

THE CITY OF NEW YORK

MANHATTAN COMMUNITY BOARD 314

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

Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire

	Today's Date: June 26, 2018						
	APPLICANT Majo Acquariya Losha						
1.	Name of applicant and principle(s): Oda House NY Inc David Tskhvoriashvili Mais uradzı						
	Premise address: 76 Avenue B						
	Cross streets: Avenue B & 5th Street						
1	Trade name (DBA): Oda House						
5.	Check which you are applying to: New liquor licence Alteration of an existing license Sale of assets						
6.	If alteration, describe nature of alteration:						
7.	Is location currently licensed? X Yes No						
8.	Type of license: Restaurant Wine						
9.	Previous or current use of the location: restaurant						
10.	Corporation and trade name of current location: Ave B Buon Gusto Corp dba Cafe Buon Gusto						
11.	Type of building and number of floors: Mixed use; 5 floors						
12.	use? Yes No Pre-co 12a. What is the permitted occupancy indoors and outdoors? 59 indoors						
13.	Do you plan to apply for Public Assembly permit? Yes No						
14.	What is the zoning designation (check zoning usingmap: http://gis.nyc.gov/doitt/nycitymap/ -please give specific zoning designation, such as R8 or C2): R7A						
15	How many licensed establishments are within 1 block?						
	How many On-Premise (OP) liquor licenses are within 500 feet?						
	Is premise within 200 feet of any school or place of worship? Yes No						
	PROPOSED METHOD OF OPERATION						
18.	Describe your method of operation: (Estaurant						
19.	Will any other business besidesfoodor alcohol service beconducted at premise? Yes No						
21.	What are the proposed days/hours of operation (specify days/hours each day and hours of outdoor space if applicable: M-Th_Hp-IIp/F-Su IIa-IIp 22. Total number of table: 22 23. Total number of seats: 59						
	M-Th 4p-10p / F-Sulla-10p						

24. Ho	ow many stand-up bars/ bar seats are located on the premise? 1 bar, 9 seats (A stand up bar is any bar								
Of	counter, whether with seating or not, over which a patron can order, pay for, and receive an alcholic beverage.)								
25. De	escribe all bars (length, shape, and location): L Shape								
26. Do	pes premise have a full kitchen? 🔀 Yes 🗌 No								
27. W	hat are the hours kitchen will be open? M-Th-Hp-IIp F-Su: Ila-IIP								
	What type of food is available for sale? <u>Georgia n</u>								
	9. Will a manager or principal always be on site? Yes No If yes, which?								
	ow many employees will there be?								
	o you have or plan to install French doors accordion doors or windows?								
	ill there be TVs/monitors? X Yes No (If Yes, how many?)								
	premise have music? Yes No 33a. If Yes, what type of music? Live Music Juke box DJ Tapes/CDs/iPod								
34. If	other type, please describe:								
35. W	hat will be the music volume? 🔀 Background (quiet) 🔲 Entertainment level								
36. Pl	ease describe your sound system: i Pod w/ small wall speakers								
37. W	'ill you host any promoted events, scheduled performances or any event at which a cover fee is charged? Yes No								
38. If	Yes, what type of events or performances are proposed and how often?								
	ow do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?								
	vill be permitted to form outside								
	ill there be security personnel? Yes No 40a. If Yes, how many and when?								
41. Ho	ow do you plan to manage noise inside and outside your business so neighbors will not be affected? Music will be kee								
42. Do ye	ou have sound proofing installed? Yes No 43. If not, do you plan to install sound-proofing? Yes No								
	PPLICANT HISTORY								
	as this corporation or any principal been licensed previously? Yes No If yes, please indicate name of								
es	stablishment(s): AVEBBUON GUSTO CORP								
45. A	ddress: 76 Ave B 47. Community Board # 3								
	ates of operation: Oct. 17 - current								
47. Ha	experience or resume. Chefand manager at this previous estublishment								
	Does any principal have other businesses in this area? Yes No If yes, give trade name and describe type of business:								
	as any principal had SLA reports or action within the past 3 years? Yes No <i>If yes</i> , attach list of olations and dates of violations and outcomes.								
COMMINIT	TY OUTREACH								
	community Board website to find block associations or tenant associations in the immediate vicinity of your location for								
	each. Applicants are encouraged to reach out to community groups.								



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Community Board 3 Liquor License Stipulations for Administrative Approval within Saturated Area

I	Ma	a Aca	uaviva		as a qualified	representat	ive of	Oda Hou	se NY In	c	
loca	ted	at	76	Avenue	as a qualified B	, New Yor	k, NY agree to	the following s	tipulations:		
		I will oper	rate a full-se	rvice restau	rant, specifically a	(type of re	staurant)				
2					ery night during a	ii riburs oi c	peration.				
2.			peration wil		11 = -11 =		110-1	10			
	Moi	Mon 4p-11p; Tue 4p-11p; Wed 4p-11p; Thu 4p-11p; Fri 11a-11p; Sat 11a-11p; Sun 11a-11p.									
	Thu	Mp-	116	; Fri <u>_</u>	11a - 11p	; Sat	110-110	;Sui	n <u> 11a -</u>	110	
						ır & all patrı	ons are to be cl	eared from bu	siness at spe	ecified closing hour)	
3. I will not use outdoor space for commercial use.											
4.	•										
5.		I will employ a doorman/security personnel on the following days:									
6.		I will insta	all soundpro	ofing,							
7.	at 1 play	0:00 P.M. ring, includ	every night	or when am limited to D.	e doors and wind plified sound is Js, live music and		windows exce or when ampli	pt my entrance	e door will cl laying, inclu	no open doors or lose by 10:00 P.M. ding but not limited rformances.	
8.					ব্ৰ promoted event s/ promoted even						
9.	X	I will play	ambient red	orded back	ground music only	<i>/</i> .					
10.		I will not apply for an alteration to the method of operation or for any physical alterations of any nature without first period before CB 3.									
11.	X	I will not	seek a chang	ge in class to	a full on-premise	liquor licen	se without first	obtaining app	roval from (CB 3.	
12.	X	I will not	participate i	n pub crawls	or have party bu	ses come to	my establishm	ient.			
13.	X	I will not	have unlimit	ed drink spe	ecials, including bo	ozy brunch	es, with food.				
14.											
15.	X	I will not	have wait lir	es outside.	☐ I will have a sta	ff person re	sponsible for e	nsuring no loit	ering, noise	or crowds outside.	
16.	X	I will cons	spicuously p	ost this stipu	lation form besid	e my liquor	license inside c	of my business.			
17.	x revi	Residents sit the abo	s may contac	t the manag	ger/owner at the r eration if necessa	number belo ry in order t	w. Any compla o minimize my	aints will be ad establishment	dressed imr	nediately. I will n my neighbors.	
Nan	ne:	Maia	Acqua	viva			_ Phone Numb	oer: (347) 7	77-1511		
I he	rebv	certify th	at the infor	mation prov	ided above is trut	hful and ac	curate based u	pon my persoi	nal belief		
	Ü	UX	AGM	avel	(6/20			
Sigr	ed	(, 6	~ 0		-0			Dated	_		
Swc	rn to	this 2	oth day	of Jur	ne 20	018	Cur	Notary Publi	CAlotony Pub	JRIE CHOI ic, State of New York	

Reg. No. 02CH6353369

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Qualified in New York County

Commission Expires January 23, 2021