

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

Alysha Lewis-Coleman, Board Chair

Revised: July 2018

Susan Stetzer, District Manager

Page 1 of 4

Community Board 3 Liquor License Application Questionnaire

Please bring the following items to the meeting:

| ron | FE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED. | | |
|--|---|--|--|
| | Photographs of the inside and outside of the premise. | | |
| M M | , | | |
| _ | | | |
| | 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 | | |
| | Proof of conspicuous posting of notices at the site for 7 days prior to the meeting (please | | |
| | include newspaper with date in photo or a timestamped photo). | | |
| Che | ck which you are applying for: | | |
| | ew liquor license | | |
| al. | ckifeither of these apply: A Change to the Method of Operations | | |
| | ck if either of these apply: A CHOINGE TO THE METHOD OF OPERATIONS ale of assets upgrade (change of class) of an existing liquor license | | |
| ш э | are of assets upgrate (change of class) of all existing liquor license | | |
| | January 9, 0040 | | |
| Tod | lay's Date: January 3, 2019 | | |
| Ifai | oplying 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: On Premises | | | |
| | teration, describe nature of alteration: | | |
| | vious or current use of the location: Bar/Restaurant | | |
| Corporation and trade name of current license: PAMDH Enterprises Inc dba Katra | | | |
| COL | portation and trade name of carrone needset. | | |
| | | | |
| | PLICANT: | | |
| | mise address: 217 Bowery | | |
| Cros | ss streets: Rivington Street & Prince Street | | |
| Nan | ne of applicant and all principals: PAMDH Enterprises Inc David Casey, Mark Phillip Quilter, | | |
| | eri Wilson and Matthew Knott | | |
| Trac | de name (DBA): Katra | | |
| | | | |

| PREMISE: | | | |
|--|---|--|--|
| Type of building and number of floors: 6 story brick | | | |
| Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverage (includes roof & yard) □ Yes ☑ No If Yes, describe and show on diagram: | | | |
| _ | ccupancy and all appropriate permits, including for any is maximum NUMBER of people permitted? 150 | | |
| | permit? Tyes No Cuccently CX15+S ning using map: http://gis.nyc.gov/doitt/nycitymap/-uch as R8 or C2): | | |
| PROPOSED METHOD OF OPERATION: Will any other business besides food or al If yes, please describe what type: | lcohol service be conducted at premise? 🗖 Yes 🗷 No | | |
| | eration? (Specify days and hours each day and hours of am - 2:00 am; Thursday - Saturday 11:30 am - 3:00 am | | |
| Number of tables? 34 | Total number of seats? 136 | | |
| How many stand-up bars/ bar seats are le | ocated on the premise? 2/29 | | |
| (A stand up bar is any bar or counter (w pay for and receive an alcoholic beverage | hether with seating or not) over which a patron can order, | | |
| Does premise have a full kitchen \(\mathbb{Z}\) Yes | | | |
| Does it have a food preparation area? | | | |
| 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? | To within 2 hours of closing | | |
| Will a manager or principal always be on | site? ■ Yes No If yes, which? Either | | |
| How many employees will there be? $\frac{25-3}{2}$ | iO | | |
| Do you have or plan to install \square French d | loors 日 accordion doors or 日 windows? り | | |

Revised: July 2018 Page 2 of 4

| ill there be TVs/monitors? 🛘 Yes 🗖 No (If Yes, how many?) 1 |
|--|
| ill premise have music? Yes □ No |
| Yes, what type of music? □ Live musician 図 DJ □ Juke box 図 Tapes/CDs/iPod |
| other type, please describe |
| hat will be the music volume? 🛘 Background (quiet) 🗖 Entertainment level |
| ease describe your sound system: Ipod generated small speakers |
| ill you host any promoted events, scheduled performances or any event at which a cover fee is |
| arged? If Yes, what type of events or performances are proposed and how often? No |
| by do you plan to manage vehicular traffic and crowds on the sidewalk caused by your tablishment? Please attach plans. (Please do not answer "we do not anticipate congestion.") The kest of the control |
| ow do you plan to manage noise inside and outside your business so neighbors will not be fected? Please attach plans. Interior volume is kept to conversational level terior is constantly controlled by security by you have sound proofing installed? Exyes I No not, do you plan to install sound-proofing? I Yes I No |
| PPLICANT HISTORY: |
| as this corporation or any principal been licensed previously? ■ Yes ■ No |
| yes, please indicate name of establishment: See rider |
| ldress: Community Board # |
| ates of operation: |
| as any principal had work experience similar to the proposed business? \(\mathbb{\Bar}\) Yes \(\mathbb{\Dar}\) No If Yes, please tach explanation of experience or resume. |
| pes any principal have other businesses in this area? 🛮 Yes 🗖 No If Yes, please give trade name |
| nd describe type of business See rider |
| as any principal had SLA reports or action within the past 3 years? 🛮 Yes 🗖 No If Yes, attach list |
| violations and dates of violations and outcomes, if any. |
| tach a separate diagram that indicates the location (name and address) and total number of tablishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. ease indicate whether establishments have On-Premise (OP) licenses. Please label streets and renues and identify your location. Use letters to indicate Bar, Restaurant, etc. The diagram must submitted with the questionnaire to the Community Board before the meeting. |

Revised: July 2018 Page 3 of 4

| LOCATION: | | |
|---|--|--|
| How many licensed establishments are within 1 block? More than three | | |
| How many On-Premise (OP) liquor licenses are within 500 feet? More than three | | |
| Is p | remise 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. | | |
| | I will operate a full-service restaurant, specifically a (type of restaurant) Mococcan with a kitchen open and serving food during all hours of | |
| 2. | operation OR I I have less than full-service kitchen but will serve food all hours of operation. I will close any front or rear façade doors and windows at 10:00 P.M. every night or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances. | |
| 3. | □ 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 | |
| 4. | 🗹 I will play ambient recorded background music only. | |
| 5. | I will not apply for an alteration to the method of operation or for any physical alterations of any nature without first coming before CB 3. | |
| 6. | □ I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3. | |
| 7. | 🗹 will not participate in pub crawls or have party buses come to my establishment. | |
| 8. | \square I will not have a happy hour or drink specials with or without time restrictions \underline{OR} \square I will have happy hour and it will end by $\underline{\Sigma}$ | |
| 9. | will not have wait lines outside. • will have a staff person responsible for ensuring no loitering, noise or crowds outside. | |
| 10. | . ■ Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors. | |

Revised: July 2018 Page 4 of 4