



THE CITY OF NEW YORK  
MANHATTAN COMMUNITY BOARD 3

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

Gigi Li, 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 proposed location. Petition must give proposed hours and method of operation. For example: restaurant, sports bar, combination restaurant/bar. (petition provided)
- Notice of proposed business to block or tenant association if one exists. E-mail the CB3 office at **info@cb3manhattan.org** to find block associations. This must be done promptly so that there is sufficient time to meet with residents if necessary.
- 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.

WIA  
N/A

Check which you are applying for:

- new liquor license
- alteration of an existing liquor license
- corporate change

Check if either of these apply:

- sale of assets
- upgrade (change of class) of an existing liquor license

Today's Date: 08/06/13

If applying for sale of assets, 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: N/A Is location currently licensed?  Yes  No

If alteration, describe nature of alteration: \_\_\_\_\_

Previous or current use of the location: \_\_\_\_\_

Corporation and trade name of current license: \_\_\_\_\_

**APPLICANT:**

Premise address: 81-83 ST. MARK'S PLACE, STORE 3

Cross streets: ST. MARK'S PL and 1st Avenue

Name of applicant and all principals: MSAM Inc,

Alexey Mokoopulo

Trade name (DBA): pending

**PREMISE:**

Type of building and number of floors: Brick, 5 stories

Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages?  
(includes roof & yard)  Yes  No If Yes, describe and show on diagram: \_\_\_\_\_

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

Indoor Certificate of Occupancy 16 Outdoor Certificate of Occupancy 0  
(fill in maximum NUMBER of people permitted)

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

Zoning designation (check zoning using map: <http://gis.nyc.gov/doitt/nycitymap/> - please give specific zoning designation, such as R8 or C2):

C1-5, R7A

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)?

cafe - restaurant

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

If yes, please describe what type: \_\_\_\_\_

What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space)

Sun 9am - 12am; Mon - Thu 8am - 12am

Fri - Sat 8am - 3am

Number of tables? 7 Number of seats at tables? 16

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

(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)

Describe all bars (length, shape and location): N/A

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  
crepes, coffee and pastoy

What are the hours kitchen will be open? the same as premises

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

How many employees will there be? 4 per shift

Do you have or plan to install  French doors  accordion doors or  windows?

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 CD-PLAYER

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

Please describe your sound system: CD-PLAYER

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.

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.

Do you  have or  plan to install sound-proofing? NO

**APPLICANT HISTORY:**

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

If yes, please indicate name of establishment: \_\_\_\_\_

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. I have family-owned restaurant in Russia. Where I was a manager.

Does any principal have other businesses in this area?  Yes  No If Yes, please give trade name and describe type of business \_\_\_\_\_

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? 7

How many licensed establishments are within 500 feet? 23

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? 12

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. N/A

**COMMUNITY OUTREACH:**

N/A.

If there are block associations or tenant associations in the immediate vicinity of your location, you must contact them. Contact the CB 3 office at [info@cb3manhattan.org](mailto:info@cb3manhattan.org) to find block and tenant associations. **Please attach proof (copies of letters or email and poster) that you have advised these groups of your application with sufficient time for them to respond to your notice.**

**Please use provided petitions, which 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).

**Petition to Support Proposed Liquor License**

Date: 08/05/13

The following undersigned residents of the area support the issuance of the following liquor license (indicate the type of license such as full-liquor or beer-wine) BEER - WINE

to the following applicant/establishment (company and/or trade name) MISAM INC

*(Alexey Mokropalo)*







Address of premises: 81-83 ST. MARK'S PL., NEW YORK, NY

This business will be a: (circle)  Bar  Restaurant  Other: restaurant - cafe

The hours of operation will be:  
 Sun: 9 a.m - 12 a.m  
 Mon - THU: 8 a.m - 12 a.m  
 FRI - SAT: 8 a.m - 3 a.m

PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.

Other information regarding the license:

Name	Signature	Address
Alexey Mokropalo		92 St. Mark's Pl Apt 2
Angela Rogers		94 St Marko #2
MAMU RATA		92 ST MARK PL. APT 2.
DAVID YOO		109 ST. MARKS PLC. APT 12
Ryan Chance		92 ST MARKS PL Apt 2
Si ffany ribbet		324 E 6th St Apt 13

**Buildings**  
**Work Permit Department of Buildings**

Permit Number: 12432424 11 00-FW

Address: MANHATTAN 122 1 AVENUE

Description of Work:  
ALTERATION TYPE 2 - CONSTRUCTION EQUIPMENT FROM REMOVAL &  
REPLACEMENT OF COOKING EQUIPMENT UNDER EXISTING HOOD, INSTALL &  
PARTITION AND SPLIT-AC STOVEFRONT WITH EXISTING OPENING, NO COI

Issue: 07/11/13  
Expiry: 07/11/14  
Contract No: 12432424

Review is requested under Building Code: 2010

To see a Zoning Diagram (ZD) or to challenge a zoning approval filed as part of a New Building application or Alteration application filed after 7/13/2009, please use "My Community" on the Buildings Department web site at [www.nyc.gov/buildings](http://www.nyc.gov/buildings)

Emergency Telephone Day or Night: 311

Borough Commissioner: *AA*

Commissioner of Buildings: *Robert M. Callahan*

Tampering with or knowingly making a false entry in or falsely stating the permit is a crime that is punishable by a fine of \$500 or imprisonment for 30 days.

**De Blasio Asks City to Address Its Inequalities**

**On Liberal Gains After Struggles**

**"All the News That's Fit to Print"**

VOL. CLXII No. 56, 219

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**The New York Times**

NEW YORK, MONDAY, AUGUST 5, 2013

**Late Edition**  
Today, mostly sunny; low humidity, high 78. Tonight, partly cloudy, with occasionally cool, low 62. Tomorrow, clouds and rain, low humidity, high 80. Weather map is on Page C4.

**HEALTH CARE LAW RAISES PRESSURE ON PUBLIC UNIONS**

**TAX ON EXPENSIVE PLANS**

\$7.50

**ATTENTION RESIDENTS & NEIGHBORS**

718-360-3328  
*MSAM INC. Alexey Mokropulo*  
Company/DBA Name and Contact Number for Questions

Plans to open a  
*Restaurant/Cafe* (Please choose)  
Bar/Restaurant/Club/Grocery/Liquor Store/Wholesaler,  
Please indicate if there will be a Sidewalk Cafe or Backyard Garden

at the following location

*87-83 St. Marks Place, Ste #3*  
Street Number and Street Name

This establishment is seeking a license to serve

*Beer & Wine*  
Beer & Wine or Beer/Wine & Liquor

There will be an opportunity for public comment on

Monday, August 19, 2013 at 6:30pm  
Community Board 3 Office  
59 East 4th Street (btwn 2nd Ave & Bowery)

*Alexey Mokropulo* 718-360-3328  
Applicant Contact Information

AT COMMUNITY BOARD 3  
SLA & DCA Licensing Committee Meeting  
[info@cb3manhattan.org](mailto:info@cb3manhattan.org) - [www.cb3manhattan.org](http://www.cb3manhattan.org)