

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

Gig	i Li,	, Board Chair	Community Board 3 Liqu	ior License Stipulati	Susan Stetzer, District Manager
, X	ed a	Lecherds	, as a qualified represer	ntative of <u>Spreadinous</u> e following stipulations:	se Coffee & Art LLC
		I will operate a full-s	ervice cafe and ar	t gallery, with a kitche	en open and serving food to within
		hour(3) of closing	every night 🖾 during all hours of open	ration.	
2.	My	hours of operation wi	/ /		
	(I m		no later than" specified opening hour,	and all patrons are to be	cleared from business at specified closing
3.	IXI	i will not use outdoo	r space for commercial use.		
4.			ewalk café no later than		
5.			man/security personnel on the followin	g days:	
6.		I will install soundpr			
7.	at I	I will close any front 0:00 P.M. every night	or rear facade doors and windows t or during any amplified but not limited to DJs, live music	☐ I will not have F be closed by	Prench doors or windows and doors will
8.	l w	ill not have ⊠ DJs, ⊠ formances, □ more th	I live music, 🖾 promoted events, 🖾 ann DJs/ promoted events per	ny event at which a cover, more than	r fee is charged, [X] scheduled private parties per
9.	\boxtimes	I will play ambient i	ecorded background music only.		
10.	X	I will not apply for a	in alteration to the method of operation	agreed to by this stipulat	ion without first coming before CB 3.
11.		I will not seek a cha	nge in class to a full on-premise liquor	license without first obta	ining approval from CB 3.
12.	[2]	I will not participate	in pub crawls or have party bases com	ic to my establishment.	
13.		I will not have a hap	py hour. Happy hour will end by		
				erson outside to monitor	sidewalk crowds and ensure no loitering.
15.			post this supulation form beside my li		
	and nei	Residents may conta	net the manager/owner at the following ve-stated method of operation if necess	phone number. Any con	inplaints will be addressed immediately
17.	ū	I will:			
17.					
1	ned	y certify that the interest of this 30 th	formation provided above is truthful	2015	Dated NJAMIN KORRAY
Со	mm	unity Board 3 requests	s that the SLA add this stipulation to th	e license of the above-inc	Diary Public LIIC-STATE OF NEW YORKev. 10/2014 Entroped applicant. . 02KO6278678

