

## 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

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

Please bring the following items to the meeting:

TON	TE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED.		
	Photographs of the inside and outside of the premise.		
	Schematics, floor plans or architectural drawings of the inside of the premise.		
	A proposed food and or drink menu.		
	Petition in support of proposed business or change in business with signatures from		
	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).		
	menue newspaper with tate in photo of a timestamped photoj.		
Chec	ck which you are applying for:		
	ew liquor license  alteration of an existing liquor license  corporate change		
Che	ck if either of these apply:		
X Sa	ale of assets upgrade (change of class) of an existing liquor license		
	January 20, 2040		
Tod	ay's Date: January 30, 2019		
	oplying for sale of assets, you must bring letter from current owner confirming that you		
	buying business or have the seller come with you to the meeting.		
Is lo	cation currently licensed?   Yes   No Type of license: on-premises license		
If alt	If alteration, describe nature of alteration:		
Prev	vious or current use of the location: Ainsworth restaurant/bar		
	poration and trade name of current license: AINSPH LLC/Ainsworth		
COL	poration and trade name of current needse.		
APP	PLICANT:		
Prei	mise address: 64 3rd Ave, New York, NY 10003		
Cros	ss streets: E 10th & E 11th Streets		
	ne of applicant and all principals: John Sullivan		
mail	ie of applicant and an principals.		
	I TRD		
rac	de name (DBA): TBD		
POR 022 02 02 04			

PREMISE:
Type of building and number of floors: Mixed residential & commercial, 2 floors
Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages?
(includes roof & yard)  Yes I No If Yes, describe and show on diagram:
sidewalk cafe with 3 tables and 12 seats
Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any
back or side yard use?  Yes No What is maximum NUMBER of people permitted?  147
Do you plan to apply for Public Assembly permit? 🗷 Yes 🗖 No
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): C6-2A
PROPOSED METHOD OF OPERATION:
Will any other business besides food or alcohol service be conducted at premise? ☐ Yes ☒ No
If yes, please describe what type:
What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space) 10 a.m 2 a.m. 7 days a week
Number of tables? 24 Total number of seats? 99
How many stand-up bars/ bar seats are located on the premise? 2 bars w/ 48 seats in total
(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 alcoholic beverage)
Describe all bars (length, shape and location): 32'x7' Square & 25'x7' irregular
Does premise have a full kitchen ☑ Yes ☐ No?
Does it have a food preparation area? ☐ Yes ☒ No (If any, show on diagram)
Is food available for sale? ■ Yes ■ No If yes, describe type of food and submit a menu classic american fare
What are the hours kitchen will be open? up to one hour before closing
Will a manager or principal always be on site? ■ Yes ■ No If yes, which? principal/manager
How many employees will there be? 30-35
Do you have or plan to install ■ French doors □ accordion doors or ■ windows?

Will there be TVs/monitors? ■ Yes ■ No (If Yes, how many?)
Will premise have music? ■ Yes ■ No
If Yes, what type of music? □ Live musician 図 DJ □ Juke box 図 Tapes/CDs/iPod
If other type, please describe
What will be the music volume? ■ Background (quiet) ■ Entertainment level
Please describe your sound system: as existing
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?
private/corporate events upon request no more than 30 a year
How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. (Please do not answer "we do not anticipate congestion.")
Will there be security personnel?   Yes □ No (If Yes, how many and when) 1 - 3  Thursday - Saturday from 6 p.m 2 a.m. and if needed on other days
How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans.
Do you have sound proofing installed? ■ Yes ■ No If not, do you plan to install sound-proofing? ■ Yes ■ No
APPLICANT HISTORY:
Has this corporation or any principal been licensed previously? ■ Yes ■ No  If yes, please indicate name of establishment: SEE ATTACHED RIDER
Address: Community Board #  Dates of operation:
Has any principal had work experience similar to the proposed business? $\blacksquare$ Yes $\blacksquare$ No $\>$ If Yes, please
attach explanation of experience or resume.
Does any principal have other businesses in this area?   Yes No If Yes, please give trade name
and describe type of business
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, if any.
Attach a separate diagram that indicates the location <b>(name and address)</b> and total number of establishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. Please indicate whether establishments have On-Premise (OP) licenses. Please label streets and avenues and identify your location. Use letters to indicate <b>B</b> ar, <b>R</b> estaurant, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.

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LO	CATION:	
Но	w many licensed establishments are within 1 block? 4	
Но	w many On-Premise (OP) liquor licenses are within 500 feet? 11	
Is j	premise within 200 feet of any school or place of worship?   Yes  No	
Ple im ou lice	MMUNITY OUTREACH: case see the Community Board website to find block associations or tenant associations in the mediate vicinity of your location for community outreach. Applicants are encouraged to reach to community groups. Also use provided petitions, which clearly state the name, address, ense for which you are applying, and the hours and method of operation of your establishment at 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.		
1.	☑ I will operate a full-service restaurant, specifically a (type of restaurant) restaurant/bar, with a kitchen open and serving food during all hours of	
	operation $OR \square$ I have less than full-service kitchen but will serve food all hours of operation.	
2.	☑ 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 1 DJs / promoted events per, ☐ more than 30 private parties per year	
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.	$\square$ I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3.	
7.	☑ I 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 $OR$ $\square$ I will have happy hour and it will end by § p.m.	
9.	$\blacksquare$ I will not have wait lines outside. $\blacksquare$ I 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.	

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