



# 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 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 the premise;
- Schematics, floor plans or architectural drawings of the inside of the premise;
- A proposed food and or drink menu;
- Petition in support of proposed business or change in business with signatures from residential tenants at location and in buildings adjacent to, across the street from and behind your proposed location. Petition must give proposed hours and method of operation. For example: restaurant, sports bar, combination restaurant/bar.
- Letter of notice of proposed business to block, tenant or neighborhood association if one exists. E-mail the CB3 office at [info@cb3manhattan.org](mailto:info@cb3manhattan.org) for help to find block associations.
- Photographs of proof of conspicuous posting of meeting with newspaper showing date.
- If applicant has been or is licensed anywhere in City, letter from applicable community board indicating history of complaints and other comments

Check which you are applying for:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> new liquor license            | <input type="checkbox"/> upgrade of an existing liquor license |
| <input type="checkbox"/> alteration of an existing liquor license | <input type="checkbox"/> sale of assets                        |
| <input type="checkbox"/> corporate change                         |  |

**If applying for transfer, you must bring letter from current owner confirming that you are buying business or have the seller come with you to the meeting.**

Type of license: Full On-Premises Is location currently licensed?  Yes  No

If alteration, describe nature of alteration: Not Applicable

Previous or current use of the location: Unknown

Corporation and trade name of current license: Not Applicable

### APPLICANT:

Name of applicant and all principals: Corporation to be formed

Principals: Jessica L. Wertz and Theodore Mann

Trade name (DBA): To be Determined

Premise address and cross streets: 176 Delancey Street between Attorney St. and Clinton St.

### PREMISE:

Type of building and number of floors: Mixed residential and commercial building with three floors, six total units, four of which are residential.

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: Not Applicable

Does premise have a valid Certificate of Occupancy and all appropriate permits, including certificate of occupancy of back or side yard intended for commercial use?  Yes  No

Indoor Certificate of Occupancy 30-40 Outdoor Certificate of Occupancy N/A  
(projected)

Do you plan to apply for Public Assembly permit?  Yes  No

Zoning designation (using our website): Residential

Is this premise wheel chair accessible?  Yes  No

**PROPOSED METHOD OF OPERATION:**

What type of establishment will this be (i.e.: restaurant, bar, performance space, club, hotel)?

Premise will operate primarily as a restaurant cafe. During daytime hours it will serve as a bistro with coffee and apertifs. At night it will be a full service restaurant.

Will any other business besides food or alcohol service be conducted at premise?  Yes  No

If yes, please describe what type: Not Applicable

What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space) 8:00 AM to 2:00 AM, seven days per week

Number of tables? 11 Number of seats at tables? 30

How many stand-up bars/ bar seats are located on the premise? 1

(A **stand up bar** is any bar or counter (whether with seating or not) over which a patron can order, pay for and receive an alcoholic beverage)

The bar is rectangular with curved edges.  
Describe all bars (length, shape and location): The bar is 20 feet long and is located in the middle left side.

Any food counters?  Yes  No If Yes, describe: \_\_\_\_\_

Does premise have a full kitchen  Yes  No?

Does it have a food preparation area?  Yes  No (If any, show on diagram)

Is food available for sale?  Yes  No If yes, describe type of food and submit a menu

The restaurant will serve traditional American fare with a modern twist.

What are the hours kitchen will be open? The kitchen will be open during all operating hours.

Will a manager or principal always be on site?  Yes  No If yes, which? Principal

How many employees will there be? 10-12

Do you have or plan to install  French doors  accordion doors or  windows? No.

Will you agree to close any doors and windows at 10:00 P.M. every night?  Yes  No

Will there be TVs/monitors?  Yes  No (If Yes, how many?) \_\_\_\_\_

Will premise have music?  Yes  No

If Yes, what type of music?  Live musician  DJ  Juke box  Tapes/CDs/iPod

If other type, please describe Not Applicable

What will be the music volume?  Background (quiet)  Entertainment level

Please describe your sound system: There are speakers in the ceiling. Music will played at a low volume.

Will you host promoted events, scheduled performances or any event at which a cover fee is charged? If Yes, what type of events or performances are proposed? No.

How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. As this premise will operate primarily as a restaurant, loitering on the sidewalk in front is not anticipated.

Will there be security personnel?  Yes  No (If Yes, how many and when) \_\_\_\_\_

How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans. Music will be played at a very low volume.

Do you  have or  plan to install sound-proofing?  
 Soundproofing consists of sound board, double sheetrock and drop ceilings as a courtesy to our neighbors.

**APPLICANT HISTORY:**

Has this corporation or any principal been licensed previously?  Yes  No

If yes, please indicate name of establishment: PLEASE SEE THE ATTACHED SHEET

Address: \_\_\_\_\_ Community Board # \_\_\_\_\_

Dates of operation: \_\_\_\_\_

**If you answered "Yes" to the above question, please provide a letter from the community board indicating history of complaints or other comments.**

Has any principal had work experience similar to the proposed business?  Yes  No If Yes, please attach explanation of experience or resume.

Does any principal have other businesses in this area?  Yes  No If Yes, please give trade name and describe type of business. Not Applicable

Has any principal had SLA reports or action within the past 3 years?  Yes  No If Yes, attach list of violations and dates of violations and outcomes, if any.

Attach a separate diagram that indicates the location (**name and address**) and total number of establishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. Please indicate whether establishments have On-Premise (OP) licenses. Please label streets and avenues and identify your location. Use letters to indicate **Bar, Restaurant**, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.