Qualified in Kings County
My Commission Expires March 25, 2017



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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. You can find
community groups and contact information on the CB 3 website:
http://www.nyc.goy/html/manch3/html/communitygroups/community_group_listings.shtml
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.
Cl. 3. 15.1 studete e Com
Check which you are applying for: If new liquor license
m lead industricense — — agreration of all existing industricense — — corporate entange
Check if either of these apply:
☐ sale of assets ☐ upgrade (change of class) of an existing liquor license
1/28/15
Today's Date: \\ \D \\ \J
va v t a v d v d v d v d v d v d v d v d v d v
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.
4//
Is location currently licensed? Yes No Type of license: // //
if alteration, describe nature of alteration:
Previous or current use of the location:
Corporation and trade name of current license:
APPLICANT: 1/4 CAA 1/4 OA 1
Premise address: 16 Sattolk Street
Cross streets: Oclarcan & Rivination
Name of applicant and all principals: ? Stead How Seldie & A+we (applicant)
Gregory Minasian COWNER), PETER RICHARDSON COLNER)
$I = I = I \cap O \cap C \cap O \cap O$
Trade name (DBA): SAICEADY JUSE COFFEE AM AIX
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PREMISE:					
Type of building and number of floors: Commercial Mixed use Residential 4 Floorer					
(4 HOORS)					
will any outside area or sidewark case be disect for the sale or consumption of accommic 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 for any					
back or side yard use? Yes I No What is maximum NUMBER of people permitted?					
Do you plan to apply for Public Assembly permit? 🗹 Yes 🗓 No					
What is the zoning designation (check zoning using map: http://gis.nyc.gov/doitt/nycitymap/					
please give specific zoning designation, such as R8 or C2): $\mathcal{C}\mathcal{Q}$					
PROPOSED METHOD OF OPERATION:					
Will any other business besides food or alcohol service be conducted at premise? The Mo					
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) M - Sun 76M - 12 am (no outdoors)					
Number of tables? Number of seats at tables? &					
How many stand-up bars/ bar seats are located on the premise? $\frac{1/8sects}{}$					
(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): 20-A Straight Bar.					
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					
What are the hours kitchen will be open? $7am - Wam$					
Will a manager or principal always be on site? If Yes I No If yes, which? John Cho Maragen)					
How many employees will there be?					
Do you have or plan to install \square French doors \square accordion doors or \square windows? $N \setminus A$					
Will there be TVs/monitors? Tyes W No (If Yes, how many?)					
Will premise have music? ■ Yes □ No					
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If Yes, what type of music? 🗖 Live musician 🗖 DJ 📮 Juke box 🖼 Tapes/CDs/iPod
If other type, please describe
What will be the music volume? ☑ Background (quiet) ☐ Entertainment level
Please describe your sound system: Sans Amblent System
Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? If Yes, what type of events or performances are proposed and how often?
once a month
How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. (Please do not answer "we do not anticipate congestion.")
Will there be security personnel? Tyes \(\text{No (If Yes, how many and when)} \) \(\text{Dor Security} \) \(\text{Intains GueSt traffic Security} \(\text{2 total} \)
interior Guest traffic secupity (2 total)
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?
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.
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.
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	CATION: w many licensed establishments are within 1 block?
no	w many licensed establishments are within 1 block?
но	w many On-Premise (OP) liquor licenses are within 500 feet?
ls p	remise within 200 feet of any school or place of worship? 🖬 Yes 🗖 No
Ple imi out lice	MMUNITY OUTREACH: ase see the Community Board website to find block associations or tenant associations in the nediate vicinity of your location for community outreach. Applicants are encouraged to reach to community groups. Also use provided petitions, which clearly state the name, address, use for which you are applying, and the hours and method of operation of your establishment at top of each page. (Attach additional sheets of paper as necessary).
me	are including the following questions to be able to prepare stipulations and have the eting be faster and more efficient. Please answer per your business plan; do not plan to jotiate at the meeting.
	I agree to close any doors and windows at 10:00 P.M. every night?
2.	☑ I will not have ☑ DJs, ☑ live music, ☑ promoted events, ☐ any event at which a cover fee is charged, ☐ scheduled performances, ☑ more than DJs/ promoted events per △ ☐ more than private parties per
3	🗹 I will play ambient recorded background music only.
4,	I will not apply for an alteration to the method of operation agreed to by this stipulation without first coming before CB 3.
5.	\square I will not seek a change in class to a full on-premise liquor license. Or \square my business plan is to seek an upgrade at a later date,
6.	I will not participate in pub crawls or have party buses come to my establishment.
7.	☐ I will not have a happy hour. Or ☐ Happy hour will end by 💯
8,	☑ I will not have wait lines outside. ☐ There will be a staff person outside to monitor sidewalk crowds and ensure no loitering.
9,	☑ Residents may contact the manager/owner at the following phone number. Any 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.

ATTENTION RESIDENTS & NEIGHBORS

Opred House Cottee FID ARILL					
Company/DBA Name and Contact Number for Questions					
/ Plans to open a					
BAR/RESTAURANT					
(Piease choose) Bar/Restaurant/Club and indicate if there will be a Sidewalk Café or Backyard Garden					
at the following location					
116 SUFFOLK ST.					
Building Numbor and Street Name (Address)					
This establishment is seeking a license to serve					
BEER & WINE					
Beer & Wine or Beer/Wine & Liquor					
cyu47-th@gmail.com					
Applicant Contact deformation					

At COMMUNITY BOARD 3 SLA & DCA Licensing Committee Meeting info@cb3manhattan.org - www.cb3manhattan.org