



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 Stipulations

I, Michael Pui Leung Luk, as a qualified representative of Little Sheep Manhattan LLC, located at 105 Bowery, New York, NY agree to the following stipulations:

- I will operate a full-service restaurant, specifically a (type of restaurant) _____, with a kitchen open and serving food to within _____ hour(s) of closing every night during all hours of operation.
- My hours of operation will be :00 a.m./p.m. to 12:00 a.m. all days

(I understand opening is "no later than" specified opening hour, and all patrons are to be cleared from business at specified closing hour.)

- I will not use outdoor space for commercial use.
- I will operate my sidewalk café no later than _____
- I will employ a doorman/security personnel on the following days: _____
- I will install soundproofing, _____
- I will close any front or rear facade doors and windows at 10:00 P.M. every night or during any amplified performances, including but not limited to DJs, live music and live nonmusical performances. I will not have French doors or windows and doors will be closed by _____
- 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 _____
- I will play ambient recorded background music only.
- I will not apply for an alteration to the method of operation agreed to by this stipulation without first coming before CB 3.
- I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3.
- I will not participate in pub crawls or have party buses come to my establishment.
- I will not have a happy hour. I will have happy hour and it will end by _____
- I will not have wait lines outside. There will be a staff person outside to monitor sidewalk crowds and ensure no loitering.
- I will conspicuously post this stipulation form beside my liquor license inside of my business.
- 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.

Name: MICHAEL PUI LEUNG LUK Phone Number: (510) 857-6077

17. I will: _____

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed _____

Dated 8/12/2015

Sworn to this _____ day of _____ 2015 _____
Notary Public

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Alameda)

On August 12, 2015 before me, Su Fen Lin, Notary Public
Date Here Insert Name and Title of the Officer

personally appeared Michael Pui Leung Luk
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Su Fen Lin
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Community Board 3 Liquor License stipulations Document Date: August 12, 2015
Number of Pages: one Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer -- Title(s): _____
 Partner -- Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

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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.gov/html/mancb3/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.

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: 08/14/2015

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.

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:

Premise address: 105 Bowery, New York, NY 10002

Cross streets: Grand Street & Hester Street

Name of applicant and all principals: Michael Pui Leung Luk

Trade name (DBA): Little Sheep Manhattan

PREMISE:

Type of building and number of floors: Mixed Residential and Commercial Buildings 5 Floors

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 for any back or side yard use? Yes No What is maximum NUMBER of people permitted? 74

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): C6-1G

PROPOSED METHOD OF OPERATION:

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) 11:00 AM-12:00 AM 7 Days a week

Number of tables? 16 Total number of seats? 52

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): _____

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

Chinese

What are the hours kitchen will be open? 11:00 AM-12:00 AM 7 Days a week

Will a manager or principal always be on site? Yes No If yes, which? Michael Pui Leung Luk

How many employees will there be? 3-5

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

Will there be TVs/monitors? Yes No (If Yes, how many?) 1

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 _____

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

Please describe your sound 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? N/A

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? 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 sound proofing installed? Yes No

If not, do you plan to install sound-proofing? Yes 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.

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? 2

How many On-Premise (OP) liquor licenses are within 500 feet? 1

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

COMMUNITY OUTREACH:

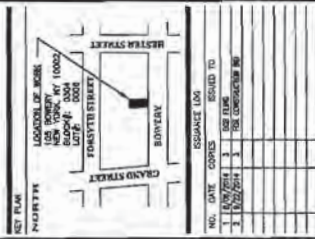
Please see the Community Board website to find block associations or tenant associations in the immediate vicinity of your location for community outreach. Applicants are encouraged to reach out to community groups. Also use provided petitions, which clearly state the name, address, license for which 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).

We are including the following questions to be able to prepare stipulations and have the meeting be faster and more efficient. Please answer per your business plan; do not plan to negotiate at the meeting.

1. 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. I will not seek a change in class to a full on-premise liquor license. Or 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.



