

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

Jam	ie	Rogers	s, Boa	ard Chai	r					Susan Stetzer, District Manag
				Commu	inity Board	d 3 Liquor	License Stip	ulations for Ac	Iministrativ	e Approval
1. /	ANA	MARI	dE	QUESA	A	, as a qu	alified repres	entative of	Wild Pro	ject Productions Inc,
locat	ed	at		19	5 E 3rd Sti	reet		, New York	, NY agree t	to the following stipulations:
								of restaurant rs of operation		
2.	My	hours o	fopera	ation will l	be	1	2:00 .am ,∕p.n	n. to 11:00 p.m.	all days	
		nderstar ing hou		ning is "no	later thar	n" specifie	ed opening ho	ur, and all pat	rons are to I	be cleared from business at specified
3.	X	1 will no	ot use	outdoor s	bace for co	mmercial	use.			
4.		I will of	perate	my sidew	alk cate no	later that	n			
6.										
1	at 1 play	I will cl 0:00 P.N ving, inc	ose an A. ever luding	y front or ry night or	rear façad when am	e doors ar olified sou	nd windows	U I w window or wher	ill have a clo is except my n amplified s	osed fixed façade with no open doors or y entrance door will close by 10:00 P.M. sound is playing, including but not limite nd live nonmusical performances.
										r fee is charged, 🛛 scheduled private parties per
9. I	X	I will pl	ay am	pient reco	rded back	ground mi	usic only.			
10. 1	X	I will no	ot appl	y for an al	teration to	the meth	nod of operati	ion agreed to I	by this stipu	lation without first coming before CB 3.
11.		I will no	ot seek	a change	in class to	a full on-	premise liquo	r license witho	out first obta	aining approval from CB 3.
12. 1	X	I will no	ot part	icipate in	pub crawls	or have p	party buses co	me to my esta	blishment.	
L3.	X	I will no	ot have	unlimite	d drink spe	cials with	food.			
L4. I		I will no	ot have	a happy	hour. 🗆 I v	vill have h	appy hour an	d it will end by	/	
15. 1	X	I will no	ot have	wait line	s outside. I	I will ha	ave a staff per	son responsib	le for ensuri	ng no loitering, noise or crowds outside
16. I	×	I will co	nspicu	iously pos	t this stipu	lation for	m beside my	iquor license i	nside of my	business.
										will be addressed immediately. I will blishment's impact on my neighbors.
Vam	e: _	Au	AMA	zi de	QUECHO	A		Phone	Number: _	212.228.1195
18. 1		will:	_							
	_	-								
har	. h.	anytif.	****	o inform	tion nroui	dad abou	o ic truthful a	and accurate b	acad upon	my personal belief.
nen	eby	certify	ulat u	ie morna	nion provi	ueu abov			ased upon	niy personal benet.
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Signe	ed	nAt	1 ch	ev	.1	-		-//	Da	ted
		o this	15	day o	Nov	empl	2016_	11/1	la	. C
		-					6	June	No	tary Public
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NOTARY PUBLIC-STATE OF NEW YORK No. 02DR6225606 Qualified in Richmond County My Commission Expires 07-26-2018



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Jamie Rogers, Board Chair

Susan Stetzer, District Manager

Page 1 of 2

Community Board 3 Liquor License Administrative Approval Application Questionnaire