**LOCATION:**

How many licensed establishments are within 1 block? Three

How many licensed establishments are within 500 feet? 17 on and off premise licenses.

Is premise within a 500 foot radius of 3 or more establishments with OP licenses?  Yes  No

How many On-Premise (OP) liquor licenses are within 500 feet? Five (including RW)

Is premise within 200 feet of any school or place of worship?  Yes  No

If there is a school or place of worship within 200 feet of your premise on the same block, submit a block plot diagram or area map showing its location in proximity to your premise and indicate the distance and name and address of the school or house of worship.

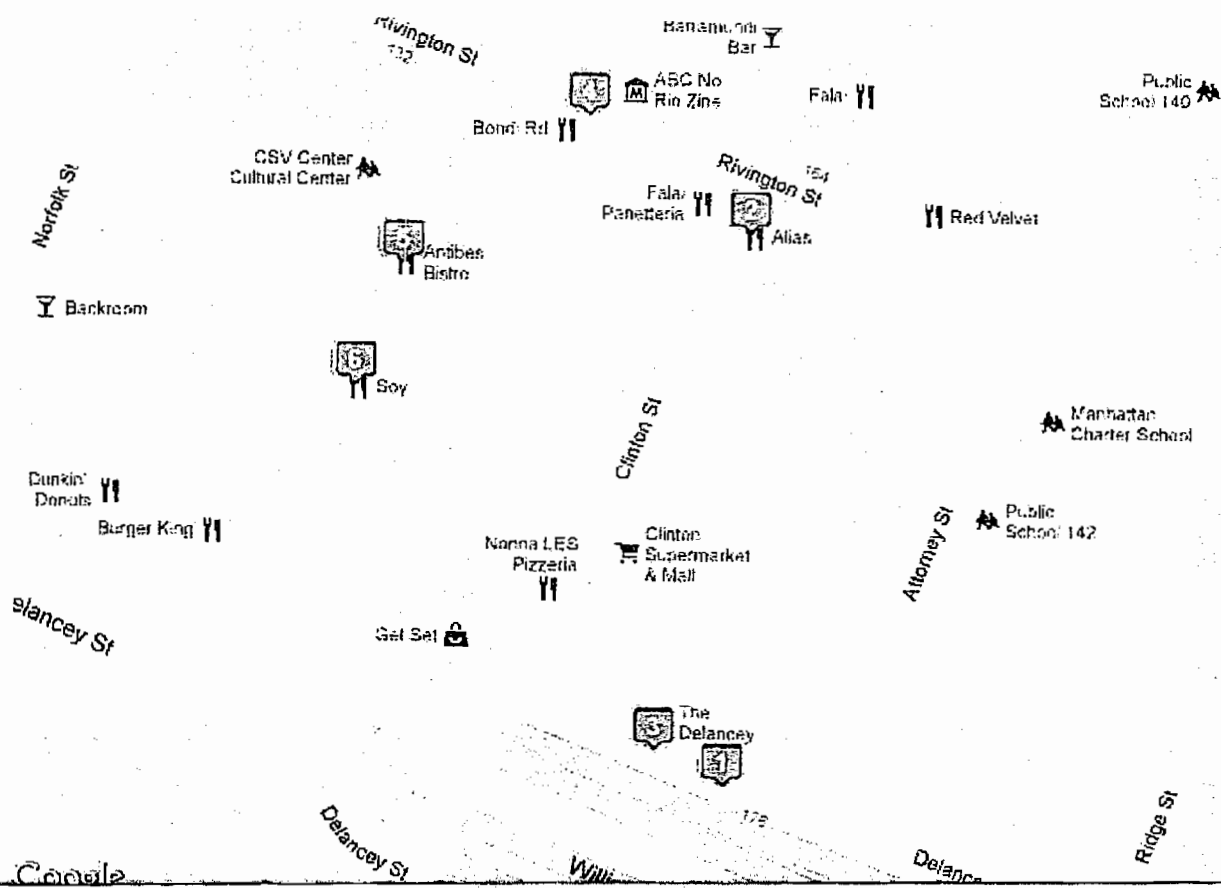
**COMMUNITY OUTREACH:**

If there are block associations, neighborhood or tenant associations in the immediate vicinity of your location, you must contact them. **Please attach proof (copies of letters and poster) that you have advised these groups of your application with sufficient time for them to respond to your notice.** You may contact the Community Board at [info@cb3manhattan.org](mailto:info@cb3manhattan.org) for any contact information that is on file.

**Petitions should clearly state the name, address, license for which you are applying, and the hours and method of operation of your establishment at the top of each page.** (Attach additional sheets of paper as necessary).

**Jessica L. Wertz  
Corporation to be Formed  
176 Delancey Street  
New York, NY 10002**

*OP Licenses Within 500'*



Serial #	Type	Premise	Address	Distance
1) Pending	OP	Jessica L. Wertz	176 Delancey Street	0
2) 1143207	OP	76 Clinton Restaurant LTD	76 Clinton Street	438.24'
3) 1109457	OP	ADR Restaurant Inc.	168 Delancey Street	58.08'
4) 1128289	OP	Rivington 151 Corp.	151 Rivington Street	491.04'
5) 1259049	OP	EHD Restaurant Corp.	112 Suffolk Street	491.04'
6) 1172565	RW	Soy Inc.	102 Suffolk Street	432.96'