

## 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

10	cate	dat 3 Clinton Street , New York, NY agree to the following, stipulations:  I will operate a full-service restaurant, specifically a (type of restaurant) Pizza Place Talian Good
		Kitchen open and serving food every night during all hours of operation.
2.	M	ly hours of operation will be:    I am   Zam   Tue
41.		
3.	W)	erstand opening is no later than specified opening hour & all patrons are to be cleared from business at specified closing hour)  I will not use outdoor space for commercial use.
4.	0	I will operate my sidewalk café no later than
	0	I will employ a doorman/security personnel on the following days:
		I will install soundproofing.
7.	at !	I will close any front or rear façade doors and windows 10:00 P.M. every night or when amplified sound is windows except my entrance door will close by 10:00 P.M. or when amplified sound is playing, including but not limited to DJs, live music and live to DJs, live music and live nonmusical performances.
		Il not have 🗵 DJs, 🗵 live music, 🗵 promoted events, 🗵 any event at which a cover fee is charged, 🗵 scheduled formances, 🗆 more than DJs/ promoted events per 🗆 more than private parties per
	[3]	I will play ambient recorded background music only.
).		I will not apply for an alteration to the method of operation or for any physical alterations of any nature without first ning before CB 3.
1.		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.
	[X]	I will not have unlimited drink specials, including boozy brunches, with food.
	□ end	I will not have a happy hour or drink specials with or without time limitations <u>OR</u> <b>I</b> will have happy hour and it will by 7 m.
j.	X	I will not have wait lines outside.   I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
	X	I will conspicuously post this stipulation form beside my liquor license inside of my business.
	revi:	Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. I will sit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.  Barbieri Giovanni Phone Number: 917) 213 2052
		will:
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	eby	certify that the information provided above is truthful and accurate based upon my personal belief.
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Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

## **Community Board 3 Liquor License Application Questionnaire**

	Today's Date:
	APPLICANT GIOVANNI Barbieri.
1.	Name of applicant and principle(s): G.R.G. NY COLP
2.	Premise address: 3 Clinton ST NY, by 10002
3.	Cross streets: Que B a Stauton ST
4.	Trade name (DBA): Big A Pizza
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? Yes No
8.	Type of license: Restaurant wine
	Previous or current use of the location: Restaulant
10.	Corporation and trade name of current location:
11.	Type of building and number of floors: WOLT, UNIT
12.	Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard use? Yes No  12a. What is the permitted occupancy indoors and outdoors?
13.	Do you plan to apply for Public Assembly permit? Yes No
14.	What is the zoning designation (check zoning using map: <a href="http://gis.nyc.gov/doitt/nycitymap/">http://gis.nyc.gov/doitt/nycitymap/</a> -please give specific zoning designation, such as R8 or C2): <a href="http://gis.nyc.gov/doitt/nycitymap/">R8 or C2</a> ): <a href="http://gis.nyc.gov/doitt/nycitymap/">R8 or C2</a> ): <a href="http://gis.nyc.gov/doitt/nycitymap/">http://gis.nyc.gov/doitt/nycitymap/</a> -please give specific zoning designation, such as R8 or C2): <a href="http://gis.nyc.gov/doitt/nycitymap/">http://gis.nyc.gov/doitt/nycitymap/</a> -please give specific zoning designation.
15.	How many licensed establishments are within 1 block?
16.	How many On-Premise (OP) liquor licenses are within 500 feet?
17.	Is premise within 200 feet of any school or place of worship? Yes No
	PROPOSED METHOD OF OPERATION
18.	Describe your method of operation: Restaulant
19.	Will any other business besidesfoodor alcohol service beconducted at premise? Yes No
20.	If yes, please describe what type:
21.	What are the proposed days/hours of operation (specify days/hours each day and hours of outdoor space if applicable: \\\angle \angle \a

2	1. How many stand-up bars/ bar seats are located on the premise?(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 beverage.)
2:	
2	
2	30 open. 30 open.
2	B. What type of food is available for sale? PIZZa (ITalian
2	9. Will a manager or principal always be on site? Yes No If yes, which?
3	0. How many employees will there be?
3	1. Do you have or plan to install French doors accordion doors or windows?
3	2. Will there be TVs/monitors? Yes No (If Yes, how many?)
	Will premise have music? Yes No 33a. If Yes, what type of music? Live Music Juke box
3	If other type, please describe:
3:	Extractabilities level
36	Please describe your sound system: Tho
3'	Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? Yes No
38	
3	How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?
4(	Wild to the state of the state
	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?
	Do you have sound proofing installed? Ves No. 43 rs. 41 1 1
	APPLICANT HISTORY
44	Has this corporation or any principal been licensed previously? Yes No If yes, please indicate name of establishment(s):
45	
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.
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.
COMMU	NITY OUTREACH
Please see t	ne 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.

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