LITTLE SHEEP MONGOLIAN HOT POT



GRAPHIC LEGEND

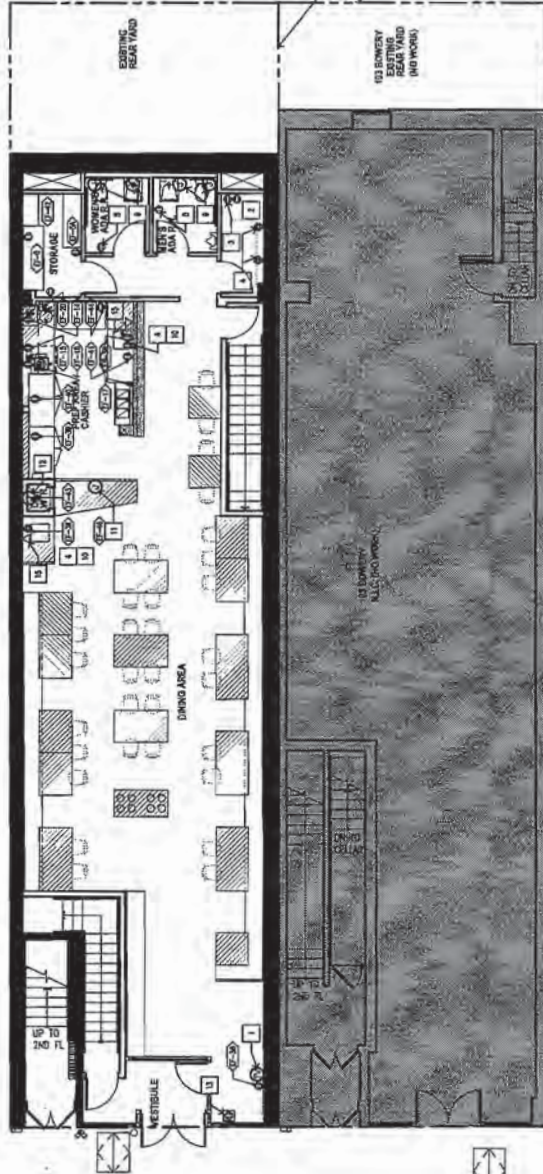
- WALL MOUNTED DUPLEX RECEPTACLE OUTLET
- DUPLEX RECEPTACLE OUTLET ON SEPARATE CIRCUIT
- WALL MOUNTED DUPLEX RECEPTACLE OUTLET WITH GROUND FAULT INTERRUPT
- ▽ WALL MOUNTED VOICE JACK, PROVIDE BACK BOX & CONDUIT STRIP-UP TO CEILING ABOVE.
- ▽ WALL MOUNTED VOICE/DATA COMBO OR RJ45, PROVIDE BACK BOX & CONDUIT STRIP-UP TO CEILING ABOVE.
- ▽ WALL MOUNTED CAT 5/40 DATA, PROVIDE BACK BOX & CONDUIT STRIP-UP TO CEILING ABOVE.
- JUNCTION BOX WITH POWER CABLE
- TV MONITOR
- ▽ WALL MOUNTED VOICE JACK, PROVIDE INCH BOX & CONDUIT STRIP-UP TO CEILING ABOVE.
- ▽ WALL MOUNTED VOICE/DATA COMBO OR RJ45, PROVIDE INCH BOX & CONDUIT STRIP-UP TO CEILING ABOVE.
- ▽ WALL MOUNTED CAT 5/40 DATA, PROVIDE INCH BOX & CONDUIT STRIP-UP TO CEILING ABOVE.

GENERAL NOTES

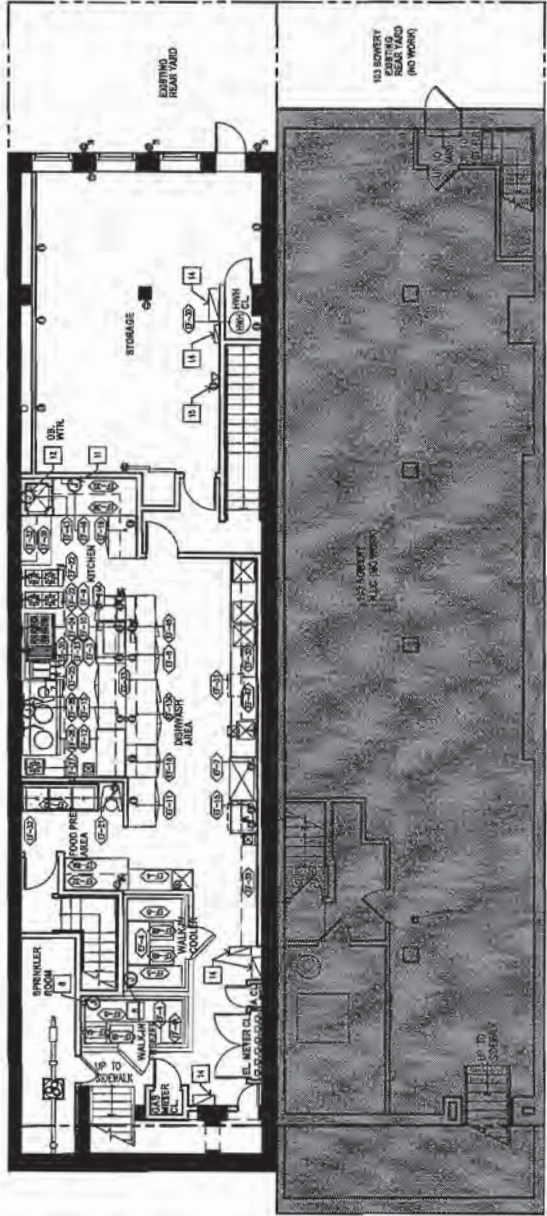
1. REFER TO EQUIPMENT & FUTURE SCHEDULE FOR MORE INFORMATION.
2. REFER TO LIGHTING PLAN FOR POWER REQUIREMENTS ON LIGHTING.
3. REFER TO MECHANICAL PLAN FOR POWER REQUIREMENTS ON MECHANICAL EQUIPMENTS.
4. REFER TO PLUMBING DRAWING FOR POWER REQUIREMENTS ON PLUMBING EQUIPMENTS.
5. REFER TO ELECTRICAL DRAWINGS FOR ALL OTHER POWER REQUIREMENTS.
6. GO TO PROVIDE ALL COMMENTS AS GAS APPLIANCES AND OTHER MAJOR APPLIANCES, NOT DIMENSIONED, AS REQUIRED BY MANUFACTURER AND LATEST NYC CODES & REGULATIONS.