Today's Date:	
APPLICANT:	wind Project Productions inc
1. Name of applicant and all	principals: ana Mari de Quesada
2. Premise Address:	25 E 30 ST NY, MY 10009
3. Cross streets:A	we ha where B J. J
	wild protect
5. Check which you are ap	
new liquor license	alteration of an existing sale of assets liquor license
6. If alteration, describe na	ature of alteration:
7. Is location currently lice	ensed? 🔽 Yes 🗌 No
9. Previous or current use	e of the location: <u>Performing airts</u> Theater (will sta e name of current license: The wild Project LLC
10. Corporation and trade	ename of current license: The wild Project uc
PREMISE:	
11 Type of building and n	number of floors: <u>Commercial - 2</u>
11. Type of building and in	valid Certificate of Occupancy and all appropriate permits, including for any back or
12. Does premise nave a v	And the finder of occupation and appropriate France France
	12. What is the normitted accumancy indoors and outdoors? Theater
side yard use? Ves	No 12a. What is the permitted occupancy indoors and outdoors? 1 hear ea
side yard use? Ves 1	No 12a. What is the permitted occupancy indoors and outdoors? $\underline{1421200}$ or Public Assembly permit? $\underline{1}$ Yes $\underline{1}$ Yo
side yard use? Yes 11 13. Do you plan to apply for 14. What is the zoning des	No 12a. What is the permitted occupancy indoors and outdoors? <u>I hear each</u> or Public Assembly permit? Yes Yos NO OUT BOOK signation (check zoning using map: <u>http://gis.nyc.gov/doitt/nycitymap/</u> -please give
side yard use? Yes I 13. Do you plan to apply for 14. What is the zoning des specific zoning designatio	No 12a. What is the permitted occupancy indoors and outdoors? <u>I hear en</u> or Public Assembly permit? Yes No WO WT BOOK signation (check zoning using map: <u>http://gis.nyc.gov/doitt/nycitymap/</u> -please give on, such as R8 or C2): <u>RTB</u>
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side yard use? Yes I 13. Do you plan to apply for 14. What is the zoning designation 15. How many licensed ess 16. How many On-Premised 17. Is premise within 200 for PROPOSED METHOD OI 18. Describe your method of 19. Will any other business	No 12a. What is the permitted occupancy indoors and outdoors? <u>I hear equation</u> or Public Assembly permit? Yes No OUT BOOK signation (check zoning using map: <u>http://gis.nyc.gov/doitt/nycitymap/</u> -please give on, such as R8 or C2): <u>R & B</u> stablishments are within 1 block? <u>14</u> e (OP) liquor licenses are within 500 feet? <u>9</u> eet of any school or place of worship? Yes No FOPERATION: of operation: <u>Tavesu (Serving Theates Goess</u>) ess besides food or alcohol service be conducted at premise? <u>No</u>
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1 yseats
24. How many stand-up bars/ bar seats are located on the premise? (A stand up is any bar or
counter [whether with seating or not] over which a patron can order, pay for and receive an alcoholic beverage)
25. Describe all bars (length, shape, and location): Rectangular on 15t Floor
26. Does premise have a full kitchen? Yes No
27. What are the hours kitchen will be open? <u>food will be available</u> up to I hour before 28. Is food available for sale? Yes No If yes, describe type of food and submit a menu:
28. Is food available for sale? Yes No If yes, describe type of food and submit a menu:
Hanburgers, Hotbogs was + cheese
29. Will a manager or principal always be on site? Pres No If yes, which? Principal 30. How many employees will there be? 5 (1 Four Time & 4 Part Time)
30. How many employees will there be? <u>5 (1 FULL Time & 4 Part Time)</u>
31. Do you have or plan to install \Box French doors \Box accordion doors or \Box windows? NO
32. Will there be TVs/monitors? 🛛 Yes 🗹 No (If Yes, how many?)
33. Will premise have music? Yes No
34. If Yes, what type of music? Live musician DJ DJ Juke box 🔀 Tapes/CDs/iPod
35. If other type, please describe:
36. What will be the music volume? Background (quiet) Entertainment level
37. Please describe your sound system: <u>L PO O</u>
38. 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? NOT
39. How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?
(Please do not answer "we do not anticipate congestion.") EXISTING ESTAblishmenT
40. Will there be security personnel? Yes No 40a. If Yes, how many and when?
41. How do you plan to manage noise inside and outside your business so neighbors will not be affected?
42. Do you have sound proofing installed? Yes No
43. If not, do you plan to install sound-proofing? ☐Yes ⚠️No
APPLICANT HISTORY:
44. Has this corporation or any principal been licensed previously? Yes No
45. If yes, please indicate name of establishment:
46. Address: 47. Community Board #
48. Dates of operation:
49. Has any principal had work experience similar to the proposed business? Yes No If Yes, please attach explanation of experience or resume. at Location For Current Buner
50. Does any principal have other businesses in this area? Yes No If Yes, please give trade name and
describe type of business:
51. 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.

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.







Certificate of Occupancy

CO Number:

103365546F

This certifies that the premises described herein conforms substantially to the approved plans and specifications and to the requirements of all applicable laws, rules and regulations for the uses and occupancies specified. No change of use or occupancy shall be made unless a new Certificate of Occupancy is issued. This document or a copy shall be available for inspection at the building at all reasonable times.

Α.	Borough: Manhattan Address: 195 EAST 3 STREET Building Identification Number (BIN): 1005001	Block Number: Lot Number(s): Building Type:	00399 40 Altered	Certificate T Effective Da		Final 09/05/2007			
	For zoning lot metes & bounds, please see BISWe	b.							
B.	Construction classification:3Building Occupancy Group classification:COMMultiple Dwelling Law Classification:None		Number of stories: Height in feet: Number of dwelling units:		1 15 0				
C.	Fire Protection Equipment: None associated with this filing.								
D.	Type and number of open spaces: None associated with this filing.								
E.	This Certificate is issued with the following legal limitations: None								
	Borough Comments: None								

Christopher M. Santalle **Borough Commissioner**

Borough Commissioner

Commissioner

Borough Commissioner

B Form 54 (Revised 03/05)

DOCUMENT CONTINUES ON NEXT PAGE



Certificate of Occupancy

Page 2 of 2

CO Number:

103365546F

Floor From To	Maximum persons permitted	lbs per	Per Building Code habitable rooms	Building Code	Jse and O Zoning dwelling or rooming units	Zoning use group	Description of use
MEZ				E			OFFICES
001	127	100		COM		8	THEATER
	710			END	OF SECTION		

Christopher M. Santalli Borough Commissioner

Commissioner

Borough Commissioner

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