

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

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

Jamie Rogers, Board Chair	Susan Stetzer, District Manager
Community Roard 3 Houar License Stinulations for	
I, SAMUEL + CARMEN as a qualified represent	tative of Mama Fina's NY Inc
located at 167 Avenue A	, New York, NY agree to the following stipulations:
1. I will operate a full-service restaurant, specifically a (type of the first specifically a specifically	restaurant) FILIPINO
Kitchen open and serving food every night during all hours ofMy hours of operation will be: * open UNTIL 12 AM	IF THEVE IS A PRIVATE FUNCTION
2. My hours of operation will be: # 07-60 00/10 12-311	11 Ann - Ca Pm
Mon AM - 9PM ; Tue CLOSED ; Thu 1AM - 9PM ; Fri 1AM - 10PM ; Sa	wed 11/AM - 10 PM : Sun 11/AM-10 PM
(I understand opening is no later than specified opening hour & all page 3. I will not use outdoor space for commercial use.	atrons are to be cleared from business at specified closing hour)
4. U I will operate my sidewalk café no later than	
5. U I will employ a doorman/security personnel on the following	dove
6. U Will install soundproofing,	3 udys.
7. X I will close any front or rear façade doors and windows	☐ I will have a closed fixed façade with no open doors or
at 10:00 P.M. every night or when amplified sound is	windows except my entrance door will close by 10:00 P.M.
playing, including but not limited to DJs, live music and live	or when amplified sound is playing, including but not limited
nonmusical performances.	to DJs, live music and live nonmusical performances.
8. I will not have 図 DJs, 図 live music, 図 promoted events, 図 any performances, □ more than DJs/ promoted events per	event at which a cover fee is charged, 🗵 scheduled , 🗆 more than private parties per
9. 🗵 I will play ambient recorded background music only.	
10. 🗵 I will not apply for an alteration to the method of operation coming before CB 3.	or for any physical alterations of any nature without first
11. 🗵 I will not seek a change in class to a full on-premise liquor lic	ense without first obtaining approval from CB 3.
12. I will not participate in pub crawls or have party buses come	in description from the first control and the first of the first control and the first c
13. 🗵 I will not have unlimited drink specials, including boozy brun	ches, with food.
14. I will not have a happy hour or drink specials with or without end by	t time limitations <u>OR</u> 🛘 I will have happy hour and it will
15. ☑ I will not have wait lines outside. ☐ I will have a staff person	responsible for ensuring no laitering, noise or crowds outside.
16. 🗵 I will conspicuously post this stipulation form beside my liqu	 A control of the contro
17. 🗷 Residents may contact the manager/owner at the number be revisit the above-stated method of operation if necessary in order	elow. Any complaints will be addressed immediately, I will
Name: <u>Samuel Sta Maria</u>	Phone Number: (201) 742-3712
18. It will: the back door will be closed at all times; should return to the community board and consult wi	
Carifornia (Angles and Angles and	
I hereby certify that the information provided above is truthful and	accurate based upon my personal belief.
Signed	Dated Dated
Sworn to this 20 M day of November 2017	
	Notary Public
FRANK MY PALILLO Notary Public, State Willew York	
No. 2A 5 3 \62 Ou≈lified in King \ounty 2a ₹ Commission Expired A \60 \60	



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Community	Board 3 L	<u>iquor Licen</u>	<u>se Applica</u>	tion Qu	estionnaire
					- Albertan de la company de la

PPLICANT	
me of applicant and principle(s): MAMA FINA S NY INC	
emise address: 167 AVENUE A, NEW YOULL, NY 10009	
oss streets: BETWEEN LOTH St. of 11th St	
ade name (DBA): MAMA FINAS	
eck which you are applying to: New liquor licence Alteration of an existing license existing license	
	<u> </u>
location currently licensed? Tyes Yno pe of license: N/A	

evious or current use of the location: A FAMILY DINE-IN & TAKE OUT VORTHWEATH	
prporation and trade name of current location; MAMA: FINAS NY INC	
pe of building and number of floors: RETAIL + RESIDENTIAL / 7 PLOORS	1 ¹
pes premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard entropy of the permitted occupancy indoors and condenses? 1 2a. What is the permitted occupancy indoors and condenses?	
you plan to apply for Public Assembly permit? Yes [No	
natis the zoning designation (check zoning usingmap: http://gis.nyc.gov/doitt/nycitymap/-please give specific zonin	ng
signation, such as R8 or C2): <u>R7A</u>	
w many licensed establishmentsare within 1 block?	
w many On-Premise (OP) liquor licenses are within 500 feet? 2	
premise within 200 feet of any school or place of worship? Yes No	
OPOSED METHOD OF OPERATION	
scribe your method of operation: AUTHENTIC FILIPING CUISINE, DINE-IN 4 TAKE OUT RESTAUR	CAN
ll any other business besidesfoodor alcohol service beconducted at premise? Yes No	
es, please describe what type: NA	
nat are the proposed days/hours of operation (specify days/hours each day and hours of outdoor space if applicable II AM - GPM 22. Total number of table: 12 23. Total number of seats: 60 AT - II - IOPM).

24	How many stand-up bars/ bar seats are located on the premise? $\frac{BAR}{BAR}$ (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 alcholic becomes
25.	Describe all bars (length, shape, and location): 20 FEET STRNICHT FRONT OF THE DESCRIBON OF
26.	Does premise have a full kitchen? Yes No HALF WILL BE USED TO TOKE ORDERS
27.	. What are the hours kitchen will be open? //AM - 10PM
28.	What type of food is available for sale? AUTHENTIC, FILIPIND FOOD
	Will a manager or principal always be on site? Yes No If yes, which? MANAGER 4 OWNER.
30	How many employees will there be?
31	Do you have or plan to install French doors accordion doors or windows?
32	Will there be TVs/monitors? Yes No (If Yes, how many?) 2
33. V	Will premise have music? Yes No 33a. If Yes, what type of music? Live Music Juke box
34.	If other type, please describe: N/A
35.	NAMES OF A STATE OF A
36.	Please describe your sound system: SPFAKERS + TPOD
37.	Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? Yes
38.	
39.	How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?
	CUSTOMERS WILL BE RESPONSIBLE FOR PARKING, WE HAVE A SMALL WAKING ARDA
·, 40.	Will there be security personnel? Yes No 40a. If Yes, how many and when?
	How do you plan to manage noise inside and outside your business so neighbors will not be affected? Downs CLOSTO
42. D	o 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 If yes, please indicate name of
A22	establishment(s): N/A
45.	Address: V/A 47. Community Board # N/A
46.	Dates of operation:
47.	Has any principal had work experience similar to the proposed business? Yes No If yes, explanation of experience or resume. MAMA FINA'S ELMWOOD PL, NJ. SINCE 2004.
48.	Does any principal have other businesses in this area? Yes No If yes, give trade name and describe type of business:
49.	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.
COMMITA	IITY OUTREACH
	e Community Board website to find block associations or tenant associations in the immediate vicinity of your location for
community o	outreach. Applicants are encouraged to reach out to community groups.
Re vi s e d: Octol	
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