KEY NOTES

1. BLUE PANEL TV, WALL-MOUNTED, PROVIDE BIDDING, NETWORK CABLE MAKE RUN TO SERVER ROOM/OFFICE.
2. CABLE TV, NETWORK SERVICE & PHONE SERVICE ENTRY POINT, GO TO COORDINATE WITH IT VENDOR ON LOCATION OF EQUIPMENT.
3. POWER OUTLET FOR COMPUTED SERVER & TELECOM EQUIPMENT ON DESIGNATED DESKTOP.
4. POWER OUTLET FOR ICE/REFRIGERATOR, BATES EQUIPMENT SPECIFICATION & ELECTRICAL DRAWINGS FOR MORE INFORMATION.
5. PROVIDE RECESSED RECEPTACLE FOR HANG DRYER, REFER TO MANUFACTURER AND A-310 FOR MOUNTING HEIGHTS.
6. REFER TO SPECIFICATION & ENGINEER'S DWG FOR POWER REQUIREMENTS FOR COOKING EQUIPMENT IN THIS AREA.
7. REFER TO ENGINEER'S DWG FOR POWER REQUIREMENTS FOR EXHAUST HOOD.
8. REFER TO WALL-IN COOLING/HEATING SPECIFICATION & ENGINEER'S DWG FOR POWER REQUIREMENTS, LOCATION OF OUTLET TO BE VERIFIED.
9. PROVIDE POWER FOR AUTOMATIC FLUSHING SYSTEM & FAUCET.
10. COMPUTER NETWORK CABLE MAKE RUN TO SERVER ROOM/OFFICE.
11. PROVIDE JBOX FOR NETWORK SYSTEM BETWEEN BAR AREA AND KITCHEN.
12. PROVIDE JBOX FOR 3-5/8" DIAMETER BETWEEN BAR AREA AND KITCHEN. REFER TO MANUFACTURER FOR POWER REQUIREMENTS.
13. PROVIDE DESKTOP MOUNT DUPLEX FOR ELECTRIC SHANCE BIA. G.C. TO COORDINATE WITH IT VENDOR ON LOCATION OF EQUIPMENT.
14. REFER TO ELECTRICAL PANEL, REFER TO ENGINEERING ELECTRICAL DRAWINGS FOR MORE INFORMATION.
15. USE PROVISIONS FOR WATER PDS STANDOFF OTHER TO COMPANY FINAL LOCATION AND MOUNTING HEIGHT.



1 POWER & EQUIPMENT PLAN - GROUND FLOOR
SCALE: 1/8" = 1'-0"



2 POWER & EQUIPMENT PLAN - CELLAR
SCALE: 1/8" = 1'-0"

PROJECT: G M H
GM Huang Architecture, PLLC
372 Fifth Avenue, 10th Floor
New York, NY 10001

PROJECT: LITTLE SHEEP MONGOLIAN HOT POT
105 W. 4th St.
New York, NY 10002
Ground Floor & Cellar

DRAWING TITLE: POWER & EQUIPMENT PLAN AND NOTES

SCALE & QUANTITY: 1/8" = 1'-0"

DATE: 8/27/14

DESIGNED BY: GEORGE X.

CHECKED BY: GEORGE X.

DWG. NO.: A-130.00

CADD FILE NO.:

PAGE NO.: 9 of 20

4.888 HOI POI MENU

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LITTLE SHEEP

HONGKONG HUI POI

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 Phone: (212) 555-1234
 Website: www.littlesheep.com

