IRISH PUB

Revised: June 2010

| Premises address: 221 SECOND AVE |
|--|
| Between what streets: EAST 13 TOTRET AND EAST 14 TSTREET |
| Mailing address (if different than above): |
| City /State / Zip: |
| Telephone number: E-mail: |
| Contact Name: Attorney |
| Office address: |
| City, State, Zip: |
| Telephone number: E-mail: |
| PREMISES: |
| Type of building and number of floors: 4 STORY ATTACHED BRICK |
| Prior use of premises: JAVERN |
| Any outside area or sidewalk cafe used for the sale or consumption of alcoholic beverages? (includes roof & |
| yard) Yes No If Yes, describe and show on diagram: |
| Does premises have a valid Certificate of Occupancy and all appropriate permits? X Yes |
| Do you plan to apply for Public Assembly permit? |
| Zoning designation: Maximum number of persons that can legally occupy |
| the premises? 74 Number of tables? 8 Number of seats at tables? 36 |
| BARS: |
| How many *stand-up bars/ bar seats are located on the premises (and how many seats)? ///9 |
| How many service bars? None |
| Describe all bars (length, shape and location): Existing - 24 IN HAIF OVAL NEW- 7' BAR REAR |
| Any food counters? Yes No If Yes, describe: |
| * A <u>stand up bar</u> is any bar or counter (whether seating or not) over which a member of the public can order, pay for and receive an alcoholic beverage. |
| KITCHEN: |
| Does premises have a kitchen or food preparation area? |
| Is food available for sale? Yes \(\text{No If yes, describe type of food and submit a menu} \) SANDWICHES \(\text{No Menu - On CHARK BOARD} \) |
| PROPOSED METHOD OF OPERATION: |
| What type of establishment will this be? (i.e.: restaurant, tavern, sports bar, etc.) |
| What are the proposed days/hours of operation? (Specify days and hours each day) |
| Revised: June 2010 |

| Will the business employ How many employees? | • | ¥Yes IØ | □ No Bo | TH OWN | er 5 |
|--|--|--|--|--|--|
| Will there be security pe | | | (If Yes | s. how many? | 2 NIGHTLY |
| Do you □ have or □ pla | · | | | | • |
| Will there be Hookah pip | | | , | | |
| Will premises have musi | 4 | | | | |
| If Yes, what type of mus | ic? Explain in det | ail: IRISH | AND CUR | RENT PO | PULAR |
| Type of music/entertain Volume | iment: 🔲 Li | ve musician ackground (quiet | ☐ Live DJ | X Juke box | |
| Do you have or D pla | n to install sound | proofing? Pleas | e describe your | sound systen | n: |
| PRESENTA | Y INSTA | LED AND | 1 SOUWI | PROOF | ep |
| | • | | | | a cover fee is charged? |
| Do you have plans to ma establishment? | nage or address v Yes A N | | nd crowd contro s" please attach | | walk caused by your |
| Is this establishment whe | el chair accessible | e? | 🗶 Yes | |) |
| Has this corporation or a | ny principal been | licensed previou | sly? 💢 Yes | □ No |) |
| If yes, please indicate nar | me of establishme | nt: Huzzaf | 1 LIC | W | - |
| Address: 221 Secont | | | Con | nmunity Boar | -d # |
| Dates: Licensed | IN 2009 | | | *************************************** | |
| If you answered "Yes" to or other comments from | • | | | _ | |
| Using the diagram below address) and total number each direction. Please indiagram. Please label strindicate it with a [★]. Using questionnaire to the Com | or of establishmen dicate whether est eets and avenues se the letters to in | ts selling/serving ablishments have and identify your dicate B ar, R esta | g beer, wine (B/ e On-Premises (location near t purant, etc. The | (W) or liquor (OP) licenses he middle of a diagram mus | (OP) for 2 blocks in by circling the letter on the diagram and |
| Bar (B) Gr OPB/W B/ | ocery (G) W | Restaurant (R) OPB/W_ | Cabare OP | t (C) _B/W | Sidewalk Café (S) OPB/W |
| Example: | | | | | |
| | | | | | |
| BGBS(R)GBI | R B B I | RSGBBBR | В | | |
| BRGSBBBI | R B B | RSGRBE | ВВ | | |
| | | | | | |

Revised: June 2010

| Hov | many licensed establishments are within 1 block? many licensed establishments are within 500 feet? many of these are On-Premises (OP) liquor licenses? |
|---------------------|--|
| thes are (Att | e are block associations, merchant associations, or tenant associations in the immediate vicinity of your on, you must contact them. Please attach proof (copies of letters and poster) that you have advised groups of your application. Petitions should clearly state the name, address, license for which you oplying, and the hours and method of operation of your establishment at the top of each page. In additional sheets of paper as necessary). You may contact the Community Board office for any contact station that is on file. |
| INF | RMATION REGARDING NEARBY LOCATIONS: |
| | Premises is not within a 500 foot radius of three or more establishments selling liquor for on-premises |
| Ø | consumption. Premises is within a 500 foot radius of three or more establishments selling liquor for on-premises consumption. |
| Are | our premises within 200 feet of any school, church or place of worship? |
| | e is a school, church or place of worship within 200 feet of your premises or on the same block, submit a plot diagram or area map showing its location in proximity to your applicant premises (8 1/2" x 11"). |
| Indic | te the distance in feet from the proposed premises. Attach additional sheets if necessary. |
| Nam | of church/school: |
| Addı | Distance: |
| Nam | of church/school: |
| Addı | ss:Distance: |
| Nam | of church/school: |
| | ss: |

vou will act immediately to resolve any problems.

| | JMB AVENUE | | | | | | | | | | | | | | | | | # W | A.P. | |) -t | | | | | | |
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